

19 January 2019

Dr Catherine Lynch, JD

Dear Sir/Madam,

**Re: *WA Human Reproductive Technology and Surrogacy Legislation Amendment Bill 2018***

I'm writing to you in my capacity as President of *Adoptee Rights Australia (ARA Inc.)* on behalf of its members to bring to your attention the issue of neonatal rights and wellbeing that appears to be overlooked in WA surrogacy laws.

This letter is divided into 5 parts:

- 1. Why removing babies from their gestational mothers for any reason other than child protection concerns or abandonment is wrong.**
- 2. Why removing babies from their gestational mothers for any reason other than child protection concerns or abandonment is cruel.**
- 3. Why removing babies from their gestational mothers for any reason other than child protection concerns or abandonment is a violation of the human rights of children under both domestic law principles and international law.**
- 4. Conclusion.**
- 5. Appendix: *Research proving maternal-neonatal separation is distressing for neonates.***

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- 1. Why removing babies from their gestational mothers for any reason other than child protection concerns or abandonment is wrong.**

*ARA Inc.* members note the Second Reading Speech of Hon Roger Cook MLA, Minister for Health, who states:

'This bill recognises that the best interests of children are served when they can grow up in an environment in which they are cared for, loved and supported. A growing body of sociological and psychological research shows that it is a supportive and loving environment, not

sexual orientation or whether there are two parents or one, that is important for the development of happy and well-adjusted children.’

With all due respect, the Hon Roger Cook has neglected to mention that the best interests of children are *also best served* when they are placed on their gestational mother after the ordeal of birth, allowed to attach and suckle at her breast, and receive all the warmth, reassurance and security of being with the only person in the world whom they already have a profound and *pre-existing* relationship with and love for: their gestational mother. Removing neonates from gestational mothers is an intrinsic part of all forms of surrogacy – including compensational surrogacy – and, indeed, surro-people are conceived for the purpose and intention of removing them to give to other parents. “Visits” between mother and baby after the baby has been removed to the commissioning parents’ home does little to reassure a baby against the loss of their mother and is likely only to re-traumatise the infant who must re-experience this frightening loss – which evolutionary biology indicates is experienced by the baby as “life-threatening” - again and again.

Unlike any other human relationship, the mother/baby relationship in utero is a unique embodied relationship and because of this embodied nature, it cannot be replicated by any other relationship. This unique relationship is also *the first relationship every human being has with a human adult*, bar none. It is a fact that the maternal-neonatal relationship is the foundational relationship of all other human relationships. Anca Gheaus, in her paper, “*The normative importance of pregnancy challenges surrogacy contracts*,” explains that the phenomenology of pregnancy establishes a pre-existing relationship and that this bonding happens “even if the pregnant woman knows she will not be permitted to keep the baby.”<sup>1</sup> Bonding during pregnancy provides a very solid reason why allocating babies to different social parents damages or destroys the already existing intimate relationship between mother and child. Gheaus concludes that pregnancy itself fosters this relationship and hence taking babies away from their gestational mother is morally wrong.”<sup>2</sup>

When they are born, babies show little interest in the nurses and other strangers in the room, and although they are usually extremely curious and delighted about the source of their father’s voice which they recognise from being in-utero, have only one, biologically determined, dominating desire: to be with, *and remain with*, their mothers. This is obvious if you have ever observed a baby being taken from the arms of their mother for any significant length of time: the baby will eventually become agitated and begin to cry for her. It has always been true, and always will be, that all babies “want their mummies.” A baby grown from an implanted embryo has no awareness whatsoever that their “mummy” may not be related to them via DNA. As Gheaus points out, “[b]iology turns out to play an important role in parent-children relationships thanks to the biological processes of parenthood, independent of genetic connections.”<sup>3</sup>

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<sup>1</sup> Gheaus (2016) op.cit., 27-28.

<sup>2</sup> Ibid., 23.

<sup>3</sup> Ibid., 21.

Because of the phenomenology of pregnancy, every human being has a moral right to be parented by their gestational mother. And, in a truly compassionate and responsible society of adults that places the wellbeing of its children above their own, this right would defeat even the claim of the gestational mother to *transfer* her moral right to parent to someone else. Gheaus explains that “if part of what explains this moral right [to parent] is the newborn's own attachment to her or his gestational mother, then the surrogate's moral right... cannot, in principle be transferred to a third party and therefore surrogacy contracts ought to be always seen as void.”<sup>4</sup> If taking babies off their mothers for any other reason other than child protection reasons or abandonment is morally wrong then immorality is intrinsic to all forms of surrogacy.

## **2. Why removing babies from their gestational mothers for any reason other than child protection concerns or abandonment is cruel.**

The belief that removal of babies from their gestational mothers in the months, hours or weeks after birth makes a “clean break” of the gestational mother/infant relationship or bond, without damage to either mother or child, cannot even remotely be sustained. Nor can the claim that “daily, weekly or monthly “visits” are enough to sustain the child’s absolute feeling of wellbeing, experienced in the arms of their mother even if she is a “merely adequate” kind of mother.

Australians have heard testimony from thousands of members of the Stolen Generations, and thousands of people who were removed for adoption near to birth, that their removal caused untold, lifelong and even intergenerational damage. And the *National Apology for Forced Adoption* revealed that much the same motivation for forced adoption was the same motivation as that currently driving the push for surrogacy: to “build” the families of adults who cannot naturally have children.

We have a significant demographic of Australian adults who have suffered the removal from their gestational mothers at birth who have dedicated their lives to fighting for, and winning, National Apologies and to re-educate people in what we have always known: *Babies do not want to be removed* and doing so causes them significant distress. Unfortunately, this is the case no matter how loving the “replacement” parent may be, no matter how perfect the future family environment may be, and no matter whether or not the child has genetic links to the replacement parent. This is the small matter that the Hon Roger Cook MLA, Minister for Health neglected to mention, perhaps does not himself understand. In this respect it would be good for him to listen to mothers like me and the mothers in the adoption community. I am someone who not only has gestated and birthed two children but who was also separated from her own mother after birth for adoption. I think that the Minister would not have this experience himself and so may not be able to fully comprehend what it means.

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<sup>4</sup> Ibid.

In evolutionary biology the neonates love for its mother and its ability to wriggle up her body to her breast to suckle in the hours after birth is recognised as an innate and ancient survival mechanism. A newborn's inability to locate the mother is experienced as life-threatening and deeply distressing and, at one time, would have meant death for the baby. That neonates suffer from maternal separation is undeniable and this fact alone – even regardless of the exploitation and damage to women and mothers that goes along with it<sup>5</sup> - means that all surrogacy is unethical, even what has falsely been termed “altruistic” surrogacy. It is impossible for surrogacy to be altruistic towards neonates because of its intrinsic cruelty in denying a baby's desire for its mother. And the naming of “compensational” surrogacy in this way only further evidences how adults' preoccupation with their own interests has driven the narrative of “artificial family formation” and sidelined infant rights, needs, desire and experience. It is also worth pointing out that there is no great difference between commercial and compensational surrogacy: everyone still gets paid in the end, except the commodified child.<sup>6</sup> And those countries that permit compensational surrogacy such as Australia, actually have higher rates of illegal surrogacy arrangements, such as cross-border, than those countries that prohibit it altogether. Therefore “regulation” only serves to increase both legal and illegal baby trade.<sup>7</sup>

Conducting experiments on human beings that involve removing them from the gestational mother to observe the effects is out of the question. Despite this lack of safeguards, removal is not only permitted, but is required, under surrogacy contracts. Further, it can be argued that the “experiment” of removing children from their gestational mother at or near to birth, which would never be approved by an ethics committee, has already been conducted en masse on adopted people. There is nothing to suggest – nothing that we can even imagine would suggest - that a newborn baby removed for the purposes of surrogacy will be any less “stressed” than babies removed for the purposes of adoption.<sup>8</sup> This is simply because the infant does not understand that they have been implanted, that their DNA may differ from that of the woman with whom they are symbiotically growing, nor that the

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<sup>5</sup> See Renate Klein Renate Klein, *Surrogacy: A Human Rights Violation*, Spinifex Press, Australia, 2017 as well as Kasja Ekis Ekman at [https://www.theguardian.com/commentisfree/2016/feb/25/surrogacy-sweden-ban?CMP=fb\\_gu](https://www.theguardian.com/commentisfree/2016/feb/25/surrogacy-sweden-ban?CMP=fb_gu)

<sup>6</sup> For more information see Ekman, Kajsja Ekis. *Being and Being Bought; prostitution, surrogacy and the split self.* Transl. Suzanne Martin Cheadle, North Melbourne: Spinifex Press, 2013. First published in Sweden, Leopard Forlag, 2010.

<sup>7</sup> Ibid.

<sup>8</sup> “[T]here is a kind of denial that at the moment of birth and the next few days, weeks or months in the life of a child, when he is separated from his mother and handed over to strangers, he could be profoundly affected by the experience.” Nancy Verrier, “The Primal Wound: Legacy of the Adopted Child. The Effects of Separation from the Birth Mother on Adopted Children,” *American Adoption Congress International Convention*, Garden Grove, California, USA, (Apr 11-14, 1991).

woman in whom they gestate is not considered their “mother” but merely a “surrogate” for their mother under a surrogacy contract. So for the purposes of ascertaining the ethics of neonatal removal under surrogacy contracts there is no discernible difference between the immediate impacts on a neonate when removed for adoption or for surrogacy.

What this means is that listening to those with experience in adoption is the best source of information regarding the obvious outcome of a society that endorses the conception of human beings for removal under surrogacy contracts. Nancy Verrier, an adoptive mother and psychotherapist, in *The Primal Wound; Understanding the Adopted Child*,<sup>9</sup> writes,

Babies who are separated from their mothers demonstrate several stages of grief... The initial response is one of protest and an urgent effort to recover the lost mother ... This is the stage at which babies have been administered Phenobarbital in order to quiet the anguish and rage ... Next comes despair. Although there is still longing for the lost mother, the hope of being reunited with her diminishes. The child stops crying and, instead, becomes withdrawn, depressed, and detached.<sup>10</sup>

Dr. Wendy McCord, a pre- and perinatal psychologist and family therapist, agrees with Verrier’s conclusions by saying:

All adopted babies, I think you can pretty much say, are in shock, which is the most severe level of trauma. They need to be held a lot, they need to be given true empathy, and what they do needs to be interpreted in terms of their loss. And parents who are in denial of this add another trauma to what the baby's already suffered.<sup>11</sup>

Donor conceived people are another source of testimony. Alana S. Newman, a donor conceived person, says, “If people can take away something as precious as a mother or father, what else can people take away from us?... Removed by the state... Removed by a fertility industry that forces you into existence and then doesn’t return your calls when you grow up and start banging on their doors asking for records... Removed by a commissioning parent, often your other biological parent who vowed to protect and provide for you, but only on the contingency that you show gratitude for your life and don’t ask questions about the other missing parent...”<sup>12</sup>

And what better source of evidence do you need but the voices of surrogate people themselves? Jessica Kern, a young woman removed from her gestational mother to fulfill a surrogacy contract, has said of surrogacy:

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<sup>9</sup> Nancy Newton Verrier, *The Primal Wound; Understanding the Adopted Child*, (Gateway Press Inc: Baltimore) 2014, xiii-xiv.

<sup>10</sup> Verrier, 40-41.

<sup>11</sup> Marcy Axness Ph.D, “A Therapist Counsels Parents of Adopted Babies, Hospitalized Babies and other babies separated from mothers at birth,” from an interview with Dr. Wendy McCord, pre- and perinatal psychologist and family therapist. [http://www.healingresources.info/article\\_axness2.htm](http://www.healingresources.info/article_axness2.htm)

<sup>12</sup> Alana S. Newman, “AnonymousUs.org” at <https://anonymousus.org>

“We have so much evidence in the adoption communities that it’s detrimental to a child to separate them from their biology unless it’s a necessity but then we turn around and do it intentionally in this arena and we’re supposed to be grateful and all that stuff. The more you look into it the more problems you find... On the outside looking in it might look like it’s just a “couple” - but it just gets nastier and nastier the deeper you look in it.”<sup>13</sup>

Brian, a surro-person writing in a blog says: “You can dress it up with as many pretty words as you want. You can wrap it up in a silk freaking scarf. You can pretend these are not your children. You can say it is a gift.... But the fact is that someone has contracted you to make a child, give up your parental rights and hand over your flesh and blood child. I don’t care if you think I am not your child, what about what I think? Maybe I know I am your child.”<sup>14</sup>

### **3. Why removing babies from their gestational mothers for any reason other than child protection concerns or abandonment is a violation of the human rights of children under both domestic law principles and international law.**

Under the *Convention of the Rights of the Child* to which Australia is a signatory, the gestational mother is, of course, included in the definition of “parent.” Under this convention, the *best interests of children must be the primary concern* (Article 3). Children have an explicit right to be known and cared for by their gestational mother as far as is possible (Art. 7); a right to preserve his or her identity, including nationality, name and family relations (Art. 8); a right to NOT be separated from their gestational mother (Art. 9); a right to maintain personal relations and direct contact with the gestational mother on a regular basis (Art. 9); a right to maintain on a regular basis, save in exceptional circumstances, personal relations and direct contacts with both their parents (Art. 10). And there is even more rights violations of this Convention than I have listed.

The principle that children’s interests should be prioritized *above* those of adults and not merely “balanced” or subordinated to them (Article 3), is also a common principle found throughout Australian domestic law, especially in the *Family Law Act 1975*.<sup>15</sup> But where the law fails is the protection of neonates

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<sup>13</sup> The Centre for Bioethics and Culture Network, “Jennifer Lahl interview of Jessica Kern,” Twelfth Annual Paul Ramsey Award Dinner, April 18 2005, <https://vimeo.com/125756487>

<sup>14</sup> June 16, 2014, at <http://sonofasurrogate.tripod.com>

<sup>15</sup> Section 60CA of the *Family Law Act 1975* provides that “in deciding whether to make a particular parenting order in relation to a child, a court *must regard the best interests of the child as the paramount consideration*” and this principle appears nearly 30 times throughout the Act

[http://www.austlii.edu.au/au/legis/cth/consol\\_act/fla1975114/](http://www.austlii.edu.au/au/legis/cth/consol_act/fla1975114/)

The Australian Law Reform Commission explains that this principle is “to ensure that children’s interests are preferred over those of any other party” and “is an important consideration because children’s participation in proceedings is so

after birth: laws forbid the early removal of kittens and puppies from their gestational mother for 8 weeks despite the fact that a puppy survives on solids at 4 weeks<sup>16</sup> *yet no such laws protect the rights and welfare of human beings*. For this reason women's groups all over the world are working to get such protections of mothers and babies into legislation and also working toward a proposal to draw up a *Hague Convention on the Abolition of Surrogacy*.

#### 4. Conclusion

In view of the available evidence and the testimony of adopted adults, adoptive parents, professionals and the donor conceived; in lieu of conclusive proof to the contrary, that is, proof that babies do not suffer in any way upon removal from the gestational mother at birth; and until thorough long-term studies are conducted on people who have suffered removal from their gestational mothers at birth to prove that there are no negative short- or long-term impacts upon them from their removal, the baby trade that is all forms of surrogacy should be immediately outlawed, as it is in France, Germany, Italy, Spain, Serbia, Bulgaria, Sweden, Switzerland, Iceland, Finland, Quebec, Colombia, Pakistan, Saudi Arabia and parts of the United States. This must be done because all forms of surrogacy are cruel to neonates and violate the moral rights, needs and desires of the human being created.[10] Even if it were the case that losing ones gestational mother were not a "trauma" for the neonate is it really not generally agreed upon by all Australians "that unnecessarily stressing a newborn is unacceptable"?[11] In this respect ARA Inc. objects to the expansion of the surrogacy market to allow more people the opportunity to distress neonates by taking them from their mothers, either from the labour ward, or gradually over a many days.

Please consider the abolishment of this practice of baby trade. There is no "right" to be a parent, so children and babies are not obliged to satisfy such a right. Please protect them from being taken, and prevent them from being conceived and gestated for such a purpose.

Yours faithfully,

Dr Catherine Lynch JD

*Adoptee Rights Australia, Inc.*

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limited." *Seen and heard: priority for children in the legal process (ALRC Report 84)*, Chapter 16, "Children's involvement in family law proceedings; the best interests principle," para. 16.10. (Published/tabled 19 Nov 1997.)

<sup>16</sup> See for example NSW *Animal Welfare Code of Practice: Animals in Pet Shops*, Department of Primary Industries, 2008, p.17, Standard 10.1.9. [http://www.dpi.nsw.gov.au/\\_\\_data/assets/pdf\\_file/0019/244018/Animal-welfare-code-of-practice-animals-in-pet-shops.pdf](http://www.dpi.nsw.gov.au/__data/assets/pdf_file/0019/244018/Animal-welfare-code-of-practice-animals-in-pet-shops.pdf)

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### **Appendix.**

Some of the science relating to the neonatal experience of removal is canvassed in the section below. For testimonial evidence of the devastating long-term impact on neonates from separation from their gestational mothers I suggest reading all the submissions to the *Stolen Generations* and *Forced Adoptions* inquiries.

#### ***Research proving maternal separation is distressing for neonates.***

The importance of gestational mother-infant interactions is proved by “[o]ver half a century of converging clinical and animal research”<sup>[1]</sup> and the distressing effects on mammalian neonates of separation from the gestational mother are contained in a vast array of literature covering its impacts on brain, body and behaviour.<sup>[2]</sup> For instance, there is research that shows that human babies react in a unique way to the gestational mother while in utero as well as post-partum and that this is important for their wellbeing.<sup>[3]</sup> There is research that suggests the neonate is not psychologically separate from the gestational mother.<sup>[4]</sup> There is research that shows that removing a neonate from her or his mother after birth significantly impairs the baby’s sleep and causes her or him distress.<sup>[5]</sup> For example, in a 2011 study results of separation from mothers showed a 176% increase in autonomic activity and an 86% decrease in quiet sleep duration during Maternal-neonate Separation (MNS) compared with skin-to-skin contact... MNS is associated with a dramatic increase in HRV power, possibly indicative of central anxious autonomic arousal. MNS also had a profoundly negative impact on quiet sleep duration.”

*The authors state that the findings indicate maternal separation is a stressor the human neonate is not well evolved to cope with and is not be benign and Dr. John Krystal, editor of *Biological Psychiatry*, claims that “[t]his paper highlights the profound impact of maternal separation on the infant. We knew that this was stressful, but the current study suggests that this is major physiologic stressor for the infant.”<sup>17</sup>*

On top of all this data (please read the footnotes for the studies sourced), there is evidence that shows that early childhood stress has long-term neurodevelopmental effects<sup>[6]</sup> and recent research in epigenetics has shown that stress in infancy can have intergenerational impacts on gene

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<sup>17</sup> Ibid.

transcription.[7] There is research that shows that adoptees – people who have typically been removed from their gestational mothers at or very near to birth - have higher rates of mental illness, drug addiction and suicide than people who have not been removed[8] and there is evidence that these problems occur in adoptees even in the very “best” adoption scenarios.[9] Add to this adult adoptee testimony as well as testimony from adoptive parents, professionals and the donor conceived, and you get a pretty good case that permanent premature maternal separation causes short-term distress and long-term – even life-long and possibly intergenerational - negative impacts on the wellbeing of human beings.

To suggest that in these many and various scientific studies performed over many, many decades, that the provision of a “caregiver,” related by DNA to the neonate or not, as a substitute for the gestational mother would completely prevent the impacts of removal on the neonate, is both unsubstantiated and unreasonable and *to this date there are no conclusive studies that prove that separation from the gestational mother does not affect the neonate adversely*. And yet this must be the premise upon which any ethical acceptance of child removal for the purposes of a surrogacy contract is based.

A substitute mother, a donor, may perform damage control: the relationship that is formed may minimise some of the impacts of premature mother loss but it cannot *prevent* them. Neither do “visits” between mother and child suffice because the impacts occur because of the physical absence of the gestational mother and her repeated “loss” or “leaving” serves to retraumatise the child each time, as we have learnt in the adoption community, the hard way.

After a well-known recent history of enquiries into and apologies for child removal, Australians cannot say to adult surro-people what they so often say to adoptees: “Sorry! But we didn’t know...”

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[1] This body of research indicates “that early life experiences induce enduring neuroplasticity of the HPA-axis and the developing brain and this experience-induced neuroplasticity is due to alterations in the frequency and intensity of stimulation of pups’ sensory systems (i.e., olfactory, somatosensory, gustatory) embedded in mother–infant interactions.” Millie Rincón-Cortés and Regina M. Sullivan, “Early Life Trauma and Attachment: Immediate and Enduring Effects on Neurobehavioral and Stress Axis Development,” *Frontiers in Endocrinology (Lausanne)*.(2014; 5: 33). Published online Mar 21, 2014. Prepublished online Feb 8 2014. DOI: [10.3389/fendo.2014.00033](https://doi.org/10.3389/fendo.2014.00033) See also, for example, Michael L. Power and Jay Schulkin, “Maternal regulation of offspring development in mammals is an ancient adaptation tied to lactation,” *Applied & Translational Genomics*,

Elsevier, 1 December 2013, Vol 2, 55–63. <http://dx.doi.org/10.1016/j.atg.2013.06.001>

[2] Recent examples include L A Diehl, L O Alvares, C Noschang, D Engelke, A C Andrezza, C A Gonçalves, J A Quillfeldt, C Dalmaz, “Long-lasting effects of maternal separation on an animal model of post-traumatic stress disorder: effects on memory and hippocampal oxidative stress,” *Neurochemical Research*, April 2012, 37(4):700-7.

DOI: [10.1007/s11064-011-0660-6](https://doi.org/10.1007/s11064-011-0660-6) Epub *PubMed.gov* 2011 Nov 23

at <https://www.ncbi.nlm.nih.gov/pubmed/22108759>; L T Huang, G L Holmes, M C Lai, P L Hung, C L Wang, T J Wang, C H Yang, C W Liou, S N Yang.

“Maternal deprivation stress exacerbates cognitive deficits in immature rats with recurrent seizures.” in *Epilepsia*, Oct 2002; 43(10):1141-8

at <https://www.ncbi.nlm.nih.gov/pubmed/12366727> In the 1950s research

using animal subjects to investigate the ability for organisms to form attachments contributed significantly to the field of developmental psychology, particularly that of K. Lorenz and H. Harlow and, later, J. Bowlby.

[3] During the last phase of gestation a baby can recognise his or her mother’s voice, heartbeat, etc., see Anthony J. DeCasper and William P. Fifer, “Of Human Bonding: Newborns Prefer Their Mothers’ Voices,” *Science* 208 (1980): 1174-76; and Maude Beauchemin, Berta Gonzalez-Frankenberger, Julie Tremblay, Phetsamone Vannasing, Eduardo Martinez-Montes, Pascal Belin, Renè Beland, Diane Francoeur, Ana-Maria Carceller, Fabrice Wallois and Maryse Lassonde, “Mother and Stranger: An Electrophysiological Study of Voice Processing in Newborns,” *Cerebral Cortex* 21 (2011): 1705-11. Post-partum, a whole range of interactions indicate skin on skin contact with the gestational mother secures neonate wellbeing, see S Pipp and R J Harmon (1987) “Attachment As Regulation: A Commentary.” *Child Development*, (58: 648–652); JS Rosenblatt (2010) “Behavioral development during the mother-young interaction in placental mammals” in KE Hood, CT Halpern, G Greenberg and R Lerner (Eds) *Handbook of Developmental Science, Behavior and Genetics* (Wiley Blackwell pp. 212–213); CR Pryce and J Feldon (2003) “Long-term neurobehavioural impact of the postnatal environment in rats: manipulations, effects and mediating mechanisms.” *Neuroscience and Biobehavioral Reviews*, (27: 57); J Winberg (2005) “Mother and newborn baby: mutual regulation of physiology and behavior—a selective review.” *Developmental Psychobiology* (47: 217–22); and SC Brake, HN Shair, and MA Hofer (1988) “Exploiting the Nursing Niche: Infant’s sucking and feeding behavior in the context of the mother-infant interaction,” Blass, E (Ed.) *Developmental Psychobiology and Behavioral Ecology*, Vol. 9 (Plenum Publishing Corp, New York pp. 347–388). The benefits of breastfeeding by the gestational mother are well known and the World Health Organisation provides a comprehensive list of studies proving this in the “references” sections of their 2013 publications “Short-term effects of breastfeeding: a systematic review on the benefits of breastfeeding on diarrhea and pneumonia mortality” and “Long-term effects of breastfeeding: a systematic review,” [http://www.who.int/maternal\\_child\\_adolescent/documents/infant\\_feeding/en/](http://www.who.int/maternal_child_adolescent/documents/infant_feeding/en/)The WHO recommends colostrum, the yellowish, sticky breast milk produced at the end of pregnancy, as the perfect food for the newborn with

feeding to be initiated within the first hour after birth, exclusive breastfeeding up to 6 months of age, and continued breastfeeding along with appropriate complementary foods up to two years of age or beyond, <http://www.who.int/topics/breastfeeding/en/>

[4] Studies of neonatal psychology can be found in the field of psychoanalysis. See for example Margaret Mahler's separation-individuation theory of child development which developed over time in response to research, in SW Coates, *John Bowlby and Margaret S. Mahler: Their lives and theories* (2004), *J Am Psychoanal Assoc.* 2004 Spring;52(2):571-601, 571–587. The term "fourth trimester," a popular term for the few months after birth, comes from Sheila Kitzinger, *Women as Mothers*, Martin Robertson, Glasgow, 1978. Like Mahler, Kitzinger argues that these months are part of a continuum in which the infant remains, in part, psychologically merged with the mother.

[5] See Barak E. Morgan, Alan R. Horn, and Nils J. Bergman. "Should Neonates Sleep Alone?" *Biological Psychiatry*, 2011; 70 (9): 817 [10.1016/j.biopsych.2011.06.018](https://doi.org/10.1016/j.biopsych.2011.06.018). "Results show a 176% increase in autonomic activity and an 86% decrease in quiet sleep duration during Maternal-neonate Separation (MNS) compared with skin-to-skin contact... MNS is associated with a dramatic increase in HRV power, possibly indicative of central anxious autonomic arousal. MNS also had a profoundly negative impact on quiet sleep duration. Maternal separation may be a stressor the human neonate is not well evolved to cope with and may not be benign."

[6] See also, for example, J. P. Shonkoff, A. S. Garner, Committee on Psychosocial Aspects of Child and Family Health, Committee on Early Childhood, Adoption, and Dependent Care, Section on Developmental and Behavioral Pediatrics, "The lifelong effects of early childhood adversity and toxic stress." *Pediatrics*, 129(1), 2012, e232-246: "Recent advances in developmental science are revealing how significant adversity in childhood alters both the way the genome is read and the developing brain is wired. In this way, early childhood trauma is biologically embedded, influencing learning, behaviour and health for decades to come." American Academy of Paediatrics, *Helping Foster and Adoptive Families Cope With Trauma*, (2015) <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/healthy-foster-care-america/Documents/Guide.pdf>

[7] For example, "[T]he involvement of epigenetic mechanisms in intergenerational transmission of stress effects has been demonstrated in animals but not in humans... This is the first demonstration of an association of preconception parental trauma with epigenetic alterations that is evident in both exposed parent and offspring." Rachel Yehuda, Nikolaos P. Daskalakis, Linda M. Bierer, Heather N. Bader, Torsten Klengel, Florian Holsboer, Elisabeth B. Binder, "Holocaust Exposure Induced Intergenerational Effects on FKBP5 Methylation," *Biological Psychiatry*, (Sep 1, 2016, Volume 80, Issue 5) pp 372–380 <http://dx.doi.org/10.1016/j.biopsych.2015.08.005>. See online video report of the study at <http://www.pbs.org/video/2365554485/> Some of the animal studies referred to: Ewen Callaway and Nature magazine (1 Dec 2013) [Fearful Memories Passed Down to Mouse Descendants: Genetic imprint from traumatic experiences carries through at least two](#)

generations and Mariette Le Roux (1 Dec 2013) [Mice can 'warn' sons, grandsons of dangers via sperm](#) See also MV Veenendaal, Painter RC, de Rooij SR, Bossuyt PM, van der Post JA, Gluckman PD, Hanson MA, Roseboom TJ, Transgenerational effects of prenatal exposure to the 1944-45 Dutch famine. *BJOG*. 2013 Apr;120(5):548-53. doi: 10.1111/1471-0528.12136. Epub 2013 Jan

24. <https://www.ncbi.nlm.nih.gov/pubmed/23346894>

[8] For higher rates of disease and addiction among adoptees: "Adoptees have an increased all-cause mortality compared to the general population. All major specific causes of death contributed, and the highest excess is seen for alcohol-related deaths." Liselotte Petersen, Thorkild I. A. Sørensen, Erik Lykke Mortensen, Per Kragh Andersen, *Excess -Mortality Rate During Adulthood Among Danish Adoptees*, (16 Dec 2010) <http://dx.doi.org/10.1371/journal.pone.0014365> See also Paul Sunderland's "Adoption & Addiction: Remembered not Recalled" <https://www.youtube.com/watch?v=Y3pX4C-mtil>

For increased suicide risk see Margaret A. Keyes, Stephen M. Malone, Anu Sharma, William G. Iacono, Matt McGue "Risk of Suicide Attempt in Adopted and Nonadopted Offspring," *Pediatrics*, (132(4) Oct 2013) 639–646; G Slap, E Goodman, B Huang, "Adoption as a Risk Factor for Attempted Suicide During Adolescence" in *Pediatrics* (Vol. 108, No. 2, 2001) e30; A Von Borczyskowski, A Hjern, F Lindblad, B Vinnerljung, "Suicidal behaviour in national and international adult adoptees: a Swedish cohort study" *Social Psychiatry and Psychiatric Epidemiology*, (Vol 41, No 2, Feb, 2006) 95-102; B E Boulton, "Suicide attempts among adolescent adoptees," *South African Medical Journal*, (Vol 74, 1988). See also mother of loss, Wendy Jacob BSc BA, "Adoption and Suicide" in *Known Consequences of Separating Mother and Child at Birth Implications for Further*

*Study* at <http://www.adoptionbirthmothers.com/known-consequences-of-separating-mother-and-child-at-birth-implications-for-further-study/>. and adoptee Thomas Graham, "Where darkness resides: suicide and being adopted – is there a connection of elevated risk?" *Australian Journal of Adoption* (Vol 8, No 2, 2014) <http://pandora.nla.gov.au/pan/98265/20150416-0016/www.nla.gov.au/openpublish/index.php/aja/issue/view/282/showToc.html>

Historically there are reports from both Britain and the USA from 1952 onwards that a large number of children seen in child guidance clinics and other psychiatric services were adopted. See, for example, E Wellisch, "Children Without Genealogy A Problem of Adoption," *Mental Health*, 13, 1952; Donald W Winnicott, "Adopted children in adolescence: Report of Conference at Roehampton 1955," in Robert Tod, ed., *Social Work in Adoption: Collected papers*, Longman, 1971; Sants, op. cit.; Bernice T Eiduson and Jean B Livermore, "Complications in Therapy with Adopted Children," *American Journal of Orthopsychiatry*, 23, 1953; Marshall D Schechter, P V Carlson, J Q Simmons and H H Work. "Emotional Problems in the Adoptee," *Archives of General Psychiatry*, 10, 1964, 37-46; Nathan M Simon M.D and Audrey G Senturia, "Adoption and Psychiatric Illness," *American Journal of Psychiatry*, 122:8, 1966; Lydia Jackson, "Unsuccessful adoptions: a study of 40 cases who attended a child guidance clinic," *British Journal of Medical Psychology*, Vol 41, 1968; Alexina M

McWhinnie, "The Adopted Child in Adolescence," in Gerald Caplan & Serge Lebovici, eds, *Adolescence: Psychosocial Perspectives*, Basic Books, 1969. This information collated by Wendy Jacobs. For her full bibliography see "Known Consequences of Separating Mother and Child at Birth Implications for Further Study" op. cit.

[9] See Nancy Newton Verrier, *The Primal Wound; Understanding the Adopted Child*, (Gateway Press Inc: Baltimore) 2014. See also Martin Reite MD, Conny Seiler and Robert Short MS, "Loss of Your Mother Is More than Loss of a Mother," *American Journal of Psychiatry*, (135:3, Mar 1978). Reite demonstrated that when monkey infants were separated from their mothers they experienced decreases in body temperature and sleep pattern changes, *even when the separated infants were immediately adopted by another adult female*. Reite suggests that these physiological changes are caused, at least in part, by the perception of loss of the mother on the part of the infant. See also, Dr. John Triseliotis, "Adoptees in Search of Their Origins: The findings of a recent Scottish study," *The adopted person's need for information about his background*, Association of British Adoption Agencies, London, 1971. Adoptees were found to have a sense of "abandonment" by their gestational mothers irrespective of post-adoption experiences. Thanks to Wendy Jacobs, op. cit. for these references.

[10] Laws forbid the early removal of kittens and puppies from their gestational mother for 8 weeks despite the fact that a puppy survives on solids at 4 weeks - yet no such laws protect the rights and welfare of human beings. See for example NSW *Animal Welfare Code of Practice: Animals in Pet Shops*, Department of Primary Industries, 2008, p.17, Standard 10.1.9. [http://www.dpi.nsw.gov.au/\\_\\_data/assets/pdf\\_file/0019/244018/Animal-welfare-code-of-practice-animals-in-pet-shops.pdf](http://www.dpi.nsw.gov.au/__data/assets/pdf_file/0019/244018/Animal-welfare-code-of-practice-animals-in-pet-shops.pdf)

[11] "[M]ost would agree that unnecessarily stressing a newborn is unacceptable." "Maternal separation stresses the baby, research finds," op.cit.