Rights of a child born through the use of assisted reproductive technologies in the EU countries and Ukraine

Права дитини, народженої за допомогою репродуктивних технологій в країнах Європейського Союзу та Україні

Received: February 3, 2022 Accepted: March 30, 2022

Written by: Vitalii Cherneha
https://orcid.org/0000-0002-9118-6562
Iryna Hrytsai
http://orcid.org/0000-0002-5467-839X
Tetiana Tarasevych
https://orcid.org/0000-0002-3860-9909
Viktor Savchenko
https://orcid.org/0000-0001-7104-3559
Hanna Krushelnytska
https://orcid.org/0000-0001-9934-6973

Abstract

This article aims to identify the features of the European Union and Ukraine legislation on the rights of children born through reproductive technologies and the practice of its application. To achieve this goal, first of all, an analysis of an array of sources in the field of the rights of children born with the help of reproductive technologies was carried out. The paper compares the legislation and practice of the European Union and Ukraine regarding the rights of children born with the use of reproductive technologies, which was achieved through comparative law. The historical-legal method has made it possible to outline the changes that have taken place in the approaches to the rights of children born with the help of reproductive technologies in countries whose legislation and practice have been specially studied. The synthesis method was applied, which helped to form a comprehensive vision of the rights of children born with the help of reproductive technologies in the European Union and Ukraine countries. The direction of research on ensuring

Анотація

Метою цієї статті є виявлення особливостей законодавства країн Європейського Союзу та України щодо прав дітей, народжених за допомогою репродуктивних технологій, та практики його застосування. Для досягнення поставленої мети насамперед здійснено аналіз масиву джерел у сфері прав дітей, народжених за допомогою репродуктивних технологій. У роботі зіставлено законодавство та практику країн Європейського Союзу та України в аспекті прав дітей, народжених за допомогою репродуктивних технологій, що вдалося досягти внаслідок використання порівняльно-правового методу. Історико-правовий метод дав змогу окреслити зміни, що відбулися в підходах до прав дітей, народжених за допомогою репродуктивних технологій, в країнах, законодавство та практику яких спеціально досліджено. Застосовано метод синтезу, що сприяє сформувати комплексне бачення прав дітей, народжених за допомогою репродуктивних технологій, в країнах Європейського Союзу та України.

44 PhD in Law, Associate Professor at the Department of Business Law and Corporate Law, Educational and Scientific Institute "Institute of law", State Higher Educational Institution Kyiv National Economic University named after Vadym Hetman, Kyiv, Ukraine.
45 Doctor of Law, Professor General Legal Disciplines Department, Educational and Scientific Institute of Law and Innovative Education, Dnipropetrovsk State University of Internal Affairs, Dnipro, Ukraine.
46 PhD in Law, Associate Professor at the Department of Public Law Disciplines, Vinnytsya Mykhalo Kotsiubynskyi State Pedagogical University, Vinnytsia, Ukraine.
47 PhD in Law, Associate Professor at the Civil Law Department, V. N. Karazin National University, Kharkiv, Ukraine.
48 PhD in Law, Senior Lecturer at the Department of Civil Law Disciplines, National Academy of Internal Affairs, Kyiv, Ukraine.
and guaranteeing the right to life of children born with the help of reproductive technologies is promising.

**Keywords:** adoption, assisted reproduction, assisted reproductive technologies, natural motherhood, rights of the child, right to life, surrogacy, freedom of will.

**Introduction**

The ways of giving birth to a child resorting to science and technology have expanded greatly in the 21st century. The use of assisted reproductive technologies encompasses important ethical, social, socio-economic, legal and even religious aspects. The use of reproductive technologies has raised many issues related to human rights and freedoms, dominated by the disputes over the parentage of those children. The problems of child and organ trafficking, securing the right to know parents and the story of origin are particularly acute.

EU and Ukrainian legislation provides for assisted reproductive technologies ranging from in vitro fertilization (IVF) to surrogacy (Medical Center “Leleka”, n.d.). As a result, more than 200,000 children conceived by artificial insemination are born each year. Moreover, in some EU countries (Denmark) citizens have the right to have a child through the use of IVF free of charge.

The national and European legislation addresses the issue of assisted reproduction mainly from the parentage perspective. Basay (2014) defines surrogacy as the implantation of an embryo belonging to a spouse and created through in vitro fertilization for the purpose of childbearing and childbirth, carried out by mutual agreement of persons entitled to use this method of assisted reproductive technologies with the subsequent child transfer to the appropriate persons. The features of surrogacy are the following:

- Mutual agreement of persons involved in the surrogacy program;
- Admitting only those persons to this program who are entitled to it;
- The fact of conception through IVF followed by embryo implantation;
- The embryo used to implement this method of assisted reproductive technologies must belong to the spouses. The use of the genetic material of the spouses is one of the main conditions for surrogacy. There are 3 options for surrogacy, namely: the use of the wife’s egg and husband’s sperm; use of the wife’s egg and donor’s sperm; the use of the donor’s egg and husband’s sperm.
- The main purpose of surrogacy should be to bear and give birth to a child.

These methods become especially relevant when it is impossible in a natural way. As a consequence, the rate of use of reproductive technologies has recently increased noticeably, while complex and sensitive ethical issues related to the use of such technologies have not been resolved at the state level. At this stage, governments focus mainly on the right of adults to create a family and have children or on banning all forms of assisted reproduction, depending on public policy.

The issue of the right of a child born through the use of assisted reproductive technologies remains, however, inadequately developed. Therefore, national law and practice do not recognize the unborn child as a subject of rights, treating it as an object of a surrogacy agreement: an “embryo”. The new-born child still remains subject to the contract until the parties fulfil their obligations to transfer the child to the parents. Hence, the child is objectified as an object of trade. It is important to emphasize that the ways in which assisted reproduction is regulated have significant implications for children’s rights, which must be taken into account in the development and application of legislation on the use of assisted reproductive technologies. This necessitates a detailed research on relevant issues.

The expression of the will of persons who have applied for the use of reproductive technologies is the main requirement and the initial stage of their service. The intention of individuals in the use of reproductive technologies is evidenced by informed consent. This issue is especially relevant in wartime if a man has agreed to freeze his reproductive cells as part of the process of using reproductive technologies, agreeing to fertilize a woman. Therefore, whether this
consent will be relevant if the man dies arises. These and many other issues are highly relevant, as they directly affect those who use reproductive technologies and the unborn child’s rights.

So, the issue of the development of the rights of children born through the use of reproductive technologies is becoming increasingly important with a view to the European integration of Ukraine. This problem is especially relevant with regard to the adaptation of national health care legislation to European law. These factors determine the topicality of this research. In particular, the issue of the child’s right to life, knowledge of his or her origin and contact with his or her biological parents is particularly acute.

The aim of this article is to identify features of the legislation development and security of the rights of children born through the use of reproductive technologies in Ukraine and the EU. This research involved the following objectives:

- determine the place of the rights of children born through the use of reproductive technologies in the legal system;
- analyze the state of practical realization of the rights of children born through the use of reproductive technologies;
- identify the main gaps and trends in the development of the rights of children born through the use of reproductive technologies in Ukraine and the EU.

Literature Review

Many recent researches in the field of law, social and medical sciences conducted by the scholars around the world dealt with the issue of the rights of people born through the use of assisted reproductive technologies. This indicates the growing urgency of this issue on a global scale. Somerville (2007) emphasizes that the most basic right of every person is the right to be born and to know his or her natural origin. The rights of those children also include the right to know their biological parents and, if at all possible, to bring them up. But the same-sex marriages require changes in legislation that would enshrine children’s rights to know their biological origins and families.

Mohr and Koch (2016) reviewed the evolution of IVF in Denmark. It was found that disputes between medical authorities, debates on the range of persons entitled to access reproductive biomedicine and changes in individual and social identity through the use of assisted reproductive technologies accompanied the introduction of IVF in Denmark. The first child, Troels Renard Ostberg, born through the use of assisted reproductive technology, came into the world in 1983. But the rights of the child, including the right to privacy, were not adequately protected despite the success of the procedure.

Studying the regulations in the field of assisted reproductive technologies and (re)definition of human rights in Poland in 2018, Mishtal (2019) pointed out that the public debate in Poland has been dominated by the struggle for reproductive rights since the political revival of the Catholic Church in 1989. In 2015, the state adopted the In Vitro Policy to regulate assisted reproductive technologies, which became a milestone.

Madeira (2015) studied information consent as a form of expression of the will of persons who wish to use reproductive technologies. The researcher positions that informed consent should not be a one-time signing of a document but a process that lasts throughout the treatment period. Patients are unpredictable, they make decisions based on a wide range of problems, both individual and relationship, and sometimes they are even irrational.

Honkasalo (2018) explored the substantiation of the demand for sterilization of Finnish transgender people to maintain reproductive justice. Finnish citizens are still debating the withdrawal of the sterilization provision from the Transgender Act demanding to reform parental legislation and the legislation on affordable, accessible and fair reproductive health for transgender people. So, this author raised the moral and ethical issues of the rights of children born to transgender couples.

Haug and Milewski (2019) dealt with the attitudes towards assisted reproductive technologies among immigrant and non-immigrant women in Germany. The author notes that the social demand for assisted reproductive technologies is growing in Western countries because of the low birth rates, high childlessness rates and the gap between the desired and actual number of children.

The research by Montanari Vergallo (2019) considers the surrogacy experience of Italy. The birth of children who are then raised by parents who may have no genetic or biological connection to them became possible due to surrogacy. The national criminal code of Italy prohibits medical assistance to reproduction, but the legislation of this country does not affect the
parents’ ability to legally register children born abroad through surrogacy.

Rallo et al. (2021) noted COVID-19 strongly affected infertile couples. Italy, like most European countries, has closed most assisted fertilization centers since the outbreak of the pandemic. We consider that access to assisted reproduction methods for sterile and infertile couples should be part of the right to health, not the alleged parentage right or a tool to increase the birth rates, the decline of which was caused, among other things, by the COVID-19 pandemic.

Methods

This research paper involved modern general scientific, as well as political and legal research methods. The comparative law was an important method to analyze the regulation of assisted reproductive technologies in Ukraine and the EU in the 21st century.

The method of systematization was involved in the research to generalize and classify the consequences of the use of assisted reproductive technologies. A systematic review of the scientific literature was carried out with further comprehensive analysis of data related to the use of assisted reproductive technologies.

Ukrainian and European academic and practical materials on the research subject were reviewed in this paper. The sample was based on the resources that provided information to study the background and history of assisted reproductive technologies.

The legislation of some EU countries (Great Britain, Denmark, Germany, Poland, France, etc.) and Ukraine in this field is analyzed. It provided for the analysis of international law and international business practice in this field. The research procedure provided for determining the topicality and research prospects of the subject matter.

The first stage of the study involved a review of scientific sources for 2014-2021 to analyze the main aspects and theoretical foundations of reproductive technologies in the EU and Ukraine.

The next stage involved the selection of practical materials for research through an integrated approach to examine the material and to identify the main problems and prospects of this research. We further examined the relevant regulations of Ukraine and the EU to verify the results. The appropriate practical materials on the research topic were monitored.

An important objective is examining the issue of realization of the rights of children born through the use of assisted reproductive technologies in the EU countries and Ukraine.

The object of research is social relations that arise in the course of realization of the rights of children born through the use of assisted reproductive technologies in the European Union and Ukraine.

Results

The review of the studies found that assisted reproductive technologies are a relatively young field of research. The use of reproductive technologies is necessitated by socio-economic, environmental or biological factors. Socio-economic factors include the need to build a career, the inability to plan a pregnancy. Environmental and biological factors include unfavorable environmental factors and infertility, which may result from environmental problems.

It is important to note that different EU countries have different approaches to assisted reproductive technologies. In our opinion, the religious policy of the state becomes important in this case. For example, the EU countries (Italy, Poland), where religion plays a significant role, often ban assisted reproductive methods. Secular states have a more balanced policy in the legal regulation of assisted reproductive technologies. However, not every country has paid much attention to securing the rights of children born through the use of reproductive technologies. In our judgment, even religious states, where the embryo has a sacred meaning and is subject to protection, primarily protect the established religious and ecclesiastical canons. This results in an ignorance of the interests and rights of the child.

We can identify radical, democratic and moderate approaches to the use of assisted reproductive technologies. This division reflects general approaches to political ideologies. The supporters of radical approaches advocate the preservation of the a ban on any assisted reproductive technologies. The representatives of moderate views consider it necessary to let a person retain the right to decide on these issues. The individual approaches to determining the interests of a child born through the use of modern technology exist already. At the same
time, the supporters of democratic approaches advocate granting reproductive rights to the entire population without exception. Accordingly, security of the rights and interests of children is not a priority for this group, they focus on the rights and interests of parents. Table 1 shows examples of countries and their attitudes towards altruistic and commercial surrogacy.

Table 1. The state of surrogacy in some countries.

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Country</th>
<th>Altruistic surrogacy</th>
<th>Commercial surrogacy</th>
<th>Since</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Spain</td>
<td>prohibited</td>
<td>prohibited</td>
<td>-</td>
</tr>
<tr>
<td>2</td>
<td>Italy</td>
<td>prohibited</td>
<td>prohibited</td>
<td>-</td>
</tr>
<tr>
<td>3</td>
<td>Austria</td>
<td>prohibited</td>
<td>prohibited</td>
<td>-</td>
</tr>
<tr>
<td>4</td>
<td>Sweden</td>
<td>prohibited</td>
<td>prohibited</td>
<td>-</td>
</tr>
<tr>
<td>5</td>
<td>Germany</td>
<td>prohibited</td>
<td>prohibited</td>
<td>-</td>
</tr>
<tr>
<td>6</td>
<td>Estonia</td>
<td>prohibited</td>
<td>prohibited</td>
<td>-</td>
</tr>
<tr>
<td>7</td>
<td>France</td>
<td>prohibited</td>
<td>prohibited</td>
<td>-</td>
</tr>
<tr>
<td>8</td>
<td>Portugal</td>
<td>allowed</td>
<td>prohibited</td>
<td>2016</td>
</tr>
<tr>
<td>9</td>
<td>United Kingdom</td>
<td>allowed</td>
<td>prohibited</td>
<td>1985</td>
</tr>
<tr>
<td>10</td>
<td>Netherlands</td>
<td>allowed</td>
<td>prohibited</td>
<td>1994</td>
</tr>
<tr>
<td>11</td>
<td>Greece</td>
<td>allowed</td>
<td>prohibited</td>
<td>2002</td>
</tr>
<tr>
<td>12</td>
<td>Canada</td>
<td>allowed</td>
<td>prohibited</td>
<td>2004</td>
</tr>
<tr>
<td>13</td>
<td>Australia</td>
<td>allowed</td>
<td>prohibited</td>
<td>1986</td>
</tr>
<tr>
<td>14</td>
<td>Ukraine</td>
<td>allowed</td>
<td>allowed</td>
<td>1997</td>
</tr>
<tr>
<td>15</td>
<td>Russia</td>
<td>allowed</td>
<td>allowed</td>
<td>2011</td>
</tr>
<tr>
<td>16</td>
<td>USA</td>
<td>allowed</td>
<td>allowed</td>
<td>1980</td>
</tr>
<tr>
<td>17</td>
<td>Israel</td>
<td>allowed</td>
<td>allowed</td>
<td>1996</td>
</tr>
<tr>
<td>18</td>
<td>Belarus</td>
<td>allowed</td>
<td>allowed</td>
<td>2016</td>
</tr>
<tr>
<td>19</td>
<td>Georgia</td>
<td>allowed</td>
<td>allowed</td>
<td>1997</td>
</tr>
<tr>
<td>20</td>
<td>Czech Republic</td>
<td>allowed</td>
<td>allowed</td>
<td>2014</td>
</tr>
</tbody>
</table>

Source: authors.

We can see that most leading European countries prohibit commercial surrogacy. These are the first attempts to protect both the mother’s interests and the child’s interests. In most cases, supporters of those approaches oppose the objectification of the mother’s and child’s body. It is also determined that surrogacy agreements are human trafficking at the bottom of fact. Table 1 contains the data on a total of 20 selected countries, including 11 EU countries, the United Kingdom, which withdrew from the EU, and 2 associate members of the EU (Ukraine and Georgia). In some countries (Austria, Germany, France, Norway, Sweden, Estonia) violation of the reproductive legislation is punishable. Non-commercial surrogacy is not prohibited in the UK, the Netherlands, Denmark, Portugal and the Czech Republic. This method is not regulated by law, while not being prohibited in Greece, Belgium, Spain and Finland.

So, an analysis was carried out on the example of the countries of the former Soviet Union to demonstrate a similar policy on surrogacy. Ukraine has a long history of using reproductive technologies. In particular, Ukraine is considered one of the surrogacy centers. Accordingly, Ukraine is one of the world’s centers of children’s organs trafficking, child trafficking, children resale and further exploitation. Moreover, children’s life is not controlled or supervised upon transferring abroad.

Ukraine has significant shortcomings in legislation and monitoring the future of children born through surrogacy. Children find themselves in the EU, Britain and other countries from Ukraine not only in families that need the services of a surrogate mother. There are many cases of selling children as commodities for organs. So, the lack of control over the future of children and proper inspection of customers of relevant services in Ukraine violates the rights of children, making them a commodity and contributing to the objectification of surrogacy services.
We believe that the adoption of the Convention on the Rights of the Child (United Nations, 1989) is one of the reasons for the changes. The EU didn’t have the approach to the rights of children born to surrogate mothers. The issue of protection of the rights of such children in accordance with the Convention on the Rights of the Child has been raised only in recent years. Article 7 stipulates that a child has the right to know his or her parents; a child has the right to life according to Article 6. Article 35 provides that states must prevent child trafficking. Most EU countries agree that the birth of children through surrogacy violates children’s rights and contributes to the objectification of both children and mothers. This is why commercial surrogacy is significantly limited in EU countries. Unfortunately, we can see a negative trend in child trafficking in Ukraine, which stains both the country’s reputation and the decriminalization of crimes against children in general.

There is a conflict of interest of potential parents and the child in resolving this issue. It is important to note that the interests of the child are not taken into account when using assisted reproductive technologies.

This issue should be considered in detail as Ukraine is considered one of the centers of commercial reproductive business, supplying surrogate mothers (Table 2). According to statistics, there are about 500 surrogate pregnancies in Ukraine per year (Lytvyn & Hrudieva, 2021). There is no more accurate official data in Ukraine as of the beginning of 2022. There are approximately 40 reproductive medicine clinics operating in Ukraine with an annual volume of about 2,000 operations per year (Caritas Ukraine, 2021).

We surfed the web for propositions to become a surrogate mother in Ukraine. We selected 10 propositions by the method of analysis and systematization to compare in this article. The analysis of Table 2 allowed stating that the requirements for surrogate mothers are similar in different clinics and medical centers. Moreover, the allowable age of a potential surrogate mother varies from 18 to 44 years. In addition to the health requirements of a potential surrogate mother.

Table 2.
Available propositions of surrogacy in Ukraine as of 2022.

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Proposition</th>
<th>Resource</th>
<th>Requirements for the mother</th>
<th>Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Artemida Surrogacy Centre</td>
<td><a href="https://artemida.ua/">https://artemida.ua/</a></td>
<td>Age: 19-36; Children: 1+; Health: Good health and no bad habits; no caesarean section; Rh positive</td>
<td>Up to EUR 25,000</td>
</tr>
<tr>
<td>2</td>
<td>IVMed Fertility Centre</td>
<td><a href="https://mammasur.com.ua">https://mammasur.com.ua</a></td>
<td>Age: 21-37; Children: 1+; Health: No bad habits; no medical contra-indications to pregnancy; mentally healthy woman; Rh positive</td>
<td>EUR 15,000</td>
</tr>
<tr>
<td>3</td>
<td>Ya Mama Surrogacy Centre</td>
<td><a href="https://imama.com.ua/ua">https://imama.com.ua/ua</a></td>
<td>Age: 19-36; Children: 1+; Health: No hereditary diseases; Rh positive; no bad habits; no caesarean section</td>
<td>EUR 18,000 to EUR 25,000</td>
</tr>
<tr>
<td>4</td>
<td>Ukraina Surrogacy Centre</td>
<td><a href="https://surrogacy.com.ua/">https://surrogacy.com.ua/</a></td>
<td>Age: 19-36; Children: 1+; Health: No hereditary diseases; positive Rh; no bad habits; no caesarean section</td>
<td>From EUR 14,000</td>
</tr>
<tr>
<td>5</td>
<td>Yuzko Medical Centre</td>
<td><a href="https://ivf.ua/hochubutisurogatnyu-matiriyu/">https://ivf.ua/hochubutisurogatnyu-matiriyu/</a></td>
<td>Age: 21-35; Children: 1+; Health: No medical contra-indications</td>
<td>No data</td>
</tr>
<tr>
<td>6</td>
<td>BioTexCom Clinics</td>
<td><a href="https://biotexcom.com.ua/uk/prokliniku/">https://biotexcom.com.ua/uk/prokliniku/</a></td>
<td>Age: 18-44; Children: 1+; Health: Mental and physical health; no bad habits</td>
<td>Up to EUR 29,200</td>
</tr>
<tr>
<td>No.</td>
<td>Agency/Center</td>
<td>Contact Details</td>
<td>Requirements</td>
<td>Fee (EUR)</td>
</tr>
<tr>
<td>-----</td>
<td>---------------------------------------------------</td>
<td>----------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------</td>
<td>-----------</td>
</tr>
<tr>
<td>7</td>
<td>Adonis Family Solutions agency</td>
<td><a href="https://fertilitysolutionsagency.kiev.ua/contact-us/">https://fertilitysolutionsagency.kiev.ua/contact-us/</a></td>
<td>No bad habits; no mental or oncological diseases; no hereditary chronic gynaecological and genetic diseases, no HIV or tuberculosis, etc.</td>
<td>Up to 29,200</td>
</tr>
<tr>
<td>8</td>
<td>Maternitate Surrogacy Centre</td>
<td><a href="https://besplodie.net.ua/anketa-uchasnyka/">https://besplodie.net.ua/anketa-uchasnyka/</a></td>
<td>No hereditary diseases; Rh positive; no bad habits; no caesarean section</td>
<td>EUR 14,000</td>
</tr>
<tr>
<td>9</td>
<td>Mama Plus Reproductology Centre</td>
<td><a href="https://surogatyne.com.ua/uk/">https://surogatyne.com.ua/uk/</a></td>
<td>No medical contra-indications to childbirth; good physical and mental health; psychologically ready to bear somebody else’s child and transfer this child to the biological parents immediately after birth</td>
<td>Up to 29,200</td>
</tr>
<tr>
<td>10</td>
<td>Surrogacy Ukraine</td>
<td><a href="https://surrogacy.net.ua/contact/">https://surrogacy.net.ua/contact/</a></td>
<td>No medical contra-indications; moral and psychological stability; responsibility; desire to help a childless couple</td>
<td>EUR 19,000</td>
</tr>
</tbody>
</table>


None of the selected examples provides the security of the child’s right to know his or her mother after birth. According to the requirements, the mother also has no right to refuse to transfer or visit the child after birth. Moreover, there is no mechanism for monitoring and appropriate state and protection of children’s rights. Therefore, Ukrainian practice transforms surrogacy into child trafficking.

It should be noted that all the studied resources present the positive experience and benefits of surrogacy, provide relevant examples. But there is no information on the risks of surrogacy for the health of women and children, the adverse consequences, etc. No Center raised the issues of moral aspects as well as the rights of the child. The child is considered the object of trade, which is subject to transfer under the contract. Therefore, a potentially positive image of surrogacy is created and idealized. Furthermore, there is no information on the surrogate mother’s possible contact with the child in the future and the child’s right to know his or her origin and the surrogate mother.

So, the commercial component is criminalized and condemned in EU countries, where surrogacy is recognized as a last resort. In contrast, there is a tendency to commercialize this type of reproductive medicine in Ukraine. All the above indicates the current negative trend of violation of the rights of the child born through surrogacy.

We further consider the use of another type of reproductive medicine: IVF in the EU and Ukraine. There is a more liberal attitude towards IVF in the EU in contrast to the negative attitude towards surrogacy. Moreover, IVF has become widespread in some countries.

The research found three main positions in the EU in relation to the IVF procedure:
- the state supports IVF (Denmark);
- permitted at the citizens’ expense (Czech Republic, Latvia);
- prohibited (Italy).

Directive 2004/23/EC of the European Parliament and of the Council of March 31, 2004 (EUR-Lex, 2009) regulates this issue by setting standards of quality and safety for the donation, purchase, testing, treatment, preservation, storage and distribution of human tissues and cells. But the national legislation and guidelines for assisted reproduction in the EU is country-specific. The EU countries enshrine an important aspect of a child’s right to know his or her parents (donors) and origin in their legislation in different ways. For example, the Federal
Republic of Germany provides the right of children to know the identity of their biological parents. The study of the examples of IVF in the UK indicated a fairly high rates of application of in vitro fertilization (National Health Service UK, n. d.). So, we can state that approaches to supporting and securing the interests of the child are gradually evolving in Europe. The rights of the child are becoming increasingly important despite the existence of different approaches to the use of assisted reproductive technologies.

Discussion

The problem of the rights of children born through the use of assisted reproductive technologies has become pressing in recent years on a global scale, where assisted reproductive technologies themselves have raised significant questions. The development of assisted reproductive technologies results in the emergence of new forms of childbearing, family reproduction and filiation practices, which raise the issue of the need and the way of legal recognition of these new family structures (Haug & Milewski, 2019). Therefore, the issue of protecting the interests of the child from a legal, socio-economic, biological and ethical perspective has become urgent.

Scholars admit that the further struggle related to these technologies will become fiercer and more difficult as the pool of knowledge base expands (Gryshchenko et al., 2021; Honkasalo, 2018).

Different EU countries have different approaches to assisted reproductive technologies. For example, there are 21 fertility clinics in Denmark, nine of which are state-funded and twelve are privately funded. In general, the European Parliament renounced surrogacy by adopting its Resolution of December 13, 2016. On February 2, 2016, were signed the Paris Charter, calling on European countries to respect the international Convention for the Protection of Human Rights that they have ratified. Sixteen organizations from 18 EU countries have recently signed a call to stop surrogacy. It was recognized that such procedures violate the rights of the child (Marinelli, 2020).

There is another approach to this issue, which relies on the principle of exercising parental rights by infertile couples. The laws of Ukraine do not provide a detailed regulation of the surrogacy procedure (Mendzhul, 2019).

Researchers emphasize that the surrogacy procedure does not adequately addresses the interests of the child, while meeting the interests of adults in the first place. The children themselves experience the greatest manipulations, as they are deprived of the right to a decent way of conception and birth, to knowing of their biological parents (Yarema, 2019). For this purpose, the Constitutional Court of Germany has ruled in 1989 that children have the right to know the identity of their biological parents. That resulted in the creation of a database of donors in July 2018 at the German Institute for Medical Documentation and Information in Cologne. The information should be kept until the child approves it, or for 110 years (Isenson, 2018). The citizenship of the new-born child is also the problem. Furthermore, the child is unprotected in cases where the intended parents and the surrogate mother abandon the child. Those children are sent to an orphanage in most cases.

Another threat was posed by the emergency caused by COVID-19 restrictions (Rallo et al., 2021). Some 2022 studies found that the global pandemic COVID-19 posed an epidemiological and social threat at all levels, but did not have a significant impact on the state and legal regulation of the reproductive business in the world (Rodríguez-Varela et al., 2022).

There is a growing number of court cases in Europe regarding disputes over the possibility of using embryos created through IVF by a former spouse. The cases on the struggle for custody of a child born to a gestational surrogate mother, etc. also remain unresolved (Crockin, Altman & Edmonds, 2021). Therefore, there are still many controversial issues to be studied and resolved even despite quite successful practices.

Conclusions

The use of assisted reproductive technologies has been prompted by the development of technologies and the increasing infertility rates. There are different approaches to the issues of using assisted reproductive technologies due to both social, religious and ethical factors. As of 2022, the right to a healthy life, the right to know their history and other rights of children born through the use of reproductive technologies are not properly protected. So, surrogacy is the reason and method of child trafficking. In
general, the approaches to understanding the possibility of using assisted reproductive technologies are different in Ukraine and the EU: while surrogacy is prohibited in most of the EU countries, the whole surrogacy business is established in Ukraine. It should be noted that the COVID-19 pandemic of 2019-2022, which has complicated realization of the rights of children born through surrogacy, has become a pressing issue for all countries.

Therefore, we can conclude that the EU countries and Ukraine have different approaches to the use of assisted reproductive technologies. The EU is more committed to protecting the rights of the child. But we should note a significant expansion in the understanding of the risks of assisted reproductive technologies in recent years. We can state that the European countries have conflicting approaches to regulating this issue.

The findings of this research would allow a more effective and systemic approach to the development of reproductive policy in Ukraine, as well as its adaptation to the EU regulations. Determining the peculiarities of reproductive tourism in Ukraine is considered to the prospects for further research in this area.

**Bibliographic references**


from https://besplodie.net.ua
Medical Center “Leleka” (n. d.). In vitro fertilization (IVF). Retrieved from https://leleka.zt.ua/ua/articles/eko
Yuzko Medical Center. (n. d.). Yuzko Medical Center. Retrieved from https://ivf.ua