

### CHILD ADOPTION AND SURROGACY FROM THE BABY FACTORY: A FLUX OF REPRODUCTIVE HEALTH CARE IN THE SOUTH EAST OF NIGERIA

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**ABSTRACT:** Infertility and childlessness among married couples is rife in Igboland, which is the South East of Nigeria. Child adoption and surrogacy are becoming popular options for solving the problem in recent times. These means yield quick positive result when they are sought through the baby factory which however has not been spoken well of, due to some criminal activities that sometimes take place there. Consequently, many infertile couples who would have speedily realized their goals in marriage through these means are denied the opportunity. The paper tried to closely assess the act of engaging in child adoption and surrogacy through the baby factory to determine if there is any utilitarian value derivable from the baby factory and how it could be harnessed legitimately. It was observed that these means have helped the triad involved in these procedures. Adoptive parents who got babies through the baby factories may not have been helped if these teenagers did not give birth to children that could be adopted. Genetic surrogacy fits into Igbo world view that emphasizes consanguinity and can best be realized through the baby factory structure. Due to negative publicity, actions of some greedy criminal operators, dearth of proper legislative frame work, proper monitoring and particularly, absence of government involvement in implementation to ensure uniformity in practice, baby factory activities have been hunted by law enforcement agents. The paper recommended that government should be involved in operating the baby factory through a customized form of baby hatch as found in other western countries. The agency should be spread across the whole country to ensure availability of these services nationwide and also act as a regulatory body to private reproductive health care givers.

KEYWORDS: Child Adoption, Surrogacy, Baby Factory, Reproductive Health Care, Nigeria

### **INTRODUCTION**

In Igboland which is the South East of Nigeria, life is valued above everything else, just like in other cultures of the world. To them, the continuity of life, evident in bearing children as product of marriage, is regarded as the foremost reason for embarking on it, as it preserves the life of the family and the entire community (Orjiekwe, 2014). In recent times, infertility has become a major challenge to the realization of the hopes of many married couples. Scholars like Ojelabi *et a*l (2015) and Panti and Sununu (2014) in their works, observed that infertility among married couples in Nigeria is placed at 15%. Infertility has frustrated many couples desire to meet their culture's demand. Nwosu and Onwe (2015) maintain that the patriarchal Igbo culture transfers inheritance along the agnatic line. Hence the need for children, especially males, is treated with desperation by childless couples. All efforts to bear children including the options of child adoption and surrogacy are neither discarded nor treated with levity.



Child adoption is a procedure where a parent or couple takes in a child of other parentage and bestows on the child, the rights, privileges and responsibility of their own birth child. It is a legal process where a child's rights and duties towards his or her natural parents are terminated and transferred subsequently to his adoptive parents (Ibraheem, 2013). Child adoption as practiced in recent times was neither popular nor accepted in the pristine Igbo culture. Instead, consanguinity was the determinant of relationships. Extraneous relationships outside of consanguinity like marriage was therefore contracted with caution by enquiring into the background of the prospective marriage partner, to avoid having blood ties with persons whose blood were deemed 'contaminated' (Orjiekwe,2014). Based on this premise, Nwaoga (2013) and Agbo (2014) observed that the dread of forming blood ties with an 'Osu', a social outcast discourages some persons from adopting children even at the face of obvious infertility, in the Igboland. Despite these odds, the need for children is so overwhelming to many childless couples in contemporary times that some ignore these cultural maxims and adopt while others resort to polygyny and sometimes, unhealthy surrogate arrangements to bear blood related children. There are others whose tenets of their religion disapprove of polygyny and therefore are frustrated about what options to pursue to realize their blood related children.

# THEORETICAL CONCEPTION

Rational choice theory also known as rational action theory was used to analyse this work. It holds that macro human social relations like norms, traditions, rites originate from the behaviours of individual actions, each of whom makes their personal decisions at the micro level (White, 2005). The means of solving childlessness and infertility by an individual couple is uniquely decided such that one couples decision due to their peculiar religious, social, cultural educational and financial disposition, may not tally with that of another couple. Therefore, they must take a rational action or decision that is most suitable to them irrespective of how others around perceive it, as far as it meets their need. When such action is repeated by others in the society, it becomes a norm, rite or tradition.

Infertility is of primary and secondary types. Primary infertility is inability to achieve clinical pregnancy after twelve months of regular unprotected sexual intercourse. Secondary infertility is inability to achieve pregnancy after a previous one (Panti & Sununu, 2014). The nature of a childless couple's infertility problem may be the determinant of their solution mechanism. For instance, a couple who has female children but lack a male child may differ in their choice of options from one who lack both genders. Noteworthy is that infertility compels desperation but disparate rational choice decisions must be taken to suit individual needs through a methodical individualism process. The options among others include child adoption and surrogacy. The theory further elucidates that maximization of the benefits the individual decision, generates a social norm which must be shared by others. Where child adoption and surrogacy have provided succor to the infertile couple, the "unwanted" adoptive child and the teenager who is the birth mother or surrogate mother, it becomes a norm that is shared by others in the society, who may wish to benefit from it. The norm however must be guided by legislative Act to avert negative "externalities" or impact on the society while harnessing the benefits of the positive impact.



## **Child Adoption from the Baby Factory**

Baby factory is a place where "baby harvesting" takes place (Nwaolikpe, 2018). It is an illegal institution where young women give birth to children for sale on the black market, either as adopted children, for sex slavery, trafficking or religious rituals. (Makinde et al, 2014). Nwaoga (2013) described it as buying of children, underscoring the commercial activity that goes on while realizing children through this means. The baby factory meets the need of infertile child seekers while resolving the challenges inherent in government or agency adoption such as beaureaucratic bottle necks, prolonged waiting, and ignorance of adoption procedures and stigmatization that is dreaded by infertile couples. Agbo (2014) compared the ease of realizing children from the baby factory with buying candy from the confectioners' shop. Social critics, scholars and the mass media have criticized and denigrated the activities going on in the baby factory aptly because of some criminal and illegal activities going on in some of them (Huntley, 2013). Antithetically, many couples whose marriages were threatened and bereft of joy due to infertility and childlessness are currently happy and stable due to the solutions they realized from the baby factory. Some young women who gave birth in the baby factory may have had their lives abruptly terminated due to unsafe abortions, while others whose ambition and careers would have been frustrated due to "unwanted" pregnancy and child birth, are alive and fulfilled today. Some children who are currently safe and comfortably adopted into loving homes, could have either been aborted, born but thrown into pit latrine to die as was the case before the advent of the baby factory.

From the foregoing, it is possible that in reported cases of baby factory, not all the activities therein are bad. Some pregnant teenagers who patronized the baby factory may have done so, devoid of coercion, but intent to discreetly get rid of their pregnancy, even if it meant giving them up permanently in adoption. Alternative options available to such girls, excluding the baby factory, are too costly and detrimental to their lives. Such options include unsafe abortion which terminates the life of the unborn child and sometimes, that of the teenage mother. Inadvertently, the baby factory by providence is not as bad as it is portrayed. However, as Huntley (2013) rightly observed, some actors in the system are greedy for wealth and consequently perpetrate evil activities to maximize their gains.

Remarkably, the major thrust of baby factory activities is child adoption, which has been found to be convenient to some childless couples because it takes care of the scourge of stigmatization (Makinde *et al*, 2015). The secrecy with which children are adopted from the baby factory favours the adoption triad, namely the adoptive parent or childless couple, the adopted child who would not want to be known among his peers as adopted and the teenager or birth mother who got pregnant out of wedlock. Teenage unwanted pregnancy has been going on in human history. For instance, in the medieval times, Pope Innocent iii decreed against abandonment of children evident from the numerous drowned infants found in the Tiber River in Italy due to unwanted pregnancies (Wikipedia, 2019). In South East of Nigeria, there have been reported cases of abandoned children obviously emanating from teenage pregnancy which is apparently not going to stop. Therefore, efforts must be made to help not only the products of teenage pregnancy who are the babies but also the teenage mothers in most practical and pragmatic ways. Further, high rate of infertility mostly due to late marriage, ill health condition and other inexplicable reasons will always make the need for children persistent, begging for solution.



#### **Surrogacy from the Baby Factory**

Surrogacy is derived from the latin word "subrogare" meaning to substitute. It is a situation where a "third party female elects or is commissioned to carry pregnancy on behalf of another couple, delivers and hands the baby over to the commissioning parents" (Umeorah *et al*,2014:105). Two known types of surrogacy are gestational and genetic surrogacy. Gestational surrogacy is where the surrogate mother is implanted with an invitro-fertilised embryo for the commissioning parents' or donors. Genetic surrogacy means that the surrogate contributes the egg (Makinde *et al*, 2016). Gestational surrogacy is expensive and often unaffordable to most infertile couples in Igboland.

Genetic surrogacy also known as partial or traditional surrogacy has been identified as an option that resolves the much-desired consanguinity that determines relationship among Africans. As altruistic and pragmatic as surrogacy has been to the people of South East, Nigeria, it has been in practice in sororate and levirate arrangements (Mbiti, 1979). For instance, in recent times, in some parts of Igboland, couples lacking male children are at liberty to retain or "commission" one of their daughters to remain without marriage in order to bear preferably, male children who will perpetuate the family lineage and maintain consanguinity. In some communities, widows who can no longer bear children, "commission" surrogates by marrying younger women to carry pregnancies from male sperm donors and deliver such children for the commissioning widow. As applicable in sororate arrangements, some infertile women have opted to bring in their sisters, female friends or relations sometimes in the guise of accident, to conceive through their husbands, but to give birth and give up the child to the couple, just to ensure that consanguinity is maintained with the child. Surrogacy can therefore be done by a woman either for altruistic or commercial reasons (Umeorah *et al*, 2014).

According to Ombelet and Johnson (2016), the common trend shared by surrogacy and child adoption is stigmatization evident in the unwillingness of couples to identify with infertility. Also, teenage mothers involved in adoption at the baby factory and surrogate mothers are driven by altruistic, economic and sometimes incidental or accidental reasons (Eseadi *et al*, 2015). With the level of poverty in Africa, economic reasons may continue to drive surrogacy and child adoption from the baby factory. This is because some young girls under the auspices of baby factory operations are commissioned to carry pregnancy for couples for a fee, while they are staying in the confines of baby factory as the commissioning parents fake pregnancy that will be terminated on the due delivery date of the surrogate mother, thereby leaving the impression that the child is a natural or birth child. In recent times in Nigeria, some young women advertise their interest to engage in surrogacy agreement are often determined to suit the desire of the commissioning parents, sometimes posing as baby factory activity while fertilization of the surrogate mother's egg is done through sexual intercourse.

Makinde *et al* (2014) underscored the involvement and role of health professionals in the activity in baby factory as agents to surrogacy or child adoption. The baby factory therefore serves as agency to the infertile childless couple in search of a child, the teenager who "accidentally" got pregnant and wishes to give the child away in adoption and also to the surrogate mother who wishes to "rent her womb" (Makinde *et al*,2014). This is a flux of reproductive health care.



The actions of the triad involved in child adoption and surrogacy under the auspices of baby factory can be regarded as rational, as it serves their best interest. The teenager who got pregnant unintentionally or woman who wishes to be commissioned as a surrogate mother may be desirous to so discreetly in a baby factory due to the fear of stigma, is making a relatively rational decision due to the prevailing value scales that frown at these unavoidable situations. Infertility or childlessness is a social malaise that has always existed in human history and may remain so perpetually. Therefore, a couple's effort to remedy it through surrogacy or child adoption in a baby factory is pragmatic and only natural. Due to Igbo world view that attaches importance to consanguinity and Christianity's insistence on monogamy, the Igbo's search for a blood related child by the aforementioned means, has become a norm that emanated from a rational choice. The ills emerging from some baby factories can be appreciated from the perspective of relativists who argue that conceptions of values are not absolute but relative to the persons or groups holding it. The actions of the triad involved in child adoption and surrogacy should be appreciated and ratified from the duress that their circumstances subject them to, as opposed to normal situations. The axiom, "one man's meat is another man's poison" accentuates this view

# RECOMMENDATION

The 2013 Childs Right Act provides a legal framework for regulating the practice of child adoption in Nigeria. Ajayi, R. A & Dibosa-Osadolor, O. (2011) argue that the absence of surrogacy regulation in Nigeria exposes the practice to the vagaries and excesses of the practitioners within the ambit of their self-grafted laws and standards. Regulation of surrogacy, as demonstrated in child adoption, should favour the surrogacy triad. This refers to the surrogate mother, the infertile couple seeking a child and the child to be born. The liberty of the surrogate mother to decide whether to engage on the procedure altruistically or for monetary reasons must be respected as her conscience or religious affiliation guides her. Age should be a factor to prequalify into the procedure.

To suit the peculiar needs of the South East people of Nigeria, which emphasize consanguinity, Child adoption and surrogacy activity can be subsumed in the baby factory activity but operated within the governments mould for adequate regulation and control. This mould could be called "the baby hatch", a synonym of the same structure that could be found in other developed countries like Japan, Italy, America, China and so on (Encyclopaedia Brittanica, 1911). This is a place where pregnant women and teenagers who wish to anonymously but discreetly abandon their babies, freely come and do so. This agency should also admit pregnant teenagers who are desirous to discreetly give birth and give them out in adoption. This may attract some monetary benefit, depending on how the birth mother elects. The agency should also manage and regulate surrogacy, after determining the type that suits an infertile couple's need. In order to maintain consanguinity, a commissioning parent can opt for genetic surrogacy which can be performed by artificial fertilization and implantation or naturally. The agency will therefore manage the procedure to ensure compliance with the relevant laws and also with the agreement between the commissioning parents and the surrogate mother. It will also keep an inventory of prospective surrogate mothers, to make the search for them easy, affordable and safe for prospective commissioning childless couples and the embryo. The baby hatch should be a unit of all the Federal Teaching Hospitals in Nigeria, to ensure availability of reproductive health



care to all the people of South East Nigeria irrespective of where they are domiciled the country.

# CONCLUSION

A couple's success in realizing a child either through surrogacy or child adoption in a baby factory, justifies the means to them. There have rarely been reports of probe on the source, when childless couples suddenly 'got' a child. Instead the impression has often been that they adopted, even when a surrogate mother in a baby factory was involved. The utilitarian value of the baby factory therefore cannot be undermined. Doubtless, there are some criminal activities that may be taking place in some baby factories that calls for legislations that will check these excesses. Yet, the apparent benefits of the system should be harnessed, to avoid committing the error implied in the adage of 'throwing the baby and the dirty bath water away'.

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