
By Naipanoi Lepapa

Introduction

An investigation has raised serious concerns that vulnerable women and babies may have been exploited by commercial agencies which market Kenya to foreigners as a highly affordable destination for surrogacy.

Surrogate Monica was hired to deliver a baby for a commissioning parent who later changed their mind. Forced into a late term abortion, for which she says she was never fully compensated, she wakes up from a recurring nightmare that the dead baby is lying on her bed.

Monica is one of scores of poor Kenyan women who have turned to commercial surrogacy to lift their lives out of poverty.

Commercial surrogacy is when an individual or a couple who are unable to conceive their own children hire a woman and pay her to carry and deliver a child for them (see sidebar below).

The demand for their services in Kenya is driven mainly by foreigners — many of them either gay or lesbian couples — who are attracted to the country due to its affordability.
Commissioning parents can commission a child from a Kenyan surrogate at quarter of the cost in some Western countries.

But unlike other countries where the surrogacy laws are clear and dutifully followed, the industry in Kenya operates in a legal and regulatory void.

Kenyan legislators have for years failed to pass a law that would protect surrogate babies as well as the mothers commissioned to carry them.

 Ironically, some surrogacy agencies advertise Kenya as an open and tolerant country, whereas the reality is that homosexuality is illegal.

The law also expressly forbids gay or unmarried couples from adopting children.

In September 2019, the government also banned the adoption of children by foreign nationals. The allegations by surrogates include:

- coercion, exploitation and intimidation of surrogates;
- apparent human trafficking of surrogate mothers and children;
- forced abortions; and
- identity forgery and fraud.

This is allegedly happening in the shadows while lawmakers dither over passing a number of bills currently tabled before both the National Assembly and the Senate.

More than a third of Kenya’s population is classified as poor, according to a report by the National Bureau of Statistics (KNBS) in 2020.

With a lack of clear regulations and laws in this area, Kenya provides a perfect environment for such businesses to flourish.

Commercial surrogacy agencies market Kenya as a safe, affordable and welcoming surrogacy destination to desperate and guileless foreign couples via dozens of websites.

They mostly operate legally under Kenyan laws.

Some operate quietly out of private houses in the Nairobi suburbs.

In one case, the actual ownership trail disappears into the secretive and anonymous offshore world via the UK and the obscure Marshall Islands.

Before moving to Kenya, one of the other main players shifted his business from country to country in Asia.

The agencies hire local fixers, some without medical backgrounds.

These fixers can obtain identity documents, court orders and free passage through immigration with remarkable ease.

Some international agencies are now warning their clients against using Kenya as a surrogacy destination. They despair about what they claim are fly-by-night operators who give the wider industry a bad name.

To crack open this secretive and fear-filled world, reporter Naipanoi Lepapa spent months posing as
She then broke her cover to interview five surrogate mothers, who shared their stories — and that of a wider circle of surrogates — on condition of anonymity. Their reluctance to be identified stems in part from the social stigma that exists around surrogacy; but mainly, these women are vulnerable and scared.

This reporter faced threats of legal proceedings and an attempted arrest after confronting one of the agencies about the allegations against them.

This is also a story about how a national failure to confront the complexities of sexual reproduction has created these issues.

Only a comprehensive law can address the legal and ethical issues around commercial surrogacy. It would define the kind of surrogacy to be practiced in Kenya, set standards for all parties, and provide a regulatory framework.

Two bills — one before the National Assembly, one in the Senate — promise to accomplish all this, but they have stalled in the face of concerted opposition.

The bills would provide an overarching legal framework to govern safe access to a wide range of reproductive services for women such as family planning, pregnancy terminations, adolescent reproductive health and assisted reproduction — including surrogacy.

The Senate bill has stirred strong debate particularly on issues on abortion and teenage access to family planning methods. Its critics want it voted down, saying it promotes underage sex and abortion. Others claim surrogacy is an unnatural process and would allow same-sex couples to have children.

Its supporters say it would make surrogacy legal for the first time in Kenya thereby protecting surrogate children, mothers and parents from exploitation.

If passed, it would make Kenya only the second country in Africa to legally recognise surrogacy, after South Africa.

A reproductive practice where an individual or couple who are unable to conceive their own children contract a woman and pay her to carry and deliver a child for them.

There are two ways this can happen:

1. In gestational surrogacy, the couple’s sperm and eggs or donor eggs are fertilised in the lab to make an embryo that is then implanted in the surrogate’s womb — a process known as in vitro fertilization (IVF).
2. In partial or traditional surrogacy, the surrogate uses her own eggs and becomes pregnant through artificial insemination often using the commissioning father’s sperm.

The alternative to commercial surrogacy is altruistic surrogacy, in which a surrogate agrees to carry a child for free. A couple that enters a commercial surrogacy arrangement with a surrogate who they pay to carry and deliver their child. A surrogacy agency typically acts as a go-between for the commissioning parent and the surrogate. Kenya does not currently have any legal framework which either permits or bans surrogacy.

A patchwork of laws make it possible (but not straightforward) for married heterosexual couples to
either adopt, or get custody of, a surrogate baby through the courts.

The law outright forbids adoption by sole applicants or unmarried couples, as well as by “homosexuals” and “sole foreign males” — although this appears to be a major target market for surrogacy agencies who offer Kenya as a surrogacy destination.

Custody is a quicker, simpler route through the courts, provided the surrogate gives her consent.

Some surrogacy agencies short-circuit the process entirely by arranging for the commissioning parents’ names to be entered straight into the surrogate baby’s birth records when they are born.

This method is thought to be illegal, as it not only risks children being trafficked but also denies the surrogates their legal rights as the birth mothers. A number of mostly foreign-owned agencies market surrogacy services in Kenya, but there are no official estimates of how many IVF and surrogacy agencies exist in the country.

The Ministry of Health was unable to provide any data on the numbers of foreigners coming to Kenya for surrogacy, women working as surrogates, or children born out of these arrangements. Officially, the ministry says they don’t have data because there is no law in this area.

Globally, commercial surrogacy is big business with revenues expected to exceed $27.5 billion in the next five years, according to a market research report from 2019.

Kenya is a relatively new and niche surrogacy market, and is likely to be a tiny player. Its principal attraction as a commercial surrogacy destination appears to be because it is cheap and English-speaking.

A typical package costs commissioning parents Sh3-4 million ($30,000-$35,000) — which is around one-quarter of what it would cost in the USA, for example.

The cost of surrogacy in Kenya makes it competitive with countries in eastern Europe, like Georgia and the Ukraine.

Meet the surrogates

Monica (not her real name), a single mother of two, earned Sh6,000 ($55) per month as a house help before being fired. Months after losing that job, and getting desperate, Monica was scrolling through Facebook when she thought she had found a life-changing opportunity. A Kenyan surrogate in Russia posted a WhatsApp link seeking surrogates.

Monica jumped on the opportunity and joined the WhatsApp group, where she met Josephat Kioko Jahjah, a former taxi driver and tour guide turned surrogate recruiter for African Fertility Agency Limited.

Jahjah immediately sent her the transport fare to meet him at a hotel in downtown Nairobi the following day. Monica remembers it was the first day of the month and, coincidentally, the first day of her period. In the brief meeting, Jahjah, a tallish middle-aged man who at first acted charmingly told her said he would pay her Sh630,000 ($5,700) for the entire process, comprising a monthly stipend of Sh20,000 ($180) and Sh450,000 ($4,100) after delivery.

After the brief meeting, Jahjah instructed her to meet him at Fertility Point, an IVF clinic located in the Upper Hill suburb of Nairobi, a leafy area favoured by multinational companies and major banks, for medical tests the next day.
On the third day of the month, Monica met him at the fertility clinic where she was subjected to many tests, including for sexually transmitted diseases, hepatitis, and hormonal balance.

The doctor in charge immediately put her under hormonal medication to help prepare her uterus for pregnancy.

Just two weeks later, with her verbal consent, but without her signing any contract, an embryo was implanted in her womb at the facility and afterwards she relocated to a private hostel in Buruburu, a middle-class residential area of Nairobi.

The hostel is one of several run by African Fertility Agency, where surrogates remained for the whole nine months.

“From this point on, Jahjah dictated every part of my life. What I ate, where I travelled, and when,” Monica said.

Six months later, Jahjah took Monica to Nyayo House, the government’s immigration centre in Nairobi, to get a passport. She would need to make a journey to a foreign country where the commissioning parent of the baby inside her lived.

Monica had never been out of Kenya before. Jahjah told her to pay Sh3,000 ($27) and three days later, Monica’s first passport arrived. A few days later, she boarded the flight.

Upon arrival, Monica was put up at a hotel where she lived for a further two months. The commissioning parent lived a five-hour drive away. Sometimes he visited to check up on her but mostly they communicated via WhatsApp.

In the eighth month of her pregnancy, Monica got a call from the parent, instructing her to pack her bags. He said he’d pick her up in a few hours’ time, and gave her the impression that he was taking her to live with his parents where she would be better cared for.

When he arrived, he tearfully informed her that his parents were not in support of the arrangement and that he had changed his mind and didn’t want the baby.

He was accompanied by a friend, and they drove to another hotel where Monica was checked in. Over the next few hours, a doctor injected her with a drug that gave her severe contractions.

As her pain grew, the parent and his friend moved her to a clinic. It turned out that the friend owned this single-bed facility, and that it was a backstreet abortion clinic.

They injected her with more drugs and she laboured painfully for 12 hours.

“When the baby didn’t come out, this guy called his friend who was also a doctor and they transferred me to another hospital where they did a Caesarian-section surgery on me. They told me that the baby had already died.”

“All this was done without my consent,” Monica recalls, her face etched with anger and bitterness.

Five days after the abortion, during which Monica was not allowed to use her phone, she boarded a flight back to Kenya. “It’s a miracle I made it back home,” she said.

African Fertility Agency was unaware about these developments, Monica said, until she landed back in Nairobi.
Upon her return, Monica received another blow: the agency refused to pay her, she claimed.

Monica fell into depression and had nightmares of the aborted baby sleeping on her bed.

After she threatened to report the matter to the police, the agency’s co-owner Gaurav Wankhede paid her Sh400,000 ($3,600).

She used a chunk of this, around Sh30,000 ($270) to pay for therapy and medication for depression.

A sample surrogate contract obtained from the African Fertility Agency focuses mostly on the needs of the client, and if anything goes wrong the surrogate appears to be on their own.

For example, there is no next of kin in the contract or a contact in case of an emergency. A surrogate who miscarries before week 24 of pregnancy is not compensated and one who wants to abort must seek consent from the parent.

Monica is among the many poor women from Kenya who have turned to surrogacy to lift their lives out of poverty but who find themselves being exploited.

In some cases where women may have felt pressured to give birth abroad, experts believe that what happens to surrogates is tantamount to human trafficking.

Sophie Otiende, a highly respected anti-human trafficking campaigner, commented that Monica’s experience was also of concern. She said: “She appears not to have been told what would happen to her, or that she would have to leave the country.”

Trafficking in persons is a serious crime, carrying a minimum sentence of 30 years or Sh30 million ($271,000) fine, or both. Repeat offenders face life imprisonment.

All the allegations in this article were put to African Fertility Agency in writing, as well as to both co-owners individually. Wankhede didn’t respond. Jahjah denied the allegations saying they were “false and untrue”.

**Vulnerable women**

More than a third of Kenya’s population lives below the poverty line, according to the Comprehensive Poverty Report published by the Kenya National Bureau of Statistics (KNBS) last year.

The KNBS’s poverty line is set at Sh3,252 ($30) monthly income per adult in rural areas and Sh5,995 ($55) in urban areas. Experts say that poor, illiterate and ignorant women are particularly at risk of exploitation because they are not aware of their rights and cannot negotiate for reasonable compensation.

While researching this article, this reporter met half a dozen women who have risked their bodies to gain some economic stability.

Ordinarily, they would earn meagre incomes as house helps, as assistants in shops and hair salons, or as menial workers.

Single women seem to be preferred by recruiters because, as one surrogate put it, “Single women have no support systems. A husband will question things, and they don’t seem to want that.”

All of them spoke on condition of anonymity, for multiple reasons including fear of reprisals, losing
out on further surrogacy opportunities, and social stigma from their families and communities.

Many identifying details have been removed to protect the identities of those who have shared their stories.

Anne Ireri, executive director of the Kenya chapter of the International Federation of Women Lawyers (FIDA), said that there was a risk of the exploitation and abuse of surrogates because of a lack of regulation.

“Our organisation has heard reports of abuse, but the surrogacy industry is clouded in mystery and very few women are willing to come forward,” she said.

She added that FIDA is available to help surrogates who feel that they may have been exploited.

Dr Jane Wathuta, director of the Institute for Family Studies and Ethics at Strathmore University, said that agencies should at a minimum give surrogates detailed information about what the entire surrogacy process entails, before they consent to participate.

She also said that surrogates should receive ongoing counseling for lengthy periods before and after the procedure.

But all of the surrogates we interviewed claim none of this was offered. “You are not allowed to question. If you do, you’ll be reminded that you need them more than they need you,” said one surrogate.

**Threatened and silenced**

Magdalene (not her real name) acted as a surrogate twice, under New Life Kenya, an agency founded by a Georgian woman and ultimately owned in an offshore tax haven.

Both times she signed contracts, Magdalene says, but she claimed that her recruiter kept hold of them.

“They rush you into signing the contract before you read it, and they never give you a copy to keep or read later,” she says.

The single mother of one was in desperate need of money when she first signed up with Millicent Auko Ogott, the company recruiter and Kenya country manager, whom she met on Facebook.

As with surrogate Monica, Magdalene was immediately sent for tests and then put on hormone medication to prepare her womb for pregnancy.

The first time, her commissioning parents were a foreign couple living and working in Kenya. When they met, the couple revealed they would soon be moving back to their home country and wanted Magdalene to go with them to have the embryo implanted there.

“When I said I didn’t want to go, they threatened me with legal action saying I had signed a contract and they had already paid Sh80,000 ($700) for my tests. Bobby Mkangi, a constitutional and human rights expert, said that Magdalene was given a wrong impression that her contract is the law, whereas her own legal rights superseded any contract.

Otiende, the human trafficking expert, observed that there seemed to be no way for her to opt out of the arrangement.
Two weeks later, on her way to the airport believing that she was headed to one country, Magdalene learned she was going to another.

She says she protested, but at this late stage there was nothing she could have done.

Magdalene lived overseas for the duration of her pregnancy. After she delivered, she flew back to Kenya where she said she was paid Sh400,000 ($3,668) — a welcome sum for a single mother, but still Sh200,000 ($1,834) short of the agreed Sh600,000 ($5,502) delivery fee.

“I was told the additional costs of sending me abroad were deducted from the final payment,” she said.

Magdalene added that New Life Kenya was meant to protect her but they didn’t, choosing to side with the parents at every turn. “When I called Millicent, she would dismiss me saying, ‘You complain a lot.’”

“If a surrogate falls ill or even dies while pregnant, or during childbirth, nobody cares,” Magdalene said.

Although her second surrogacy was more straightforward — she delivered for Kenyan parents at a hospital in Nairobi, and was paid in full — she says she will never do it again: “Robbing a bank is easier than being a surrogate.”

All the allegations in this article were put to New Life Kenya in writing, as well as to Ogott in her personal capacity.

New Life responded: “We always respect our surrogate mothers’ interests and always treat them in line with protecting all kinds of human rights.”

Ogott said the specific allegations against her were “malicious” and threatened to sue this reporter in a personal capacity. Further detailed questions sent to her lawyer at her request went unanswered.

**Surrogacy Costs**

New Life Kenya shared the following cost breakdown with this reporter, who was posing as a potential client in mid-2019.

On signing:

- $4,500 (Sh463,500 at the then-exchange rate) agency fee for sourcing surrogate mother;
- $1,000 (Sh103,000) to prepare uterus for implantation;
- $1,000 for surrogate hospital visits and tests before embryo transfer (IVF); and
- $1500 (Sh154,500) for contract notarisation and surrogate background check.
- $500 (Sh51,500) for surrogate pay after embryo transfer, and
- $500 monthly pay for surrogate during the remainder of her pregnancy.

The IVF procedure was not included in the cost breakdown, the agency said.

IVF can cost anything between $3,000-$5,000 (Sh310,000 and Sh515,000) in Kenya, according to experts.

In total, New Life Kenya said the surrogate’s compensation package would be $8,000 (Sh824,000)
plus an extra $1,000 (Sh103,000) if she delivers twins.

“It is your responsibility [as an commissioning parent] to look after the pregnant surrogate mother during the pregnancy period and undertake all necessary expenses,” reads the email.

New Life no longer operates in Kenya.

**Meet the agencies**

The surrogacy agencies that managed Monica and Magdalene are both owned by foreign nationals with a long history in the surrogacy industry and both operating legally in Kenya.

Monica was recruited by African Fertility Agency Limited, an offshoot of an international surrogacy group called Become Parents which was founded in 2007 in Melbourne, Australia, by Gaurav Wankhede.

Wankhede, 46, is a jack-of-all-trades with a tendency towards grandiose self-promotion.

According to his LinkedIn profile, his remarkable career has zigzagged from being a restaurant manager in India to a procurement specialist for the Royal Australian Air Force “responsible for inventory optimisation for the entire $4.7 billion Australian defence supply chain”.

He then moved on to KPMG where he was a senior advisor in organisational change management, before becoming CEO of a fine dining establishment in Kolkata called OMG Hospitality.

In 2017, Wankhede co-founded an Indian professional wrestling franchise with a childhood friend.

Throughout these many career changes, the one constant on Wankhede’s CV has been his surrogacy agency Become Parents, which he calls “the world’s leading ethical surrogacy agency”.

Bill Houghton has known Wankhede for years, ever since Become Parents facilitated the birth of Houghton and his husband’s two children in 2012. For a while, they were business partners, first in India and then Thailand.

But then Houghton and Wankhede parted ways gradually. “Every time one country closed its borders to surrogacy, it seemed Become Parents opened its services in the next unregulated country. I think he would have done better to move instead to the next safer destination.”

Houghton said the unregulated Cambodian market in particular was dishonest and dangerous.

Commissioning parents operating in a legal vacuum were forced to navigate a maze of bureaucratic bribery in order to obtain the necessary documentation for their children. Some lawyers were found to be forging documents, and some agents were arrested, Houghton said.

There is no suggestion that Wankhede or his agency were involved in any illegal activities.

While Houghton says he remains grateful to Wankhede for helping him start a family, he parted ways in order to focus on his own agency, called Sensible Surrogacy.

Houghton worries that his old friend Wankhede may one day come unstuck operating in unregulated
surrogacy markets, and points out that Kenya is similar in many ways to Cambodia.

Houghton has now taken to actively warning prospective parents that Kenya is an unsafe surrogacy destination.

“The lure of being able to have a baby ‘on the cheap’ is attracting desperate couples into what could be a dangerous situation.” Houghton said in a 2018 press release. “Many of our clients are LGBT [lesbian, gay, bisexual or trans-gender] couples, and Kenya is notoriously homophobic.” Houghton said that surrogacy agencies in the US charge $120,000 (Sh12 million). Or they can deal directly with a surrogate and spend less than $70,000 (Sh7 million). Either way, they avoid the risky, unregulated and homophobic Kenya market, he said.

Wankhede shot back in a video posted to his website last year, saying Houghton was not speaking from experience because he had never been to Kenya.

Wankhede extolled Kenya’s virtues as a great tourism destination that is welcoming to same-sex couples. “The fear that people have about same sex couple in Kenya is wrong. It’s absolutely a myth,” he said.

He claimed his agency’s “best practices in the industry” help attract local and foreign clients, adding that foreigners like him are able to build their businesses around Kenya’s many IVF clinics and plentiful supply of skilled medical practitioners.

In the video Wankhede then introduces Jahjah, the former taxi driver, as the agency’s manager and caretaker.

Jahjah claimed none of the same sex couples he worked with had issues. As long as foreigners do not show affection in public, he advised, nobody cared about their sexual orientation.

Wankhede and Jahjah own 50 percent each of African Fertility Agency, which was registered in April 2019 according to ownership records from the business registry. Jahjah is also the firm’s director.

Wankhede has been operating in Kenya for longer, however, since at least 2017 when Become Parents launched a website for a business called Surrogacy Agency Kenya.

Wankhede did not respond to detailed questions, including about his run-ins with Houghton. Jahjah dismissed all the allegations against him as “false”, including a question about the agency’s apparently misleading marketing pitch about Kenya being open and welcoming to gay commissioning parents.

In another video posted to Become Parents YouTube channel in 2017, Wankhede introduced Millicent Aoko Ogott as his operations manager in Kenya.

Ogott, a former teacher, was also managing at least one other surrogacy firm in Kenya at the time.

This was New Life Kenya, the agency where Ogott recruited surrogate Magdalene — the surrogate who felt unable to opt out of her contract and who ended up being sent to an unexpected country to give birth.

New Life Kenya is a branch of the New Life Global Network, founded by Dr Mariam Kukunashvili in Georgia in 2008.

Kukunashvili lives a jet-set lifestyle, with each glamorous destination documented on social media
with herself at the centre of a seemingly inexhaustible series of fashion and modelling shoots.

New Life Global Network is actually a limited liability partnership (LLP) company, incorporated in the UK in 2010.

It is impossible to determine who ultimately owns the company, as its registered partners are not people, but a pair of companies based in the Marshall Islands, a secrecy jurisdiction and tax haven in the Pacific.

It is puzzling, though, that whereas New Life Global Network’s website and Facebook page says it has helped thousands of couples become parents through IVF and surrogacy, the UK-based parent company’s public disclosures bear little relation to this line of work.

Its principal business activity is described as “consultant for medical equipment and received commission”. Between 2017 and 2019, its corporate filings show an annual income of just a few thousand pounds in commission fees.

In 2015-2016, when the company’s principal business activity was listed as “medical consulting services”, its income comprised agent’s fees in the region of £120,000–£160,00 per year (Sh15-20 million at the then-exchange rate).

This amount is roughly equal to the cost of just a couple of commercial surrogacy packages offered in a Western country, like the US.

Although New Life was happy to answer questions about its Kenyan operations, it ignored all questions about its global ownership structure, principal business activity and income.

New Life said it had only ever referred four client couples to surrogates in Kenya, who delivered a total of six babies between 2016 and July 2019, after which they stopped offering surrogacy services in the country.

They said they closed because, “despite the fact that surrogacy is not banned in Kenya, we saw that the legal part of the procedures was not regulated quite well”.

Ogott distanced herself from New Life Kenya saying she does not run any entity by that name. She said all her business operations are lawful, and referred further questions to her lawyer who declined to receive them by email.

In a brief WhatsApp exchange, the lawyer said: “Pay due to consideration to the laws of defamation, criminal libel and malicious falsehoods.”

Asked to explain why the New Life Kenya website — which features Ogott as its country manager — was only taken down in late February after receiving our questions, the agency said it was an oversight by their technical team and should have been done earlier.

New Life said that, apart from the six surrogacy deliveries of which it was aware, it was “not responsible for any other actions taken by Ms. Ogott”.

From interviews with surrogates, this reporter believes that there could have been up to nine deliveries in total involving Ogott as agent — some of which may have been undertaken for other agencies including Wankhede’s Surrogacy Agency Kenya.

New Life confirmed that Ogott had been their agent in Kenya between 2016 and 2019 because “she
had the [data] base of surrogate mothers” in the country. Most surrogacy agencies rely on a number of IVF fertility clinics dotted around Kenya.

One of the most popular being Mediheal Diagnostic and Fertility Center which is owned by Kenyan politician Swarup Ranjan Mishra. Mishra, the Jubilee Party’s MP for Kesses constituency in Uasin Gishu county, is also a trained gynaecologist and obstetrician.

According to a 2019 brochure on the Mediheal website, they say they have a “surrogacy program” which “accepts embryos from overseas for transfer into surrogates”.

The brochure also notes that “monetary compensation may or may not be involved in [surrogacy] arrangements” and that the Centre’s “success rate is among the highest in the region for both IVF and surrogate procedures”.

Other IVF clinics include Fertility Point and Wings in Nairobi, and the Mombasa Assistive Reproductive Centre, attached to the Mombasa Hospital.

Hospitals where surrogates have given birth include the Aga Khan University Hospital and the Nairobi Hospital, Nairobi West Hospital as well as smaller facilities such as Mater Misericordiae and Balozi hospitals.

There is no allegation of wrongdoing by any of these IVF clinics and hospitals.

In the next installment, we reveal the potential impact of unregulated surrogacy on commissioning parents PLUS an encounter with a surrogacy agent.

Additional reporting and story editing by Lionel Faull & Margot Gibbs, of Finance Uncovered. This article was developed with the support of the Money Trail Project (www.money-trail.org).

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