

From harmonious altruism to contradictory feminism: an analysis of the public consultation on financial compensation for egg donation

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Publication date: 18 June 2025

DOI: <http://dx.doi.org/10.5324/eip.v19i1.5918>



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After the revision of the Biotechnology Act in May 2020, egg donation in Norway became a reality. In the wake of the 'biotechnology agreement' – a result of the coalition between Ap (the Norwegian Labour party), Frp (the Progress Party) and SV (the Socialist Left Party) to secure a parliamentary majority for changes in the law – the amount of compensation was to be determined for women who wish to donate eggs. A public consultation was therefore held on the guidelines for egg donation, including alternatives for how much the donor should be financially compensated. In this article, I have analysed the consultation draft, the consultation responses and the final guidelines for compensation for egg donation. The purpose of the study was to examine the various arguments in the Norwegian debate about financial compensation for egg donation. Three recurring themes were identified in the consultation documents: the form and content of the motivation, fairness and donor store. A key finding in the consultation was a recurring concern about financially motivated donation. There was also broad agreement that egg donation should be altruistic. Altruism was understood as an absence of financial motivation on the part of the donor, but without other non-altruistic motives being problematised or the prerequisites for altruism being further discussed. The analysis also showed how similar arguments were framed differently in order to support both higher and lower compensation. For example, an emphasis on women's rights in some consultation responses ended up as a defence for the higher compensation proposed, while in other consultation responses it was used as an argument for a ban on any form of compensation. Overall, this study provides insight into the diversity of arguments that have been used in the Norwegian debate on financial compensation for egg donation, and it shows the importance of defining the relevant concepts – such as altruism, voluntariness and financial motivation – in order to better illuminate the agreements and disagreements between the parties in the debate.

Keywords: altruism, biotechnology, oocyte donation, remuneration, motivation

Brief background

Egg donation was introduced in Norway on 1 January 2021. Since then, women have been able to donate eggs for assisted fertilisation in women they do not personally know.¹ The debate on egg donation, as well as the donation of gametes and other organs more generally, raises various ethical questions. One such question is whether, and if so how much, the donor should be paid or compensated for the donation.

Sperm donation was introduced as a systematised provision in Norway's public health service in 1972, and has been financially compensated since then (Bjørvik 2018: 147–155). Initially, the compensation was normally between NOK 50 and 100, but NOK 350 was subsequently paid per donation up until 2020 (Helsedirektoratet 2020a: 6). However, egg donation differs from sperm donation in that it is more invasive, burdensome and time-consuming. Women who donate eggs need hormone therapy and must undergo a procedure to retrieve the eggs. The compensation rates for sperm donation are therefore of little practical help in setting the compensation for egg donation.

In connection with the introduction of egg donation in Norway, the Ministry of Health and Care Services tasked the Norwegian Directorate of Health with drawing up guidelines for egg donation, including proposals for financial compensation for donors. The Directorate subsequently sent out a consultation draft for a new 'Circular on Assisted Fertilisation with Donor Eggs and Donor Sperm' before Christmas 2020, with a response deadline of 20 January the following year (Helsedirektoratet 2020b).

This consultation draft was tightly framed by both national and international legislation. The Convention on Human Rights and Biomedicine (1997: article 21) prohibits financial gain from the human body and its parts. In accordance with EU regulations, Norwegian law also requires donations to be voluntary and unpaid (Forskrift om håndtering av humane celler og vev 2015: section 14). The regulation states that donors can, nevertheless, be compensated, but only to cover expenses and as recompense for the inconvenience of donation. Meanwhile, the Norwegian parliament (the Storting) further framed the consultation draft by instructing the Government that the compensation should reflect the donor's burden and time usage, that it should be set at a moderate level to prevent driving up levels in the Nordic countries, and that travel expenses should be covered independently of the compensation to prevent geographic location from playing a role in who can donate eggs (Helsedirektoratet 2020a: 27).

It was within this framework that the Norwegian Directorate of Health arrived at two alternatives: either that the compensation for egg donation should be 10% of 1G (currently NOK 13,016) (G represents a basic amount used in Norway's National Insurance Scheme) or 5% of 1G (currently NOK 6,508), both of which were proposed as tax-free payments (Helsedirektoratet 2020b: 16).² After calculating time usage and estimating the burden of donating eggs, the Directorate itself argued for the first and higher compensation alternative (Helsedirektoratet 2020a: 35). However, following the consultation and input from the consultative bodies, the Ministry of Health and Care Services decided instead on the second alternative, with the lower compensation rate. The Ministry's decision was based on a concern that the money would motivate women to donate eggs to women they

did not know (NRK 2021).³ It was further proposed in the consultation that the compensation for sperm donation be increased from a fixed sum of NOK 350 per donation to 0.7% of 1G (currently NOK 911), and this was later passed by the Ministry (Helsedirektoratet 2021).

The purpose of the study was to examine the various arguments in the Norwegian debate about financial compensation for egg donation through an analysis of the public consultation to determine the level of compensation for egg donation. Such efforts can help identify important nuances in the arguments used and aid the process of clarifying and discussing key concepts in the debate. In doing so, the study can contribute to the further debate on compensation for gamete donation and inform similar debates on the use of financial compensation. In the following, I start by explaining the method and data material, and then present and discuss the findings from the document analysis.

Method and data material

In order to analyse the consultation on egg donation guidelines, I carried out a qualitative content analysis of official documents. The data material consists of the consultation letter, the consultation paper, a report from the Norwegian Directorate of Health outlining the proposal for the introduction of egg donation in Norway, 19 consultation responses and the final published circular. The documents were retrieved from the Norwegian Directorate of Health's website,⁴ and the study was approved by Sikt (Norwegian Agency for Shared Services in Education and Research) (reference no. 946698).

I use quotes when referring to the individual consultation document, but private individuals who responded to the consultation have either been de-identified or not quoted to protect their privacy. Although anyone can provide input in such consultations, it is mostly public bodies and enterprises as well as various organisations and associations that do so. Some other entities were also invited to respond to the consultation, including various hospitals and their fertility departments, private clinics engaged in assisted fertilisation, advisory bodies such as the Norwegian Biotechnology Advisory Board (NBAB), and associations representing those who are involuntarily childless and donor-conceived individuals. The purpose of consultations like this is to obtain input from the public, relevant actors and other authorities that can be used in policymaking, ensuring an optimum decision-making basis.

Specifically, I started by loading all the documents into the analysis software NVivo (version 12). In line with what Hsieh and Shannon (2005) refer to as a conventional content analysis, I then thoroughly read through all the documents. As the circular addresses more areas than just the determination of financial compensation, I highlighted the parts of the text that related to the compensation scheme. It transpired that all the consultation responses commented on the proposals regarding the amount of compensation for egg donation, which is probably because the Norwegian Directorate of Health specifically requested input on this point in the consultation letter (Helsedirektoratet 2020c).

The next step in the analysis was to code the parts of the text relating to the compensation proposals. I created 'labels' that referred to words and sentences in the documents. These codes should be derived directly from the text data, such that they describe the content with minimal interpretation (Hsieh and Shannon 2005). Meanwhile, the codes tend to refer to content in several places in the texts. After

coding the documents, I began the process of grouping the codes into categories that capture the common elements of the individual codes. Finally, I grouped these categories into themes. The themes represent an interpretation of the content – what the text is about – at a higher, more overarching level. Thus, categories and themes, and to some extent codes, are not something that are discovered, but something that the researcher actively constructs (Malterud 2001).

Content of the consultation

It therefore follows that the three themes presented below are just one possible way of organising the content of the consultation. The themes cover the content of the consultation but are not intended to be reproducible in the sense that another person would arrive at the same categorisation. On the contrary, the actual organisation of the content constitutes an analytical contribution in itself, which is reflected and further developed in the subsequent discussion, in which key findings are discussed in light of relevant theory and literature. Although the themes are closely related and may overlap, especially the first and last ones, I will argue through the selected quotes and descriptions from the consultation documents that each theme captures an independent dimension of meaning in the consultation and is distinctive enough to warrant its designation as a separate theme. The three themes I identified in the consultation on financial compensation for egg donation were: the form and content of the motivation, fairness and donor store.

Theme 1: The form and content of the motivation

Donor motivation was a recurring theme in the guidelines, the report from the Norwegian Directorate of Health and many consultation responses. On the one hand, motivation was related to voluntariness, what I have called the motivation's *form*, which denotes the conditions for motivation. This is consistent with one of the prerequisites for any donation of cells and tissue under Norwegian law, namely that the donation must be voluntary and unpaid. A concern raised in the consultation was that the proposed compensation for egg donation could challenge the principle of voluntariness:

We believe that a scheme similar to that for kidney donation would be a much better solution as it would prevent cash-strapped women being coerced into donating eggs. Under this scheme, income compensation is provided by the Norwegian Labour and Welfare Administration (NAV) and possibly health trusts, and travel expenses and agreed extra expenses are covered. In the case of kidney donation, financial compensation is prohibited, and we believe that a similar arrangement must also be applied to egg donation. (Kvinnegruppa Ottar 2021: 3)

Another respondent pointed out that voluntariness can be an argument for both limited and extended compensation. Extended compensation, which is a form of payment beyond mere compensation, can be justified through the premise that adults should have the autonomy to make decisions about their own bodies and '[...] that the donor and recipient of the eggs should be allowed to enter into an agreement on payment that both parties are satisfied with' (Bioteknologirådet 2021: 4). Limited compensation can be justified by the fact that the woman is actually choosing to donate voluntarily, and '[...] that lost working days should not be compensated as it is the woman's own choice to donate' (Bioteknologirådet 2021: 6). Interestingly, the latter argument also shows that both the concern that

donations might not be voluntary and the recognition that they are voluntary can support a lower level of compensation.

However, in the consultation, the form of motivation was closely linked to the other aspect of motivation: *content*, i.e. what the motivation is based on and where it stems from. In another consultation response, the respondent was concerned that parts of the population could be financially motivated by the compensation and that this would challenge the voluntary nature of the donation. This concern was related to economically disadvantaged women:

With regard to the proposed amounts for egg donation, the Medical Ethics Council is concerned that financial motives could influence potential donors. For example, 5–10% of the basic amount used in Norway's National Insurance Scheme roughly corresponds to NAV's subsistence allowance for single people and couples/cohabitants respectively. For a student, 10% of 1G is more than the monthly payment from the Norwegian State Educational Loan Fund (Lånkassen). Put in perspective, benefits of the proposed magnitude could be considered remuneration, potentially motivating economically disadvantaged women to donate eggs primarily for financial reasons. (Rådet for legeetikk 2021: 2)

Financial motivation was a generally recurring theme in the consultation documents. For example, the Norwegian Directorate of Health's report on the introduction of egg donation in Norway referred to the Standing Committee on Health and Care Services' recommendation that 'altruistic donation with modest compensation' should be established and therefore '[...] donors should have their expenses covered and receive compensation for the inconvenience, but the amount should not be so high that the payment itself motivates women to donate' (Helsedirektoratet 2020a: 27). As this excerpt illustrates, altruistic donation was understood in the consultation documents as a donation without financial motivation.

This impression is also confirmed by the fact that a minority in the NBAB said that they '[...] believe that a higher amount than this [the second and lower compensation alternative] would challenge the altruistic nature of the donation' (Bioteknologirådet 2021: 7), and an even smaller minority '[...] oppose financial compensation for gamete donation because it poses a risk of non-altruistic motives, particularly for young people without a steady income' (Bioteknologirådet 2021: 7). Although the latter quote acknowledges the possibility of there being non-altruistic motivation, none of the consultation responses discussed any non-financial motives that could challenge the altruistic nature of donations. Admittedly, the NBAB did discuss whether donors might be driven by both financial and altruistic motivation, but only to the extent that donors might seek recognition and compensation, even if the primary reason for the donation remains altruistic.

Meanwhile, several respondents were concerned – as in the quote above about economically disadvantaged women – that what constitutes financial motivation seems to be relative to the donor's circumstances. In other words, it can be difficult to delineate between compensation and payment because if the intention is to increase *the supply* of donor eggs, the NBAB emphasised, compensation ceases to be compensatory and becomes a payment and financial incentive: 'Payment for donor eggs, which is permitted in countries such as the United States, helps to attract more donors, and thus more eggs' (Bioteknologirådet 2021: 4). None of the consultation responses embraced this line of thinking. No one considered such

payment acceptable. The common, representative attitude in the documents was rather that 'the remuneration must reflect the difference in effort between egg donation and sperm donation, but not be so high that donation could be viewed as a source of income' (Foreningen for donorunnfangede 2021: 6), as expressed by another respondent.

Theme 2: Fairness

The second central theme in the documents was driven by a requirement for parity, in the sense of equal compensation for equal contributions and differentiated compensation for differentiated contributions. This requirement for fairness had several implications. Firstly, egg donation was compared to sperm donation in the consultation documents. The alternatives for compensating egg donation were proposed based on the premise that the compensation should reflect the donor's burden and time usage. The consultation responses that supported the first and higher of the two compensation alternatives presented by the Norwegian Directorate of Health emphasised the burden and time usage involved in egg donation, while some compared egg and sperm donation. One respondent applied both of these approaches:

Alternative 1 = 10% of 1G – necessary based on the expected time usage of an egg donor. There are multiple examination appointments, pharmacy visits and ultrasound checks throughout the process, and finally, egg retrieval. The time usage is equivalent to 1 week of work, and a quarter of the average monthly income in Norway is thus reasonable. [...] NOK 700 per visit for sperm donation has been proposed, and the total compensation for a sperm donor will, with an average of 10–12 visits to the clinic, amount to almost NOK 8000. Egg donation also entails much greater discomfort from daily injections, a minor procedure for egg retrieval, and some pain afterwards. The additional inconvenience for women must be taken into account. (St. Olavs hospital HF 2021: 3)

Furthermore, the Storting's guidance that travel expenses must be covered in addition to the compensation can be understood as an expression of the equal treatment of donors. A woman can thus choose to donate regardless of the costs of travel, if for example she has to travel a long way to donate eggs. The Storting was also clear that the Norwegian compensation should not drive up levels in the Nordic countries. Although this requirement may primarily have reflected a desire to limit the level of compensation, it also promoted equal treatment of donors across countries.

However, some respondents focused more exclusively on the fairness of the compensation itself, without comparison to other donors or types of donations. For example, one respondent believed that 'an egg donor must not lose out by contributing as a donor, even if it is done altruistically'. Furthermore, the same respondent argued that 'the compensation must be perceived as reasonable given the time-consuming and extensive nature of the clinical investigation and medical treatment' (Ønskebarn 2021: 5). Despite broad agreement in the consultation responses that 'donors should not pay for or incur costs for medications or other costs associated with egg donation', as assumed by the Norwegian Directorate of Health (2020a: 72), some were more cautious: 'The Medical Ethics Council believes that compensation should only reflect actual costs and loss of income, including travel expenses and income losses not covered by sick pay or other welfare benefits'

(Rådet for legeetik 2021: 2). This cautionary approach, which allows for compensating for *burden* to a lesser degree, intersected with the fear of financially motivated egg donation in the consultation. The Medical Ethics Council further cautioned that the risk of economically disadvantaged women donating primarily for financial gain, coupled with the relatively high costs associated with assisted fertilisation in Norway, can lead to inequitable outcomes that reinforce social inequality:

In Norway, assisted fertilisation requires additional out-of-pocket expenses for fertilisation attempts and medications, potentially exceeding NOK 20,000, even when done through the public health service. Economically disadvantaged women are therefore less likely to utilise this opportunity than more affluent women. Within this lies a risk of the financial arrangements associated with this provision reinforcing social inequality: to be more exact, the overall effect can be that 'poor women are donating eggs for the rich'. (Rådet for legeetik 2021: 2–3)

However, the NBAB mentioned an argument for a much higher payment, based on the perceived unfairness of clinics making substantial profits from the donor's benevolence while the donor receives a small, symbolic amount. Such payments *compensate* in a way for the disparity between the donor's payout and the clinic's profit, and serve as a form of recompense. However, they then transition into a form of payment that goes beyond mere recompense and reflects market conditions. None of the consultation responses supported such a solution. However, as highlighted by the NBAB, the argument primarily rests on the principle of fairness rather than a motive to attract additional donors:

Some believe, on principle, that egg donors should be entitled to more than a symbolic sum as recompense for time usage and the physical and mental strain they endure throughout the process. They point out that clinics offering egg donation charge high fees for their services aimed at infertile women. It could therefore be considered unreasonable for clinics that facilitate the transfer of egg cells to make a substantial profit while donors receive little compensation. (Bioteknologirådet 2021: 5)

Theme 3: Donor store

I named the third and last recurring theme in the consultation *donor store*. At its essence was a concern about commercialisation, where eggs become a commodity and egg donation a commercial transaction. The Norwegian Directorate of Health emphasised in the consultation letter that 'the starting point for the guidelines on compensation is the prohibition on commercial exploitation of the human body and its parts [...]' (Helsedirektoratet 2020c: 2). Although the NBAB mentioned – as a possible point of view – that allowing the trade of eggs could help prevent the emergence of a grey, uncontrolled market (Bioteknologirådet 2021: 4), the commercialisation of egg donation was uniformly understood as undesirable in the consultation responses.

However, this opposition to commercialisation had different origins. One variant played on the idea that 'many believe it is morally wrong to turn the sale of organs, tissues or cells into a profitable business' (Bioteknologirådet 2021: 4). Nevertheless, no other consultation responses referred to such a moral intuition. Paying the donor, and thus the sale of eggs, was not highlighted as *wrong in itself*, but rather as wrong because the donation could be financially motivated – as

covered in the first theme. The Norwegian Directorate of Health went further, emphatically stating that the ‘commercial sale of egg cells is prohibited, and egg donation should be altruistic’ (Helsedirektoratet 2020a: 21). Another respondent wrote that ‘Norway’s legislation on organ and tissue donation is based on principles of voluntariness and altruism and prohibits donation for commercial purposes or financial gain’ (Rådet for legeetikk 2021: 2). In both examples, the references to ‘commercial sale’ and ‘commercial purposes’ can be understood as moving beyond the donor’s motivation, thus implying that there is something inherently wrong with allowing commercial logic to govern egg donations. The NBAB generally described what some consider deeply problematic about such logic:

There is also concern that paying for gametes may contribute to the commercialisation of reproduction, where having children, in some cases, increasingly resembles just another business transaction. In the United States, fertility clinics have offered up to USD 50,000 for eggs from young women educated at the most prestigious universities. (Bioteknologirådet 2021: 4)

However, the opposition to commercialisation also stemmed from a feminist critique. One respondent believed that ‘[...] fundamentally, paying for eggs constitutes the objectification of the female body, even if the payment comes from someone other than the recipient’ (Kvinnefronten 2021: 4). This argument was used as a general but independent concern regarding financial compensation for egg donation. Another respondent went further, placing an even stronger emphasis on the fact that only (biological) women can donate eggs. The respondent argued that the guidelines ‘[...] should clearly state that donors have a gender’ rather than using the gender-neutral term ‘donor’, and expressed concern about the ‘commodification of the female body and reproduction, especially in a political climate where the very definition of a woman is being erased’ (Women’s Human Rights Campaign Norge 2021: 1, 6). Furthermore, based on the fact that eggs come from women and that far fewer egg cells are produced in women than sperm cells in men, the respondent argued that financial compensation exacerbates the already disproportionate pressure on women to donate eggs. According to the consultation response, any financial compensation for egg donation therefore leads to invisible systemic discrimination by the state against women:

Women are biologically female and thus the only source of ova, which are produced in limited quantities per woman, resulting in inherent limited availability. The relationship between supply and demand will thus always be disproportionate. Consequently, the starting point is also disproportionate, as there is a considerable need for female donors, both compared to the need for male donors and sperm and to the demand created by the number of donor recipients. With this also comes a disproportionate pressure on women compared to men. Financial compensation increases this disproportionate pressure on women, particularly on those in difficult financial situations. This leads to an intrinsic discrimination against women. However, in light of the fact that the word ‘woman’ is being removed from legislation and from the definition of ‘mother’, we believe that financial compensation for the donation of ova promotes invisible systemic discrimination by the state against women. (Women’s Human Rights Campaign Norge 2021: 1)

Discussion

Through this analysis, I identified three themes that describe the content of the public consultation on financial compensation for egg donation: the form and content of the motivation, fairness and donor store.⁵ Several of the arguments that emerged in the consultation, such as the opposition to commercialisation and the fear of involuntary and financially motivated donations, are recognisable both from the debate on compensation for egg donation (Holland 2001; Klipstein et al. 2021; Kool et al. 2019) and the debates on payment for organ donation (Albertsen 2020; Sterri 2021) and blood donation (Titmuss 2019). In contrast, other arguments identified in the consultation, particularly those that juxtaposed men and women to highlight the differences between sperm and egg donation, demonstrated a distinction between the debate on compensation for egg donation and similar debates on financial compensation for other types of donations (Bayefsky, DeCherney and Berkman 2016; Klipstein et al. 2021; Spilker and Lie 2016).

Some of the findings in the consultation documents, however, challenged conventional understandings and established definitions. The first theme, which dealt with the form and content of the motivation, related to the concern among some respondents that (excessive) compensation for egg donation could be tantamount to coercing women with financial difficulties into donating eggs. This understanding, that offering payment or some other benefit to perform an action could be considered coercion, is in contrast to an authoritative analysis of bioethics. Wertheimer and Miller (2008) posit that coercion requires a threat of harm to someone, making them worse off than they were before, or violating someone's rights; the mere absence of acceptable alternatives is not sufficient. Since compensation for egg donation (or payment for research participation, as discussed in the bioethics analysis) is an offer of money and not a threat of something disadvantageous happening if the woman does not donate eggs, financial compensation cannot be considered as coercion to donate.

Other respondents, however, expressed a concern that the primary motivation for egg donation among economically disadvantaged women might be financial gain. If this is the type of 'coercion' that the concern about involuntary donation refers to, i.e. that women donate because they need the income and not because they genuinely want to, this is more akin to undue influence. Payment or compensation represents undue influence if the offer of money causes a person to do something that goes against their own principles or better judgement (Grant 2012; Grant and Sugarman 2004). Consequently, the amount of money required to constitute undue influence is subjective and depends on the individual. Several respondents noted that the amount of compensation that might lead to financially motivated donation will be relative to the donor's circumstances. Part of the fear surrounding financially motivated egg donation, which was a recurring theme in the consultation, therefore seems to have been about undue influence.

Nevertheless, financial motivation was mainly juxtaposed with altruism in the consultation. The Storting passed the introduction of altruistic egg donation in Norway, and in the consultation documents, altruism was understood as the absence of financial motivation. No consultation responses discussed whether there were other motives besides financial ones that could challenge altruistic donations or whether there were other motives or factors that had to be in place for a donation

to be considered altruistic. The literature on altruism distinguishes between a broad and a narrow form of altruism (Kraut 2020). While an action that benefits others, regardless of the actor's motives, can be altruistic in a broad sense, an action is altruistic in a narrow sense if the actor is motivated by doing good for others. The concern about financial motivation in the consultation reflected altruism in the narrow sense, since both the authorities and the respondents cared about the donors' motivation.

Altruism is also commonly understood as the opposite of self-interest (Kraut 2020; Stich, Doris and Roedder 2010). The understanding of altruism as the absence of financial motivation in the consultation thus seems to align with the literature. Self-interest can also, however, encompass more than financial motivation, and there are other non-altruistic motives in addition to financial ones. Although one respondent used the term 'non-altruistic motives', only financial motives were highlighted in the consultation. A person who wants to enhance their social image, for example a woman who donates eggs to impress her friends or colleagues, can be understood as acting out of non-altruistic motivation without being financially motivated. Therefore, the absence of financial motivation does not seem sufficient to establish that a donation is altruistic, even though some may argue that it is a necessary condition.

However, we can also distinguish between financial motivation in a narrow and a broad sense. The narrow type of financial motivation pertains to money, while the broad type encompasses *all aspects* of human life. Some economists (e.g. Becker 1968; Levitt and Dubner 2010) consider all human behaviour to be related to economics in a broad sense, in that all our actions are evaluated based on the potential costs and benefits they entail for us. If this was the type of financial motivation being discussed in the consultation, it would be impossible to avoid financial motivation. Since financial motivation was considered undesirable and avoidable, it was applied in a narrow sense, pertaining specifically to money, in the consultation.

A final point about altruism and financial motivation is the difference between actions and motives. Actions are often complex, while motives are singular (Kraut 2020). The discussion on altruistic egg donation in the consultation referred to an action, while financial motivation referred to a *single* motive. It therefore makes sense that some respondents were concerned that the primary motivation should not be financial, or that financial motivation could challenge the principle of altruistic egg donation. However, there was no discussion in the consultation documents of whether actions can have multiple, and sometimes conflicting, motives, except for the NBAB touching on the idea that donors can have both financial and altruistic motives. Some authors argue that the notion of donations being either altruistically or financially motivated should be abandoned (Kool et al. 2019; Moorlock, Ives and Draper 2014; Pennings 2015). An empirical study of 1423 egg donors across 63 clinics in 11 European countries found that about one-third of the donors had both altruistic and financial motives, although most donated primarily for altruistic reasons (Pennings et al. 2014). In other words, there can be a risk of losing sight of reality if actions are reduced to singular motives.

By extension, unclear and inadequate definitions of key concepts can lead to agreements and disagreements between the different parties in the debate being obscured. Referring to egg donation as something that must be voluntary and altruistic, for example, leaves a conceptual void that can be filled with varying

definitions. On the one hand, voluntariness can entail both coercion and undue influence, where financial compensation seems unproblematic in light of the former meaning but may pose a major problem in light of the latter. Conversely, altruism can involve actions that result in positive consequences for others as well as the motivation of an individual to do good for others. Furthermore, if altruism is applied in the latter sense, the absence of financial motivation can be understood as synonymous with altruism or as one of several conditions for altruism. However, financial motivation can also be compatible with altruism provided that this is not the individual's primary motivation. If we add the possibility of the broad form of financial motivation, which covers all human actions, the question of financially motivated egg donation becomes redundant. In summary, without clearer explanations of the concepts, there is ample opportunity for miscommunication, leading parties to mistakenly think they agree when they are actually in disagreement (appearance of agreement), or conversely, think they disagree when they are actually in agreement (appearance of disagreement).

Finally, I highlight how arguments about women's rights – what we can call feminist arguments – came to light in both the fairness and donor store themes, but with opposite implications. On the one hand, several respondents emphasised that the compensation must reflect egg donors' burden and time usage, which was one of the prerequisites set by the Storting for the introduction of egg donation in Norway. As the differences in burden and time usage between egg and sperm donation were used as an argument for the higher compensation alternative, it can be understood as a defence for gender equality in terms of the time usage and burden that donation requires. Conversely, a few respondents believed that any payment for egg donation leads to the objectification and commodification of the female body. One respondent had a focus on the sex of the donor, arguing that since women produce fewer eggs than men produce sperm cells, there will be disproportionate pressure on women to donate eggs.

One way to define feminism is that '[...] feminism represents the recognition of women's equality in all areas, both public and private' (Pettersen and Wiestad 2015: 357). However, the same authors emphasise that it is more accurate to talk about feminisms instead of feminism. Based on this definition, and acknowledgment of multiple feminisms, the feminist arguments that emerged in the consultation can be placed in two different traditions (Dybvig, Dybvig and Wyller 2019: 463–467). In simplified and broad terms, the argument for equal pay between the sexes can be placed in the tradition of Simone de Beauvoir (1908–1986): women must step out of man's shadow and be treated on the same terms as men. Meanwhile, the argument against compensation, with an emphasis on the uniqueness of women, can be placed in the tradition of Luce Irigaray (1930–): women should not become like men, instead the feminine must come to light and be recognised on its own terms. This difference feminism has traditionally held a weaker position in Norway, while equality feminism, in line with the first argument, has held a stronger position (Halsaa 2006). The fact that the argument emphasising the uniqueness of women led to a position against all forms of payment for egg donation does not ensue from difference feminism. It is entirely possible to imagine that the peculiarity of women would lead to a requirement for higher compensation. The point, however, is that the two feminist arguments from the consultation can be understood as representing two different traditions, with different feminisms.

Conclusion

This study has provided insight into the various arguments used in the Norwegian debate on financial compensation for egg donation. The analysis of the public consultation documents revealed that the fear of financial motivation permeated the consultation and that altruistic donation was understood as non-financially motivated donation. Both the authorities and the respondents considered such altruism to be the right basis for donating eggs. However, it emerged that several similar arguments, such as those about voluntariness and women's rights, were framed differently in order to support both higher and lower compensation. An overarching finding was that key concepts, such as altruism, financial motivation and voluntariness, were inadequately defined and under-explored in the consultation documents. To provide a clearer understanding of the different positions in the debate and to elucidate both points of agreement and contention between the parties, more discussion on the different concepts would be beneficial.⁶

Notes

¹ Norway only allows the use of unknown donors, i.e. the donor and recipient do not know each other (with the exception of egg donation between female partners, known as partner donation). Unknown donors must not be confused with anonymous donors; the donor can be identified after the child reaches the age of 15 if the child wishes, but women cannot donate eggs for friends and people they know, even if they want to do so.

² Under current regulations, a woman can donate eggs up to three times and thus receive compensation for three egg retrievals.

³ NRK referred to this justification in a brief news report on 15 April 2021. In email correspondence with the undersigned, the Norwegian Directorate of Health replied (31 March 2023, case no. 23/12144-1) that they did not receive any justification for the choice of compensation amount when they were asked by the Ministry of Health and Care Services in an email dated 8 April 2021 to set the compensation for egg donation at 5% of 1G. The Ministry of Health and Care Services has not yet responded to my email enquiry (first sent on 3 April 2023, case no. 2023/2020) regarding the accuracy of the justification in NRK's news report, as no such justification has been referred to elsewhere in the public domain.

⁴ The documents are no longer available on the Norwegian Directorate of Health's website. I downloaded them on 23 February 2021 and archived them for future use. The references to the consultation documents do not therefore have download links.

⁵ In finalising this article, I became aware of a master's thesis in legal sociology: Johansen, J.H. (2021). *Klar som et egg? En feministisk rettsosnologisk analyse av legalisering av eggdonasjon*. Oslo: University of Oslo. The author used the same consultation documents as in my study, in addition to conducting interviews, and presents several interesting findings about the compensation scheme for egg donation. The author highlights, inter alia, the uncertainty regarding the knowledge about the side effects (and thus the burden) of egg donation and the lack of clarity on what is actually being compensated, as it is not specified how many eggs are to be retrieved from the donor. An overarching finding in the thesis is that equality in the Norwegian debate seems to be limited to the differences between the sexes, while there is little or no focus on the differences between women (intersectionality). The author is concerned that economically disadvantaged

women may be exploited and that a new class divide is emerging in which poor women end up donating eggs to women with (more than) enough money to pay for assisted fertilisation. The author therefore recommends that the compensation amount be determined on a case by case basis. In contrast to this study, the author argues that altruism can be understood almost synonymously with voluntariness, and concepts such as altruism and financial motivation are neither explored nor critically analysed. The master's thesis also does not provide a comprehensive picture of the arguments regarding financial compensation for egg donation in the consultation, but this was also outside the scope of the thesis, as the author was concerned with examining the entire legislative process.

⁶ I am very grateful for the constructive, friendly and wise feedback from two external peer reviewers, which undoubtedly improved the quality of the article.

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