



Closer Connections

When the donor is someone you know



By Jane Ellis



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When the egg, sperm or embryo donor is someone you know

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Donor Conception Network

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"With grateful thanks to all those DCN members who took time to talk with me, and to Marilyn Crawshaw for her wise comments and patient editing."

Introduction

Welcome to this booklet about known donation. We hope you find it useful and interesting. It is written primarily for those of you who are thinking about using a known donor and who want to find out more about it, and also for those who are considering becoming known donors. People who have already created their family this way and those who have become known donors may also find it thought-provoking and informative.

Its aim is to provide you with information to help you decide whether known donation might be for you. It includes some real-life experiences (with names changed). We have tried to cover how people arrived at their decisions, what challenges and rewards they have experienced and what, if anything, they would have done differently with hindsight.

What is a known donor?

Known donation can encompass a wide range of situations. A known donor may be:

- a family member
- a friend or an acquaintance
- somebody met through an agency, website or social media site specifically set up to help with finding donors willing to be known to recipients

What they all have in common is that from the beginning the recipient knows at least some personal details about their donor, and often a great deal more. This is information they can pass on to their child as and when they feel it's most useful.

Known donation should not be confused with identity-release donation. UK legislation (2005) states that all donors involved in fertility treatments taking place in a UK licensed clinic must be identifiable to the donor conceived (DC) child or children when they reach 18. This means that non-identifying details can be given to a parent of a DC child from prior to treatment right through until the child reaches 18. A DC person themselves can request such information once they are 16. From the age of 18 onwards, they have the right to request the donor's name, date of birth and last known address. The first time this can happen will be in 2023¹. The date at which the first cohort of DC people conceived since 2005 will turn 18 is 2023.

Known donation is also different from co-parenting. Co-parenting is an option for anyone not in a permanent relationship who wishes to raise a child with another adult, sharing parental and financial responsibility. ([Co-parenting blog](#))

Why choose a known donor?

For some people who are coming to terms with not being genetically related to their prospective child, an offer from within their wider family can feel like the next best thing.

¹ The 2005 changes also allowed previously anonymous donors to come forward and re-register as being willing to have their identity released. Some have done so and some of those donors have now been 'linked' to adults who were conceived prior to the changes.

For those seeking a donor from within their friendship group or via an introduction agency, it offers the chance for their child to have information or, sometimes, a personal relationship with the donor as they are growing up.

For some, using a known donor offers them not only more confidence about the donor's medical and social history but also the expectation that they will be kept informed about any relevant changes in the future.

For some people, using a known donor might mean a shorter wait for a donor or a less expensive route.

Marianne read widely about donor conception when she and her husband realised they would need egg donation to complete their family. She found articles by DC adults that made it clear that finding out about their origins as teenagers or adults and/or finding out the donor was anonymous had affected them profoundly and negatively. As a result, they decided not to pursue egg donor treatment abroad where a donor would either be anonymous or potentially difficult to trace. They also decided that they didn't want their child to have to wait until they were 18 to seek out the donor (if they wished), so came to the conclusion a known donor felt right for them. Marianne found their donor on a Facebook group and they all met for the first time in a park. Although this was initially nerve-wracking, it also meant that Marianne and her husband learned more about the donor's motivation and more about her as a person. They also started to discuss ideas about the extent to which they wanted to be part of each other's lives in the future.

Barbara and her husband Cal discovered they needed donor sperm to create their family. Whilst coming to terms with this and considering their options, Cal felt he couldn't face using a donor who would not be identifiable until their child was an adult. He thought that otherwise he would always be wondering who it might be. When Cal's brother volunteered this felt right for both Barbara and Cal, and subsequently they now have two children.

When Paul and his partner David imagined themselves in the shoes of the children they hoped to have, they decided that the children might well be curious about the woman who had donated the egg with which they were conceived. If the children wanted to meet her, or at least find out more about her, they wanted to be able to facilitate that, so decided they should use a known donor.

Legal situation in the UK and abroad

Using a licensed UK clinic

Known donation is legal in UK clinics except where this involves mixing sperm and eggs between close family members such as a brother and sister. The UK regulator, the Human Fertilisation & Embryology Authority (HFEA), is responsible for ensuring that clinics comply with legislation and your clinic or the HFEA website can provide further information:

'Using donated eggs, sperm or embryos in treatment', *'Donating your eggs'*

Using home insemination

If you are considering home insemination with sperm from someone that you know, then this is not regulated by the HFEA. However the HFEA offer some advice and information about it on their website: *'Home insemination with donor sperm'*. There are also different legal implications versus using a licensed clinic.

Finding a known donor

You may be considering using someone you already know well, such as a friend or a family member. Alternatively, you could consider signing up with an introduction agency that specialises in helping potential parents find an egg or sperm donor who is willing to be known to them.

You might want to look at the websites: Pride Angel and CoParents.co.uk. Although they are geared towards people considering co-parenting, they also offer known donation in some instances. However, there are certain risks and consequences involved in using a known donor whom you don't actually know, which ought to be considered.

It is important to understand the legal implications of the use of different types of donors. An article by a lawyer, Sarah Wood-Heath of Clarke Willmott solicitors in the Summer 2021 edition of the DCN Journal (Issue 24) helpfully compares the legal considerations when using an identifiable/identity-release donor and a known donor. The article can be found here: *'The legal considerations of using a known or unknown donor'*.

Natalie Gamble runs NGA Law and there is specific information on its website about known donation.

If you use home insemination, or you are going overseas, and are a single woman or in a female same sex relationship but not married or in a civil partnership, the sperm donor will be the legal father of any child born from this donation under UK law. In recent years there have been court cases resulting in donors being given similar access rights to those that might be awarded to an estranged spouse or partner.

If you are thinking of going abroad

If you are seeking your treatment abroad, think about the fact that every country differs in its laws and views about donor conception, which inevitably adds complexity. It is important to find out what the regulations are in the country in which you are considering having treatment.

The HFEA provide information and suggested topics to be aware of here:

<https://www.hfea.gov.uk/treatments/explore-all-treatments/fertility-treatment-abroad/>

What support is available to help you decide about, or prepare for, using a known donor?

Seeing a counsellor

If you are pursuing treatment through a UK clinic, the HFEA requires that both the donor and the recipient(s) will be offered counselling. The [British Infertility Counselling Association \(BICA\)](#) guidelines suggest a minimum of two sessions is made available, with the known donor (and any partner) being seen separately to the recipient (and any partner), plus at least one joint session with all parties involved. You are strongly advised to take this up, and indeed some clinics require you to do so as a condition of offering treatment. If your arrangement is outside of a clinic, consider jointly visiting a specialist counsellor. BICA lists counsellors who have training in this field.

There are a number of issues for all parties to think about before embarking on treatment (or indeed home insemination). It's important to be clear about the kind of relationship you would like to have from pregnancy onwards (or even before), to ensure everyone agrees.

The counsellor will explore with you how you arrived at your decision to use a known donor, and this donor in particular, and whether you have considered other options, for example using an identifiable donor. They will explore with the donor what their motivation is, and whether this is driven in any way by a sense of obligation or duty to you as recipients. Counselling sessions are also an opportunity to discuss the implications of health screening, the medical process and any legal issues. The counsellor will ask you to consider how and what you will be telling any existing or resulting children, (and current or future children of the donor), and to think about the complexities of the different levels of relationships these children will have in the future. What do you plan to tell family members, close friends and others, and could this result in changes in these relationships?

The counsellor will also check your understanding of the implications of direct-to-consumer DNA testing (such as Ancestry, 23AndMe), as growing numbers of people are discovering long-held secrets within their families this way.

It's also important to think about how all concerned expect the level of contact to work in the future; this includes taking account of the views and wishes of the donor-conceived child in due course. Counselling provides the opportunity to consider how any differences of opinion at this stage between recipients and the donor might be resolved.

Barbara identified several factors which she feels have led to the success of the arrangement she and Cal made with their donor (Cal's brother). One is that her brother-in-law and his wife had already completed their family and that their children were older. This meant that the two families remain quite distinct. Another is that the two sets of parents held many discussions and also sought the views of the wider family on some aspects. Barbara and Cal felt it was important that they kept each other up to date on what their nephews and nieces were being told.

Annie and her husband Paul have also been able to create their family with a donation from Paul's brother, Zac. Although the two couples and their family had talked it all through before contacting the clinic, Annie felt the counselling session was beneficial in pressing Zac and his wife with more questions than she had felt comfortable asking. Before proceeding, Zac and his wife also each underwent a fertility assessment to check that there were no issues should they want children of their own in the future.

Cathy donated her eggs on several occasions. At first she was an identifiable/identity-release donor but over time she came to feel that it was in the best interests of her own future family and any future donor conceived children that she be a known donor. She took the lead in finding potential recipients and built up a relationship with them before they all decided to proceed. The upside to the known donation process was the relationship that was nurtured between Cathy and the recipients as they navigated the journey of donor conception together. She said they supported each other and she felt well equipped to make informed decisions around the medical process and treatment. The downside of known donation was that she found the emotional investment hard to deal with on the occasions that the treatment proved unsuccessful. She also experienced less than helpful support from one clinic who failed to keep her informed of significant updates. She attributed this to the attention being given to the recipient couple and clinics' lack of experience with known donor situations.

Paula's close friend offered to be her egg donor, and Paula and her partner now have a 14 year old son. Paula felt it was important that her friend had completed her own family, so that, like Barbara, the two families feel quite distinct. It had taken Paula and her partner a year from her friend's initial offer to consider whether this was the way forward for them, before concluding that they felt comfortable and positive about it.

When expectations are unclear, unresolved or later change

It's important to consider in advance how everyone might handle any difficulties, including any changes of mind. These might include areas such as lack of clarity about levels of contact – or where one party decides later that they want changes to what was agreed. Or what to do if the treatment is unsuccessful; whilst of course it is very upsetting for the recipients, it can also leave the donor feeling they have somehow failed. If a donor does not yet have their own children, or their family is not yet complete, this might pose later difficulties in the relationship, especially if the donor has trouble forming (or completing) their own family, or if they later decide they want another child even though they had previously thought they didn't. Where the donor is a family member but this method of family-building is not accepted in their community, all involved might decide to keep it a secret, including from any resulting child. But what happens if one of them changes their mind about this, or tells someone else who in turn tells someone else? As ever with secrets, there is always a risk of it being let out of the bag.

It's never possible to cover all future possibilities but talking together at this stage might at least lay a good basis for dealing together with later issues, should they arise.

Donor agreements

Some people decide to create a written and signed 'donor' agreement prior to conception which sets down as many aspects as possible, including what role the donor will play (if any) in your child's life, whether he/she will have any parental or financial responsibility and who (including the children involved) will be told what and when. Such agreements are not legally binding because a court will always put the best interests of the child before those of the recipient(s) or donor in any future dispute. Also, they cannot guarantee the donor's role in the child's life or his/her legal and financial responsibilities. You should seek independent legal advice before drawing one up.

Some of the benefits include:

- they may be a good way to set out everyone's intentions prior to conception
- they may help avoid future disputes or misunderstandings
- they can be reviewed and/or changed over time, and are useful if a dispute were to arise

Being involved in a known donor arrangement relies largely and ultimately on mutual trust. Fertility counsellor Jana Rupnow says in her book 'Three Makes Baby' that it is common for known donor relationships to ebb and flow over time, sometimes being close and at other times more distant, whilst remaining connected. She suggests a number of questions for both the donor and recipients to consider:

- What role will the donor play in the child's life?
- How will the child refer to the donor?
- How will you stay in touch to provide health and medical updates?
- How do you plan to talk to your child about the donor?
- Do both parties agree about telling the child?
- How will you handle it if your child wants to meet her donor?
- How will you communicate with each other?
- How will you resolve conflict?

Marianne said it wasn't all plain sailing. Her husband found it very difficult to accept the idea of using an egg donor, and it took a little time for him to work through his grief that their baby would not be genetically connected to Marianne. It was only once they had come together on the decision that they were able to move forward and make plans with the donor. Together they have written a joint agreement about their decisions and motivations – they are aware it has no legal validity but they found it a useful framework for their discussions and it sets out clearly each party's wishes. Marianne wanted to state that she and her husband valued the donor's contribution and wanted to establish a positive relationship. In addition, they set down their commitment to meeting the donor's wishes wherever possible and to sharing appropriate information about the genetic relationships on both sides, including with the donor's own child. They agreed to meeting in person at regular intervals until such time as their child is old enough to decide for themselves whether they want that relationship to continue. They also agreed to share photos and video messages, although retaining privacy on social media sites. They talked about how Marianne and her husband should refer to their donor with their child and importantly they recognised that this relationship might ebb and flow as the child grows up.

Cathy has been an egg donor for a number of years, donating to five couples, two resulting in successful pregnancies. She says that looking back, her desire to support the prospective parents meant that she minimised her contribution as a donor, initially expressing it as giving away eggs that she didn't need. More recently, as a result of discovering accounts from some donor conceived adults who describe great yearning to connect with their parents' donor and their genetic half-siblings, she has rethought her role, and now believes that only known donation should be allowed. Although she acknowledges that it can be very painful for prospective parents who do not even know whether the treatment will be successful to dwell on how they want their future with their child to be, she now believes an informal contract is important. She thinks it can help both the donor and the recipient(s) to work through differences and align expectations – and form a strong bond for the future.

The DCN booklet 'Mixed Blessings' relates the story of a lesbian woman, Diana, who had a home insemination with a known donor who was a friend. Subsequent to the birth of her son the donor wanted to re-visit the original arrangement, asking for much more involvement in his upbringing. Diana reflected that despite the best of intentions, it had turned out to be much more complicated than she expected.

Some thoughts about family and what that means to you

It's worth spending some time thinking about what 'family' means to you as this underpins all that we've said so far. We all have a sense of the boundary of a family, of who is part of our family and who isn't. A known donor might cross that line; how important is that to you? When people realise they need donated gametes to have a chance to create their family they may feel particularly vulnerable. Some might have a deep fear (sometimes unacknowledged) that the donor will return at some stage in the future to claim 'his/her' child. For some, it can seem easier to view a donor as just someone who donates cells but the child that might result could end up seeing them very differently – and you yourself may change how you see them in the future. Attempting to identify that subtle boundary between who is and who isn't family by thinking it through and trying to imagine the future, perhaps with the help of a counsellor, can ultimately strengthen your ongoing relationships.

Jon and Alex are a gay couple living in the UK. Jon has offered to donate sperm to his friends, a lesbian couple living in the US and is currently at the stage of contacting a UK clinic. Their friends were very clear that they didn't want to use a US anonymous donor, and Jon and Alex supported their view. The logistics involved in dealing with the legalities and practicalities of shipping sperm to the US and clarifying the legal status of any child born are considerable. However, Jon and Alex have also made time to consider the emotional impact on themselves and ensure that all four of them are in agreement about openness and honesty with family and friends and with the resulting child. Jon and Alex have found it useful to imagine the issues they would want to think through if they themselves wanted to create a family. Their friends have been surprised about this but supportive.

Jon and Alex are very clear that the lesbian couple will be the parents, and envisage themselves as family friends. The distance between the US and UK feels not so far that they can't occasionally visit, but not close enough for each of them to feel they run any risk of encroaching on parental roles.

What about talking with your child?

In the DCN 'Telling and Talking for those with children 0-7' booklet, Olivia Montuschi advises that all parties need to be clear about expectations of the relationship between the donor and the child in the early years. She also suggests that it's important to bear in mind that it's not uncommon for unexpected feelings to arise in any of the parties as years pass. The main question in known donation is when the child should know who the donor is. Some families have decided to start with general facts when their children are aged 3-5 without indicating who the donor is, introducing their actual identity later on perhaps when their child has raised a question. Other families with young children introduce the donor's name during everyday conversations about how babies are made. The willingness and ability of all parties to see situations from the point of view of the others involved is key to the success of the arrangement.

Annie's son is almost 3. Everyone in the wider family is clear that her husband Paul is her son's Dad, and his brother Zac, the donor, is the child's uncle. She has adapted the Our Story book quite simply by using the words 'Uncle Zac' instead of the donor. Annie first read it to her son when he was a baby in order to practice the story; she found at first that she became quite emotional when reading it but in time that lessened considerably.

The 'Telling and Talking' booklet for those with children aged 8-11 offers examples of how to build on your discussion with your child, for example:

'When we found out that we were going to need some help from another woman to help us have a baby, we wanted it to be someone who was as close to your mum as possible so we asked Auntie Andrea...and she said 'yes' so she's your donor'.

Olivia adds that although the parents might feel immensely grateful to their donor, it's wise to remember to let their child decide for themselves how they feel about him/her as time goes by.

Paula started talking to her son about his origins when he was a baby, to give herself practice in feeling comfortable with the story. She always added who the donor was. From time to time she would check in with him as he grew up. At one of those times, when he was 8, he said he did have some questions, so they went through the whole story but in more detail than when he was younger. He was grappling with the concept of the genetic link and asked her: 'So is she like my other mum then?' Paula thought if it helped him to make sense of it all, then it could be put that way. Because Paula and her husband are confident that they are their son's parents, that question didn't throw them. Their son seemed to find the answer made sense to him and so far has had no further questions. When confiding to her chosen friends about donor conception, it didn't occur to her to ask those friends to keep this confidential, as it seemed so obviously a private matter. One of those friends told an acquaintance who Paula wouldn't have wished to know. Looking back, she wishes she had emphasised to her friends that confidentiality was very important to her.

Cathy talks about how she separates in her own mind her own family and the recipients' family. This includes acknowledging that physical resemblances exist and their potential to trigger strong emotions. She says she didn't feel any special bonds with the two DC children at the point they were born; she was just happy that she could help make their births possible. Now that she views her involvement in their creation through a different lens, she realises that the importance given to the relationship between her and the DC children should be decided upon by the children themselves. So she is open to being the person they frame her to be, whether that be a relative stranger, distant family friend or a biological parent. She

has tried hard to make sure that the recipients of her egg donation feel positive and comfortable about her being an additional branch on their family tree, and although she does not consider them her 'family' in a social sense, it is a unique and special relationship. If the children contact her when they are older she is happy to be guided by their own needs in defining their relationship. But she says it nevertheless remains difficult for her to balance the children's possible future needs with the recipient parents' needs, alongside her own family's needs.

Judy donated eggs to her aunt, who is now the parent of a 3 year old son. She describes the conversation that she and her aunt had about names: technically the son is her cousin (as well as her genetic child) but as she is 28 that seems a bit odd, so she refers to him as her nephew, and he is likely to grow up calling her auntie. Judy said she felt her role was very small compared to her aunt's, and is completely comfortable with her aunt's policy of being open with her son about his origins.

Future challenges

Cathy and Judy have both talked with their recipients about the time when the children are older and navigating for themselves their relationships with those to whom they are genetically related. Although you cannot be sure how the children might feel, it is well worth donors and recipients thinking through the issues that might arise so as to be prepared. Developing understanding of the meaning of genetics, for example, might have special resonance for the pre-teen who has an auntie who is actually their genetic mother (egg donor). Distinguishing 'social relationships' from 'genetic relationships', defining the relative importance of each (for all the parties and especially the children) and finding the right language to use is complex.

Paul and David have friendly relationships with both their known egg donor and their surrogate. When their children were toddlers their surrogacy agency had contacted them to say that two half-siblings of their twins had been diagnosed with a heart condition. Paul and David's children were checked and found to be fine, but it prompted them to ask how many half-siblings they had.

They were shell-shocked to discover the answer was a total of 9 across 6 different families. Paul and David had been so busy raising their twins that they hadn't given half-siblings a thought. Now they have to establish whether, when and how they want to communicate with these families and what all this might mean to their twins as they grow up.

What can research tell us?

There is as yet only a limited amount of research regarding known donors:

1) The 'Relative Strangers' study by Petra Nordqvist and Carol Smart² involved a number of heterosexual parents, lesbian parents and grandparents of donor conceived children and looked at their experiences of having a child/grandchild born through donor conception. Thirteen couples had conceived using a known donor, of whom 10 were lesbian couples using sperm donation and the rest were heterosexual couples using egg donation. Many couples reported having quite a degree of involvement in one another's lives. The researchers concluded that there is no custom or practice to guide families in knowing what to expect, or a script to make sense of the connections. They found that parents discovered various ways to manage what the researchers called 'relatedness': some emphasised the social aspects of kinship and minimised the genetic ones, while others nurtured the genetic connections. They relate a story of a lesbian couple with a friend who had been their (known) sperm donor to illustrate how things can change over time. The friend gradually wanted to become more involved with their child and when his mother died, the dynamic changed hugely as his father (i.e. the child's biological grandfather) became an important figure in the child's life.

2) The more recent Curious Connections study by Petra Nordqvist and Leah Gilman focussed on the impact of donation on donors' everyday lives and relationships. Both identifiable/identity release and known donors were interviewed.³

3) A seminar called 'Known Unknowns: the Pros, Cons and Consequences of Known Donation' was held by the Progress Educational Trust in September 2020⁴. The speakers included Petra Nordqvist from the Curious Connections study, Nina Barnsley, the Director of DCN, Erika Transfield from Pride Angel, Natalie Gamble from NGA Law and Natasha Fox, a donor conceived adult. Natasha described how much she wanted to connect with her anonymous donor as she grew up, but so far has been unable to locate him. Other speakers outlined both the joys and challenges for families and their known donors. The event was filmed and is available [here](#).

4) A longitudinal investigation of egg donation families in the UK has been ongoing for 10 years, run by the Centre for Family Research at Cambridge University⁵. A subset of 9 families had a child by egg donation from a sister or sister-in-law and their experiences were examined. Most recipient mothers confirmed positive relationships between the donor and members of their family, and satisfaction with the level of involvement and social roles that had been developed. However, most of the children had not been told by the age of 10 either that they had been conceived using egg donation or that the donor was also their aunt. Follow up work, including with the children themselves, has been planned, which may well have a bearing on the outcomes.

5) In a study in the US by Goldberg and Allen⁶, 11 donor conceived adults aged 19–29 years who were raised in lesbian families were asked how they made meaning out of their relationships with

² The study has been written up in the book *Relative Strangers* (2014) by Petra Nordqvist and Carol Smart published by Palgrave Macmillan

³ You can read more about the results of this study at the following links: ['Being an egg or sperm donor'](#); ['Can 'known' donors show us the future of egg and sperm donation?'](#)

⁴ You can read the report of this here - https://www.bionews.org.uk/page_15205

⁵ Here is one of the papers from the study - V. Jadva, P. Casey, J. Readings, L. Blake, S. Golombok, *'A longitudinal study of recipients' views and experiences of intra-family egg donation'*, *Human Reproduction* (2011), Volume 26, Issue 10, October 2011, pages 2777–2782

⁶ You can read a paper about it at A.E. Goldberg and K.R. Allen, *'Donor, dad, or...? Young adults with lesbian parents' experiences with known donors'* - *Family Process* (2013), Volume 10, Issue 10, June 2013, pages 338–350

known donors. Most of their mothers had chosen known donors who were family friends and most participants had grown up knowing who the donors were. Their contact ranged from ‘minimal’ to ‘involved’. Participants perceived their donors in one of three ways: as strictly donors and not members of their family; as extended family members but not as parents; and as fathers. The research suggested that young adulthood is an important developmental phase during which interest in, and contact with, the donor may shift, warranting a transfer of responsibility from mother to offspring in terms of managing the donor-child relationship.

What can donor-conceived adults tell us?

There is a wealth of personal stories and reflections from donor-conceived adults available, but little from those with experience of having a known donor.

We Are Donor Conceived conducts an annual survey of its members. Its latest survey, in 2020, revealed that 88% thought that it is a basic human right to know the identity of both biological parents, with 33% supporting a requirement that donors be available for a relationship with the donor conceived person from birth.

Donor-conceived adults’ comments in the survey:

‘Don’t donate for the money. Understand that you are having children, playing a part in creating people with their own complicated emotions and thoughts. Be prepared to have some sort of a relationship with your offspring.’ [Sperm and egg donor conceived person from USA, age 21].

‘Not all donor conceived children seek a relationship with their donor, but many do and many, myself included, feel incomplete without knowing at the very least who the donor is. If you are donating—whether it be for the money or as a charitable act you should be prepared to be open to having a relationship with your donor children because many will likely want to get to know you and therefore get to know themselves.’ [Sperm donor conceived person from USA, age 16].

‘They [parents] need to know that if having a genetic connection to their child is important to them, it will likely be important for their child to know their full genetic parents.’ [Sperm donor conceived person from USA, age 45].

Similarly, the Donor Conceived Alliance of Canada state that they want to see all donors be identifiable from birth (<https://www.donorconceivedalliance.ca/goals/>).

They say:

For many DCPs, the use of known donors is considered ideal, in order to allow the DCP to grow up with a connection to their donating biological parent, and to be able to grow up with any half-siblings. Just as parents can love more than two children, children are able to love more than two parents! We understand that the choice of using a known donor is sometimes worrisome for intended parents, who may be concerned that having an additional adult figure in their lives could make things “too complicated”. We hear from some parents that they may worry about the other biological parent wanting to have custody, or wanting to be “too involved” in their child’s life. To avoid that potential scenario there should be more supporting legal frameworks (e.g. legal contracts) and counselling services to support directed donation, such as through established fertility clinics.

What resources are available?

DCN publications

The **Our Story** series for small children doesn't directly reference known donors but it is flexible enough to add in the name of a known donor <https://www.dcnetwork.org/catalog/books-children>

The **My Story My Gift** series for donors has a known donor option.

<https://www.dcnetwork.org/catalog/books-donors>

The **Telling and Talking** age-banded series to support parents in talking to their children has specific sections for those parents who have used known donors. So does Continuing the Conversation for those with older children, and Mixed Blessings for those whose families have both donor conceived and non-donor conceived children. <https://www.dcnetwork.org/catalog/telling-and-talking-series>

Marianne said she found the two Telling & Talking booklets about talking with friends and family useful. She has also given her donor the My Story, My Gift book; this is for known donors to read with their own child. Marianne also found the DCN Chats and WhatsApp groups on known donation, offered as part of DCN membership, helpful.

Barbara found the most useful resource for Cal and herself was talking to other DCN members who had been through the same experiences. She particularly remembered another parent saying to them, 'one day this won't occupy all your thoughts'. She found that hard to believe at the time, but it has turned out to be true.

Annie and Paul also found the most useful resource was talking to other families in DCN, which helped reduce their sense of isolation considerably. Annie finds DCN's WhatsApp Group and local groups supportive, but would have liked to be able to find more research and reading; she is curious to know how common known donation now is.

Further reading and listening

1) Personal stories on DCN Website:

[Loss, learning and luck: Sarah's journey to motherhood](#)

Sarah writes about becoming a mother through egg donation from a family friend. She was open with friends and family during the process, finding most people were supportive although there were a couple of occasions where people made thoughtless comments during the process. Sarah writes honestly about both the joys of parenthood and about the complexity of the feelings she experiences when her family and her donor's family all get together [DCN Journal Summer 2021, Issue 24].

[Dad through sperm donation by a known donor](#)

Brian talks about becoming a dad through sperm donation from his close friend Rob.

[Making our family - You never know where you find a donor](#)

Deirdre shares her journey to pregnancy through known egg donation, and how DCN offered her opportunities to consider the realities of such a decision for the long-term benefit of her family.

2) Olivia's View:

[If anything other than completely open embryo donation is wrong, can egg and sperm donation be far behind?](#)

This blog post suggests the best way forward for families connected through embryo donation is to agree to raise their children in full knowledge of their origins and nurture a relationship between the families.

3) Defining Mum:

[Allie's Story: What I wish I'd known about using a known egg donor](#)

This article articulates very clearly what happened when the author faced her fears over using a known donor.

4) The Stork and I Podcast:

[S3: 10 Using a known donor to become a solo mum](#)

Mel Johnson chats to Joscelyn Webb, solo mum to a nearly 4 year old son. Joscelyn lives in Hong Kong and travelled to the UK for treatment using a known donor. Joscelyn describes in detail about how she approached potential donors and about the discussions with her donor leading to the agreement they drew up together. She also talks about the book she has written for her young son about his donor origins.

5) Hey Reprotech:

Alison Motluk is a Canadian journalist who publishes a weekly newsletter, Hey Reprotech.

[She donated eggs to her sister — how did it turn out?](#) In this episode she re-interviews a woman who had donated eggs to her sister.

[When donor becomes dad](#) - This article describes the experience of a lesbian couple who asked an acquaintance to be their sperm donor.

6) Fertility Network UK:

This guide is from Fertility Network UK for those thinking about known egg donation:

<https://fertilitynetworkuk.org/known-egg-donation-guide/>

7) Research article:

Shifting to a model of donor conception that entails a communication agreement among the parents, donor, and offspring:

<https://bmcomedethics.biomedcentral.com/articles/10.1186/s12910-022-00756-1>

This recent study (2022) concludes that 'ethical and practical issues that complicate donor anonymity are driving a shift to non-anonymous donor conception, in which all parties come to a communication agreement.'

8) BBC:

An article exploring a growing trend for LGBTQ+ people to choose friends as donors:

<https://www.bbc.com/worklife/article/20220128-the-millennials-choosing-friends-as-sperm-donors>

9) Progress Educational Trust:

More insights from the Curious Connections Project:

<https://www.progress.org.uk/how-donating-sperm-or-eggs-affects-donors-own-lives-and-relationships>