

OTA Survey of Surrogate Mother Matching Services

As part of this assessment, OTA identified the following surrogate mothering matching services around the country (see box 14-B):

California

Hilary Hanafin and William Handel
Center for Surrogate Parenting
8383 Wilshire Boulevard
Beverly Hills, CA 90211

Nina Kellogg
Surrogate Parent Program
11110 Ohio Avenue, Suite 202
Los Angeles, CA 90025

Bruce Rappaport
Center for Reproductive Alternatives of
Northern California
3313 Vincent Road, Suite 222
Pleasant Hills, CA 94523

Bernard A. Sherwyn
10880 Wilshire Boulevard
Suite 614
Los Angeles, CA 90024

Katherine Wycoff
Center for Reproductive Alternatives
727 Via Otono
San Clemente, CA 92672

Georgia

Debra A. Patton
Infertility Alternatives
P.O. Box 1084
Snellville, GA 30278

Indiana

Steven Litz
Surrogate Mothers, Inc.
2612 McLeay Drive
Indianapolis, Indiana 46220

Kansas

Beth Bacon
Hagar Institute
1015 Buchanan
Topeka, KS 66604

Kentucky

Katie Marie Brophy
Surrogate Family Services Inc.
713 W. Main Street
Suite 400
Louisville, KY 40202

Richard Levin
Surrogate Parenting Associates
250 East Liberty Street, Suite 222
Louisville, KY 40202

Maryland

Harriet Blankfeld
Infertility Associates International
5530 Wisconsin Avenue, Suite 940
Chevy Chase, MD 20815

Michigan

Noel Keane
930 Mason
Dearborn, MI 48124

Nevada

Juanita Lewis
Surrogate Mother, Inc.
620 Lander Street, Suite 2A
Reno, NV 89509

New York

Betsy Aigen
Surrogate Mother Program
Suite 3D
640 West End Avenue
New York, NY 10024

Ada D. Greenberg
Surrogate Pregnancy Consultations
P.O. Box 52
Jamaica, NY 11415-6052

Infertility Center of New York
14 East 60th Street, Suite 1204
New York, NY 10022

Oregon

Norma Thorsen
Surrogate Foundation, Inc.
P.O. Box 6545
Portland, OR 97206

Of 27 services contacted, 5 were no longer in business, 5 had moved with no forwarding address, 4 failed to respond, and 13 returned completed questionnaires. For the 2 nonrespondents, data were collected by examining the contracts they have used in the past, the testimony of their directors at congressional hearings, in their own published writings, and their interviews with the press.

The following are the questions asked on the survey questionnaire. For the purposes of this survey, "client" referred to the person who wishes to hire a surrogate mother. "Client's spouse/partner" referred to the person with whom the client intends to rear the child. "Surrogate mother" referred to a woman who is artificially inseminated with the intention of relinquishing custody upon birth to the genetic father. With the exception of question (27), this survey did not concern "surrogate gestational mothers," i.e. women who bear children to whom they are not genetically related.

NATIONAL SURVEY OF SURROGATE MOTHER MATCHING SERVICES

OPTIONAL IDENTIFICATION

Your completion of this page allows us to know which organization have responded to the survey.

Please detach this page and return it **separately, so that your agency-name cannot be matched to your response.** A self addressed, postage **paid** envelope is **enclosed for your convenience.**

Of course, we are also happy to receive your response to the survey **without your** having completed this section at all.

Organization

Address

TELEPHONE

NATIONAL SURVEY OF SURVEY MOTHER MATCHING SERVICES

This is a survey of surrogate match services in the United States. The results of this survey will be used in the assessment **Infertility Prevention and Treatment**, being prepared by the Office *Of Technology & Assessment* *The request of Congress your* participation is greatly appreciated.

For the purposes of this survey, "client's spouse/partner" **surrogate** mother. "Client's spouse/partner" refers to the person with whom the client intends to *rear* the child. Please answer all questions concerning demographics by reference to **the** Client and not the client's spouse or partner. "Surrogate mother to a woman who is artificially inseminated with the intent of relinquishing custody Upon birth to the genetic father. With the exception of **question (27), this Survey does** not concern "surrogate gestations mothers," i.e. women who bear children to whom they are not genetically related,

DEMOGRAPHICS OF YOUR AGENCY

1. Location:
- major metropolitan area
 - smaller city
 - suburb
 - rural area

2. Size and professional **qualification of staff:**

3. Are you affiliated with:

	Yes	No
a hospital?	.	.
a physician's practice?	—	—
an infertility clinic?	—	.
a law firm?	—	.
other?	—	.
(specify) _____		

4. Year of first **matching arrangement**.

5. How many matches have you made:

Since you opened?	—
In 1986?	—
in 1987?	—

SCREENING CLIENTS

6. How many babies have been born as a result:
 since you opened? _____
 in 1986? _____
 in 1987? _____

7. How many matches do you predict you will arrange per year:
 in 1988? _____
 5 years from now? _____
 10 years from now? _____

How many clients and surrogate mothers are currently seeking the services of your agency?
 Clients _____
 Surrogates _____

Do you perceive any recent change in the number of inquiries from prospective clients or prospective surrogates, perhaps as a result of the Baby M case?
 Increase _____ Decrease _____ No change _____

Clients _____
 Surrogates _____

10. How are potential clients and surrogates attracted to your agency? if possible, please rank in order of frequency (1 for most frequent, 2 for next most frequent, etc.).
 Clients _____
 Surrogates _____

a) Word of mouth _____
 b) Direct solicitation _____
 c) Advertisement _____
 if so, by what medium? _____
 d) Other (specify) _____

11. Have you ever matched clients and surrogate mothers:
 Yes _____ No _____
 a) from different states? _____
 b) from different countries? _____
 c) from different religions? _____
 d) from different ethnic groups? _____
 e) from different races? _____

2. Have you ever offered to find a surrogate mother for a client is:

	Yes	No	Would if asked
a) an unmarried woman	_____	_____	_____
b) an unmarried man	_____	_____	_____
c) an unmarried couple	_____	_____	_____
d) a homosexual man	_____	_____	_____
e) a homosexual woman	_____	_____	_____

13. Do you require that the person seeking to hire a surrogate mother:

	Client		Client's Partner	
	Yes	No	Yes	No
a) be in good health	_____	_____	_____	_____
b) be fertile	_____	_____	_____	_____
c) be infertile	_____	_____	_____	_____
d) be within a certain age range (specify)	_____	_____	_____	_____
e) have a minimum income (specify)	_____	_____	_____	_____
f) other (specify)	_____	_____	_____	_____

14. Do you require that clients and their spouses/partners undergo:

	Client		Client's Partner	
	Yes	No	Yes	No
a) Home review	_____	_____	_____	_____
b) Physical examination	_____	_____	_____	_____
c) STD testing	_____	_____	_____	_____
d) Psychological examination	_____	_____	_____	_____
if yes: what type? _____ by whom? _____ where are professional services obtained _____				
e) Other exam	_____	_____	_____	_____

SCREENING SURROGATES

15. Which of the following do you require of the person seeking to be a surrogate mother?
- | | Yes | No |
|---|------------|-----------|
| a) be heterosexual | — | — |
| b) be in a stable relationship | — | — |
| c) be married | — | — |
| d) be in good health | — | — |
| e) have a prior conception | — | — |
| f) have a prior birth | — | — |
| g) have previously given up a child for adoption | — | — |
| h) have previously given up a child as a surrogate mother | — | — |
| i) be within a certain age range (specify) | — | — |
| j) have a minimum income (specify) | — | — |
| k) other (specify) | — | — |
-
16. Do you require that surrogates and their partners undergo:
- | | <u>Surrogate</u> | | <u>Surrogate's Partner</u> | |
|---|------------------|----|----------------------------|----|
| | Yes | No | Yes | No |
| a) Home review | | | | |
| b) Physical examination | — | — | — | — |
| c) Psychological examination | — | — | — | — |
| If yes: what type? _____ | | | | |
| by whom? _____ | | | | |
| where are professional services obtained? _____ | | | | |
| d) Other exam _____ | | | | |
17. Do you allow clients to choose a surrogate mother on the basis of:
- | | Yes | No |
|-----------------------------|------------|-----------|
| a) physical characteristics | — | — |
| b) ethnic origin | — | — |
| c) race | — | — |
| d) religion | — | — |
18. Do you allow clients and surrogates to:
- | | Yes | No | [if yes, when?
(before or after
conception, birth)] |
|--|-----|----|---|
| a) know each other's names and addresses? | — | — | — |
| b) meet each other? | — | — | — |
| c) have periodic contact during pregnancy? | — | — | — |
| d) have contact after birth? | — | — | — |

USE OF PROFESSIONALS

19. Where do surrogates and clients obtain legal advice?
- | | <u>Surrogates</u> | | <u>Clients</u> | |
|---------------------------------------|-------------------|----|----------------|----|
| | Yes | No | Yes | No |
| a) We have in-house attorneys | — | — | — | — |
| b) We refer to attorneys | — | — | — | — |
| c) Must obtain attorneys on their own | — | — | — | — |
20. Does the same attorney ever represent both parties? [if yes, under what circumstances? _____]
- Yes — No —
-
21. Where do surrogates and clients obtain psychological advice?
- | | <u>Surrogates</u> | | <u>Clients</u> | |
|---|-------------------|----|----------------|----|
| | Yes | No | Yes | No |
| a) We have in-house mental health professionals | — | — | — | — |
| b) We refer to mental health professionals | — | — | — | — |
| c) Must obtain mental health professionals on their own | — | — | — | — |
22. Is the use of mental health professionals or other support groups:
- | | <u>Surrogates</u> | <u>Clients</u> |
|---|-------------------|----------------|
| a) mandatory before signing a contract? | — | — |
| b) mandatory during pregnancy? — | — | — |
| c) mandatory after the birth? — | — | — |
23. Where do surrogates and clients obtain medical services?
- | | <u>Surrogates</u> | | <u>Clients</u> | |
|---|-------------------|----|----------------|----|
| | Yes | No | Yes | No |
| a) We have in-house physicians | — | — | — | — |
| b) We refer to physicians | — | — | — | — |
| c) Must obtain physicians on their own | — | — | — | — |
| d) Client obtains physician for surrogate | — | — | — | — |

CONTRACTS

24. Do you provide a standard contract? Yes ___ No ___
25. What are your most typical contract provisions? Please comment on the following possible provisions and any others not mentioned. If you have a standard contract, please enter its provisions. If not, enter those which are most typical. We would appreciate receiving a copy of the typical contract(s) if possible.

a) Does the contract provide that the client has any authority to make decisions concerning:

	Yes	No
(1) a chorionic villus biopsy?	___	___
(2) an amniocentesis?	___	___
(3) termination of pregnancy?	___	___
(4) prenatal care?	___	___
(5) use of prescription medicine?	___	___

b) Are any of the following prescribed or proscribed in the contract:

	Prescribed	Proscribed	No mention
(1) Diet?		___	
(2) Exercise?		___	
(3) Cigarettes?		___	___
(4) Alcohol?	___	___	___
(5) Marijuana?	___	___	___
(6) Other illegal drugs?	___	___	___
(7) Surrogate agrees to follow doctor's orders?	___	___	___
(7) Other (please specify)?			

c) Does your contract state that:

	Yes	No
(1) the surrogate will relinquish custody at birth?		
(2) the surrogate will terminate her parental rights prior to birth?		
(3) the surrogate will terminate her parental rights upon birth?		
(4) the client will accept the child regardless of gender?		
(5) the client will accept the child regardless of health?		
(6) the client will accept the child regardless of health unless the problem is due to surrogate's carelessness or breach of contract ?		
(7) the client's partner will accept the child if the client fails ill or dies?		

d) What remedies are listed in the contract in the event that:

- (1) the surrogate fails to abide by a life-style restriction?

- (2) the surrogate fails to follow her doctor's advice?

- (3) the surrogate fails to relinquish custody?

- (4) the surrogate fails to relinquish parental rights?

- (5) the client fails to accept the child?

- (6) the client fails to pay?

- (7) the client and partner die before birth or finalization of adoption?

e) What are the fees paid to the surrogate in the event of:

- (1) failure to *become* pregnant?
- (2) miscarriage? _____
- (3) terminated pregnancy? _____
- (4) stillbirth? _____
- (5) birth of child with health problems? _____
- (6) birth of healthy child? _____

f) What other fees and deposits are specified?

	How much?	Paid by whom?	Paid when?
(1) Fees to attorneys			
(2) Fees to psychiatrists			
(3) Fees to physicians for prenatal care			
(4) Fees to your agency —			
(5) Deposits in escrow accounts			
(6) Other (specify) _____			

DEMOGRAPHICS OF SURROGATES

37. Age: Range Average (best estimate)
38. Marital status:
 Married: percent
 Unmarried couple: percent
 Single: percent
39. Sexual orientation:
 Heterosexual: percent
 Homosexual: percent
 Bisexual: percent
40. Religion (please give best estimate of percentages, or rank in perceived frequency):
 Catholic
 protestant (fundamentalist) —
 Protestant (all other)
 Jewish
 Muslim
 Other
 Unknown
41. Race (please give best estimate of percentages, or rank in perceived frequency):
 White
 Black
 Asian
 Other
42. Reasons cited for seeking to be a surrogate mother (please rank in order of frequency):

43. Economic status of those offering to be a surrogate mother (please give best estimate of percentage, or rank in perceived frequency):
 family income below \$15,000: —
 between 15,000 and 30,000:
 between 30,000 and 50,000:
 above 50,000:
44. Educational status:
 High school: percent
 College: percent
 Graduate degree: percent
45. Percentage who:
a) have had a prior pregnancy:
b) have had a miscarriage:
c) have had an abortion:
d) have relinquished a previous child for adoption:
e) have relinquished a child as a surrogate:
f) are themselves adopted:

OPINION

46. What do you think of the Baby M decision?

47. Do you think there is any role for professional societies with respect to surrogate mothering practice? Yes ___ No ___
If not, why not? _____

- If so, precisely what would you like to see done?

48. Do you think there is any role for state government with respect to surrogate mothering practice? Yes ___ No ___
If not, why not? _____

- If so, precisely what would you like to see done?

49. Do you think **there is any role for the federal government with respect to surrogate** mothering practice? Yes ___ No ___
If not, why not? _____

- If so, precisely what would you like to see done?

Please feel free to attach further comments.