

ỊLỤ DI NWANYỊ: THE IGBO AFRICAN CONTEXTUALISATION OF CULTURAL SURROGACY AND GILLIGAN’S ETHICS OF CARE

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Abstract:

In Igbo African tradition, cultural surrogacy arrangements involve complex webs of relationships, care, and reciprocity. This study employs Carol Gilligan’s Ethics of Care to examine the experiences of women involved in cultural surrogacy, highlighting the importance of empathy, compassion, and relationality. Through a qualitative research design, this study explores the tensions between individual rights and communal interests, arguing that women’s autonomy and agency must be preserved within a framework of care and mutual responsibility. The study advocates for policies and practices that promote the well-being, dignity, and human rights of women involved in cultural surrogacy, recognizing the intrinsic value of care and relationships in Igbo African tradition.

Keywords: Igbo, African, culture, surrogacy, ethics of care, women’s rights,

Introduction

Marriage, a timeless institution, has traditionally been defined as a union between a man and woman, bound together as husband and wife. This sacred bond creates a lifelong partnership, with couples often seeking companionship, love, support, and most importantly, to start a family. Children are indeed a source of immense joy for parents. However, when a married couple faces difficulties conceiving after a prolonged period, frustration and despair can set in, prompting them to seek solutions to their infertility challenges. Marriage according to Encyclopedia Britannica is defined thus :

Marriage, a legally and socially sanctioned union, usually between a man and a woman, that is regulated by laws, rules, customs, beliefs, and attitudes that prescribe the rights and duties of the partners and accords status to their offspring (if any). The universality of marriage within different societies and cultures is attributed to the many basic social and personal functions for which it provides structure, such as sexual gratification and regulation, division of labour between the sexes, economic production and consumption, and satisfaction of personal needs for affection, status, and companionship. Perhaps its strongest function concerns procreation, the care of children and their education and socialization, and regulation of lines of descent. ¹

In Igbo African culture, which is located in South Eastern Nigeria, marriage is a vital component of society, with procreation that is having children as being the fundamental aspects. When couples are unable to conceive, they often face societal pressure and stigma, with women frequently bearing the brunt of blame. Unsubstantiated allegations, such as being a witch or an “Ogbanje,” (that is one who dies as a means of terror and comes back and dies again) can lead to social and psychological trauma. The desperation for a child can drive couples to seek unorthodox solutions, including dubious baby factories that exploit vulnerable individuals. Despite government efforts to combat these factories, they continue to operate clandestinely. Accredited motherless babies’ homes offer a legitimate option for couples, although some may be hesitant due to societal stigma.

Infertility is a prevalent issue in sub-Saharan Africa, caused by factors such as sexually transmitted diseases, low sperm count, and ovarian problems. Fortunately, medical advancements have provided various solutions, including Assisted reproductive technologies like In vitro Fertilization popularly known as IVF etc.

Key Facts of Infertility according to World Health Organisation are:

1. Infertility affects millions of people – and has an impact on their families and communities. Estimates suggest that approximately one in every six people of reproductive age worldwide experience infertility in their lifetime.

2. In the male reproductive system, infertility is most commonly caused by problems in the ejection of semen, absence or low levels of sperm, or abnormal shape (morphology) and movement (motility) of the sperm.
3. In the female reproductive system, infertility may be caused by a range of abnormalities of the ovaries, uterus, fallopian tubes, and the endocrine system, among others.
4. Infertility can be primary or secondary. Primary infertility is when a pregnancy has never been achieved by a person, and secondary infertility is when at least one prior pregnancy has been achieved.²

Surrogacy offers a viable option for couples struggling with infertility and childlessness. However, it's essential to recognize that surrogacy is a selfless act, and the rights of surrogate mothers must be safeguarded.

According to N. H. Patel et al, Surrogacy can be regarded as last resort.

Being last resort of treatment for many medical indications for infertility, surrogacy poses a new complexity on psychological aspects and again requires multidisciplinary approach. Surrogacy brings to light a cobweb of possible relationships, which could sometimes be emotionally taxing.³

This paper aims to shed light on the rights of culturally induced surrogate mothers known as Ílù di nwanyì - in Igbo African world view including their autonomy in decision-making regarding healthcare providers, access to medical care, and social and psychological well-being with reference to Carol Gilligan's ethics of care that dwelt on companionships, emotions, empathy and relationships.

GLOBAL PERSPECTIVES ON SURROGACY

Surrogacy has been in existence since the time of Babylonians. Traditional surrogacy traced in Babylon was recorded in The Christian Bible in the Book where Sarah gave out her maid Hagar to her husband as to maintain their lineage. In another vein, Rachael gave out her maid Bilhah to his Jacob because of procreation .

Surrogacy which came from a Latin word "Subrogare" simply means to substitute that is to for something to act in replace of another. Therefore surrogacy is the act of a human to act in a replacement of another especially women known as surrogate mothers. Surrogacy technically involves using scientific methods to facilitate reproduction, where a woman consents to carry and give birth to a child for another individual or couple. This assisted human conception technique has sparked intense discussions about its implications, benefits, and drawback. Different types of surrogacy have been highlighted this:

1. The most common form of surrogacy is gestational surrogacy, in which the baby is not biologically linked to the surrogate. In this type of surrogacy, an embryo is created using the sperm from the future father (or sperm donor), and the egg of the biological mother (or egg donor). This embryo is then implanted into the uterus of the surrogate, who will carry the baby to full term.
2. Traditional Surrogacy. Traditional surrogacy uses the sperm of the intended father to fertilize the surrogate's egg. The surrogate mother carries the pregnancy to full term, delivering the baby for the parents to love and raise. With traditional surrogacy, the baby is biologically linked to the surrogate mother.⁴

Surrogacy, a form of assisted human reproduction, has been a topic of scholarly debate for decades. At its core, surrogacy raises fundamental questions about the rights and interests of all parties involved. While some countries permit surrogacy, others prohibit it, reflecting diverse cultural, ethical, and legal perspectives. In the past years Legal laws for surrogate mothers were not successful until 1980.

In 1976, a lawyer named Noel Keane negotiated and drafted the first legal surrogacy agreement. The agreement was designed for a traditional surrogacy and the surrogate was not compensated monetarily for her services. Keane remained a strong proponent of surrogacy throughout his life. He is believed

to have helped roughly 600 children be born through surrogacy over the course of his career. In 1980, surrogacy contracts were generally legal but unenforceable since state surrogacy laws were largely indeterminate. Then came Elizabeth Kane, the first legally compensated surrogate in the U.S. Both parties agreed to a traditional surrogacy. The agreement stated the surrogate would be paid the sum of \$11,500.⁵

The concept of rights, care, responsibility, as discussed by Carol Gilligan in her work, will be applied to evaluate the fundamental human rights and choices of cultural induced method of surrogate mothers in Igbo land known as *ilu di Nwanyi*. By examining the ethics of care through a critical lens, this study seeks to underscore the rights, care and compassion deserving of such mothers. This can be achieved by answering the following research questions: How do cultural surrogacy arrangements in Igbo African tradition reflect the principles of Gilligan's Ethics of Care? What are the experiences and perspectives of women involved in cultural surrogacy arrangements in Igbo African tradition? How do individual rights and communal interests intersect in cultural surrogacy arrangements, and what implications does this have for women's autonomy and agency? What policy and practical recommendations can be made to promote the well-being, dignity, and human rights of women involved in cultural surrogacy arrangements?

Internationally, surrogacy is viewed differently across countries. While some nations have accepted and regulated surrogacy, others have banned it or have strict laws governing its practice. Commercial surrogacy is also a contentious issue, with some countries allowing it and others prohibiting it.

In African traditional culture, marriage is often viewed as a union between a husband and wife, with procreation being a fundamental aspect. The inability to conceive naturally is often stigmatized, leading to a preference for biological children over adoption. Surrogacy, as a form of Assisted Reproductive Technology (ART), is generally frowned upon in African culture due to its deviation from traditional conjugal relationships.

However, child adoption has long been a prominent option for childless couples. ART, including surrogacy, has also provided new avenues for individuals and couples to build their families. In Nigeria, particularly in the South Eastern region where the Igbo tribe is predominantly found, there is a lack of clear legislation governing surrogacy. This legal vacuum can lead to difficulties in arbitration and biases among lawyers when surrogacy cases arise. The Nigerian Law Reform Commission has provisions for children born through artificial insemination, stating that a child born to a married woman through this means belongs to the husband. However, for children born via surrogacy, the intended parents are required to adopt the child legally, even if the child is genetically theirs. It's worth noting that Igbo culture generally frowns upon surrogacy, which can further complicate legal and social issues surrounding the practice.

ÍLù Di Nwanyi -Cultural Induced Surrogacy in Igbo African World View

In traditional African societies, marriage is a union between a man and one or more women, with procreation being a vital aspect of family and community life. The desire for children is deeply ingrained, and couples often pray for offspring to continue their lineage. However, some couples face challenges due to medical conditions, unknown causes, or other factors, prompting them to seek solutions.

African marriage often viewed as a union between a husband and wife, with procreation being a fundamental aspect is being threatened when there is inability to conceive naturally is often stigmatized, leading to a preference for biological children over adoption. Surrogacy, as a form of Assisted Reproductive Technology (ART), is generally frowned upon in African culture due to its deviation from traditional conjugal relationships.

In many African cultures, children are considered a source of joy, economic security, and social status. When couples are unable to conceive, they may explore various options, including medical

interventions like infertility treatments, IVF, or surrogacy. In cases where medical solutions are not viable, traditional African practices may be employed.

In Igbo culture, cultural surrogacy arrangements occur in specific contexts, such as:

1. Patrilineal inheritance: When a family lacks a male heir or the father is deceased, the woman may assume a more active role in ensuring the continuation of the family lineage.
2. Arranging for a surrogate mother : The woman may arrange for a younger woman or girl to bear a child for the family, often through a secret betrothal to a kinsman or a man of her choice.
3. In some families, the pressure to produce an heir can be particularly intense. In such cases, cultural surrogacy practices, where a woman from the immediate family stays behind and bears a child on behalf of her father as to offer a unique solution. This traditional practice highlights the complexities of family, identity, and community in the face of infertility.

Sometimes these arrangements raise important questions about the agency, autonomy, and rights of the women involved. This study aims to explore the intricacies of cultural surrogacy in Igbo land, examining the social, cultural, and economic contexts that shape these practices, through the lens of Jean-Jacques Rousseau's concept of the general will.

However in Igbo African culture, natural conception and blood ties are deeply valued. The traditional worldview emphasizes the importance of a man and woman cohabiting to have children, with a strong emphasis on biological lineage. Western-style surrogacy, involving a third-party donor, is often rejected due to concerns about mixing "foreign" blood with the intended parents' lineage.

Globally, surrogacy has sparked intense debates, with some countries regulating it as a means to help infertile couples, while others prohibit it altogether. In contrast, child adoption has long been a prominent option for families.

In Igbo culture, surrogacy is viewed as a threat to the sacredness and cultural integrity of the family system. Despite the hope it offers infertile couples to have biologically related children, it is often seen as a deviation from traditional values.

In Igbo African culture, marriage is a vital component of society, with procreation and having children being fundamental aspects. When couples are unable to conceive, they often face societal pressure and stigma, with women frequently bearing the brunt of blame. Unsubstantiated allegations, such as being a witch or an "Ogbanje," can lead to social and psychological trauma.

Carl Gilligan's Ethics of Care

The ethics of care revolves around the intertwined concepts of ethics and care. Ethics broadly speaking concerns morality and the fundamental principles that guide it. This includes our actions and moral obligations not only to ourselves but also to our communities and governing bodies. Ethical thought often gabbles with the rightness or wrongness of actions, the role of judgment and choice (evaluating choices and consequences) and the philosophical questions of free will versus determinism (where personal agency external factors shape our decisions). Indeed ethics is a branch of philosophy dedicated to understanding human actions categorized as good or bad. Care on the other hand, emphasizes responsibility and availability to provide aid as circumstances demand that is being accountable and present to provide help when needed. It signifies actively providing something needed or attentively looking after another person, frequently stemming from a perceived duty or the ability to offer essential assistance. Care recognizes a moral duty to help others, leveraging one's power and ability to provide assistance. The Ethics of Care as a philosophical framework integrates these two concepts to prioritize empathy, compassion and responsibility in our relationships and actions.

The central focus of the ethics of care compelling moral salience of attending to and meeting of particular others of whom we take responsibility. Taking care of one's child for instance may well and defensively be at the fore front of a person's moral concerns. The ethics of care recognizes that human beings are dependents for many years of their lives, that the moral claims of those dependent on us for the care they need is pressing and that they are highly important aspects of caring that enable human beings to live and progress. All human beings need care for at least their early years. Prospects for human progress and flourishing hinge fundamentally on the care that those needing it receives and the ethics of care stresses the moral force of the responsibility to respond to the needs of the dependent. Many persons will become ill and become dependent for some period of their later lives including frail old age and some who are permanently disabled will need care the whole of their lives.⁶

Ethics of care ponders on the concept of care and relationship that exists between people that offers it and those that receive it. Further analysis on ethics of care is well captured thus:

The moral theory known as “the ethics of care” implies that there is moral significance in the fundamental elements of relationships and dependencies in human life. Normatively, care ethics seeks to maintain relationships by contextualizing and promoting the well-being of care-givers and care-receivers in a network of social relations. Most often defined as a practice or virtue rather than a theory as such, “care” involves maintaining the world of, and meeting the needs of, oneself and others. It builds on the motivation to care for those who are dependent and vulnerable, and it is inspired by both memories of being cared for and the idealizations of self. Following in the sentimentalist tradition of moral theory, care ethics affirms the importance of caring motivation, emotion and the body in moral deliberation, as well as reasoning from particulars. When asked what is Ethics of Care in an interview, Gillian defined ethics of care as:

As an ethic grounded in voice and relationships, in the importance of everyone having a voice, being listened to carefully (in their own right and on their own terms) and heard with respect. An ethics of care directs our attention to the need for responsiveness in relationships (paying attention, listening, responding) and to the costs of losing connection with oneself or with others. Its logic is inductive, contextual, psychological, rather than deductive or mathematical.⁸

Ethics of care therefore according to Carol is a moral framework that centers on relationships and responsibilities within those relationships, emphasizing compassion and responsiveness. It's a distinct approach from traditional ethics, which often focus on abstract rules and principles.

ÍLụ Di Nwanyí -Igbo Cultural Surrogacy and Preservation of Lineage and Heirship in Igbo Culture.

In Igbo culture, the desire for progeny, particularly an heir to preserve the family line, is deeply ingrained and of utmost importance. Families yearn for children to carry on their legacy and childlessness is often viewed as a threat to the family's continuity. That is prospect of childlessness casts a long shadow on a family's future, prompting some to explore various avenues to avoid this fate and secure male offspring to carry the ancestral name.

Names themselves often reflect this profound yearning. For instance, “Afamefuna” encapsulates the fervent hope that one's name will not be lost, while “Obiechina,” referring to the ancestral Obi – the central dwelling where ancestors are believed to reside and significant gatherings take place – is often bestowed upon a child born after a prolonged period of waiting. Such names serve as poignant reminders of the importance placed on continuing the lineage.

In Igbo tradition, the emphasis on having children, especially male children, is fundamental to Igbo identity. Male offspring are viewed as the anchors of the family, destined to uphold the family name, and ensure the lineage endures. They are revered and cherished as the custodians of ancestral traditions and cultural heritage, playing a vital role in the unbroken chain connecting past, present, and future generations.

Making the Best out of Cultural Surrogacy in Igbo African Philosophy

Culturally surrogate mothers in the Igbo African worldview embody a complex, multifaceted role, intersecting individual, familial, and communal interests. As helpers, they facilitate family unity, preserve cultural heritage, and transmit traditional values through childcare. However, culturally induced surrogate mothers may confront stigma, social exclusion, or ostracism when their communities perceive surrogacy as unconventional or taboo.

Furthermore, the adoption of cultural surrogacy practices by outsiders or dominant cultural groups risks cultural appropriation. This occurs when traditional practices are co-opted and commodified without proper understanding, respect, or compensation, potentially eroding the cultural significance and autonomy of Igbo communities.

ÍLÚ DÌ NWANYÌ - Igbo Cultural Surrogacy is characterized by the active involvement of the community in supporting both the culturally induced surrogate mother and the intended family. This communal support reflects Carol Gilligan's emphasis on interconnectedness and relationships, highlighting the significance of social bonds within both parties.

Ílú dī nwanýì that is cultural surrogacy arrangements in Igbo culture often occur within family networks or close community relationships, further emphasizing the importance of social bonds. Moreover, the practice of cultural surrogacy in Igbo land is frequently motivated by a sense of compassion and empathy for childless couples or individuals. This altruistic motivation aligns with Gilligan's emphasis on care and compassion.

Decision-making regarding surrogacy in Igbo culture is typically characterized by careful consideration for the specific context and circumstances of the individuals involved. This nuanced approach to decision-making reflects Gilligan's emphasis on contextual decision-making.

Gilligan's concept of moral responsibility is also relevant in Ílú dī nwanýì nyi that is Igbo Cultural Surrogacy, as the surrogate mother, intended parents, and community all share moral responsibility. Furthermore, surrogate mothers in Igbo culture are often viewed as having agency and autonomy in their decision-making processes.

While Igbo Cultural Surrogacy reflects elements of Gilligan's Ethics of Care, it is essential to acknowledge the complexities and nuances of this practice. Cultural expectations, socioeconomic factors, and other influences can all impact the experiences of surrogate mothers, highlighting the need for a comprehensive understanding of this complex phenomenon.

Culturally induced surrogate mothers in Igbo land may be facing some challenges, including emotional manipulation, where they are subjected to manipulation or coercion that undermines their autonomy and decision-making capacity. Additionally, they may experience social isolation, being separated from their communities and support networks, which exacerbates their vulnerability.

This situation highlights the absence of Carol Gilligan's Ethics of Care in their lives. According to Gilligan, culturally induced surrogate mothers require support to thrive physically, emotionally, and economically, as well as empathy and compassion that recognizes their dignity, worth, and humanity.

By prioritizing the Ethics of Care, we can work towards creating a more just, compassionate, and supportive environment for culturally induced surrogate mothers in Igbo land.

Policies to Protect the Dignity, Well-Being, and Human Rights of Women Involved in Cultural Surrogacy:

1. **Informed Consent:** Ensure women provide fully informed consent before participating in cultural surrogacy, understanding physical, emotional, and legal implications.

2. **Autonomy and Decision-Making:** Respect women's autonomy to make decisions about their health, bodies, and well-being.
3. **Economic Empowerment:** Provide medical expenses, education, training, and entrepreneurship initiatives to promote economic empowerment.
4. **Quality Healthcare:** Ensure access to quality healthcare, including prenatal care, childbirth services, postpartum support, and mental health services addressing emotional and psychological challenges.
5. **Protection from Exploitation:** Implement measures to protect women from exploitation, ensuring fair compensation and safe working conditions.
6. **Citizenship and Identity Documentation:** Ensure children born through cultural surrogacy have access to citizenship and identity documentation, regardless of birth circumstances.

conclusion

Ịlụ di nwanị! Culturally induced surrogacy in Igbo land is a complex phenomenon that reflects both the benefits and challenges of communal involvement in reproductive decision-making. On one hand, Igbo cultural surrogacy practices emphasize interconnectedness, care, compassion, and shared moral responsibility, aligning with Carol Gilligan's Ethics of Care. On the other hand, culturally induced surrogate mothers in Igbo land may face challenges such as emotional manipulation, social isolation, and vulnerability. These challenges underscore the need for a nuanced understanding of the power dynamics, cultural expectations, and socioeconomic factors that influence the experiences of surrogate mothers. To promote a more just, compassionate, and supportive environment for culturally induced surrogate mothers in Igbo land, it is essential to prioritize their autonomy, agency, and well-being. This requires recognizing their dignity, worth, and humanity, as well as addressing the complexities and nuances of Igbo cultural surrogacy practices. Ultimately, a comprehensive understanding of culturally induced surrogacy in Igbo land must acknowledge both the benefits and challenges of this practice, striving to promote a more equitable and compassionate environment for all parties involved.

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References

1. <https://www.britannica.com/topic/marriage>
2. <https://www.who.int/news-room/fact-sheets/detail/infertility>.
3. N.H Patel et al ,(2018) Insights into different Aspects of Surrogacy P, Journal of Human Reproductive Sciences in <https://pmc.ncbi.nlm.nih.gov/articles/PMC6262674/>
4. <https://www.elite-ivf.com/how-to-become-a-parent/what-is-surrogacy/>,
5. <https://www.worldwidesurrogacy.org/blog/the-history-of-surrogacy-a-legal-timeline>
6. Virginia Held(2006). The Ethics of Care: Personal, Political and Global. New York: Oxford University Press,p 10
7. <https://iep.utm.edu/care-ethics/#SH1a>
8. Carol Gilligan(2011). Care Ethicist Network <https://ethicsofcare.org/carol-gilligan/#:~:text=My%20research%20on%20identity%20and,of%20psychological%20and%20moral%20theory>