EDITORIAL

Baby factories in Nigeria: a new and challenging source of abuse

So called “baby factories” are institutions where young people give birth to children who are then placed for sale on the illegal adoption market. The term refers to any place where pregnant women and young teenage girls are voluntarily or forcefully impregnated and kept illegally until their babies are born and then sold for monetary gains – in practice they are usually disguised as hospitals, maternity homes, social welfare homes or orphanages. The first cases of baby factories in Nigeria were reported by UNESCO (2006). In this report, human trafficking linked to baby factories was ranked the third most common crime in Nigeria, after drug trafficking and financial fraud. The factories are operated by well-organized criminal syndicates, and, according to Eseadi et al. (2015), they have become prevalent in Nigerian society today. Cristiansson (2015) infiltrated these networks with a hidden camera and reported payments of $4000 for a girl and $4400 for a boy – there was even the option of including the placenta in the sale!

In this issue of Reproductive Biomedicine Online a commentary is published in which the authors not only describe this illegal practice and the danger of its proliferation in Nigeria, but also claim that these baby factories might be harmful for genuine services providing surrogacy or surrogacy-like procedures (Makinde et al., 2015). The authors fear that the acceptance of surrogacy by Nigerian society will be threatened by their existence. They highlight the urgent need for the regulation of Nigerian surrogacy and other assisted reproductive technologies with stringent ethical guidelines, which aim to legally combat these criminal business ventures.

It is our belief that a number of important issues linked to the problem of baby factories should be addressed when discussing this new proposal. First, we have to ask ourselves why baby factories exist and what are the reasons for their growing popularity. As stated by Makinde et al. (2015):

“Baby factories are thought to have arisen to meet two needs. First, the social stigma attached to desperate teenagers with unwanted pregnancies, who are convinced to give up their babies for a financial benefit. Second, the high demand for babies by infertile couples with a desire to complete their family and thereby fulfil a crucial social obligation. Thus, the high burden and stigmatization of infertility in Nigeria, and the unwillingness of infertile couples to associate publicly with adoption or surrogacy, contributes to the increased patronage of baby factories.”

Eseadi et al. (2015) recently also reported that the leading causes associated with baby factories include poverty, childlessness, lack of ethical behaviour of medical professionals and greed. Indeed, the huge burden of disease associated with childlessness is a major concern, especially in Sub-Saharan Africa. The socio-economical consequences of childlessness and infertility are well-known and severe, especially for women. Moreover, there is almost no access to infertility care for the large majority of the population. IVF centres are available, although scarce and far too expensive for most infertile couples. Furthermore, the non-existence of education about reproductive health, including family-planning to avoid unwanted pregnancies, and infertility care, especially the prevention of sexually transmitted infections and illegal abortions, is striking. In many Sub-Saharan countries there is almost no access to antibiotics in cases of pelvic infections and limited access to contraceptives for a large part of the population. Thus, recent figures show that the total fertility rate in Nigeria is still very high, namely 5.19, ranking number 12 out of 224 countries (2015 estimate). Correspondingly, the contraceptive prevalence rate was only 15.1% in 2013 (CIA, 2015). The demand for surrogacy in Sub-Saharan Africa is also much higher than in Western countries due to the high prevalence of large myomata in women of reproductive age.

The increasing incidence of young, pregnant and helpless teenage girls in poverty will surely also increase the possibility of giving away their babies after delivery for financial remuneration, especially given the growing demand for adoption from the US and Europe, which will surely inspire some people to start baby factories in order to make a lot of money.
Proposals to solve the problem include (i) actions to reduce the burden of disease and economical consequences of being childless. This is of course the most difficult part and should involve politicians, the media and patient-groups, (ii) increased access to infertility care by making ART more affordable and accessible (Van Blerkom et al., 2014), (iii) provision of family counselling for childless couples and an increased visibility of centres which offer ethical infertility care and family planning, (iv) the development of a positive self image in the young by creating suitable jobs for them, especially for vulnerable adolescent girls, and (v) attempts to convince the government to legalize surrogacy for those who really need it and to ban commercial surrogacy for ethical reasons: doctors and paramedicals working in these commercial baby factories need to be sanctioned.

Academic researchers are trying increasingly to focus worldwide attention on this phenomenon, to inform the public and the politicians about this emergent social menace. Adequate counselling at an individual level, and enlightenment and educational campaigns at a community level, organized by the government and NGOs are urgently needed in Nigeria to overcome the baby factory phenomenon.

References


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