Analyzing the Path of Reproductive Tourism and its Role in Supporting Tourism Demand in Iraq

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Received October 02, 2021; Accepted December 22, 2021
ISSN: 1735-188X
DOI: 10.14704/WEB/V19I1/WEB19344

Abstract

Travel to obtain reproductive services is a catalyst for all types of medical tourism, and is economical because of the low costs of services abroad. Reproductive tourism represents people crossing international borders to access reproductive technologies, to achieve their desire for a hereditary child, because they are unable to produce this child through natural means, as well as the desire to spend money to produce the child.

Keywords

Reproductive Tourism, IVF, Surrogate Mother, Reproductive Health.

Introduction

Between realizing the dream of motherhood on the one hand, and on the other hand; Using some money to fight poverty. Women have turned to a new commercial method, which is the rental of her uterus as an alternative mother for women suffering from a specific disease in the womb, or for spouses who suffer from infertility, especially in areas with high population density and poor areas. This idea witnessed an increase in fertility centers, and IVF operations, as well as an increase in the dialectic of community and religious opinion in this aspect.
Dreamers of patriarchy and motherhood, and the desire to form a family resorted to multiple means to achieve their goals and satisfy their desires, they sought their goals through a tourist trip, but rather a new path and a new framework for tourism and raising the level and volume of tourism demand through the path that he called (reproductive tourism).

a. **Research Problem**: Despite the healthy development in Iraqi health institutions, and in the two sectors; Public and private, but it has not invested in amplifying government wealth or beneficiaries on the one hand, and on the other hand; Not to support family formation, so that these health institutions are a tourist attraction, in addition to spreading a spirit of hope to those deprived of husbands and unable to have children, to enjoy the dream of the family. The problem is the presence of the growing need, the great desire to have children, and the absence of the ingredients for this process in Iraq with all its requirements.

b. **The Importance of Research**: It comes from introducing reproductive tourism, identifying its causes, and the position of religions on it. As well as access to global experiences in this area, and see the health reality in Iraq.

c. **Research Objectives**: The research aims to:

1. Definition of reproductive tourism, its causes and the material and moral benefit accruing from it.
2. Shedding light on the countries that gave their say in this field, how to benefit from their experiences, as well as knowing how to keep pace with the developments in this field in the region and the world.
3. Diagnosing the health status of women's health care in Iraq.

d. **The Research hypothesis**: The research hypothesis stems from the following questions:

1. The Iraqi health situation witnessed, especially in the last decade, A remarkable development in the health services, in addition to the high capabilities and medical qualifications working in this field, which supports the possibility of investing those institutions and their material and human resources in maturing and developing reproductive tourism.
2. The national economy can be supported by the availability of medical capabilities in Iraq.
3. Achieving the dream of forming a family for those seeking to perform IVF operations, birth methods, and the like.
4. Not to travel outside the country, therefore; Achieving a low rate of hard currency exit abroad.

e. The Research Sample

In order to achieve the practical aspect of the research, (12) questions were placed in the questionnaire which was distributed to (102) people, and by (51) husband and wife who carried out reproductive tourism trips and traveled outside the country or tried to carry out the operation inside the country.

Research Methodology

The research adopted the following research methods:

1. Self-understanding Method: The self-understanding method is known in anthropological thought as the (cognitive approach) that aims to understand the perceptions of the individual about the world, and how these perceptions are formed and organized? How can these perceptions be used? The cognitive approach assumes that all individuals who live within one culture have a single cognitive pattern, formed to act this culture, and works to organize the material and moral things of the phenomenon, events, behavior and feelings. Self-understanding works to find appropriate methods of analysis to arrive at models without including any strange perceptions or sayings about them, and then the criterion of honesty in relation to the results that the researcher reaches derives from the cultural reality itself, and expresses the viewpoint of those who belong to it (Abd, 2015).

2. Inductive Method: It is based on observing an event, then generalizing from that event using a logical analysis method to reach the general rules.

3. Deductive Method: It requires that the results depend on the introductions, so any introduction must lead to a related result (See: Bani Hani, 2013).

4. The study came with two studies. The first topic: theoretical framework, and the second topic: the field framework.

Theoretical Framework

Research Concepts

1. Reproductive tourism: it is also called genital tourism or fertility tourism; It is a branch of medical tourism that has increased interest in it. It is a type of medical tourism in which patients travel to other cities or countries to obtain fertility
treatments in various forms because these treatments are not available to them in their countries for many reasons. It was formulated as a pattern of tourism, as it attracted large numbers of people to other countries, spending money on fertility treatments, as well as on tourism costs such as food, accommodation, travel and leisure (David B. Smotrich, 13 April 2012).

2. Artificial insemination: It is the transfer of sperms to a man and placing them in the woman's reproductive system or obtaining a man's sperm and the woman's egg and fertilizing it outside the womb in a tube, then re-implanting it in a specific medical way in the womb of the woman (Al-Salhi, 2001).

3. The surrogate mother: is the use of a married couple who are unable to have children due to some health problems with another woman, which is like an alternative womb in which the child settles in the stages of his fetal formation until birth, and that volunteer woman is called (surrogate mother). The term surrogate mother is realized by the process of renting the uterus according to two methods: (van den Akker, 2017).

   a. That the surrogate mother's egg is fertilized with the sperm of the father, whether by establishing a sexual relationship or by artificial insemination, which is often done by injecting the sperm of the biological father into the reproductive system of the surrogate mother, or by using the semen of another donor, and in each Cases Here, the fetus will bear the genetic traits acquired from the surrogate biological mother, since it is donated by the egg and the uterus in this case. This method is known as (Traditional Surrogacy), and this method is the most acceptable and successful.

   b. In vitro fertilization takes place outside the body, by vaccinating the wife's egg with her husband's sperm; This results in a fertilized egg, ready for injection into the womb of the surrogate mother. The fetus here possesses genetic traits acquired from the biological mother and father and not from the surrogate mother. This method is known as (Gestational Surrogacy).

4. Reproductive health: It is a state of complete well-being, physically, mentally, and socially in all matters related to the reproductive system, its functions and operations, and not just safety from illness or disability, and therefore reproductive health is concerned with the ability of individuals to enjoy a satisfactory and safe sexual life, their ability to reproduce and their freedom to decide on reproduction and its date And frequency, the right to appropriate health care services, maternal health care during pregnancy and safe childbirth and postpartum care for the mother and her newborn including providing appropriate advice, encouraging breastfeeding,
providing quality family planning services, providing advice, information and education on aspects of Sexuality, reproductive health, responsible parenthood and family life.

The Causes of Reproductive Tourism

The causes of reproductive tourism; At the same time, they represent the characteristics of their patterns, which are:

1. Renting Uterus (Surrogate Mother)

Surrogacy is an arrangement between a woman, a couple or an individual to give birth to a child. An agreement is concluded between the biological parents and the surrogate mother, and the contract includes; The right to use the surrogate mother’s womb throughout the pregnancy, provided that the child gives up immediately upon birth, in exchange for an amount of money, to become formally affiliated with his biological parents, and this type is called (commercial surrogacy), which leads some to rent their wombs as a profession to earn a living when Some women, as is the case in India, Israel and some American states. There are countries that allow the donation of the uterus for a period without charge, as a woman can donate her womb to her friend, daughter, or sister throughout the pregnancy, without money, and without contracts, and this type is called (Altruistic surrogacy), among these countries: Belgium, Greece, Australia and the British Kingdom, and in Japan; The surrogate mother is directly banned, and doctors, agents, and clients are punished for commercial surrogate mother arrangements, and the surrogate mother was banned in China in 2001, although there are reports of a thriving black underground market for surrogate mother hire services (Deonandan, 2015).

The cost of childbirth in the alternative mother method in India is about (400) million dollars annually, and is generated from about (3000) specialized clinics in the country, and the United States is the other major provider of agents, as California and New Jersey top the list of states and each of them produces about (100) Born annually, and evidence also indicates that Thailand, Ukraine and Russia are other popular sources of agents for international customers, while Mexico, Nepal, Poland and Georgia are rapidly gaining a similar reputation. She has been a legitimate business surrogate mother in India since 2002, and she started in January 2004 with her grandmother giving birth to her twin daughter.

As a result of the development of reproductive techniques; Reproductive science has evolved. It has witnessed the past three decades; A major change in the field of
reproductive technologies, as reproductive sciences presented techniques such as: pollination by donors, methods of fertilization in the laboratory and transfer of embryos that are a revolution in the reproductive environment. These techniques instilled hope in the spirits of infertile couples, dreaming about the child (Rout, (November, 2012)).

Among the most important reasons that require the rental of the uterus:

a. The presence of a disease inhibitor in women: It stands in the way of achieving the dream of motherhood and childbearing in a woman, and the reason for this is due to: the absence of uterus for birth defects, or hysterectomy, which is one of the medical solutions in some cases, such as cases of severe bleeding and the state of rupture and explosion of the uterus. As well as uterine abnormalities that lead to repeated miscarriage, serious diseases that cause the uterus to lose its function or be removed entirely, as well; Chronic diseases in some wives, which may lead to death with pregnancy.

b. Searching for fertility: The rates of lack of fertility and infertility indicate a ratio of (30%) of cases, the origin of the cause is attributed to women, a ratio of (30%) of cases to men, and a ratio of (30%) of cases due to two: mixed infertility, and a ratio of (10%) of cases where the cause of lack of fertility is unknown. The reasons for the lack of fertility and sterility in women are due to ovarian and uterine diseases, early menopause, hereditary causes, structural disorders in the womb, and fertilization inside the fallopian tube as for the reasons for the lack of fertility and sterility in men, it is difficult to assess them, since the majority of the causes of male problems are unknown, with the exception of infections, and genetic causes (Bernabeu)

c. Searching for eggs: It is the goal of women (18 - 54) years old, who cannot get pregnant from their eggs and have children due to a medical problem, as they cannot get pregnant, and there is a medical justification for using the eggs of another woman, and the donor of the eggs can be a woman who is present in the fertilization process or a woman (21 - 35) years of age who volunteers to donate (volunteer donor) and is not present in the fertilization process.

d. Sperm Bank: The spread of sperm banks or sperm in Britain, the Netherlands and Russia. Thousands of families are unable to bear children for health reasons, as the husband suffers from sterility or a serious genetic disease, as well as unmarried women who decided to have a child for themselves. Clinics in the country provide mediation services between those who wish to bear children and sperm donors, while observing the legal aspects and health standards, knowing that the donor must not exceed 35 years of age and does not suffer from any health problem. The donor has the right to choose between confidentiality and between announcing his
donation. In the second case, the matter means his consent to the child communicating with him in the event he wishes to do so after reaching the age of (18) years. The number of sperm donations in Russia has reached about (8500), which means (8500) different types of artificial insemination (Al-Qalyubi, June 22, 2019).

Obtaining sperm is in exchange for money - despite talking about a donation - and that the price starts from (300) dollars for bank samples, and exceeds one thousand dollars if it comes from the clinic (California Crew Bank of America), because the transfer of sperm from the outside in private tanks increases its cost. However, there are (300 - 400) requests for recruitment from abroad annually, and that the high level of medicine in Russia and the low prices compared to the United States of America, medical tourism is spreading in Russia, and expected development of this sector in the coming years, as the Russian demand for these the service increases year after year. And Denmark imposes taxes on semen donors, and the bank pays the donor (250) Danish crowns (44) dollars for each dose

2. Travel to have Children

A. Pipe operation: Traveling abroad to perform IVF operations, due to the low cost abroad, on the one hand, and due to medical and technical development in genetic engineering on the other hand. The need to travel to obtain reproductive services through a set of legal restrictions that compel people to leave their countries of origin, and attractive services that attract patients to foreign countries, to access those services (Deonandan, 2015).

The laws are also a reason to travel abroad to perform this process, as in the laws of procreation of a single child, as in China. The policy of (one child) was adopted in 1980, in an attempt to halt the tremendous increase in the number of people in the country of one billion and 300 million people, but the ruling party eased its procedures, so families can have more than one child since 2013, in case one of the parents had a single child. Chinese mothers are keen to give birth in (Hong Kong); Because of its enormous potential in various aspects of educational and work life, and booming economic activity, and job opportunities, In addition to obtaining a passport issued by (Hong Kong), which allows its holder to travel easily to various countries of the world. The total cost of this tourism per person is (8000) USD. Including hospitalization fees, food, and legal papers for a pregnant mother. These companies are also concerned with the implementation of permanent flights, during which pregnant mothers will be transported from the mainland
of China to Hong Kong. In 2005, (2,000) women from mainland China gave birth in a Hong Kong hospital, which is equivalent to one third of all births that occurred in this city(Salem, 20/2/2007). The data of the Belgian Register of Assisted Reproduction in 1999 indicate that 30% of patients receiving IVF treatments come from abroad, and approximately (2700) to obtain an egg were performed in Belgium for foreign patients (Pennings, 2002).

People also engage in reproductive tourism because any country or country other than theirs can offer them better fertility treatment options, and according to data collected in 2010, up to (25,000) individuals and couples sought reproductive therapy abroad. It benefits all married couples by expanding their fertility options by traveling abroad; Doctors and clinics, and that reproductive tourism is able to help more people, as well as expand business, accumulate more research, and develop technology. It also benefits countries that have greater fertility options, as the number of visitors increases, and this supports the economy of those countries. The exact number of those who seek reproductive services globally is not known, but is likely to number in the tens of thousands in Europe alone.

Undoubtedly; That women of childbearing age (15-49) years, and who constitute more than one fifth of the world's population, are frequently exposed to the risks associated with pregnancy and childbirth, which confirms the need for accurate scientific research of these risks and basic maternity care services that ensure that these risks are addressed, and includes care services Basic maternity; Care during pregnancy, childbirth with trained and qualified hands, and postpartum care(Iraq, 2011b). And the absence of that care leads to the search for it outside the country.

B. Methods of childbirth: As in the method of childbirth with water, as many maternity hospitals in Iran, for example, offer this method to local or foreign citizens. The first hospital to have a baby in Iran was Akbarabad Hospital in Tehran seventy years ago. There are many private hospitals in Iran, such as Madran Hospital in Tehran, and Amin Maternity Hospital in Isfahan.

Women want to give birth with water in order to reduce birth shots and facilitate childbirth, as the water here plays its role as a massage through water with a temperature (37 - 38) degrees Celsius, and a woman with blood pressure, heart disease or obesity cannot deliver her in this way, and witnesses a hospital Amin for delivery in Isfahan Dozens of births for different nationalities per month, and in the year 2018 (1,600) births were witnessed, including: (1,200) normal and (400) cesarean deliveries.
Among the dangers of this method from birth: the lack of oxygen to the newborn, which causes his death, or the possibility of water entering the newborn's lung water and lung injury, or the possibility of microbial transmission from the water to the mother or the newborn.

### 3. Obtaining Citizenship

International travelers passing through American airports, and students who study at American universities obtain American citizenship in accordance with the law, and these benefits do not benefit the newborn alone, but extend to his family, as that child can later; To guarantee citizenship for his entire family. Illustrated; That mothers who give birth during their visit to the United States for the purpose of obtaining citizenship for their children, as the proportion of American babies born to non-resident mothers who come to America; For the purpose of giving birth only to obtain American citizenship, That the United States gives to those born on its soil. According to official statistics, The year 2006 witnessed the birth of (4,273,225) children, among whom (7670) were children born to mothers who do not live in the United States, and that the cost to them reached between (45 - 60) thousand dollars (Report:, 04/18/2010).

### 4. Gay

It is considered gay marriage; The practice of marriage between two men or between two women. And that this same-sex marriage is regulated by law, religion and customs in some countries of the world. However, the legal and social responses ranged from celebration on the one hand, and on the other hand; Criminalization. Research indicates that many gay and lesbian men want close relationships. As this research indicates that between (40 - 60) % of gay men and between (45 - 80) % of lesbians participate in a romantic relationship (Association, 2011). Despite convincing evidence that gay men and lesbians are gay, three concerns are often raised about same-sex couples; The first concern: the relationship is ineffective and unhappy, and the second concern: the relationships between them are unstable, and the third concern: that the processes that affect the permanence of the well-being of relationships between gay and gay people are different from those that affect the relationships of heterosexual people.

The Brazilian National Congress passed the court ruling unanimously in favor of establishing a stable relationship between two people of the same sex. And the same-sex parties obtain the same recognized rights and duties for both sexes. Same-sex couples can register their marriage in municipal records, obtain alimony and inheritance, and benefit...
from private health insurance programs (Nations, 2/13/2012). Homosexuals want to start a family and feel this entity, so attention is drawn to the rental of the uterus, or any means mentioned above.

The Position of some Heavenly Religions Regarding

1. **Judaism**: Conservatives and Reform rabbis condemn all IVF Operations (Al-Barzanji, 2009). However, contemporary society has permitted artificial insemination operations in its various forms, including the entry of a third party, or what is known as (uterine rental), and the state has approved it and legislated a law for it, and set rules and conditions for it that regulate the obligations of its parties (Attia, 2015). The surrogacy law was established in Israel in 1996, according to which wombs can be rented in Israel. The husband and wife may find a custodial mother independently or through a mediation company and conclude a surrogacy agreement with her, and according to the law; The custodial mother consents to the pregnancy by implanting a fertilized egg into the sperm of the prospective father, in order to carry out the pregnancy for the concerned parents and to deliver them after birth (Israel). Same-sex (gay) couples were excluded from the surrogacy law, which discriminated against homosexuals in Israel (The Times of Israel, July 24, 2018).

2. **Christianity**: The IVF (external artificial insemination) process was found opposed by church men, because it sees that the natural state of childbearing is that it is by naturally meeting the spouses so that the fetus is inside the wife’s womb and grows until the growth is complete and is born, then it arises inside This family, which he nurtures until he grows up, in contrast, in the process of artificial fertilization replaces the conjugal verb with a technical verb in contrast to the design of the creator who alone arranged the two concepts in the marital verb (union and reproduction)(Hussein, 2006). The Church prohibits (motherhood on behalf) because this act violates the obligations of parental love, marital trust and responsible motherhood, and it also offends the dignity of the father and his right to be born and born in the world and raised through his parents, just as the pregnant woman put herself in an inhumane condition because she separated Physical motherhood on relational motherhood (Hamza, 2007).

3. **Islamic Religion**: The Islamic Fiqh Academy, in its third conference in 1986, outlined its decisions, by prohibiting and banning five methods strictly to prevent the consequences of mixing genealogy, loss of motherhood, and other legal precautions, which are (Abu Ghaddah, 1998):
a. That the pollination takes place between a sperm taken from a husband and an egg taken from a woman who is not his wife, and that implant is then implanted in the womb of his wife.

b. That the pollination takes place between the sperm of a man other than the husband and the wife's egg, then that pollination is implanted in the wife's womb.

c. That an external fertilization be carried out between the seeds of a married couple, and then the inoculum is implanted in the womb of a volunteer woman by carrying her.

d. That an external pollination be carried out between the seeds of a foreign man and the egg of a foreign woman, and the pollin is implanted in the womb of the wife.

e. An external fertilization is carried out between the seeds of a married couple, and then the pollin is implanted in the womb of the other wife.

Among the decisions and recommendations of the Islamic Fiqh Academy in the conference itself, it is: There is no problem in resorting to the following two methods while emphasizing the need to take all necessary precautions, and the two methods are:

a. A sperm is taken from a husband, an egg from his wife, and the pollination is carried out, then the implant is implanted in the wife's womb.

b. That the seed of the spouses is taken and injected into the appropriate position of his wife's vagina, or her uterus, with internal insemination.

Among the fatwas of Sayyid al-Sistani in IVF, it is: It is not permissible to vaccinate a woman with a sperm other than the husband, whether she has a husband or not, and whether the husband and wife are satisfied with this or not, and whether the vaccination is by the husband or others (The website of the office of His Eminence).

With regard to the rental of the uterus, the scholars are of the view that the fertility of marriage between the spouses is prohibited with the rental of the uterus, with the following reasoning (Al-Hawali, 2009):

a. The woman does not have any right to rent her uterus, because proving the offspring and the methods of procreation are the right of the street, just as hiring the uterus is related to the issue of the female genital organ, and the link in the forbidden female genitalia.

b. This process involves inserting the water of a man and his wife into a strange womb, which is not permissible, and accordingly; If the womb of a foreigner is forbidden, then his benefit is prohibited.
c. The lack of a relationship between the man and the owner of the uterus, which leads to the mixing of genealogies and the loss of symptoms, and accordingly; Demolishing families and threatening societies.
d. Maternity pigmentation with the commercial nature, and the western society has practically suffered from this, as the commercial centers specialized in renting wombs have proliferated, as women have effectively become a machine that hires, and wombs have turned into a commercial market for material profit.

Among the fatwas of the Shiite religious authority, Sayyid al-Sistani: It is not permissible to transfer sperm to the uterus other than the wife, so that fertilization takes place inside the womb, but if fertilization takes place in the test tube, then I want to transplant it into the womb other than the wife, then the most precaution is desirable to leave, and if the backs are permissible and according to the two estimates, the boy Legitimate and is affiliated from the father's side to the owner of sperm.

A Review of the Health Situation in Iraq

The number of health centers in Iraq, with both main and secondary types, is (2765) health centers, (1336 chiefs, 1429 branches), i.e. (7.2) per (100,000) people, while the number of hospitals with both types (secondary and tertiary services) is (281) hospitals, i.e. At the rate of (0.7) per (100,000) people (Alwan, May 2019).

The studies of the National Population Policy Committee in Iraq in comparing levels of maternal care service in Iraq with developing and developed countries indicated the similarity of the Iraqi situation with the situation in many developing countries, with regard to prenatal care, as the percentage of women who received this care reaches Once in those countries to (81%) of women. Iraq occupied an advanced position for many developing countries with regard to delivery by skilled and qualified hands, as the percentage of deliveries by skilled and qualified hands in those countries reached about (63%), and that the percentage of births by caesarean section exceeded international standards to reach (22.6%). The results of the integrated survey of the social and health conditions of Iraqi women for the year 2011 in Iraq also showed several data indicating the high levels of women's health service in the reproductive stage (Iraq, 2011a). Figure No. (1) shows the rates of using care during pregnancy among women (15-49) who gave birth live during the five years preceding the 2011 survey, according to the Iraqi governorates.
It can be observed from the figure that the governorate of Karbala exceeded and issued proportions, at a rate of (97.7%), and the reason for that may be due to the remarkable development witnessed by the health situation in health institutions, medical and professional cadres, which was reflected by political and security stability in the province, as well as an increase in cultural awareness and the importance of health review of health institutions and maternity care centers. As this superiority scored first in the capital Baghdad and the provinces of Iraqi Kurdistan, and comes after Karbala in terms of arrangement, Sulaymaniyah Governorate (96.7%), then Al Anbar Governorate (96.1%), Babil Governorate (995.5%), and the capital Baghdad by (93.8%), then Al Qadisiyah by (93.2%) and Basra by (93%), then Najaf governorate at (92.8%), Duhok at (90.5%), and Dhi Qar at (90.2%). The other Iraqi governorates recorded a disparity with rates less than (90%), while Wasit recorded the lowest percentage (70.3%), and Maysan Governorate increased by (79.8%).

The results were shown; That (44.3%) of the women who received prenatal care, for the last live birth during the five years preceding the survey, chose a government health institution (health care center - government hospital (to receive this care, compared to (55.7%) of the women relied on an institution Private health (private doctor clinic - a
private hospital). And that the cost of a mother’s visit to health and care centers does not exceed (500) Iraqi dinars, equivalent to (0.40) US dollars. For a review of the Center for Infertility and IVF in Basra Governorate, the mother costs only (500) Iraqi dinars, which is equivalent to (0.40) US dollars, in exchange for the hospital admission ticket, and the work and treatment that takes place inside it is provided free of charge to patients (Al-Mada newspaper, 11/8/2013).

As for the cost in community centers; It is subject to price competition in this area, for example; The Spirit of Life Center for the Treatment of Infertility and IVF in Baghdad; Wages range between (4,500-5,000) US dollars, divided into laboratory analyzes and medications as well as the surgical procedure. The operation wages, which include three intervening operations: the egg retrieval, fertilization outside the uterus, and the return of the egg inside the womb at a cost of (2,800) US dollars, In the event that the patient needs one operation, such as the egg withdrawal process, the wage will be (1200) USD, fertilization will be (600) USD, and the return process (1000) USD (Nahi Kazem, 4/10/2016). Also, the cost of IVF operation in the Baghdad Fertility and IVF Center is 2 million Iraqi dinars, equivalent to (2000) USD.

By comparing costs in the regional countries that display their prices as follows:

1. **In Turkey**: the cost of IVF reaches about (3000) dollars, including the medications used, and the cost varies according to the number of courses required to complete the pregnancy. As for the cost of IVF in the womb, it will be much lower, starting from (1000) USD only, including follow-up and medication. In other, more complicated cases, the cost may increase slightly until pregnancy is complete.

2. **In Jordan**: the price of having children through IVF is often between (2400-3100) USD, and the cost varies according to the spouse’s condition or medical evaluation. Whether the anesthesia is complete, partial, or local.

3. **In Iran**: The price for this operation ranges between (3000 - 4500) USD, including the costs of the doctor, medications, necessary tests and examinations, and performing the various stages of treatment. In addition to the price of residence and transportation, if the person travels from one governorate to another, and from one country to another.

Based on the above, we infer the progress of health care for pregnant women throughout pregnancy, as well as the health care and services accompanying childbirth. And the percentage of their health care can rise with developing the physical and human capabilities and capabilities working in this field, and investing the development in health
institutions for the governmental and private sectors and the mixed sector, and developing laboratory methods for artificial insemination, to attract local women and women in regional countries - at the very least - To make their decision to fulfill their desire and need to have children.

The Applied Side

The Research Sample

The researcher distributed (120) questionnaires on meals and married females who faced what they had preceded in order to continue the searches that it stipulated. The questionnaire was distributed to (60) married couples; Any equal number between meals and females. Fifty-one married couples of the respondents responded. The reason for the decrease in the number of respondents is due to the environment that preserves the secrets of the Iraqi family, its customs and traditions, and its unwillingness to engage in research in this field.

The time period for distributing the research form took four full months. From March 1, 2019 - June 30, 2019.

The questionnaire also showed the comprehensiveness of the research sample for a number of respondents in the various Iraqi governorates, and according to Table No. (1):

<table>
<thead>
<tr>
<th>Governorate</th>
<th>Total</th>
<th>Maysan</th>
<th>Babil</th>
<th>Wasit</th>
<th>Al-Najaf</th>
<th>Al-Qadisiyyah</th>
<th>Dhi Qar</th>
<th>Al-Muthanna</th>
<th>Al-Basrah</th>
<th>Wasit</th>
<th>Babylonia</th>
<th>Maysan</th>
<th>Total</th>
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<td>Frequency</td>
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<td>6</td>
<td>8</td>
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<td>2</td>
<td>8</td>
<td>6</td>
<td>7</td>
<td>5</td>
<td>102</td>
</tr>
<tr>
<td>Percentage</td>
<td>100</td>
<td>5.9%</td>
<td>7.8%</td>
<td>1.9%</td>
<td>4.9%</td>
<td>0.9%</td>
<td>1.9%</td>
<td>1.9%</td>
<td>7.8%</td>
<td>5.9%</td>
<td>%100</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: The researcher's formulation.

Notes in the table; The high percentage of respondents from the Holy Kerbala Governorate, which amounted to (55.9%) for the ease of communication with the respondents within the exchange of social relations between researchers and the community.

Analysis of the Results

The primary results of the research sample were as follows:
1. **Age group**: The research sample included age groups as shown in Table No. (2):

<table>
<thead>
<tr>
<th>Age group</th>
<th>25 - 30</th>
<th>31 - 35</th>
<th>36 - 40</th>
<th>41 - 45</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
<td>44</td>
<td>36</td>
<td>8</td>
<td>14</td>
<td>102</td>
</tr>
<tr>
<td>Percentage</td>
<td>43.2%</td>
<td>35.3%</td>
<td>7.8%</td>
<td>13.7%</td>
<td>%100</td>
</tr>
</tbody>
</table>

Source: The researcher's formulation.

Notes in the table: The highest percentage of those who resort to the artificial fertilization process is in the age group (25-30) years, with a percentage of (43.2%), followed by the age group (31-35) years, with a percentage of (35.3%). Then the percentage of (13.7%) for the age group (41-45) years, then the age group (36-40) years, their percentage reached (7.8%). The age group (46 years and over) achieved a percentage of (0%) due to the absence of this age group in the sample studied.

2. **Academic achievement**: It is represented in Table No. (3):

<table>
<thead>
<tr>
<th>Academic Level</th>
<th>Primary School</th>
<th>Secondary School</th>
<th>Diploma</th>
<th>Bachelor Degree &amp; more</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Repetition</td>
<td>0</td>
<td>24</td>
<td>8</td>
<td>70</td>
<td>102</td>
</tr>
<tr>
<td>percentage</td>
<td>0%</td>
<td>23.5%</td>
<td>7.8%</td>
<td>68.7%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Source: The researcher's formulation.

It is clear from the table; The majority of the sample surveyed are holders of a bachelor’s degree or higher, as their percentage constituted (68.7%), and this means; Academic achievement plays a major role in the conscious, educated segment seeking to fulfill its need and desire to form a family, taking into account its customs and traditions in society. Then came the secondary certificate holders with a percentage of (23.5%), then the diploma holders with a percentage of (7.8%).

3. **Number of years of marriage**: The number of years of marriage without having children for the research sample according to Table No. (4):

<table>
<thead>
<tr>
<th>The number of years</th>
<th>1 - 5</th>
<th>6 - 10</th>
<th>11 - 15</th>
<th>16 -</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
<td>24</td>
<td>54</td>
<td>24</td>
<td>0</td>
<td>102</td>
</tr>
<tr>
<td>Percentage</td>
<td>23.5%</td>
<td>53%</td>
<td>23.5%</td>
<td>0%</td>
<td>%100</td>
</tr>
</tbody>
</table>

Source: The researcher's formulation.
Notes in the table; The highest percentage of married couples who did not get fertile reached (53%) for those whose marriage period ranged between (6-10) years, then the percentage of (23.5%) was equal for each of the two categories related to the number of years of marriage without fertilization (1 - 5) years and (11-15) years.

4. **The pathological inhibitor**: the pathological inhibitor caused the number of (57) of the respondents, with a rate of (55.9%), while the disease was not the cause of the number (45) of the respondents, at a rate of (44.1%). In addition to the percentage (100%) of the research sample, they performed the process of artificial insemination.

5. **The destination country for the fertilization process**: the majority of the respondents undertook the process of artificial insemination outside the country, in addition to the fact that some of the respondents made many attempts to obtain successful fertilization. These operations were within the regional countries of Iraq, and included: Jordan, Turkey, Lebanon, and Iran. As well as (three attempts) in the race. Table No. (5) shows the country of destination for the fertilization process.

<table>
<thead>
<tr>
<th>Country</th>
<th>Frequency</th>
<th>No. of Married</th>
<th>Percentage</th>
<th>Number of attempts IVF process</th>
<th>Place of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Iran</td>
<td>60</td>
<td>30</td>
<td>58.9%</td>
<td>31</td>
<td>4</td>
</tr>
<tr>
<td>Lebanon</td>
<td>28</td>
<td>14</td>
<td>27.5%</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>Jordan</td>
<td>8</td>
<td>4</td>
<td>7.8%</td>
<td>4</td>
<td>-</td>
</tr>
<tr>
<td>Turkey</td>
<td>2</td>
<td>1</td>
<td>1.9%</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Iraq</td>
<td>4</td>
<td>2</td>
<td>3.9%</td>
<td>3</td>
<td>45</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>51</strong></td>
<td><strong>100%</strong></td>
<td><strong>54</strong></td>
<td><strong>51</strong></td>
</tr>
</tbody>
</table>

Source: The researcher's formulation.

Notes in the table; That (30) husbands and wives of the respondents underwent the process of artificial insemination in Iran, as their percentage reached (58.9%) of the respondents. Then (14) of them did it in Lebanon, and their percentage was (27.5%). Then (4) of them performed the fertilization process in Jordan, and their percentage was (7.8%). And one family underwent the process of artificial insemination in Turkey, and represented (1.9%).

It is also noted in the table; Two families of the respondents had undergone the fertilization process in Iraq, at a rate of (3.9%) of the respondents, and by attempting one of them, and two attempts by the other family.

It is also noted; (45) women gave birth in Iraq, (4) women in Iran, and (2) only in Lebanon.
6. **The axes of the questionnaire form**: The answer was to the two axes of the questionnaire, according to Table No. (6):

### Table 6 Analysis of the answer of the research sample

<table>
<thead>
<tr>
<th>Questions</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>Sum</th>
<th>Mean</th>
<th>The power of the answer</th>
<th>STD</th>
<th>Difference</th>
<th>Variance</th>
<th>Relative importance</th>
</tr>
</thead>
<tbody>
<tr>
<td>x1</td>
<td>62</td>
<td>34</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>102</td>
<td>5.5926</td>
<td>92.84%</td>
<td>14.14972</td>
<td>2.5301</td>
<td>200.21</td>
<td>0.009284</td>
</tr>
<tr>
<td>X2</td>
<td>20</td>
<td>5</td>
<td>8</td>
<td>9</td>
<td>60</td>
<td>0</td>
<td>0</td>
<td>102</td>
<td>14.444</td>
<td>239.78%</td>
<td>22.39486</td>
<td>1.5504</td>
<td>501.53</td>
<td>0.023978</td>
</tr>
<tr>
<td>X3</td>
<td>12</td>
<td>70</td>
<td>11</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>6</td>
<td>102</td>
<td>8.8519</td>
<td>146.94%</td>
<td>17.80321</td>
<td>2.0112</td>
<td>316.95</td>
<td>0.014694</td>
</tr>
<tr>
<td>X4</td>
<td>27</td>
<td>12</td>
<td>54</td>
<td>9</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>102</td>
<td>9.2222</td>
<td>153.09%</td>
<td>17.0812</td>
<td>1.8522</td>
<td>291.77</td>
<td>0.015309</td>
</tr>
<tr>
<td>X5</td>
<td>67</td>
<td>18</td>
<td>14</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>102</td>
<td>5.8148</td>
<td>96.53%</td>
<td>13.44658</td>
<td>2.3125</td>
<td>180.81</td>
<td>0.009653</td>
</tr>
<tr>
<td>X6</td>
<td>59</td>
<td>14</td>
<td>14</td>
<td>15</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>102</td>
<td>7</td>
<td>116.20%</td>
<td>12.30327</td>
<td>1.7576</td>
<td>151.37</td>
<td>0.01162</td>
</tr>
<tr>
<td>Fir.</td>
<td>247</td>
<td>153</td>
<td>104</td>
<td>42</td>
<td>60</td>
<td>0</td>
<td>6</td>
<td>612</td>
<td>50.926</td>
<td>845.37%</td>
<td>60.29351</td>
<td>1.1839</td>
<td>3635.3</td>
<td>0.084537</td>
</tr>
<tr>
<td>x7</td>
<td>24</td>
<td>57</td>
<td>21</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>102</td>
<td>7.4444</td>
<td>123.58%</td>
<td>16.05094</td>
<td>2.1561</td>
<td>257.63</td>
<td>0.012358</td>
</tr>
<tr>
<td>X8</td>
<td>76</td>
<td>12</td>
<td>14</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>102</td>
<td>5.2593</td>
<td>87.30%</td>
<td>14.82346</td>
<td>2.8185</td>
<td>219.73</td>
<td>0.00873</td>
</tr>
<tr>
<td>X9</td>
<td>28</td>
<td>58</td>
<td>13</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>102</td>
<td>7.2222</td>
<td>119.89%</td>
<td>15.75134</td>
<td>2.1811</td>
<td>248.1</td>
<td>0.011989</td>
</tr>
<tr>
<td>X10</td>
<td>8</td>
<td>17</td>
<td>9</td>
<td>55</td>
<td>13</td>
<td>0</td>
<td>0</td>
<td>102</td>
<td>13.111</td>
<td>217.64%</td>
<td>18.61955</td>
<td>1.4201</td>
<td>346.69</td>
<td>0.021764</td>
</tr>
<tr>
<td>X11</td>
<td>31</td>
<td>14</td>
<td>48</td>
<td>9</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>102</td>
<td>8.8519</td>
<td>146.94%</td>
<td>15.57748</td>
<td>1.7598</td>
<td>242.66</td>
<td>0.014694</td>
</tr>
<tr>
<td>X12</td>
<td>6</td>
<td>12</td>
<td>76</td>
<td>8</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>102</td>
<td>10.741</td>
<td>178.30%</td>
<td>23.49827</td>
<td>2.1878</td>
<td>552.17</td>
<td>0.01783</td>
</tr>
<tr>
<td>Sec.</td>
<td>173</td>
<td>170</td>
<td>181</td>
<td>75</td>
<td>13</td>
<td>0</td>
<td>0</td>
<td>612</td>
<td>52.63</td>
<td>1052.59%</td>
<td>71.32092</td>
<td>1.3551</td>
<td>5086.7</td>
<td>0.105259</td>
</tr>
<tr>
<td>Tot.</td>
<td>4</td>
<td>323</td>
<td>285</td>
<td>117</td>
<td>73</td>
<td>0</td>
<td>6</td>
<td>1224</td>
<td>88.148</td>
<td>1762.96%</td>
<td>110.8852</td>
<td>1.2579</td>
<td>12296</td>
<td>0.176296</td>
</tr>
</tbody>
</table>

Notes the results of the first axis (the need for family and travel) in the above table, the results of which came according to the relative importance from the highest percentage and then descending according to the following:

1. The (X2) which states (investment of travel for IVF abroad for entertainment, shopping, rest and recreation); It achieved the highest value for relative importance, which amounted to (0.023978). The answer intensity percentage was (239.78%), the deviation was (22.39486), while the mean was (14,444) and the variance was (501.53). This indicates that the trip that was dedicated to performing the IVF process, was invested by the couple in establishing a recreational and recreational trip, to get rid of the psychological pressure that accompanies such operations, and thus; Clear their minds raise their spirits.

2. The (X4) which states (the financial ability helps me to travel for the delivery procedure); Its relative importance was (0.015309). The answer intensity percentage was (153.09%), the deviation was (17.0812), while the mean was (9.2222) and the variance was (291.77). the meaning of that; Achieving the economic vision towards tourism, as one of the tourism literature is that it is almost necessary, as it is linked to the income factor. and here; The high income leads to the realization of the tourist
trip on the one hand, and the process of artificial insemination to create a family on the other hand.

3. (X3) which states (financial ability to travel for health care during pregnancy); Its relative importance was (0.014694). The answer intensity percentage was (146.94%), the deviation was (17.80321), while the mean was (8.8519) and the variance was (316.95). This is consistent with (X4) in its relation to the income factor of the spouses, as higher income is directly related to travel.

4. (X6), which states: “Throughout the marriage and the absence of pregnancy, it reflected on my psychological condition.” Its relative importance was 0.01162. The answer intensity percentage was (116.20%), the deviation was (12.30327), while the mean was (7) and the variance was (151.37). This variable indicates the importance of the child's presence in maintaining marital happiness, and in strengthening family ties. Since physical health and mental health are closely related to each other, and the reason for this is; The feeling of happiness and pleasure is reflected in human health, and gives the body positive energy so that the person can perform his tasks and other life tasks positively.

5. (X5), which states (I follow the scientific and technical development that the world is witnessing to achieve the dream of motherhood / fatherhood); Its relative importance was (0.009653). The answer intensity percentage was (96.53%), the deviation was (13.44658), while the mean was (5.8148) and the variance was (180.81). This variable confirms its close association with the variable (X6) through the couple's interest in following up on scientific news about the medical technical development that countries are achieving to achieve the dream of motherhood for women, and the dream of fatherhood for men.

6. (X1), which stipulates (weakness of the necessary medical capabilities and supplies for the process of artificial insemination); Its relative importance was (0.009284). The answer intensity percentage was (92.84%), the deviation was (14.14972), while the mean was (5.5926) and the variance was (200.21). This variable is consistent with the couple's follow-up to global medical developments in the field of fertility, as this follow-up is directed towards local capabilities and medical technical development in national hospitals and private medical centers, as well as the link of this aspect to the psychological factor of the spouses and the extent of their trust in medical staff and special technological devices in this field, due to The reason for this is the state of public corruption in government sectors and institutions. And civil centers as well, which was reflected in the lack of trust that reflected the nature of disappointment in the spouses, which was a reason to travel outside the country to fulfill the family's needs.
On the side of the second axis (Health Care in Iraq), it is noted in Table No. (6), that its results came according to the relative importance from the highest percentage and then descending according to the following:

1. The (X10) which states (Social norms restrict me to seeing a specialist doctor for my care throughout pregnancy); It achieved the highest value of relative importance, which amounted to (0.021764). The answer intensity percentage was (217.64%), the deviation was (18.61955), while the mean was (13.111) and the variance was (346.69).

Customs dictate that a woman should be treated by a female doctor. The husband and family refuse to perform the surgery, even in critical cases, by male doctors; Because of the modesty and custom prevailing in the majority of Iraqi society, this leads to deaths among women, and this matter is strongly and strongly reflected in the aspect of fertilization (artificial insemination), as Iraqi women and their submission to the traditions and societal norms necessitate that they consult a gynecologist in this field.

Notes in this aspect; Encouraging the spouses to travel abroad to perform the IVF process, despite the high costs that entail travel fees, entry visas, housing, treatment, medicines, hospital or surgery costs.

2. The (X12) which states (the scarcity of solid medical treatments and vaccines in private health institutions); Its relative importance was 0.01783. The answer intensity percentage was (178.30%), the deviation was (23.49827), while the mean was (10.741) and the variance was (552.17). We infer from that; Women's fear of being exposed to severe pregnancy complications after performing the IVF process, and the lack of some solid treatments in private health institutions, is a reason not to perform this process in the country, and to seek to complete its procedure and follow up the pregnancy period in private hospitals abroad.

3. The (X11) which states (the absence of solid medical drugs and vaccines in government health institutions); Its relative importance has reached (0.014694). The answer intensity percentage was (146.94%), the deviation was (15.57748), while the mean was (8.8519) and the variance was (242.66). This is due to the mutual trust between women and the availability of treatments and drugs for this aspect in government health institutions.

4. The (X7) which states (there are no specialized medical staff in government health institutions to undertake health care for women); Its relative importance was 0.012358. The answer intensity percentage was (123.58%), the deviation was
(16.05094), while the mean was (7.4444) and the variance was (257.63). The feeling of a woman seeking to perform the process of artificial insemination is the inefficiency of the medical staff specialized in this field; He called him to bear the expenses of travel and treatment outside the country in order to receive proper health care. As well as feeling the inefficiency of treatments and their lack of modern health technology devices.

5. The (X9) which states (the lack of health centers that specialize in providing health care services for women); Its relative importance was (0.011989). The answer intensity percentage was (119.89%), the deviation was (14.82346), while the mean was (7.2222) and the variance was (248.1). The lack of health centers interested in fulfilling the family needs of those deprived of motherhood/paternity; He was invited to travel outside the country to get what they lost in the country.

6. The (X8) which states (I feel the lack of experience of the health personnel supervising health care, if any); Its relative importance was (0.00873). The answer intensity percentage was (87.30%), the deviation was (14.82346), while the mean was (5.2593) and the variance was (219.73).

As it is not an exaggeration if we say that there is almost a lack of trust between the doctor and his patient in Iraq compared to neighboring countries at least, and therefore the husbands feel that hospitals and health centers specialized in IVF, whether governmental or private, are judged to fail in attracting them because of what We have mentioned the variables (X12, X11, X7, X9), as well as their high prices without achieving price competitiveness with neighboring countries.

Conclusions

1. The highest percentage of those resorting to the artificial fertilization process is in the age group (25-30) years, reaching (43.2%), followed by the age group (31-35) years and their percentage is (35.3%).

2. achievement plays a major role in the conscious, educated segment seeking to fulfill its need and desire to form a family, taking into consideration its customs and traditions in society. Then came the holders of a secondary school certificate with a percentage of (23.5%).

3. The highest percentage of married couples who have not been fertile reached (53%) for those whose marriage period ranged between (6-10) years.

4. The pathological inhibitor caused a number of (57) of the respondents, with a percentage of (55.9%).
5. The majority of the respondents undertook the process of artificial insemination outside the country, specifically in: (Jordan, Turkey, Lebanon, Iran), in addition to making several attempts to obtain successful fertilization.

6. The investment of the respondents to travel to carry out the process of artificial insemination abroad for entertainment, shopping, rest and recreation reached its relative importance (0.023978), which achieved the highest value.

7. The financial ability of the respondents helped to travel for the delivery process, as its relative importance reached (0.015309). It also helped them to travel for health care during pregnancy, as its relative importance was (0.014694).

8. The product of the first axis (the need for a family) for the remaining variables according to relative importance: (X6: throughout the marriage period and the absence of pregnancy, it was reflected on my psychological situation) and its relative importance reached (0.01162). (X5: I follow the scientific and technical development that the world is witnessing to achieve the dream of motherhood / paternity) and its relative importance reached (0.009653). (X1: Weak capabilities and medical supplies necessary to perform the process of artificial insemination) and its relative importance was (0.009284).

9. The results of the second axis (health care in Iraq) appeared according to the relative importance from the highest relative importance and then descending: (X10: social norms restrict me to visit the specialist doctor for my care throughout the pregnancy) and its relative importance was (0.021764). (X12: The scarcity of sober medical treatments and vaccines in private health institutions) and its relative importance reached (0.01783). (X11: Absence of sober medical drugs and vaccines in government health institutions) and its relative importance was (0.014694). (X7: The absence of a specialized medical staff in government health institutions to undertake health care for women) and its relative importance was (0.012358). (X9: The lack of health centers that specialize in providing health care services for women) and its relative importance reached (0.011989). (X8: I feel the inexperience of health personnel supervising health care, if any), and its relative importance reached (0.00873).

Recommendations

1. Spreading cultural health awareness in the family field, and the importance of health care for women, especially those whose late pregnancy is a psychological pressure that is reflected in married life, as well as their effective productivity in society.

2. Interest in opening special centers that keep pace with medical developments in technology and modern methods to be advanced government institutions, and within
hospitals, which provides the opportunity for many Iraqi families who dream of forming a family, and their financial inability to travel outside the country to achieve this on the one hand, and contribute to not exporting currency on the other hand, it is difficult to get out of the country.

3. Paying attention to health centers for conducting artificial insemination and maternity care to be a tourist health resort, helping to achieve a healthy psychological atmosphere for women in achieving the goals of family formation.

4. Focusing on the sobriety and safety of medical treatments and vaccines imported to government and private health institutions.

5. Work on sending medical personnel from the government to develop scientific and practical capabilities in developed countries in this field.

6. Conducting subsequent studies that contribute to following up the health development in this field, as well as; A study of its economic and social importance, as well as the achievement of family well-being, which reflects its shadow on the well-being of society.

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