



RECHTSIDEE

PUBLISHED BY
UNIVERSITAS
MUHAMMADIYAH
SIDOARJO

ISSN 2443-3497
(online)



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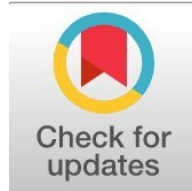
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Exploitation of Thai Women in Georgia In Vitro Fertilization Practices

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Abstract

General Background: The global rise in assisted reproductive technologies, particularly in vitro fertilization (IVF), has created a transnational market often intertwined with ethical and human rights concerns. **Specific Background:** In Georgia, weak regulatory frameworks have facilitated exploitative IVF practices involving Thai women, revealing patterns of reproductive trafficking masked as legitimate medical services. **Knowledge Gap:** While both Thailand and Georgia have ratified international conventions such as CEDAW and the Palermo Protocol, the practical enforcement of these instruments in cross-border IVF contexts remains underexplored. **Aims:** This study aims to analyze the exploitation of Thai egg donors in Georgia through a human rights lens, identifying legal shortcomings and proposing measures aligned with international norms. **Results:** Findings indicate that the exploitation constitutes human trafficking under the Palermo Protocol, highlighting a regulatory vacuum that prioritizes commercial profit over women's bodily autonomy and informed consent. **Novelty:** The research bridges reproductive ethics, international human rights law, and feminist legal theory to expose how IVF commercialization enables structural gender-based exploitation. **Implications:** The study underscores the necessity for harmonized transnational regulation, implementation of Mutual Legal Assistance (MLA) frameworks, and adoption of global ethical standards to ensure reproductive justice and protect women from exploitation in assisted reproductive industries.

Highlights:

- ♦ Highlights the exploitation of Thai women in Georgia's IVF industry as a form of human trafficking.
- ♦ Reveals the regulatory vacuum and weak enforcement of international human rights standards.
- ♦ Proposes cross-border legal harmonization through Mutual Legal Assistance (MLA) to protect women's rights.

Keywords: In Vitro Fertilization, Human Trafficking, Egg Donation, Reproductive Rights, Legal Regulation

Published date: 2025-10-22

Introduction

Social demands related to offspring are often a significant motivator for couples to have children immediately after marriage, with environmental pressures and family expectations playing a substantial role in this decision. [1]. Some couples face infertility, which is defined as the inability to conceive after one year of unprotected intercourse. This condition has led to the development of assisted reproductive technologies, particularly In Vitro Fertilization (IVF). IVF involves professionals in medicine who fertilize sperm and eggs in laboratories. Because couples battle infertility, assisted reproductive technologies, including IVF, have rapidly advanced and become essential solutions over recent decades. Using the IVF process, eggs are fertilized outside of the body. The resulting embryos are then implanted back into the uterus [2]. Cross-border reproductive care (CBRC) is a growing phenomenon in which people travel across national borders to seek reproductive care. In practice, this method often involves egg donors or surrogate mothers, creating complex legal and ethical dynamics, especially when done across countries. High demand for these services has given rise to a global market characterized by commercial practices that often diverge from international legal and human rights norms.

In the era of globalization, human trafficking has increasingly manifested in illegal and covert forms, employing tactics such as inducement, threats, and persuasion. This often leads to various forms of exploitation, including forced labor, sexual exploitation, and organ trafficking. Notably, this issue disproportionately impacts women, who remain particularly vulnerable to coercion and deception within transnational exploitation networks [3]. An IVF become commercialized international market has emerged due to the high demand for worldwide. On the one hand, this gives patients from different nations access to medical solutions; on the other hand, the lack of explicit regulations raises the possibility of exploitation. It is possible to classify donation or surrogacy as a type of human trafficking when it is performed without legitimate informed consent or under duplicitous and coercive circumstances. At this point, the line between medical contracts and exploitation becomes blurred, especially in countries with weak legal frameworks.

Thai women engaged in egg farming in Georgia is a real-life example that highlights the complexity of this problem. Authorities successfully rescued more than 100 women from human trafficking activities that were masquerading as in vitro fertilization (IVF). These women were enlisted in a program that turned out to be unlawful and opaque in order to donate eggs or serve as surrogate mothers. The case's timeline demonstrates that although the women, the majority of whom were from low-income households, were promised just compensation, they were ensnared in abusive circumstances and lacked bodily autonomy. This transnational criminal network was discovered, in large part, thanks to Interpol's cooperation with the Pavena Foundation, a local non-governmental organization, during the investigation and rescue process.

This case illustrates the inadequate regulation of the IVF industry in many developing countries, including Thailand at the time. The laws that govern IVF and surrogacy do not cover practices that cross borders, and they do not offer enough protection for women who are involved in these procedures. After this case came to light, Thailand only banned foreigners from using commercial surrogacy services in 2015 through the "Protection Of A Child Born by Medically Assisted Reproductive Technology Act, B.E. 2558." This rule demonstrates Thailand's commitment to monitoring IVF practices to safeguard individuals' rights and well-being. Thailand has signed the Palermo Protocol and CEDAW, but it has not been able to stop exploitation in the IVF sector completely.

Thailand is working to make IVF practices safer by establishing clear rules. However, Georgia has become a new hub for similar practices because its laws are relatively lenient. IVF services in Georgia, especially surrogacy and egg donation, have grown quickly and are popular with couples from countries that have strict rules about IVF. Criminal networks can generate significant profits due to high demand from other countries, particularly in Georgia, where laws are often weak and enforcement is inadequate. The IVF business is becoming a more common place for people to be trafficked. Women from poor countries like Thailand are especially vulnerable to being taken advantage of because they do not know much about medical procedures, health risks, or the law.

In reality, Georgia has few regulations that specifically govern IVF practices. Several provisions are only listed in general articles in the Law of Georgia on Health. One of them is Article 143 paragraph (1), which allows IVF to be performed if infertility occurs and there is a risk of genetic disease transmission from the husband or wife to the child, including the use of donor embryos. Suppose a woman does not have a uterus. In that case, the process can be carried out through a surrogate mother, whereby the embryo is transferred to another woman's uterus to be developed until birth. Furthermore, Article 143 paragraph (2) states that children born as a result of IVF will be legally recognized as children of the recipient couple, with all parental rights and responsibilities. Donors have no legal rights or recognition as the child's parents.

Because there are not many rules or laws about IVF in Georgia, it makes it easier for human trafficking to happen, especially against women from poor countries who are targeted by transnational criminal networks. According to Article 1431 of the Georgian Criminal Code, human trafficking is the act of recruiting, transporting, transferring, harboring, or receiving a person through threats, violence, deception, or coercion for exploitation, which can include sexual exploitation and forced labor. The Law of Georgia on Combating Human Trafficking is a set of rules that the Georgian Parliament made to help stop human trafficking. It has signed international treaties like the Palermo Protocol and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). However, these regulations have not been effective in addressing the alarming cases of human trafficking, particularly those involving Thai citizens in the IVF industry in Georgia.

The unfortunate truth is that the legal systems in both Thailand and Georgia are inadequately equipped to handle the legal gaps that make them susceptible to exploitation in human trafficking practices. While both countries have ratified the Palermo Protocol, its implementation remains weak, particularly in the context of cross-border egg donation. This is due to Georgia's unclear national legal instruments and the lack of harmonization between the two countries in the application of the

protocol. Based on this, this study aims to analyze cases of exploitation of women who are victims of egg donation for In Vitro Fertilization in Georgia and the policy direction that Georgia needs to take in accordance with Human Rights.

Methods

This study is a normative legal study that uses primary legal materials in the form of Thai and Georgian national regulations and international instruments such as the Palermo Protocol and CEDAW, supported by secondary legal materials in the form of literature, journals, and expert doctrines, as well as tertiary legal materials such as legal dictionaries. Data was collected through a literature study, then analyzed descriptively and qualitatively to produce a systematic and logical explanation. The approaches employed were the comparative approach to compare the legal frameworks of Thailand and Georgia regarding egg donation practices, and the statutory approach to examine international legal instruments, with the intention of assessing potential human rights violations and formulating a protection model that can serve as a global reference.

Results and Discussion

A. Analysis of Cases of Exploitation of Thai Women for IVF

IVF is usually chosen by couples who experience fertility problems such as ovulation disorders, fallopian tube damage, or infertility related to sperm quality. The IVF procedure consists of several critical stages that require strict medical supervision to increase the chances of success [4]. For example, in Thailand, IVF services are in high demand due to the availability of high-quality healthcare that meets international standards. In addition to Thailand, Georgia has also become a significant destination for IVF. Georgia itself has many IVF clinics because the cost of services is significantly lower than in other countries, yet it achieves the same high success rates. Although IVF in Georgia is growing rapidly and has become a significant destination for affordable medical tourism, in reality, the development of this industry also leaves serious problems. Legal loopholes and weak oversight have opened the door to illegal practices that lead to the exploitation of women, particularly through egg donation.

There have been several cases of Thai women being taken advantage of as egg donors in Georgia. These cases show a pattern of abuse in surrogacy practices. From 2023 to 2024, Thailand used online ads, mainly on Facebook, to hire surrogate mothers. The pay was perfect, ranging from 400,000 to 600,000 baht (approximately USD 11,800 to 17,700) [5]. The offers were presented in a manner that made them appear legitimate and safe, which attracted a large number of young Thai women. When they got to Georgia, they were brought in through Armenia to avoid being checked, had their passports taken away, and were then put in a housing complex in Tbilisi's Gldani district that was run by a Chinese crime group. Instead of doing what they promised to do as surrogate mothers, the victims are often forced to go through egg harvesting procedures that do not follow medical standards. Many of these people have had serious problems, like ovarian hyperstimulation, because they could not get the medical check-ups they needed [6].

The victims were scared into this exploitation, which included being held illegally, threats, and extortion of 50,000 to 70,000 baht as a condition for their release. In September 2024, one victim, who went by the name Na, was able to escape after her family paid the ransom. Before she escaped, she spoke with three other women who did not want to sell their eggs but could not afford the ransom. Na then informed the Pavena Hongsakul Foundation in Thailand about what was happening. This led to a coordinated response from the Thai police, which included Police Maj. Gen. Suraphan Thaiprasert and Interpol. On January 30, 2025, a successful rescue operation brought the three victims back to Thailand, where the foundation provided them with care and support [7].

Responding to the assertion, the Georgian Ministry of Internal Affairs (MIA) notified on February 6, 2025, that an official investigation had been established based on information from Interpol Bangkok. The investigation was conducted under Article 1431 paragraph (3) of the Criminal Code of Georgia on human trafficking for sexual and reproductive exploitation. [5]. The MIA estimated that approximately 70 foreign nationals were allegedly involved, but only three Thai women officially filed reports and provided testimony. Four foreign nationals engaged in facilitating the departure of the victims were also interrogated, and their cell phones and documents were seized as evidence. During the investigation, the name of the reproductive brokerage firm, Babycam Medical Consulting Group LLC, which was registered in Tbilisi in March 2024, was revealed. The company offers surrogacy contracts with monthly payments of USD 300–500 during pregnancy and full compensation of around USD 11,000 after giving birth. However, the victims said that the contract was just a cover, and that they were actually exploited for repeated egg donations. The company's agents denied allegations of involvement with a Chinese syndicate, claiming that all contracts were executed legally and voluntarily. [8].

Babycam Medical Consulting Group LLC is a brokerage firm that has been operating legally in Georgia since 2024, with limited oversight. This raises questions about how effectively the police perform their duties in the state. Georgia is known as a great place for IVF and surrogacy services, but it also has a serious problem with the exploitation of egg donors that continues even though these practices are technically legal. The fact that the authorities did not notice these problems sooner suggests that they may have been careless, and it raises concerns that they might be overlooking the activities of organized crime groups. This situation shows that the main problem is not just the crime itself, but also the lack of law enforcement and the possible links between legal practices and illegal activities that take advantage of foreign women.

This case has received so much criticism from medical professionals in Georgia. Dr. Ketikantaria, a Georgian reproductive doctor, emphasized that egg retrieval procedures should be performed only in licensed clinics, with informed consent provided to the government. At the same time, Lika Chkonia from the Georgian Medical Reproduction Association stated that every foreign patient must sign a consent form in a language they understand [8]. Thus, this case not only exposes the

exploitation of Thai women but also reveals legal loopholes, weak oversight, and the potential for abuse in Georgia's rapidly growing fertility industry through egg donation practices.

The practice of egg retrieval from Thai women in Georgia falls short of the medical ideals applicable in IVF, mainly the principle of due care as prescribed in the Guidelines for Conformity Assessment of In Vitro Fertilisation (IVF) and Assisted Reproduction Technologies (ART) Products by the European Commission DG Health & Consumers. This principle emphasizes that every IVF procedure must meet *Conformité Européene* (CE) certification, with a primary focus on protecting gametes, embryos, and donors from all risks through strict standards. These standards include the use of clean rooms with optimal environmental control, thorough sterilization, and a layered quality control system. These international standards also require the protection of the physical and mental health of donors, transparency of information, valid consent, and legal certainty. [9]. Ideally, before egg retrieval, victims should undergo a series of medical consultations, including blood tests, hormonal studies, ultrasounds, and complete counseling with donors and intended parents to ensure the safety and interests of all parties. However, these essential steps were forgotten entirely in the Georgia case, revealing a disregard for the minimum standards that should form the foundation of ethical and humane IVF practices.

In this case, the egg retrieval procedure was not performed by qualified medical personnel or in a licensed clinic, but rather by unqualified parties in structures that did not meet the necessary standards. In fact, as accentuated by Dr. Ketu Kantaria, all IVF and surrogacy procedures in Georgia should be carried out in official clinics with government licenses, trained medical personnel, and sterile and maintained laboratories. [8]. This fact exemplifies the importance of the principle of due care, which should be a fundamental aspect of every IVF procedure.

Although Georgia is not yet an official member of the European Union, the Guidelines for Conformity Assessment of In Vitro Fertilisation (IVF) and Assisted Reproduction Technologies (ART) Products, published by the European Commission's DG Health & Consumers, should serve as the minimum standard in Georgia. This case confirms Georgia's failure to adopt these principles, highlighting the weakness of national regulations and opening the door to violations of the rights of female donors that get exploited under the guise of medical services.

Infringements of the principle of due care in IVF have unlocked the door to illegal practices and systematic exploitation of women. This is evident in the case of Thai women who have fallen victim to illicit surrogacy networks. Strict protocols that should protect patient safety and expand the chances of IVF success have been ignored for financial gain, underlining the weakness of regulatory oversight and legal loopholes that are exploited to the detriment of victims [10]. This case of exploitation of Thai women shows how the neglect of the principle of due care not only threatens medical safety but also opens the door to human rights violations in the assisted reproduction industry, where women who should be protected instead become victims of an irresponsible system.

In this case, the duty to get informed consent was also broken. Informed consent is a fundamental part of medical practice. It makes sure that the patient has the right to know everything about the purpose, procedure, risks, benefits, and alternatives before they agree to the treatment [11]. Patients are at risk of being manipulated and exploited by medical professionals if they don't give valid informed consent because they lose their right to make their own decisions. Without this mechanism, patients lose their freedom, are more likely to be manipulated, and are taken advantage of medically [12]. According to WHO standards and literature on IVF, informed consent must include a comprehensive explanation, the opportunity to ask questions and refuse treatment without pressure, and an evaluation of the patient's capacity to give free and informed consent [13]. Not following these rules not only goes against medical ethics, but it also makes it easier for reproductive rights to be violated and women to be taken advantage of.

The failure of informed consent is evident when Thai women are recruited with the narrative of surrogacy but are forced to undergo egg retrieval without valid permission. Essential information regarding the procedure, medical risks such as ovarian hyperstimulation, frequency of retrieval, and the right to refuse was never disclosed. In contrast, the status of the procedure was manipulated to appear as if surrogacy was legal when, in fact, it was forced and repeated donation. The violation is even more apparent because the victims did not receive information in a language they understood and did not have access to medical services and follow-up for complications, even though follow-up is an integral element of ethical informed consent. This case shows that the problem is not merely weak administration. Still, there is a systemic failure to establish informed consent as a moral and clinical protection mechanism that must underpin every assisted reproductive medical practice.

From a feminist legal approach perspective, this violation of informed consent shows how women's bodies are reduced to economic objects in the reproductive industry. The seemingly neutral law fails to protect because it ignores structural gender-based inequality. [14]. In this framework, the "consent" given by the victims cannot be considered valid because it was obtained through deception, economic pressure, and limited information. [15]. The feminist legal approach critiques the conventional legal view that formal consent is sufficient, as valid consent is only possible under conditions of equality and fairness. When the law disregards how consent is formed in unequal power relations, consent actually functions as a legitimization of domination rather than protection. [16]. Women's vulnerability in the socio-economic system means that their choices are never neutral, so even if they appear to agree due to financial needs, the situation remains exploitative because it deprives them of their bodily autonomy and reproductive rights.

Georgia has regulations regarding IVF in the Law on Health Care, specifically in Articles 141, 143, and 144, as well as in the Law on Civil Acts in Article 30 and the Law on Patients' Rights in Article 22. However, these laws only cover administrative issues like who can perform IVF, how to register a birth, and the legal status of children born through surrogacy. They don't give detailed medical advice [10]. So, state law doesn't specify technical details, such as how to select eggs, the number of embryos that can be transferred, or the process for obtaining eggs. Because there are no laws governing this, clinics and middlemen can set their own standards, which often prioritize efficiency and profit over patient care.

In real life, this situation has led to private companies, such as Babycam Medical Consulting Group LLC, which offers surrogacy contracts with specific payment plans. However, these companies have been used to take advantage of Thai women who donate eggs. The company's illegal actions not only deceive victims into thinking they are legal, but they also highlight the weakness of government oversight, which allows these actions to continue without being noticed or regulated.

This situation has profound implications for human rights violations. It contradicts the universality and inalienability of human rights, whereby women's right to bodily integrity cannot be compromised even if it is wrapped up in contracts or compensation that arise from deception or structural inequality. This situation presents a "regulatory vacuum" in Georgia's legal system regarding assisted reproduction, where the absence of comprehensive regulations has created loopholes for exploitation and abuse due to the lack of clear and effectively enforceable legal guidelines. [17].

This case contains strong indications of human trafficking as referred to in Articles 1431 Paragraphs (1) to (3) of the Criminal Code of Georgia in paragraph (1) "The purchase or sale of persons, or other illegal transactions involving them, using threats, violence, or other forms of coercion, abduction, extortion, fraud, deception, by exploiting a position of vulnerability or power, or by giving or receiving payment or benefits to obtain the consent of a person who controls another person, as well as the recruitment, transportation, harboring, rental, transportation, provision, sheltering, or receipt of persons for exploitation" [18]. Paragraph (2) states "intentionally by the perpetrator against a person who is helpless or financially or otherwise dependent on the perpetrator" [17]. And paragraph (3) states "by taking the victim abroad" [18]. Strong indications of this occurred when the victims were deceived with false promises of work as surrogate mothers, then were systematically transported to Georgia via Armenia, had their passports confiscated, and were forced to undergo repeated egg retrieval without medical standards.

In addition, Article 3(d.d) of the Georgian Law on Combating Human Trafficking stipulates that exploitation includes "the forcible removal or fraudulent extraction of human organs, parts of organs, or tissue" [19]. This clearly covers the practice of forced egg retrieval. The victims' conditions also fall under the category of modern slavery as described in paragraph h, namely when the victims' passports are confiscated, their freedom of movement is restricted, communication with their families is controlled, and they are placed in an intimidating environment. Thus, the syndicate's actions can be classified as human trafficking for sexual or reproductive exploitation. On the other hand, the aspect of victim protection is regulated in Articles 11-20, which should guarantee victims' legal status, the right to compensation, and repatriation mechanisms relevant to the process of returning victims to Thailand. Thus, the entire series of facts in this case aligns with the elements of the Palermo Protocol, which are then explicitly represented in Georgian national law through a combination of these articles.

Georgia's Law on Combating Trafficking in Persons also guarantees state compensation for officially recognized victims, as well as data confidentiality and witness protection. However, these guarantees only apply after victims are identified and recognized through legal proceedings. Many preventive or protective mechanisms, such as recruitment, transportation, and initial medical conditions, do not appear to have specific regulations that cover this type of exploitation. In situations like this, even though victims de facto experience conditions that correspond to the elements of trafficking, such as deception, abuse of vulnerability, and restriction of freedom, they may not immediately have access to all the rights guaranteed by trafficking laws, such as access to a lawyer, information in a language they understand, or adequate medical/psychological rehabilitation services.

This practice is at the crossroads of exploitative surrogacy and human trafficking for reproductive purposes. Not only do these cases go against medical ethics, but they also fit the definition of human trafficking in the Palermo Protocol. The fact that Thailand has banned commercial surrogacy since 2015 and Georgia has less strict rules makes it easier for transnational syndicates to take advantage of legal loopholes. This situation highlights the importance of ensuring that national laws align with international laws, particularly those that safeguard human rights and the rights of victims to bodily integrity and freedom from exploitation. To protect women who undergo cross-border IVF, fraudulent recruitment must be stopped, valid informed consent must be obtained, and high-risk medical facilities must be closely monitored.

B. Analysis of Georgia's Policy on IVF Practices in Accordance with Human Rights Standards

This case shows what organized crime is like: people are recruited in Thailand, moved through Armenia to avoid detection, and then held in Georgia. Because Georgia has long been a popular place for IVF programs, and the number of victims keeps going up, it's unlikely that just one company runs these kinds of programs. The state should have established measures to identify, prevent, and protect individuals early on. Georgia's failure in this regard is not only due to poor administrative oversight, but it also breaks its international obligations to protect women's bodily integrity, freedom from exploitation, and dignity.

Since 1994, Georgia has signed several international legal agreements, including the International Covenant on Economic, Social, and Cultural Rights (ICESCR) and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). Georgia must follow the rules set out in these documents to protect and uphold the rights it protects. Georgia is bound by the ICESCR's principle of progressive realization, which means that the government must take real steps to make economic, social, and cultural rights a reality. This includes the right to physical and mental health, as well as reproductive health. Georgia has a specific duty under CEDAW to get rid of all types of discrimination against women, such as in reproductive health, access to information, and the protection of women's bodily integrity.

According to international human rights law, states are responsible for respecting, protecting, and fulfilling the human rights of everyone within their jurisdiction. Individuals, on the other hand, are the ones who have those rights. In Georgia, where egg donors are being exploited, this means that the government must make sure that all IVF-related activities follow human rights principles, especially the right to reproductive health, the right to information, and the right to free and informed consent. As a duty bearer, Georgia must establish clear legal standards and rules for IVF practices and ensure that they are

adhered to. The state also has to ensure that medical facilities adhere to international ethical standards and that both donors and patients can easily obtain information about the risks, rights, and medical consequences of assisted reproductive procedures.

But in reality, Georgia has not done enough to protect the rights of women who donate eggs. The Responsibility of States for Internationally Wrongful Acts (ARSIWA) of 2001, a legal framework created by the International Law Commission (ILC) and accepted by the UN General Assembly, is to blame for this failure. ARSIWA is not a binding international treaty, but it serves as an authoritative reference and a soft law tool that outlines the basic principles of state responsibility under international law. ARSIWA states that a state can be held internationally responsible for wrongful acts, whether these are due to omission (failure to act) or commission (action taken).

Articles 2 and 12 make it clear that omission is a form of international responsibility. Article 12 says that a state's failure to act can be a reason for international responsibility. This law states that Georgia's failure to act constitutes negligence in its duty to prevent human rights abuses. The state did not set clear rules for IVF procedures, keep an eye on fertility clinics, or give women donors strong legal protection. In contrast, commission means that a state is actively involved in or supports actions that may break international law. In this context, Georgia permitted the operation of fertility clinics with insufficient regulation and deliberately permitted the expansion of egg farming, despite its potential for exploitation. This is in line with Articles 4 and 5 of ARSIWA, which state that actions taken by state organs or by groups granted power by the state can be attributed to the state itself.

Consistent with Georgia's actions, legal consequences inevitably arise from internationally wrongful conduct as set out in Articles 30 and 31 of ARSIWA. These provisions stipulate that a state is under an obligation to cease the wrongful act (obligation of cessation), to provide guarantees of non-repetition, and to make full reparation through restitution, compensation, or rehabilitation. Accordingly, Georgia's failures are mainly attributable to omission, namely the neglect to establish health standards for IVF, and to commission, namely the active issuance of operating licenses without adequate regulation, placing the state within the framework of international responsibility. This is because Georgia hasn't kept its promise to protect people's right to health and freedom from exploitation.

In Georgia, IVF regulations are primarily focused on business rather than rights. Because there aren't clear rules and good ways to keep an eye on things, there is a regulatory gray area that brokerage firms use to connect people who want to have children with assisted reproduction providers. Donor protection is based on private contracts or the policies of clinics and brokers, with little help from the government. This makes the power dynamic uneven, with clinics and agents setting the terms of contracts while women donors are still at risk. The situation is even worse for Thai donors because they lack legally guaranteed fundamental rights, cannot refuse without consequence, and are highly likely to be misled due to a lack of information or inadequate understanding of the medical risks and legal implications of the contract. In this context, the absence of direct coercion does not negate the existence of exploitation; the imbalance of information and power alone places donors in a disadvantageous position. Thus, Georgia's legal framework is not only weak but also structurally facilitates the exploitation of egg donors, rendering the state in breach of its international human rights obligations in the context of assisted reproductive practices.

Another international legal instrument violated in this case is the International Covenant on Economic, Social, and Cultural Rights (ICESCR), a multilateral treaty adopted by the UN General Assembly in 1966, which obliges state parties to respect and implement its provisions. Article 12(1) of the ICESCR affirms that: "The States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health." This provision is further elaborated in General Comment No. 14, which emphasizes that to eliminate discrimination against women, states must adopt and implement comprehensive national strategies to advance women's right to health throughout their lives. The absence of technical regulations and oversight mechanisms in Georgia has deprived women donors of adequate access to medical information and legal protection, leaving them in a position of heightened vulnerability to exploitation. The state should have ensured the existence of IVF medical standards, effective monitoring mechanisms, and guarantees of access to accurate information regarding the risks and implications of assisted reproduction.

The exploitation of Thai egg donors in Georgia is also a clear violation of the principle of informed consent, which should be the basis for any IVF procedure. The procedures were done without proper consent in a language that the victims could understand. The necessary information about the purpose, risks, and the right to refuse was ignored entirely, turning women into objects of exploitation instead of rights-holders who should be protected. This situation constitutes a direct violation of Article 7 of the International Covenant on Civil and Political Rights (ICCPR), which states: "No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, no one shall be subjected without his free consent to medical or scientific experimentation." General Comment No. 20 strengthens this by making it clear that medical or scientific experiments cannot be done without the person's free consent.

In the case of Thai women who were used as egg donors in Georgia, the violations are especially clear in the way that information was changed to make it look like the work was legal surrogacy when it was really just repeated forced egg donation. The lack of clear explanations in a language the victims could understand shows even more that these women were never allowed to decide for themselves whether or not the medical procedures were right for them. This is a serious violation of the principle of informed consent, which is necessary in all medical practices. It also puts victims at risk of being taken advantage of and developing serious health problems. These kinds of things contradict the WHO Patient Safety Rights Charter, particularly the rights to information, education, and assistance in making decisions.

The Charter stresses that every patient has the right to get timely, accurate, and complete information about their health, treatment plans, medications, possible benefits, risks, side effects, and other options. Additionally, this information should be presented in a culturally sensitive manner, considering factors such as age, literacy levels, and individual needs. This may

include translating the information when language barriers exist. Patients also have the right to actively participate in decisions about their care and to receive the necessary assistance before giving their consent, such as through consultation, educational materials, or legal advice. In Georgia, these standards were completely ignored when it came to forced egg donation. Victims were not only not given correct information, but they were also intentionally misled by false stories. This shows a serious failure to make sure that women have access to follow-up medical care, valid informed consent, and transparency. This is a serious violation of women's reproductive health rights protected by international standards.

Article 143¹ of the Georgian Criminal Code makes human trafficking a crime, including taking organs or cells through fraud and abuse of vulnerability. However, it does not specifically protect victims of reproductive exploitation, like harvesting eggs under the guise of surrogacy. Legal protections, such as compensation, privacy, and rehabilitation, only take effect when someone is officially recognized as a victim. Consequently, preventive measures and early-stage protections, encompassing recruitment, transportation, and medical conditions, are lacking. This legal vacuum shows that even though the elements of trafficking are present, the lack of clarity in medical and administrative rules still puts victims in a weak position until the law can work properly.

The exploitation of Thai women as egg donors in Georgia can thus be qualified as a form of human trafficking under the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, commonly known as the Palermo Protocol. This UN instrument seeks to prevent trafficking, prosecute offenders, and protect victims, with a particular focus on women and children. Article 3(a) of the Protocol defines trafficking as: “the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.”

This provision requires three key elements, namely the act, the means, and the purpose. The act element is fulfilled through the recruitment of victims by means of false advertisements in Thailand, their transportation to Georgia via Armenia, and subsequent confinement in closed housing facilities. The means element is evident in the deception involving false promises of employment as surrogate mothers, the confiscation of passports, and the exploitation of victims' economic vulnerability. The purpose element is clearly reflected in the reproductive exploitation carried out through the repeated and coercive extraction of ova for the commercial interests of the IVF industry. Accordingly, all the elements required under the Palermo Protocol are satisfied, and thus this case qualifies as a form of human trafficking.

Moreover, Georgia has failed to comply with Article 6(3) of the Palermo Protocol, which stipulates that: “Each State Party shall consider implementing measures to provide for the physical, psychological and social recovery of victims of trafficking in persons, including, in appropriate cases, in cooperation with non-governmental organizations, other relevant organizations and other elements of civil society, and, in particular, the provision of ...”. This provision obliges States to ensure the provision of assistance and protection to victims, including medical services, psychological support, and legal aid after their rescue. In practice, however, victims in Georgia did not receive adequate protection or rehabilitation. To address this situation, pressure from the Thai government, as well as relevant NGOs, is necessary to urge the Georgian government to conduct a thorough investigation and enforce the law. This is particularly alarming considering the increasing number of victims alongside the proliferation of broker companies, which should have compelled Georgia to fulfill its responsibility to protect every individual within its jurisdiction.

Violations are also apparent with respect to Article 9(1)–(5) of the Palermo Protocol. These provisions emphasize the obligation of States to adopt preventive measures, including strengthening national regulations, educating their citizens, and engaging in bilateral and multilateral cooperation to reduce the demand that fosters all forms of exploitation of persons, particularly women and children, to prevent human trafficking. Yet in Georgia, the absence of strict regulations concerning medical standards and the lack of oversight of the assisted reproduction industry have instead created an enabling environment for reproductive trafficking. Therefore, the fulfillment of the act–means–purpose elements, combined with the State's failure in both protection and prevention, clearly establishes that the practice of forced egg donation constitutes human trafficking under international law.

From the perspective of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), this case also constitutes a form of gender-based exploitation. Article 3 of CEDAW obliges States to ensure the full development and advancement of women without discrimination; yet, the practice of egg harvesting reduces women's bodies to mere economic commodities, thereby constituting structural discrimination. Article 6 requires States to suppress all forms of trafficking and exploitation of women, including the trade in organs and reproductive cells. Furthermore, Article 12(1) obliges States to guarantee women's right to health; however, in this case, the victims were coerced into undergoing invasive medical procedures without valid informed consent.

It follows, therefore, that this case must also be understood within the framework of General Recommendation No. 35, which revises and expands upon General Recommendation No. 19 by affirming that gender-based violence encompasses not only physical or psychological harm but also the economic exploitation of women's bodies. In this context, the exploitation of egg donors represents a dual infringement: it fulfills the criteria for human trafficking as outlined in the Palermo Protocol, while concurrently violating the State's responsibilities under CEDAW to eradicate gender-based discrimination and violence. These violations illustrate the multifaceted nature of reproductive exploitation, functioning simultaneously as a form of transnational human trafficking and as gender-based violence. Accordingly, Georgia, as a duty bearer under international law, bears direct responsibility for addressing and remedying these infringements in accordance with its treaty commitments.

The absence of a comprehensive international legal instrument governing cross-border commercial gestational surrogacy

(CGS) further exacerbates the vulnerability of both egg donors and surrogate mothers. To date, no international convention specifically regulates cross-border surrogacy practices, leaving significant gaps in protection. As a result, divergent national legal standards create a grey area between legitimate private law arrangements and surrogacy-based human trafficking, thereby facilitating the exploitation of women's reproductive capacities under the guise of contractual freedom. [20]. This legal vacuum renders the protection of vulnerable women heavily dependent on national regulations, which are often inadequate. In Georgia, the absence of stringent technical rules significantly heightens the risk of exploitation. The lack of clear medical standards, oversight mechanisms, and legal safeguards for egg donors and surrogate mothers blurs the line between legitimate private contracts and practices amounting to reproductive trafficking. Consequently, existing international law becomes the primary instrument to fill this gap while simultaneously imposing obligations on Georgia to uphold its duty to protect human rights in the sphere of cross-border reproductive health.

In the case of Thai women being used as egg donors in Georgia, Mutual Legal Assistance (MLA) is an essential tool because state negligence in protecting victims must be dealt with through cooperation between countries. MLA helps close jurisdictional gaps that people who traffic in reproductive services often take advantage of. It also makes law enforcement stronger between Thailand, the country where the trafficking starts, and Georgia, the country where it happens. This mechanism enables both states to share information, collaborate on investigations, and ensure that criminals are punished legally, even if they are located in different countries. MLA is a system of legal cooperation between states that is based on mutual respect. It is written into many international treaties, such as the 2000 United Nations Convention against Transnational Organized Crime (UNTOC), which requires States Parties to help with investigations, prosecutions, and court cases involving transnational crimes [21]. The ultimate goal is to make sure that transnational crimes are not only dealt with in the country where they happen, but also prosecuted in a way that includes things like sharing information, calling witnesses, gathering evidence, and freezing assets that come from criminal activity [22].

In this case, the use of MLA could involve various types of direct assistance. For example, Thailand could provide information about recruitment agents, online advertisements, and the names of individuals who assisted the victims in their escape. Georgia could also share the results of medical investigations, administrative records from fertility clinics, and testimonies from victims who were protected. Additionally, this type of cooperation enables the tracking of financial flows by freezing or seizing profits generated by the exploitation network. The MLA is not just a formal way for states to work together; it is also a real way to hold criminals accountable and protect victims across borders.

Thailand and Georgia are required to establish a Mutual Legal Assistance (MLA) framework due to the principle of duty to cooperate under international law. This principle is supported by the United Nations Convention against Transnational Organized Crime (UNTOC), CEDAW, and the Palermo Protocol. These instruments mandate that States work together to stop, look into, and prosecute human trafficking as a type of transnational organized crime. Without an MLA agreement, victims' legal protections are not as strong, allowing criminals to take advantage of jurisdictional gaps and avoid being held accountable. Thus, the formation of an MLA treaty between Thailand and Georgia is not merely a policy choice, but a legal obligation under international law that is necessary to fill regulatory gaps, guarantee victims' access to justice, and strengthen the global framework against human trafficking in the realm of reproductive exploitation.

Conclusions

This study finds that the exploitation of Thai women as egg donors in Georgia constitutes a form of human trafficking through the reproductive exploitation of the human body, thereby violating fundamental principles of assisted reproductive medicine. The case illustrates a regulatory vacuum in Georgia's legal framework, which prioritizes commercial interests over human rights protection, creating space for brokerage agencies to exploit women's vulnerabilities. At the same time, differences in national laws create legal gaps that transnational criminal networks use to turn women's bodies into economic assets. To fill these gaps, it is necessary to align national laws with international human rights standards and to enhance cross-border cooperation through Mutual Legal Assistance (MLA) between Thailand and Georgia, guaranteeing both the effective prosecution of offenders and sufficient legal protection for victims. In parallel, the adoption of global standards on cross-border assisted reproduction is essential to guarantee that IVF procedures are conducted ethically, transparently, and in full respect of women's bodily integrity and dignity.

Acknowledgement

The author wishes to express sincere gratitude to the academic supervisor, whose invaluable guidance, insightful feedback, and continuous support have been instrumental in the completion of this research. Special thanks are also extended to family members for their endless prayers, encouragement, and unwavering moral support throughout this journey. The author is equally grateful to friends and peers who have provided motivation, shared ideas, and offered meaningful discussions that enriched the writing process. Without the collective support of my supervisor, family, and friends, this research would not have been completed successfully.

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ISSN 2443-3497 (online), <https://rechtsidee.umsida.ac.id>, published by [Universitas Muhammadiyah Sidoarjo](#)

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