

Pre-Surrogacy Observation Scale (PSOS) ©

Use of Pre-Surrogacy Observation Scale (PSOS) in Pre-Surrogacy Counselling and/or Assessment:

This psychosocial observation scale can be used in pre-surrogacy counselling and/or assessment as a guide for clinical practice. The development of the PSOS is based on more than twenty five years of surrogacy experience. This includes extensive experience in pre-surrogacy counselling, before and after the introduction of legislation, totalling 250 surrogacy cases. As well it is informed by surrogacy related counselling during pregnancy, post-delivery, relinquishment counselling and parentage order counselling in a number of cases. The PSOS is also based on quantitative and qualitative analyses in a study of 120 pre-surrogacy counselling cases done over a 12 year period.

The PSOS is offered for use by experienced counsellors in the spirit of offering help to counsellors who are working in pre-surrogacy counselling. In this context any feedback on the use of the PSOS would be appreciated to help refine and improve the PSOS. The use of the PSOS assumes that the counsellor has the appropriate experience and qualifications required for this very demanding work, with a minimum being the requirements for full membership of ANZICA (Australia and New Zealand Infertility Counsellors' Association). This practice tool is offered as an aid to clinical judgement in pre-surrogacy counselling and is not a replacement for clinical expertise. The PSOS should be used in conjunction with the ANZICA Surrogacy Guidelines and the ANZICA Surrogacy Guidelines Addendum.

Note that there are deliberately no indications of minimum or maximum scores and no threshold for approval or not of a surrogacy arrangement in an assessment situation. There may be one item alone which would contraindicate a surrogacy or indicate significant concerns if the surrogacy arrangement were to proceed. Items indicated in the red zone of the PSOS are particularly important in such decision making. There may also be a number of areas of concern observed during the pre-surrogacy counselling which do not necessarily contraindicate the surrogacy arrangement but which suggest that a psychosocial treatment plan should be developed as part of the surrogacy arrangement.

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Case:

Dates of counselling:

Counsellor:

A	Process Issues	Positive Indicators ✓	Comments ✓/ X	Negative Indicators X
1	Initial contact	Acceptance by intended parents (IP) and surrogate (S) that this is just a process that needs to be gone through and it will be helpful		Dismissal of value of process; pressure re process or cost of counselling; lack of consideration; time pressure (needs to be done yesterday)
2	Email follow up/booking appointments	Consideration and respect for all exhibited when appointments are being made (eg needs of surrogate and partner for child care)		Appointments made to suit IPs only/primarily; no consideration of needs of others, including no understanding of the counsellor having other commitments; pressure re time/money/process
3	Appointment 1	Respectful, considerate, collaborative environment		Domination of needs of one or more parties to the surrogacy; lack of respect; any parties meeting for the first time
4	Between sessions homework: Surrogacy Plan (Treatment/Pregnancy/After Birth Plan)	Completion of homework such as a detailed "Surrogacy Plan"		Non completion of agreed homework; dismissal of relevance or importance of issues
5	Appointment 2	Respectful, considerate, collaborative environment		Domination of needs of one or more parties to the surrogacy; lack of respect
6	End of pre-surrogacy counselling/review of report	Constructive and/or positive feedback; acceptance of the value of the counselling		Unwarranted criticism of report or assessment of counsellor; negative feedback re the value of the counselling process

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B	Assessment Factors	Positive Indicators ✓	Comments ✓/ X	Negative Indicators X
1	Time, space for exploration of issues	Time and space for thinking by all parties evidenced, before, during and at the end of counselling		Everything in a rush, pushing for appointments, pressure by one or more parties
2	Capacity for understanding	Evidence of understanding of implications by and for all parties		Indications of lack of understanding of implications for one or more parties
3	Relationships assessment: (Intended Parent/s and with Surrogate and partner)	Evidence of longer term relationships, and contact between partners and between intended parents and surrogate and partner		Very recent relationships between intended parents and surrogate and partner; have never visited each other's homes, or met extended family members of the others
4	Current life stressors	No current health, work, family or financial stressors		Current health, work, family or financial stressors
5	Mental health assessment	No indications of psychopathology as per Minnesota Multiphasic Personality Inventory (MMPI) or Personality Assessment Inventory (PAI) assessment		Indications of significant psychopathology for one or more parties to the surrogacy arrangement
6	Interpersonal style assessment	No significant Power-Control imbalances; No indications of significant class/locale/education difference		Significant Power-Control difference, eg as assessed by PAI Dominance-Warmth, significant class/locale/education difference
7	Coercion (financial or personal), either explicit or implicit.	No indications of coercion either explicit or implicit		Indications of coercion, eg implicit in a family situation; indications of financial or power coercion
8	Surrogate's sovereignty over her body	Acceptance of the surrogate's absolute right to make decisions affecting her body		No acceptance that the surrogate has an inalienable right over her body, including pressure re pre-natal testing, TOP, diet, lifestyle

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B	Assessment Factors	Positive Indicators ✓	Comments ✓/ X	Negative Indicators X
9	Criminal or child protection history	No reported criminal convictions or personal interactions with child protection agencies		Current criminal convictions and past - particularly child protection related
10	Psychological Entitlement	No indications of psychological entitlement (eg from use of the Psychological Entitlement Scale (PES))		Indications of psychological entitlement (eg from use of the PES or observation)
11	Legal consultations	Have had all legal consultations and accept that altruistic surrogacy is based on an unenforceable contract between the parties		Have had no legal consultations; have had no contact with lawyers, no understanding of legal and regulatory processes related to surrogacy arrangements
12	Dispute resolution plan	Have a written dispute resolution plan, eg as part of a "Surrogacy Plan"		No dispute resolution process and non-acceptance of the need for there to be one
TOTALS		Number of ✓		Number of X

Notes: Any other factors, not otherwise assessed:

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The following attitudes/values and spoken examples came from the qualitative analysis of 120 pre surrogacy counselling cases. They can be used to aid thinking, consideration and assessment during pre-surrogacy counselling. Rarely ask specific questions on these themes.

			From observation	
IP	Themes/Values	Positive Examples ✓	Comments ✓/ X	Negative Examples X
IP1	Empathy, respect and understanding for all involved	IM "If she decided she didn't want to do it, it wouldn't affect our relationship. She's not my baby machine. She's first and foremost my friend. I don't want the relationship with the surrogate to be like a business relationship."		
IP2	Feeling blessed	IF "We've been very touched by her offer to be our surrogate, we find it hard to comprehend that she can be so giving, so nice. We feel so comfortable with her." IM "It's a very generous thing for her to do. We feel really lucky. I understand how generous she & her partner are, & how fortunate we are."		
IP3	Respect for the wellbeing of the surrogate	IM "My biggest concern would be if anything were to happen to the surrogate. I would never forgive myself. I would struggle with that." S "They keep saying, are you sure, because they see being pregnant as a burden, but we (surrogate & husband) tell them it is the easy part."		IM "I said to IF ask the girls at work if any of them will be our surrogate," AND S said "IF is my boss. If he tells me I'm doing something wrong I have to listen to him."
IP4	Close female bond	IM "Surrogate and I used to work together, and have remained friends since. We are agreed that if anyone were to change their mind we would still be friends." SP "When IM and my wife get together, they can spend days together. They have similar interests."		IM "I could not deep down trust the surrogate to care for the baby in the same way as I would myself." S "I didn't know they were using donor eggs" AND IM "She didn't ask."
IP5	IM management of own emotional pain	IM "I used to lock myself away but I was isolating myself and I lost friends. That wasn't going to work, so I pulled myself out of that hole, and I took a different approach. Now I often see my friends with children." IF "If it doesn't work it will be shattering, but we'll work through it. If we do get a child out of this it is a wonderful lucky circumstance."		IM "I won't feel any less anger at the doctors if I have a baby," AND IPS argue regularly about this. IF "I just want for IM to have a baby and for it all to end."

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IP6	Telling children	<p>IF – “My view of future relationships with donor and surrogate) is that it is all about the kids, not about the adults. It’s what’s best for the children.”</p> <p>IM “It would always be part of my child’s story. The surrogate and her husband would be known as Auntie and Uncle.”</p>		
S&P	Themes/Values	Positive Examples ✓	Comments ✓/ X	Negative Examples X
S1	Surrogacy is special	<p>S “All My life I had been thinking of doing something to give back.”</p> <p>S “It is for selfish reasons as well as wanting to help. Someone once said, live your life how you wish that they will talk about you at your funeral. I just feel that life is short.”</p>		S “Saying no now is not an option, because I don’t go back on my word.”
S2	Importance of being parent/sisterhood	<p>S “I look at IFs and think why can’t they be dads. I look at my husband and say what if he couldn’t be a Dad. Love is love. If it was me, I would want someone to help me.”</p> <p>S “When I first heard what happened to IM all I could think was how I would feel if I couldn’t have my children.”</p>		
S3	Good at pregnancy/delivery	<p>S “I love being pregnant and I feel a bit guilty that it has been so easy for me.”</p> <p>S “I thought there’s lot of things I can’t do in my life, but I can do that (pregnancy).”</p>		
S4	Family support/future relationships	<p>SP “I’m here to support my wife, who wants to do this crazy thing, which I think is really beautiful.”</p> <p>S “The child will be like a niece or nephew, and will be part of my life. They can meet me and won’t feel abandoned by me. This is going to be a real village that brings this child into the world.”</p>		<p>S “I’m just a defensive person even when I don’t need to be. I think it’s when I’m out of my comfort zone,” AND</p> <p>SP “It’s sort of got to the point where I’m either with her or against her.”</p> <p>SP “I’m not overly enthusiastic about the surrogacy. I don’t want to be a bad person, and they’re all for it. If we are going to have another child now would be an ideal time.”</p>
S5	Feeling blessed	<p>S “I’ve always known I could be a surrogate, we are just so blessed, so grateful for what we have and the life we have.”</p> <p>S “I’ve been blessed three times to be a Mum, and I think it doesn’t matter what your sexuality is, so long as you’re a good person you should be a Dad.</p>		IM “We know that S was doing what she was being told to do by her friends (asking for money)”