Feedback form

Please provide your contact details below.

Name	Name withheld 6
If this feedback is on behalf of an organisation, please name the organisation	
Please provide a brief description of the organisation (if applicable)	
Address/email	
Interest in this topic (eg, user of fertility services, health professional, researcher, member of public)	Surrogacy researcher

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Question 1: Rescinding the biological link policy

Refer to section 3.

ACART is proposing that:

- the guidelines should no longer require intending parents to have a genetic or gestational link to a resulting child
- instead the guidelines should require ECART to be satisfied that where intending parents will have neither a genetic nor a gestational link to a resulting child, the lack of such links is justified.

(a) Do you agree? Yes [X] No [ ]

(b) Do you believe there are cultural implications associated with the proposed removal of the biological link policy?

Yes [ ] No [X]

If so, please describe these implications.

Please give reasons for your views.

Question 2: Access to information held on birth certificates

Refer to section 3.

ACART is interested in hearing views about potential strategies to strengthen a donor offspring's access to information about their origins, which is held on their birth certificate.

Do you have suggestions? Yes [ ] No [X]

Please give reasons for your views.

Question 3: Format of the proposed guidelines

Refer to section 4.1.

ACART is proposing to issue one set of guidelines to ECART that encompass family gamete donation, embryo donation, the use of donated eggs with donated sperm and clinic-assisted surrogacy.

Do you agree with the format of the proposed guidelines? Yes [X] No [ ]

Please give reasons for your views.

I think that it is a valid consideration to issue one set of guidelines to ECART for these four methods. I am curious how it will look and what impact it will have one each of the applicants, if there are potential negative consequences.

Question 4: Justification to use a procedure

Refer to section 4.2.

ACART is proposing that ECART should be satisfied the proposed procedure is the best or only opportunity for intending parents to have a child and the intending parents are not using the procedures for social or financial convenience or gain.

Do you agree? Yes [X] No [ ]

Please give reasons for your views.

I have respect for the ECART process

Question 5: Consent by gamete and embryo donors

Refer to section 4.3.

ACART is proposing that, where a procedure will involve the use of an embryo created from donated eggs and/or donated sperm, the gamete donor(s) must have given consent to the specific use of their gametes:

- at the time of donation; or
- when a procedure using such an embryo is contemplated.

In either case, the affected parties should receive counselling on the implications of using gametes before the gamete donor gives specific consent.

If consent is given, the gamete donor can vary or withdraw their consent only up until an embryo is created (in cases where consent is given before the embryo is created).

In addition, where a procedure will involve the use of a donated embryo, the person(s) for whom the embryo was created must give consent to the specific use of the donated embryo:

- at the time of donation; or
- when a procedure using such a donated embryo is contemplated.

Once an embryo is created, the decision to vary or withdraw consent up to the time the embryo is transferred to the womb should remain with the people for whom the embryos were created.

Do you agree? Yes [X] No [ ]

Please give reasons for your views.

Question 6: Taking account of potential coercion

Refer to section 4.4.

ACART is proposing that ECART should take account of any factors in a relationship that might give rise to coercion or unduly influence a donor's or surrogate's consent to take part in a procedure.

Do you agree? Yes [X] No [ ]

Please give reasons for your views.

Given the potential complexities involved in surrogacy arrangements, it is a valid proposal to take these potential problems into account although my understanding was that ECART already operate with these guidelines in mind.

Question 7: Limit to number of families with full genetic siblings

Refer to section 4.5.

ACART is proposing that full genetic siblings should continue to be limited to no more than two families.

Do you agree? Yes [X] No [ ]

Please give reasons for your views.

I do not have a strong view on this.

Question 8: Legal advice

Refer to section 4.6.

ACART is proposing that ECART must be satisfied that:

- where an application includes a surrogacy arrangement, each affected party has received independent legal advice
- where an application does not include a surrogacy arrangement, each affected party has considered seeking independent legal advice
- any legal reports show that all affected parties understand the legal implications of the procedure(s).

Do you agree? Yes [X] No [ ]

Please give reasons for your views.

Question 9: Regulation of all family gamete donations

Refer to section 5..

ACART is of the view that all family gamete donations through a fertility services provider should be regulated by guidelines and thus require ECART approval.

Do you agree? Yes [ ] No [X]

Please give reasons for your views.

I have ticked no, but I think this question is difficult. From what I would understand it would be mainly a question of whether there is any possible coercion which is a valid reason to enforce ECART approval. I just worry about how people will respond to the increase or tightening of regulations.

Question 10: Donation of embryos created from donated gametes

Refer to section 6.1.

ACART is proposing that the guidelines should enable ECART to approve the donation of embryos created from donated eggs and/or donated sperm, provided ECART takes account of the potential complexity of resulting relationships and the gamete donors have given specific consent to the procedure.

Do you agree? Yes [X] No [ ]

Please give reasons for your views.

Question 11: Embryo on-donation and re-donation

Refer to section 6.2.

ACART is proposing that surplus donated embryos:

- should not be able to be on-donated by the recipients
- but can be returned to the donors, in accordance with any agreement between the parties, for re-donation to another party, subject to a new approval by ECART.

Do you agree? Yes [X] No [ ]

Please give reasons for your views.

Question 12: Clarification of the status of embryo donation in the regulatory framework

Refer to section 6.3.

ACART is of the view that the regulatory framework should clarify that:

- all embryo donation cases are regulated by guidelines and thus require approval by ECART
- embryo donation does not include cases where an embryo created for a couple is used by one of the couple in a new relationship with the informed consent of the previous partner.

Do you agree? Yes [X] No [ ]

Please give reasons for your views.

Question 13: Regulation of all clinic-assisted surrogacies by guidelines

Refer to section 8.

ACART proposes to recommend that all clinic-assisted surrogacy cases be regulated by guidelines and thus require ECART approval.

Do you agree? Yes [ ] No [X]

Please give reasons for your views.

My research has been on traditional and clinically assisted surrogacy in New Zealand. Although I realise the small increase in applications to ECART this proposed regulation may not seem like a lot, I am highly concerned that it will discourage people to seek clinical guidance. It is a very contentious issue within the community itself, and so I would be wary. Further…I find it somewhat problematic that although traditional surrogacy is seen as an established procedure, and therefore ECART does not have to be involved, by implementing this guideline you would be only really be doing one thing: helping clinics to be legally covered if something goes wrong within the traditional surrogacy arrangement. Further, given the traditional surrogacy's that are guided by clinics are few, this is setting up an unequal precedence and further stigmatising those who do home insemination, who are just as vulnerable (in terms of potential complexities or problems) as those you propose to be followed up by ECART. There is more to this debate than what I can write here, but my 18 months of in-depth qualitative research within the surrogacy community has brought to light the nuances and the disjunctures found between what the government hopes to achieve in terms of regulation and wellbeing for all parties and that which my participants would find helpful. There is no easy answer, and I'm not fully against this proposed change but I do have concerns as to the fallout of it.

Question 14: Any other comments

Do you have any other comments about the proposals in this document?