This is a transcript of The Conversation Weekly podcast ‘Why so many women in Spain are choosing to donate their eggs,’ published on September 28, 2023.

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**Gemma Ware:** Spanish women are having fewer and fewer children, and yet the country is the egg donation capital of Europe. In this episode, we're finding out about the experiences of women who decide to donate their eggs. Who are they, what motivates them, and are there enough protections in place to prevent them from being exploited?

I'm Gemma Ware and this is The Conversation Weekly, the world explained by experts.

So Holly Squire, welcome to the podcast. You're the special projects editor for The Conversation in the UK. Tell me how you came to this story about egg donation in Spain.

**Holly Squire:** So for about the past seven months, I've been pulling together a series on women's health called Women's Health Matters, which we have just launched. And as part of that series, one of the things that came up as being quite a dominant theme that we wanted to look at was fertility, but within that, we didn't just want to tell those stories of fertility treatment or maybe couples that have struggled or women that have struggled with IVF. We also wanted to look at the other side. So, what's it like to be an egg donor and what's it like to be part of that egg donation industry? And then that's when I discovered that Spain was the egg donation capital of Europe, which kind of blew my mind a bit, and it's got this multi million pound industry there. So then I went looking for some research on that industry.

**Gemma Ware:** And what kind of research were you looking and hoping to find?

**Holly Squire:** So I was really hoping to sort of get a bit of an inside scoop on what the egg donation industry is like, and that is when I came across Anna. So Anna Molas is a research fellow at the Autonomous University of Barcelona and her specialism is anthropology, which that really attracted me to her. The fact that she studied anthropology because I felt like she was going to have a slightly different take and looking at the human angle in this of what these
women's stories are, that are giving their eggs away and not necessarily knowing where they end up.

**Gemma Ware:** And you put me in touch with Anna and I called her up for a chat. I started off by asking her what got her interested in women in Spain who choose to donate their eggs.

**Anna Molas:** So I think I was at the age where donors are recruited and I started to receive a lot of messages on social media. Even one day it happened to me that I was actually looking for a job. And from that job portal, I got a very big ad that said to donate your eggs reward. So I thought that was super problematic because of course I was in need of money at the time as I guess anybody that was subscribed in the employment portal. And I had a lot of curiosity about, you know, what other women had received this message and what women would actually say, “Oh, maybe this is an option for me, no?” So I really wanted to find out who are these people and what was their experiences, why they decided to do that.

**Gemma Ware:** Tell us about why Spain has become this central place for egg donation.

**Anna Molas:** Spain has, at the moment, the most flexible assistive reproductive law across Europe. Well, it does not have an age limit to access the private system. The public does have a limit, but the private system does not.

**Gemma Ware:** The fact that private clinics in Spain don't have an age limit is important because Anna says it's women over the age of 40 who are driving up demand for donated eggs. As women grow older, the quality and quantity of their own eggs decline, meaning they may need help to get pregnant.

**Anna Molas:** All across the world, the age of motherhood has been delaying. So people are having very little children, and also they are having them when they are much older than, for example, 20 years ago. In Europe, each country has a different regulation, and not all regulations, for example, allow egg donation. Or there are some countries that do allow egg donation but for example with an age limit to access the system, and sometimes this limit is 40. So it's already like, when people are starting to look for that, they are already around 40, so they are out of the system.

**Gemma Ware:** There are a couple of other reasons why Spain is an attractive country for those seeking donated eggs.
Anna Molas: Also, there are no restrictions in terms of civil status or sexual orientation for the patients to access, which exists in other countries. And finally, and most importantly, there is a large availability of donated eggs.

Gemma Ware: The number of egg donation cycles across Europe has been on the rise in the past 20 years, reaching nearly 81,000 in 2018. Around half of these were performed in Spain. In 2019, nearly 18,500 patients came to Spain to undergo IVF treatment, and most of them used donated eggs. These eggs are extracted by doctors at private clinics, often part of multinational health corporations, from around 15,000 donors per year.

A successful egg donation cycle can harvest around 18 to 20 eggs, many of which are then immediately frozen for use in future treatment. Some of these are then sent abroad. So as a result, there are more than 43,000 IVF attempts per year that use eggs donated in Spain, either fresh or frozen.

You've really spent the last couple of years looking at the experience of these women, particularly these Spanish women who've decided to become egg donors. So tell us how you went about doing this.

Anna Molas: During my fieldwork, my time doing this study, I was also doing interviews to clinicians in different clinics, but recruiting donors in the clinics was not possible for me. So they always made very clear that for them, it was very important that donors were not bothered too much in the clinic so that they could focus on what they were doing, no. So I basically had to do it on my own through social media. I put a lot of posters around the town, the places that I thought that could, you know, be frequented by young people. And actually I was kind of successful because kind of a large number of donors reached out to tell me their stories.

Gemma Ware: In the end, Anna was able to interview 32 women about their experience donating their eggs in Spanish clinics. They were mostly students and unemployed or under-employed young women between the ages of 18 to 22. Many came from outside Spain, including some migrants from Latin America and Eastern Europe.

Anna Molas: The clinic that I was doing observations and it happens in other clinics as well. They had one person that spoke Russian and that their function in the clinic was to make this link because sometimes these women don't necessarily speak Spanish or they don't have a very good level. Sometimes they arrived recently. So, you know, clinics are prepared also to receive these donors that at the same time are very appealing because many of the clients that they
have come from Northern countries in Europe, which have a phenotype that is a little bit different than the average Spanish. Maybe they are more blonde, they have like more blue eyes.

**Gemma Ware:** Because when women who then are looking for donors, they will look at kind of the characteristics of that person to see whether it matches their own.

**Anna Molas:** Actually, it's already stated in the Spanish law that clinics have to do that, no? The matching, that it's called. So, clinics in theory have to assign the recipient a donor that is, they say, the most similar possible, of course, this is very relative, no? But the most similar possible to this woman that is going to receive them. And, in Spain, they don't choose, so there is no catalog. They cannot see any picture. It's everything on the hands of the embryologist usually, or the people in the lab that is doing the matching.

**Gemma Ware:** Oh, interesting, because in a lot of other countries, you can see pictures of donors, but in Spain, it's absolutely not like that. It's completely anonymous.

**Anna Molas:** Absolutely. Yeah.

**Gemma Ware:** Women interested in donating their eggs have to undergo a series of tests, among them physical and psychological evaluations, and a family health history. If they're selected, they then begin the process. Each donation cycle involves preparing their bodies to release multiple eggs at ovulation, using medications and daily injections of hormones. This lasts around 10 to 12 days. The doctors monitor what's happening via frequent ultrasound scans. When they see that there are enough eggs big enough to be harvested, the woman takes medication to trigger ovulation and then has surgery under sedation to extract the eggs.

The short term risks of the procedure include ovarian hyper-stimulation syndrome, when the ovaries become enlarged. It can cause bleeding, blood clots and painful twisting of the ovaries. Some women don't tolerate the medication well and suffer side effects. And of course, as with any surgery, there's a risk of infection, problems with the sedation, and the risk of puncturing an organ or blood vessel.

But Anna says, these days, these short term risks are pretty minimal, and the clinics are good about ensuring that donors are informed about them in advance. Long term risks, however, are less clear.
Anna Molas: What we don't know very well is what can happen in the long term, no? So at the moment, there are still not a lot of studies that can provide us a lot of clarity on that. There is case study literature that highlights that could be problems or could lead to problems such as endometriosis, certain kinds of cancer. But unfortunately, due to this lack of studies, we cannot be sure about that. And the little studies that have been done have been done for women who were doing IVF for themselves. And there are reasons to think that there might be, you know, some differences between these two groups. And that, of course, studies should be done in the long term to egg donors, no?

Gemma Ware: And just to understand that, the differences might be in that hopefully if a woman is doing IVF, they will eventually become pregnant and have a baby. And then all the hormonal changes that your body goes through at that point. Whereas if a woman is just donating their eggs, perhaps repetitively over a number of years, there might be some other medical risks involved in that without kind of having a baby at the end of it. Is that where the questions lie?

Anna Molas: Exactly. So first thing, there is a matter of age, that usually egg donors are much younger than people who is doing IVF. And then what you were saying, you know, that some women are undergoing multiple cycles.

Gemma Ware: So given the risks involved, I asked Anna what motivated the women she interviewed to donate their eggs.

Anna Molas: So the main reason was clearly economic. And this doesn't mean that they didn't like the idea that they were also helping someone, no, but that was not the reason that took them to the clinic in most cases. Of course, I also found a minority of people, particularly three who stated that they didn't have a lot of knowledge about the money that this was given, that for them it was really like this very personal thing that they wanted to do, no. But this is clearly not the main motivation as it is of course logical. Like this is the reason why in Spain we have 15,000 and in other countries, very, very little, no.

Gemma Ware: So, what is the money? What is the incentive for a woman to give their eggs?

Anna Molas: Hmm. So at the moment it's something around 1100 euros —

Gemma Ware: Per cycle?

Anna Molas: Per cycle, yeah. And it's a number that goes increasing in every donation that you do. So if you repeat, you will have 100 euros more. And if
you repeat it a lot of times, so 100 euros more, right? And this is interesting because I think this number can seem very, very small because it is in other contexts. But if you check the current unemployment rates in Spain, how much women, especially young women, are paid for a full time job, how difficult is to find this job at all? You start to see how this is suddenly appealing for some women.

**Gemma Ware:** What did they feel about their compensation? Because obviously it's an onerous process. It carries risk. Did they feel that they were getting fair compensation for it?

**Anna Molas:** It depended a bit. So the ones that were doing it at that moment, they usually thought that it was OK. And sometimes when looking it back, you know, after some time they thought that it was actually not a lot. But yeah, this is interesting because even if it is a low amount of money for all the process that it involves, it still appeals a lot of women, no? So that compared to their sometimes other options that they have at the moment to get that money, that is the best one, no?

**Gemma Ware:** The compensation per cycle does start to look a bit lopsided though when you find out what the egg recipients are paying.

**Anna Molas:** The starting price for an egg donation treatment to receive as a patient usually starts around maybe 12–14,000 euros. This doesn't guarantee of course that you're gonna get pregnant or that you're gonna have a baby.

**Gemma Ware:** So just to restate that so the woman who donate her eggs could be up to 18 or 20 eggs. She gets 1,100 euros and yet the woman who wants to buy that egg is paying 14,000 euros for it.

**Anna Molas:** Exactly. Yes, yes. So there is, yeah, a big gap.

**Gemma Ware:** Of course, what a recipient gets for their 14,000 euros is more than simply one egg. The packages vary, but that money usually covers the whole treatment. The recipient's medication, creating multiple viable embryos, and then potentially more than one procedure to implant those embryos in the hope that one develops into a successful pregnancy. That means that there isn't a one to one correspondence between a single egg being donated and a single pregnancy. In fact, eggs from multiple donors may be used to create embryos for a single recipient, and multiple recipients may get eggs extracted from one donor. Anna says for many donors, this can contradict the narrative they have in their own minds when they begin the donation process.
Anna Molas: Many donors don't know about this possibility, you know? When I asked them how would they imagine the recipients of their donation, they would usually think about one single family. Sometimes that they would live nearby. So also not very conscious about the international dimension of it. Not thinking that there could be more than one per cycle.

Gemma Ware: Under Spanish law, the clinics aren't required to disclose to donors the number of eggs extracted or where they end up. And Ana says that the flexible Spanish laws around fertility clinics, which created this whole successful egg economy in the first place, are part of what keeps the compensation for egg donors so low.

Anna Molas: So donors, in theory, according to the Spanish law, are altruistic, no? Egg donation would be something that is done altruistically. Even if there is an economic compensation. The fact that they are treated as donors, as volunteers, makes very difficult that there can be a discussion on how much they should be paid, no. Because precisely they are not workers, so they are not insured in that way. It's not that they can negotiate conditions. Because in theory, you know, the economic compensation is to maybe express a little bit of gratitude or simply to, you know, fix the time that you spend, the inconveniences, et cetera.

So I think it's also very important to somehow deconstruct this narrative of altruism. And I think there is something very gendered here because clinics are going to somehow discipline them with this idea, no. Like I have heard things like that, no. That you are here because you are an altruistic donor. And this is like kind of the attitude that we are expecting from you. Not someone who is going to discuss with us, that is going to ask for things or for more money. So I think there is an important issue here.

Gemma Ware: Hmm And I guess it really is an economy, but with one side of it, the women being expected, as you say, to do it for altruistic reasons. So it could, some might say, be seen as an exploitative kind of relationship there. Is that how you've come to see it in any way, since you've been studying what's been going on for a long time?

Anna Molas: I personally don't like very much the word exploitation, because I think that it somehow implies that there are people that don't have agency and that are like suffering, that they are victims somehow of this. And I think that is a problematic idea, no? Because egg donors do have agency, you know, like they choose to do these processes because they want to have a better personal
situation. Sometimes, they want to help their families or because they prefer doing that over other precariously paid jobs, no?

So they are, in a way, also taking profit of this system, of course, and trying to make their best move, you know, in this situation. And sometimes they would ask different clinics how much they pay, because there are slight differences, and see you know, where is better. So like, of course, they will also try to get as maximum as possible. It depends on the donor, of course, but you can see that no, that donors trying to game the system no, or hopping from clinic to clinics, etcetera.

However, I think the crucial question here is how these people are informed, what clinics are saying, what clinics are not saying, what guarantees they have. Like, for example, they don't have medical insurance when they are doing egg donation. It is true that in Spain there is a very solid public medical system, but it's also a little bit problematic, I think, that when there are complications, you know, it's the public system who is going to be there, no. So I think that there are a lot of challenges and the anonymity of donation at the moment is making egg donors very, very invisible. Even though they are a key part of the fertility industry in Spain at the moment.

**Gemma Ware:** But Anna told me that she expects the rules around anonymity in this process to change in the near future. This is in part due to shifts in the laws in other European countries to require donors to be identifiable to any children conceived from their donation. Even Spain's own medical ethics bodies are calling for the country to drop donor anonymity.

**Anna Molas:** But it's not gonna be easy because anonymity is one of the pillars of this success and that would imply probably a reduction of donors.

**Gemma Ware:** At the moment clinics don't have to track the number and locations of children born from the same donor, but losing anonymity would mean they'd have to start doing so and provide these children with information about their biological families. Although the law has been slow to change, at home genetic testing kits such as 23andMe are already starting to make anonymity a thing of the past.

**Anna Molas:** In the past two years, the first association of children born by third party donation started in Spain, and they are making very politically and very clear claims against anonymity. They are very angry with what happened to them because they don't have any information. They don't even have many times the medical records of the donor, no, so nothing. And this group of people
that is every time they are more, they started to do these genetic tests. In Spain is not so much spread. So these children have less chances to find matches, but they started to find some, like the other day I saw on their Instagram page that they said that two of them found half brothers through this test, no? So anonymity cannot be guaranteed. And I think if that would be reversed, there would be a lot of more transparency in all aspects.

**Gemma Ware:** Anna Molas, thank you very much for your time today and good luck continuing your research.

**Anna Molas:** Thank you very much for inviting me.

**Gemma Ware:** That's it for this week's episode. Thank you to Anna Molas and Holly Squire for speaking with us. You can find links to more Conversation stories from the Women's Health Matters series, that Holly mentioned, in our episode show notes. I really recommend having a look at it. There are some excellent insights into pain, fertility, breastfeeding, the menopause, and much more.

This episode of The Conversation Weekly was written by Katie Flood and me, Gemma Ware, and produced by Katie Flood with assistance from Mend Mariwany. Sound design was by Eloise Stevens and our theme music is by Neeta Sarl. Stephen Khan is our global executive editor. Alice Mason runs our social media and Soraya Nandy does our transcripts. I'm the show's executive producer.

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