

A baby to love

By by Lisa Applegate - 10/24/2008

On Aug. 27, at 9:10 a.m., Sarah Stauffenberg delivered a healthy baby boy. Upon hearing his first cry, family and friends who packed the delivery room cheered and wiped away tears. Nurses cleaned the newborn, swaddled him in a white blanket and took him to Stauffenberg.

But even though she had carried this baby for nine long months, she only admired his face for a moment. She knew there was someone who had been waiting years to hold him and Stauffenberg wanted to be the one to hand him over.

"It was to finally say, 'Here you go. Here's what you've been waiting for.' It just felt so good to be the one to do it," she says.

That someone was Hope Firsel, who had struggled with the desperation of infertility for four years. Once Firsel held her newborn, that dark time when she was denied a child was suddenly replaced with the euphoria of having one.

"All the emotion came out and I was crying and it was all being released in that experience," Firsel remembers of the delivery. "Here was this woman going through this tough experience just for us. She really changed all of our lives."

Then, Firsel and her husband Chad announced the name of their son: Hudson Milo. And they thanked Stauffenberg, their gestational surrogate, for providing such a safe, nurturing first home for their child.

A small but steadily growing number of babies are entering the world like Hudson. Once vilified by some as unnatural or immoral, surrogacy is becoming more widely accepted as advances in reproductive technology remove the need for a surrogate to be genetically linked to the baby.

When people hear the word surrogacy, they may recall the highly publicized 1985 trial of Baby M, in which a traditional surrogate sued for custody of the baby she was carrying for a New Jersey couple. Most surrogates in the 1980s conceived a child using the intended father's sperm and the surrogate's egg via artificial insemination.

Today, however, a majority of couples like the Firsels choose to use gestational surrogates. The baby is conceived through in vitro fertilization using embryos created from the father's sperm and the mother's egg (or an egg provided by a donor).

Widely publicized surrogate births to celebrities such as Joan Lunden, Dennis Quaid, Angela Bassett and Ricky Martin have raised awareness about the alternative. And more homosexual couples have expressed interest in surrogacy as laws and societal norms begin to favor gay parenting.

Surrogacy today

Illinois is particularly in the spotlight as one of the most popular destinations, behind California, for people in the U.S. and abroad who want to conceive using surrogacy. In recent years, the Illinois legislature has passed several laws that protect the surrogate and make the entire process easier

for intended couples.

The search by agencies or infertility clinics for qualified surrogates is competitive and the list of requirements is long. In general, potential surrogates must be physically and mentally healthy, have a stable home life with at least one child and be financially secure enough to carry private health insurance.

Surrogates and intended parents sign detailed contracts that can include specific issues, such as how many embryos the surrogate is willing to carry, whether she is allowed to travel later in her pregnancy, whether she will receive a stipend for maternity clothes or lost wages.

"Surrogates have to have a healthy pregnancy and be height and weight proportionate," says Nancy Block, founder of the Center for Egg Options Illinois. "They can't so much as take a Tylenol without it being in the contract."

Once they are accepted and matched with a couple, the real work begins. Surrogates must take a variety of hormones, some delivered by needle. They must also be prepared to do this more than once because fertilization often doesn't work the first time.

Intended couples pay roughly \$40,000 for the agency's services; surrogates receive about half of that. In the recent economic downturn, clinics in Illinois are increasingly being contacted by women interested in becoming a surrogate.

"We meet probably 50 percent more women now who would consider surrogacy than before. People who are on the fence about it are swayed by the economy," says Block. "It's very rewarding for surrogates ... Plus, it allows them to stay home with their kids or pay off their mortgage or college loans."

Life-changing decisions

Surrogates say the key to their decision lies not in their purses, but in their hearts.

Stauffenberg, the mother of three ranging in age from 4 to 9, felt moved to help a family not as fortunate as she had been.

"Most of my friends either had trouble getting pregnant or suffered a miscarriage and I felt like I was the only one who hadn't," she says.

She started considering being a surrogate for a relative who was having trouble conceiving. Even though she wasn't needed, Stauffenberg continued researching surrogacy for more than a year. Finally, with the encouragement of her husband Jason, she contacted the Illinois surrogacy agency Parenting Partners.

When she met Hope and Chad Firsell for the first time, "we just clicked."

Firsell was 29 when she and her husband decided it was time to start a family. Almost two years later, after a miscarriage, she learned that scar tissue in her uterus might prevent her from carrying a fetus to term.

She began researching ways to improve her chances. She used acupuncture, changed her diet, spent untold hours researching alternative reproductive technologies.

It changed Firsell's life. Once a consultant for CEOs who faced change in their companies, Firsell

decided to become a life coach for other couples facing a personal change they never expected.

But even after four years, as she met with Parenting Partners to explore surrogacy, she hoped it would not be required.

"I had always dreamed of being pregnant," she says. "I had such visions of what it would be like to be pregnant and give birth and breast feed."

It was hard, she admits, to give up that dream and hand it over to another woman. She would attend Stauffenberg's obstetric appointments, hear her baby's heart beat or see the outline of his tiny body on an ultrasound, but then have to say goodbye to her unborn child.

But both women say the challenges of surrogacy were lessened by the close friendship that developed—and not just between the two women. When Stauffenberg went into labor, Hudson's delivery was truly a family affair. Her husband, mother and grandmother were in the delivery room, together with Hope and Chad and their mothers. And Stauffenberg made sure her three children met Hudson soon after he was born.

As soon as she was accepted as a surrogate, Stauffenberg says she started talking with her children about the different kinds of gifts one can give to another. Sometimes, she told them, the most difficult gifts to give can also be the most precious.

"They knew that the baby was not ours, that he was a part of Hope and a part of Chad. Even my 4-year-old understood it."

Not all surrogates and intended couples develop such a close bond, says Shirley Zager, director of Parenting Partners, and some don't want to.

"I've had cases where the couples and surrogates are like family now," she says. "Others are clear: 'We'd like a good working arrangement, but we're not looking for a new family member or long-term close contact.' "

Concerns over surrogacy

No matter what the arrangement, there are those who voice concerns about surrogacy.

Dr. Christopher Sipe, a reproductive endocrinologist from Fertility Centers of Illinois, says some people question whether science is replacing God in the miracle of creation. Others have specific concerns, he says: Should same-sex couples be allowed to parent? What about the increased chance of carrying twins and therefore an increased risk those babies will be born prematurely?

Ethicists also worry that surrogacy may one day develop into a convenient option—rather than a medical necessity—for wealthy couples choosing to 'lease' out the wombs of lower income women. Already, in India, a growing number of clinics offer surrogates at prices far less than in the West.

But Stauffenberg says her family, friends and even strangers who learned of her decision never questioned her choice. Nor did she. After delivery, Stauffenberg sent an e-mail to Hope Firsel, which read: "Aside from you, I feel like the luckiest woman in the world."

As she learns to mother her newborn, Firsel says her years of heartbreak, the stress of paying for a surrogate, the nine months of worry—all of it makes sense now. Hudson was the child she was meant to have and Stauffenberg was the woman meant to help her.

The Firsels will be proud to tell their son about his surrogate one day, she says. "He was brought into this world because of the world's humanity and goodness."

Resources

- NuFocus Empowerment Coaching, nu-focus.com
- American Society for Reproductive Medicine, asrm.org
- The Organization of Parents Through Surrogacy, opts.com

Who can be a surrogate?

- Must have given birth and are raising at least one child.
- Must have private health insurance; women who receive public assistance do not qualify.
- Must live a healthy lifestyle, have at least a high school education and enjoy being pregnant.
- Must undergo physical and psychological screenings.
- Have the support of their husband or partner, who must also meet with a psychiatrist.
- Are paid in 10 monthly installments. First time surrogates receive roughly \$25,000; experienced surrogates can earn more.
- Receive life insurance that is paid for by the intended couple during pregnancy and then can be continued by the surrogate.

Surrogacy by the numbers

Surrogacy remains relatively uncommon.

The Society for Assisted Reproductive Technology, which represents more than 85 percent of clinics nationwide, tracks the number of "attempts" to implant an embryo using in vitro fertilization. In 2006 (the most recent year available), the number of attempts made was almost 127,000 nationwide.

Of those, just 739 were made using a surrogate. About 250 of those surrogate attempts resulted in the live birth of a child.

Under Illinois law, women may use a surrogate only if they meet very specific medical conditions that prevent them from carrying a fetus, such as losing a uterus to cancer.

About surrogate laws

Not all states are as surrogate-friendly as Illinois. In neighboring Michigan, for example, people who enter into surrogacy contracts can be charged with a felony, according to Brette Sember, a former lawyer who wrote *The Infertility Answer Book*.

By contrast, Illinois has a process set up for a birth certificate to be issued in the names of the intended parents. In many other states, only the father who provided biological material would be on the birth certificate. The intended mother has to then adopt the baby to make it legally

hers—even if she provided eggs. In most states a woman who gives birth is the legal mother unless proven otherwise.

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