



TELLING ABOUT DONOR ASSISTED CONCEPTION

*Interviews
with
donor conceived
adults,
parents and
counsellors*

April 2006



Infertility Treatment Authority

SUMMARY

This report from the Infertility Treatment Authority, Victoria, presents results of interviews conducted with donor-conceived adults, parents who are recipients of donated sperm or eggs, an egg donor, and infertility counsellors; 34 people in all. Discussion focused on telling donor-conceived people about their conception and resources that would assist parents and donor-conceived people to manage the information. Although it was generally accepted that concealment was no longer desirable and that children should be told as early as possible, parents often still found telling very difficult and would value specific guidance on how to tell, including detailed accounts from parents who had told their children, meetings with donor-conceived people and other parents, and a range of printed and electronic resources for children of all ages.

Resources are needed for donor-conceived children or adolescents who have always known about their conception and those who have only recently been told, and should cater for a variety of family types. Counselling and resources must also recognise the diverse individual responses to donor-assisted conception. Donor-conceived adults may need help in identifying their donors and opportunities to meet other donor-conceived people. Although not everybody felt in need of counselling, the service should take account of 'telling' as a process and not an event, and thus be available long after donor-assisted conception has taken place, for parents, donor-conceived people and families.

Sperm donation has a long history of assisting conception in couples where the man is infertile. It has an equally long history of secrecy. Now, however, the justification for secrecy is being questioned. Adults from around the world who have learnt that they were donor-conceived are arguing that it is their right to be told. Parents who once took for granted that it was best for all concerned if donor insemination was never mentioned are wondering about how to tell their donor-conceived children.

Today, donor insemination extends beyond infertile heterosexual couples to single women and lesbian couples. Such women are less likely to conceal their use of donor sperm, which has contributed to making the community in general more aware of donor-assisted conception.

And donor-assisted conception is no longer confined to sperm donation. Many babies have been born from eggs or embryos donated to their parents.

The Victorian Infertility Treatment Authority (ITA) has a statutory responsibility to maintain registers of conception by donor and to assist donor-conceived people to learn the identity of their donors. The Authority recognises the complex personal and social ramifications of donor-assisted conception, and that parents have understandable reasons for choosing not to tell. It is evident, however, that many parents do not know how to set about telling. Rather than deciding not to tell, they just keep putting it off. The Authority is concerned that appropriate resources are made available to help parents who want to tell their children about their conception and to donor-conceived people who are trying to comprehend what this information means to them.

To this end, ITA spoke to people who are personally involved with donor-assisted conception. This document reports what they had to say.

WHO WAS INTERVIEWED?

In seeking volunteers, ITA advertised in the newsletters of infertility and donor conception support groups and the ITA newsletter; arranged for stories in newspapers; and asked Melbourne clinics and their satellites to post notices about the study. ITA also wrote directly to accredited counsellors. Potential volunteers were offered a choice of individual or group interviews and assured of confidentiality.

Recruitment was directed at the following groups:

- Parents who had used donor insemination before 1 July 1988, when legislation was first put in place in Victoria and birth registers were established. Most of these involve anonymous donors.
- Parents who used donor-assisted conception after 1 July 1988, whose donors are not anonymous.
- Donor-conceived adults (over the age of 18) who, by definition, are aware of their means of conception.
- Counsellors involved with donor-assisted conception.

These strategies produced a total of 34 volunteers, comprising:

- Six donor-conceived adults, including the daughter of one of the fathers interviewed. Two women were interviewed together; three women and one man were interviewed individually.
- 17 recipient mothers (14 of sperm, three of eggs); five were interviewed together, the rest individually. Three were the partners of fathers interviewed. Their children ranged from infants to adults.
- Four recipient fathers (three of sperm, one of eggs), interviewed individually. One was the father of one of the donor-conceived adults interviewed; another three were the partners of mothers interviewed. Their children ranged from infants to adults.
- One egg donor.
- Six infertility counsellors who participated in a group interview and two single interviews.

All participants were encouraged to discuss 'telling' from their own perspective and to reflect on both their experience and potential improvements, including in the provision of resources.

Interviews were conducted between October 2003 and October 2004. The interviews took place at ITA's offices, with the exception of one at the participant's home and four telephone interviews. Detailed notes were taken of telephone interviews and the rest were audio-recorded, with permission; transcripts were used for analysis.

WHAT DID THEY SAY?

What follows is a summary of the discussions about whether donor-conceived people should be told about their conception, who are the people who should tell them, the age at which telling is most appropriate, what language should be used, and the kinds of resources that would help donor-conceived people and their parents. The text is interspersed with quotations from donor-conceived adults and recipients of donated sperm and eggs, in recognition that participants in donor-assisted conception value the insights to be gained from other people's experience.

Should donor-conceived people be told?

All those interviewed affirmed or implied the desirability of telling children that they were conceived with the help of donated sperm or eggs; no-one argued against it, although some parents had not yet told their children. As the mother of three adult donor-conceived children said, "I definitely advise anyone never to lie to their child." One mother said that, before she had conceived with donor insemination, "having read the literature and spoken to people we had known through the support groups, we knew it was best to tell the child." Another couple had adopted a baby before having other children with donor insemination, and transferred the desirability of telling children about adoption to the case of donor-assisted conception.

Mother of two toddlers conceived through DI:

"We told my parents, my sisters, his parents, and brother. We held off for a bit telling friends, but then we started getting stressed about it, going through the process and trying to get pregnant. We had made it clear to our friends that we were going to have a family. After a while, when we still didn't have kids, it was noticed. And, of course, people started asking questions, like why we weren't pregnant yet. So we told people, which made it so much easier. But these were my friends [overseas]. It was strange for us in Melbourne because within three to four months I fell pregnant. So sometimes it was hard, in hindsight, to find the way to talk about it or bring it up. Sometimes with friends in my mothers' groups, I put out feelers. Then if someone seems interested I usually explain. Most people haven't got the foggiest about donor sperm or egg. I feel I am educating the masses. All our friends would know. A few acquaintances might not know. People just say things and they just presume."

However, the accounts included information about parents (usually but not always fathers) who were highly resistant to telling their children, commonly because they feared losing their love and respect or causing the disintegration of the family. One mother of a teenager conceived by sperm donation reported, "I would have told from day one, but I didn't, to protect my husband."

The desirability of telling children does not imply that everyone should know. The need for privacy in such intimate matters also has to be considered. The wider family is not always told, let alone the family's social circle. Much depends on trust and the degree of intimacy. For example, one mother said: "I still haven't told one of my sisters. She is a total and utter blabbermouth and would use it for gossip fodder, and I didn't want it to be an item of gossip. But I need to tell her soon." In contrast, another mother reported that her extended family is not concerned about their use of donor insemination, just "relieved" at her pregnancy after years of trying. Some parents chose to tell the staff at crèche or the teachers at kindergarten or school, to ensure that they could respond appropriately to the child and provide an accepting environment. However, there is also apprehension that donor-assisted conception is not widely understood in the community, which is one reason given for avoiding it as a topic for general conversation. And, as one mother said, "I don't feel I need to enlighten every man and his dog."

Furthermore, some people feel that others should not be told before the child knows. The mother of a toddler conceived through donor-insemination said, "We think our son deserves to know before everyone else in the world knows. Once he knows, the whole world can know; that information is his." A couple whose infant was conceived by egg donation swore their family to secrecy and told some of their acquaintances that they "got lucky and conceived naturally", so that it wouldn't be discussed before the child was old enough to understand.

Mother of baby conceived with donor egg:

"I feel much more confident in my role than I did earlier on. She's very like her brother and her father, so that makes things easier, as neither child has my colouring or characteristics. During the pregnancy I wondered where she would fit in. I'm very like my mother...and I wondered what this would mean for her and whether we would be close. My daughter won't have that biological link and she will have to deal with that. What I would like to do is normalise the experience for her. Because of that, I have second thoughts about telling anyone else until she knows. I don't want her to know and then to think that all of our friends have known about it before her. I want to be really open with her."

Other families have practised openness with everybody from the beginning.

The variables that appear to influence practice and opinion include individual circumstances, personalities, feelings about being the recipient of donor sperm or eggs, expectations of what it will mean to children, the degree of family support, and whether the community is perceived as accepting or condemning donor-assisted conception.

Who should tell?

No one other than parents was suggested as appropriate to tell donor-conceived people about their conception. The task did not clearly fall to either mother or father; if telling happened early and over a long time, either or both could deal with it as the occasion required. One donor-conceived adult who was told at about ten advised that it should be “the parent that is closest to that kid” if the parents had separated. She thought it would be best for both parents to tell the child (and much younger than ten) if they were still together, but that “if you have two divorced parents and they both sit you down, your stress levels go through the roof when you’re a kid because you know something is about to happen”.

Donor-conceived adult, told as a young adult:

“In order to have not gone through this pain, from the time I could hear I would have liked to have known, to have that honesty. You can never get that trust back. Especially from your parents, who teach you most of the things in your life...Since that trust was ripped away, I have difficulty trusting anyone. Especially knowing that others knew, everyone other than my brother and I knew, and they didn’t say anything. We aren’t weird or bad. Why keep it a secret? It should be spoken about. I feel a donor offspring must know the truth. Why can’t it be an option on the birth certificate to register everyone, including the social father and the donor? They should all be there. It’s such a lie. I am also very frightened of cross-breeding issues for my children and the generations after. I should have access to that information and to medical information. I have had medical issues with my children,...but we can’t trace where it’s from. It’s a jigsaw of unfitting pieces. This needs to be about fulfilling the needs of the baby, its rights. It’s going to be a human being...Dad doesn’t want to speak about it. Mum sometimes will, other times not. She just wants me to forget it. If, then, they’d had more knowledge and different support, that would’ve been good. They didn’t even have counselling, which wasn’t available then. Instead they’ve not addressed their issues. So all their issues have been dumped on us and added to other issues. My friends will ask me, ‘Why don’t you keep searching?’ But not with my parents still alive. It’s far too difficult, too much hurt for them...Parents need to ensure that the child doesn’t find out through anger. They need to be bringing the child up with love, trust and honesty. If they want you to be honest with them, they need to be honest with you. I think about it all the time.”

If they had postponed the task, some parents were moved to tell their children to avoid others getting in first: “I want to tell my children the story before they hear it from other people,” said one mother. The sister of another woman “became estranged from the family and blurted out the secret to my mother, which was another reason to tell my daughter before she found out via other people.” It is common for people who have used donor-assisted conception to tell someone else about it even if they have not told their child, because they need the emotional support that comes from sharing a difficult or emotional journey.

There was also an awareness of other potential sources of suspicion or information, prompting parents to act to ensure that the revelation came from them. One mother said that she told her daughter, despite her estranged husband’s wish to keep it a secret, so that she did not find out “through medical records, or stumble across it somehow, or through blood groups.”

The secret of donor-assisted conception was experienced as a burden to some parents, who described themselves as relieved after telling their children. One mother, who had told her primary-school-aged child, said, "I felt very calm, and then afterwards I felt euphoric that literally I had a load lifted off my shoulders because I no longer carried the secret...[My husband] felt very positive and very relieved." Furthermore, once they had told their child about his conception, this mother found it easier to deal with other people's comments on family resemblances: "It was all of this stuff like, 'You've got your mum's hands and your dad's wrist'. Not that every time someone says that we say, 'No, she hasn't', but it was sort of easier for him to be honest."

Although parents did not want other people to be the first to tell their children, they can appreciate support. Teachers may not know that they have donor-conceived children in their classrooms, but it was suggested that those who teach sex education can provide back-up to parents by teaching about different ways of conceiving and the various reasons for using a donor. Some people hope that this will also contribute to a more aware and accepting community.

When should telling occur?

There were two broad categories of when telling should occur: from the outset, and when the child 'can understand'. In practice, donor-conceived people were also told (or discovered) as adolescents or adults. The counsellors advocated disclosure in infancy or at least when children are very young, and cautioned against telling donor-conceived people during adolescence because of likely disruptions to 'identity formation'.

Parents who advocated telling children from infancy included a mother who said of her daughter (conceived by donor egg), "I've talked to her probably when she was far too young to understand, but I've told her right from the word go." This mother wanted to avoid it becoming a problem she had to confront when her daughter was a teenager: "She'll ask trickier questions as she gets older, but I think it's pretty straightforward. I think it would be a big shock for a kid learning at a later age." Early disclosure was also to ensure that family relationships were not damaged by potent secrets surrounding the donation from a family member, "so the four of us agreed that it would be completely open and everyone would know about it." The child has talked about it with the donor's children, who "are fascinated by the fact that she's a half-sister"; she enjoys knowing that she is "not really an only child".

Father of DI-conceived pre-school child:

"There was never any thought of concealment or not answering questions...I think he was about two [when we began], but we haven't laboured the point with him...We have always mentioned it in front of other people with him and the extended family, so he knows the term 'donor'. We have a couple of books: Where Did I Come From? and a book specifically about donor sperm, but I don't think he found them exciting enough, or violent enough; no superheroes! They weren't that successful when he was three, and now he's four it's still not that interesting for him...We probably gave up on the books for a little while...At the moment I'm waiting for him to come up with a question that can lead into something, rather than just trying to reiterate our version of it... With children, you need to partly lead and partly be led by them. Once he gets really curious about it, we'll need to make a different effort."

Some parents prefer to wait until their children are older. One mother is preparing the ground by telling her two-year-old son that he is 'special'; she intends to tell him about his donor conception "when he's developed an understanding, as he moves on and asks more questions; about four-and-a-half or five years". The father of a toddler and a baby said that he and his wife want neither child to remember ever being told that the younger one was conceived by egg donation, preferring it to be 'casual' and part of stories told from infancy. At the same time, they do not want outsiders to know until the children 'fully understand', and have "sworn the family to secrecy". An egg donor plans to tell her son about the donation when he is aged ten and "has a greater understanding of medical terms". This is complicated by the fact that the friend to whom she donated has not yet told her child (who has started primary school). A father said that the right time would be when his daughter is about six or seven. To ensure that disclosure occurs, he and his wife have "made arrangements so that if something happens to us, a family friend would tell our daughter." Parents who believe it is their children's right to know are aware that others may not share their views, and fear the consequences: "My wife and I think that family members could just brush it under the carpet." A mother who thinks they will tell their child (conceived through donor insemination) when he is five ("When he's old enough to understand") plans that the family will go to a counsellor who will help them to tell him.

Some parents consider that children "need to understand the process of conception before introducing donor sperm," as one mother put it. However, one of the barriers to telling appears to be the linking of disclosure of donor-assisted conception to the 'where babies come from' talk. Many parents who conceived without assistance find it difficult to talk about baby-making, so it can be even more of a challenge if you then have to go on to describe using a donor, especially of sperm. Those who talked about donor-assisted conception from birth were, in effect, detaching that information from the often alarming birds-and-bees routine.

When parents disagreed about the need to tell their children, telling was sometimes precipitated by an unexpected event. For example, one mother persuaded her husband to let her tell their primary-school daughter that she had been conceived by donor insemination because he became very ill and they did not want him to die leaving the daughter in ignorance. Another mother decided to tell her son when she and her husband separated; the child was then five, but disclosure did not occur until the child was ten: "I was nervous, but I wasn't about to let the step-mum blurt it out." This mother has no regrets about when or how the child was told; at 14, he remains untroubled by the knowledge and has corresponded with his sperm provider. According to his mother, "He would not have wanted to be told when he was an adolescent; he appreciates being told when he was ten."

A donor-conceived adult recounted being told in her twenties "in spiteful circumstances" by her mother after her parents had divorced. They were arguing about something to do with her father's father when her mother said, "Well, he's not your grandfather, because your father's not your father. You were conceived through artificial insemination and your father is an anonymous sperm donor." The young woman—one of several who reported being told in anger—was left with "a massive sense of distrust"; she is among those who point not only to the damage wrought by long-held secrets but to the difficulty of keeping them: "People go into this treatment thinking that they will be together for ever. They go into this environment thinking they are going to keep this secret, but then they separate, and divorce rates are rising. You can't assume that you can keep that secret."

Another donor-conceived adult was told as a teenager by both parents together. She is grateful that her parents told her, especially that it was her father's initiative, but remains troubled by being "not related to half my family".

A third donor-conceived adult and her twin were told about their conception by IVF, but not directly that it also involved donor insemination. It was not until they were discussing donor-assisted conception in a Year 9 Science class that the penny dropped for her: "Ah! I think that's how I was conceived!" She describes herself, in her twenties, as untroubled. "I sometimes joke about it: 'I've got really bad skin! It must have been the donor!...' I think for my brother it's been a bit more of an issue...but he doesn't have big issues." This young woman does not feel that her conception was concealed from her; it was something that she just did not comprehend until she was 13. "It was never a secret, and actually I remember because we didn't understand the concept that one of our parents was infertile; that was a big issue for them. I remember Mum telling everyone that 'Dad's infertile'... Quite obvious, if you thought about it."

Similarly, another donor-conceived adult was told as a young man, but had already worked it out for himself because the subject had been discussed in front of him. His brother, too, was conceived by donor insemination, but to him the news came as a shock. "It wasn't really such a huge drama for me...I felt better for Mum that she didn't have to hold in this secret any more...My younger brother was absolutely furious, and yet he doesn't realise how much trouble our parents went through to have a baby. He would never have been born if they hadn't gone through that." This young man attributes his brother's reaction to differences in personality and the fact that he was still living at home when his parents were divorced and he found out about his conception when he was emotionally vulnerable.

Personality and age are also used to explain different responses by a young woman and her brother: "I think I was told at the wrong time. The only reason they waited until I was nine-and-a-half was because [my brother] was old enough to be told. My brother was told at six. He says if he had to do it to his children, he'd do it at six...He swears by eight or six is the best time to be told."

Father of adult donor-conceived twins:

"From a very early age we talked about our adopted son's story, around four or five. There were times when he was eight or nine when he wanted to find his natural mother, but we said, 'Not yet'. When he was in high school, we went through finding out more information, but he's not yet made contact. We talk about it occasionally. We've left it up to him...With adoption, it was accepted that it was healthy to tell, and legislation was coming in that children could gain access to information. I was expecting similar legislation to come in regarding donor assisted conception...With the twins,...at age 13, there was a discussion of biology, and my daughter asked, out of the blue, 'Were we conceived with donor sperm?' I answered yes. It was very matter-of-fact. She was aware that there had been an issue of infertility. The issue was then, how do we tell the other children?...If my daughter hadn't raised the subject, would I have told them? Yes and no. Deep down, I knew it would have been raised at some point and I would tell them. I didn't have a strategy to tell them unless they raised it first. I thought it would come up later in life when they were trying to have families of their own...We were shocked when the question came. I think my wife found it easier that my daughter asked me first...They have openly talked about it with their friends. It comes up from time to time with jokes about appearance; it's just something that they know...There have been no adverse reactions."

The donor-conceived child may have siblings who may not themselves be donor-conceived. Do parents tell their children all together? If not, how do they do it? There were different approaches. Some parents told the first child about their own conception (if it was by donor) and explained the conception of subsequent brothers and sisters as they happened. Others told the donor-conceived child first, before informing an older, non-donor-conceived child. Sometimes it was planned, sometimes not. On the whole, the ideal seemed (among these people) to be to ensure that all children knew from the outset, although there were dissenters. One mother was very troubled by how to help her older child understand the difference between his conception and the need for egg donation for his younger sister. She had planned to tell him from the beginning, but went to a meeting where "One of the speakers had told everybody straight away, then she regretted it when she realised that her child would know last." They were torn between wanting the elder child not to remember being in ignorance and wanting the younger child to know her own story before anyone else. "Initially we thought we won't tell everybody until she fully realises. But when will she fully understand?" That is, how long do they wait and how will they recognise the moment? And if they tell the older child, how do they prevent him from revealing it to others? This same mother had read books like *Let the Offspring Speak*: "It seemed so important, reading the stories from older offspring in particular, that I would not want my daughter to grow up and not know about her origins".

Parents may postpone telling for fear of causing harm. One mother said, "I feel a lot of pressure on me to tell them the right way to avoid damage in the future." She is "concerned about how my children's story would affect them as parents later in life, as my husband's adoption affected his outlook." No matter how they told or planned to tell their children, all parents interviewed were profoundly conscious of their responsibilities to their children and concerned for their well-being. Another mother waited until her daughter was 16 to tell her because she "wanted to find the donor and make sure that he was alive, in Australia, contactable and suitable, prior to my daughter being told". Her daughter has reacted angrily, despite having met her donor.

Overall, it was clear that telling children about their donor-assisted conception is not an event but a process. Whether a person is told as an infant or an adult or somewhere in between, different ramifications need to be explored at different times. Something that was very important or puzzling one year may not be so the next; a new consideration may arise; or it may take a very long time and a lot of thought, conversation and exploration to process all that is incorporated in being donor-conceived. To this end, it is desirable for parents to be willing to answer questions and to be sensitive to their children's changing needs. Those who had been talking about it since their children were babies could still be apprehensive about how the process would unfold. One mother of donor-conceived children had not found it too difficult to talk to a baby and a toddler, but said, "For both of us it will be a big day when it dawns on them, when they're a bit bigger, about what it all means: when we start getting the big questions. My husband has said he'll feel a bit threatened."

Mother of two toddlers conceived through DI:

"Our oldest child is starting to understand and is talking. Not too long ago, we were looking at our second child, and she commented on her eyes and how they were brown, not blue like mine.

I told her that it was because the eye colour was like her donor. She looked up and asked, 'What's a donor?' I then explained to her again that her daddy's sperm hadn't worked, and the donor probably had brown eyes. She asked whether they both had the same donor, and she seemed pleased to know that they were the same. This is a three-year-old! I was just thinking the other day that I must try to get my husband to say more as well. I'm not sure what he says to her about her story. Also it's because he speaks Spanish to her. I feel it's important she hears it from him, and in Spanish as well as English, and from both of us. I have told the baby as well, using the same fairy tale type thing."

How should parents tell?

One of the greatest worries for parents appears to be how to tell their children that they were donor-conceived. What do they say? How much detail should be included? What attitudes or emotions should colour the words? Among the parents represented here, the common approach with infants and young children is to tell a story. "I did tell her as a bedtime story about how she was in my tummy and how [my sister] donated the egg", said one mother who went on to explain, "She doesn't really understand about sex and how babies are made yet, but she's seen friends of mine who are pregnant and she realises that babies grow in a woman's tummy. She knows that babies grow from an egg, that I didn't have any eggs and her aunt gave me one of her eggs and it was put inside my tummy." Another mother heard a parent talk at a Donor Conception Support Group meeting: "She told the story much like a fairytale, with the baby in her arms so she could practise the words. So we told them from the first day, and it was like a fairytale. We may say something like, 'Daddy had problems with his sperm and a man gave us a gift.' We tell them there are three important people: Mummy, Daddy, and the donor."

Mother of infant conceived by DI in same-sex couple:

"It's fairly obvious that there's not a dad, in a normal sense. It's a bit more obvious than if I was in a relationship with a man. We will certainly tell and be very open, and she'll be told on an age-appropriate basis. We'll respond to her general interest in the process at two, or three, or four years old. She may probably become aware that her family is a bit different. I imagine we'll be introducing age appropriate conversations with her at that point. Working towards a situation where there is clear and full disclosure available to her...There are some essentials we will do it as appropriate, in response to her questions. We are anticipating that she will have some interest or curiosity, but that may not mean there will be a donor that will exist in a number of levels. It may not be that she wants to know about him as a person; it may just be at an understanding level, until she has that interest. That's our framework to respond to her at this point."

The mother of three donor-conceived adults emphasised adapting the account to the child: "Telling them began with how babies were made; a gradual progression. As the child matured you gave them more information." The parents wanted the children to know how much they loved them and that they used donor insemination because of their yearning to be parents. "We always both told them how desperately they were wanted; told them about the delight at their births." Part of adapting to the child is knowing when to be silent: "They get to the point where they don't really want to know any more. They're happy just having the answer at the time. When it's belaboured, they shut down." This mother also wanted the children to know that it was their own story and not a secret, although they needed to be a little cautious in sharing it. "I said to them, 'This is your information. When you feel comfortable, you can tell a friend'."

When one mother told her son at ten, she used a photograph album of his ultrasound images and baby photos to help them discuss how he was conceived. He was fascinated and wanted to tell his cousins, uncles and aunts. His mother quickly told the adults first, in private, "so that when he told them, their reactions would be very positive."

A mother who told her daughter at 16 wrote notes to guide her in the telling and said that the sperm provider was "A special man, a lovely man; he donated sperm; he was anonymous". She was also able to say that he had written in his profile of his willingness to be contacted. A donor-conceived adult, told at about the same age, cannot recall exactly what her mother said, except "Dad had trouble and became infertile. I think they used the words 'artificial insemination'. They also used the words 'IVF'. I think my mum was a bit confused about what the procedure was called, because...at first I thought that I was IVF, but Mum said no, that another man had helped to create me." This same young woman has strong feelings about how donor-assisted conception is described: "I hate the use of the word 'treatment'. It's like the letter that the doctor wrote to me that said, 'Your parents knew of all the conditions of treatment before they went through the treatment'. He's talking about my conception as if it was something that he sold. As if it's a piece of paper that he sold to my mum and dad that I had no say in."

Among the donor-conceived adults, there was a range of views about what parents should say, including whether or not the information should be adapted to the child's age and understanding. One young woman, who found out about her conception in her early teens, advised parents "just to be open about it". She said, "I don't think it's such a bad thing that, when you're younger, you know that you were conceived differently but you don't know how. When you're younger, you don't have that level of understanding." She would have liked her parents to have explained the whole process before she made the connection in her science class. Nevertheless, "it was really good that my parents were open about it, and if we had any questions they were ready to answer and stuff." In contrast, another donor-conceived person, told as a young adult, said "They shouldn't be telling a story which they think is 'age appropriate'. It's more confusing to a child then. It needs to be real and truthful. Otherwise, it's being more sensitive to parents' feelings and emotions than it is to the child."

Mother of DI son, mid-teens:

"When I re-married and had another child, my son wanted to know more about his donor. I wrote a letter to the ITA who passed the letter on to the donor. They exchanged photos and have had a lot of correspondence. The donor got married and now has children of his own. His wife suggested to cut down on contact, so my son now has his donor's e-mail address just at work... They've never met...He doesn't really talk about the donor, although he still looks for a birthday card. He's now interested in knowing about his siblings. My son still sees his father once a week, and rang him in great excitement when he found out he had siblings. I think he's very comfortable about the way he was conceived."

One of the most difficult dilemmas was what to call the provider of sperm (in particular) or eggs. The words used were intimately bound up in what was understood to be the relationship of the sperm provider to the child: A kind of father? Provider of biological cells? (There was less sense of an egg donor as a mother.) Some people chose to describe him as 'the donor', but there was no clear consensus on the best words to use.

For example, a father whose toddler was conceived with donor sperm said that his wife was the first to speak of it, “just telling him a story”. Although the father “felt fine about it”, he was unsure about “the right language”, saying, “I always refer to myself as ‘Dad’; I didn’t know how to approach the topic of ‘biological father’. The language of who is that third person involved in his conception is difficult to work out.” One couple had ‘rehearsed’ telling their daughter for a long time, but ultimately found it too difficult “to consider introducing the concept of another father at this stage, and too confusing” for their pre-school child. They decided “we wanted to be parents together and put less emphasis on how she was conceived”. Their solution was “to make it a bigger connection including the doctor in the story, how he helped put us in touch with the donor.” A similar approach was taken by the mother of a primary-school-aged child from donor insemination: “We were careful about the language we used; the ‘daddy’ words were always about [my husband], and the ‘biological father’ or ‘donor father’ was how we described that person. It was sort of clinical and a bit removed from the situation. More formal.”

A father of a toddler and an infant from donor insemination was happy with ‘donor’. The family had recently been driving past the hospital where the procedure took place, and “we mentioned to our son that this was where he was conceived, through the help of a donor. His only comment was, ‘Donors are very good people, aren’t they?’. So I assume that meant that something got through.”

Parents are aware of different approaches to conceptualising and explaining the sperm provider. One mother of young children reported that close relatives also had children from donor insemination who had “different views on how to tell their children, and will be telling them that they have two fathers. I disagree with that.” Some parents clearly want to avoid associating ‘fatherhood’ with the sperm provider.

Where there are two mothers rather than a mother and a father, terminology has an extra twist in that there is obviously no ‘father’ in the family, and decisions must be made about whether the provider of sperm occupies the role and to what extent. One birth mother in a lesbian couple said, “We decided to call him ‘the donor’. It was important for me that where it says ‘father’ that it not be ‘unknown’; that we use the word ‘donor’ so she has a biological heritage. Certainly that’s the way we’re referring to it. When we had to take her to the hospital and they asked about a father, we said, ‘No father; donor’.”

The matter of what to call the sperm provider is especially contentious among donor-conceived adults. (None of these adults was conceived by egg or embryo donation.) Feelings are passionate, reflecting the profound personal significance to the person created by this means. One young adult, who had learnt about her conception as an adult, said, “From the minute I started talking, it shouldn’t have been a story about ‘the donor’, or ‘the nice man who helped Mummy and Daddy have me’. It should have been my ‘biological father’, because ‘donor’ means nothing to a child...It does nothing to illustrate the connection that I have with my biological family. He is my biological father. He’s not my dad; I have my dad. Kids are smart enough to understand that difference.” This young woman has had to defend her insistence on the fatherhood of her sperm provider: “I know that some parents think that it’s inflammatory to use the term ‘biological father’, but in reality that’s the truth. That is what it is to me. Until some point, where we don’t have to conceive using a man’s sperm and a woman’s egg, then [my donor] is still going to be my biological father, my mum is going to be my mum and my dad my dad. There is no getting around that. Calling them anything else is bending the truth.”

Donor-conceived adults, one told in mid-teens, the other as a young adult:

A: *"People believe that if you want to search then you must be the product of bad parenting, that you are unhappy, miserable, that you must want another father."*

B: *"Yeah, that we can't live our lives. I think about it a lot, but not because I have to. I have a job, and a life, and a boyfriend, and goals, and ambitions"*

A: *"Even if you do think about it a lot, you shouldn't be considered something negative. This is the very reason we exist, because this was how we were created. If we think about it, there's nothing wrong with that. We shouldn't be looked down upon or thought of as abnormal. Parents, when they're raising their children, should be made aware of that. The way they speak about the donor will have an effect on the way the child feels they can talk to their parents."*

As donor-conceived people ponder the significance of their conception, opinions may change. Another young woman, told as a teenager she was donor-conceived, explained: "Previously I was using the word 'donor,' but now I think that I only use that because I don't want to upset my dad. [When I said] 'biological father', my dad was upset about it. I think that caused us to be a bit shaky for a while. You don't realise that you're trying to protect so many people."

A third young adult, however, who was told in early teens, said that she "would feel uncomfortable talking about 'biological fathers', because I think once you bring the word 'father' in, there's kind of an emotional attachment. For me, it was something that happened in a lab. It was kind of a scientific procedure; that's half, but my dad's my dad and the emotion is with him. I hate the word 'biological father'. That doesn't stay with me. I always keep it impersonal, as I think it's an impersonal procedure and it becomes separate from the father figure: the father who helps you become who you are. Personality stuff."

Taken as a whole, this information suggests that each family must fine-tune their story to their circumstances and the evolving needs of their children. It may not be possible to avoid mistakes. Even putting the child into the story can be tricky, as one mother found: "I did speak to [an infertility counsellor] as [my pre-school daughter] had said, 'I'm not a donor child'. Label the process, not the child. The language is quite tricky." And this seems to be one of the central conundrums: parents want to be truthful with their children, to protect them from distress and unhappiness, and not to say something hurtful when they are doing their best to be honest and open. Anxiety about finding the right words and doing no harm can paralyse parents who want to tell their children about their donor-assisted conception, and appears to be the main reason for 'putting it off'. Parents need help to begin telling and to continue the process, and advice and resources to deal with questions, mistakes, and surprises. Donor-conceived people, too, need resources to help them to understand what it means and to deal with the practicalities of their genetic heritage. The next section of this report summarises what these resources could be.

WHAT SUPPORT AND RESOURCES ARE REQUIRED?

Parents

Parents feel the burden of responsibility to do the best for their children, including telling them about their donor-assisted conception. The best guidance they have found (or wish they had) is the experience of other parents and information from donor-conceived people. Many had become involved in the Donor Conception Support Group, and value the information sessions, newsletter stories and the personal contact and advice provided in the group.

Mother of two toddlers conceived through DI:

"I haven't actually read a lot of the books. We both read more before we started on the program... Once we got pregnant, we felt so OK about it all we haven't read anything. I've had the My Story book out to read to them, but we certainly haven't used the resources very much. I think it's partly because we feel very relaxed with it. I'm glad they're there if we need them when they get older... We also read Lethal Secrets, on how people had found out accidentally, or later, and the results. My husband told me not to read it if I didn't want to be upset. But I found that it rammed home the need to tell. We wouldn't want to experience what those families had...I think one of biggest things is real stories, personal stories. The biggest thing for me was to be talking to people who knew how stressful the process could be, and all the things that go through your mind: Should I? Shouldn't I? And later on down the track, talking to people about telling. Also I found reading stories like Let the Offspring Speak very helpful. It doesn't mean the same as talking and hearing other people, but it helps. I remember that there was one letter written to the Donor Conception Support Group early this month by a man. He described it as, 'You feel like you're standing on the edge of a cliff, and it is so hard and you don't dare jump. Now that I am a father of two, I can say, 'Come on in, the water's fine.' Just hearing that someone else has been through it means so much. If we were back a few years ago launching into this, I would have been really relieved. You know it's a rollercoaster of emotions, but you need to hear that it can have a happy ending."

Parents may not feel like 'real' parents if they have not contributed their sperm or eggs to make the child. Confidence usually comes with living that role; as one mother said, "It took a long time for [my husband] to feel that he was so totally and utterly loved by [our daughter] that it wouldn't matter." Another mother was worried that her husband would reject their son because he was not genetically connected to him, or that her son would reject them both. However, "recently, when my husband was away, our son was howling for his daddy with sore teeth, and it really hit home: that bond is really there...It's no different from the people across the road." Hearing from other parents about the way relationships grow and strengthen can be very reassuring. The mother of a baby conceived by donor insemination explained her fears about telling their son: "People might think he's different. Our friends might be shocked. Worried that our son might want to spend time with the donor and not with us." Her husband is worried that their son "will turn around and say, 'You're not my father'." Sometimes it is enough to know that others have been similarly afraid or puzzled and have survived the experience.

Given the difficulty of finding the right words to tell, parents often feel that they would benefit from a series of scripts that they could adapt to their own needs. They would also like 'something to give the children' such as age-appropriate videos or books that parents and children could turn to whenever they needed information. They want to know how other children have reacted to being told in various ways, and how the parents dealt with all those reactions. A few parents had prepared their own resources: personal books to help their children appreciate the story. The mother of a toddler kept a journal of her attempts to have a child and will show her son "when he's old enough". She also keeps a scrapbook with relevant articles to give him later. "In our wills we have information for our son and how to get information if he needs to access it."

It can be problematic enough to know what to say when there is a known or identifiable donor; parents who conceived before the registers were established in Victoria or outside the state jurisdiction have particular needs for guidance in telling and supporting their children, in both attempting to find the donor and dealing with being unable to do so.

Books and other resources need to cater not only for children and young adults who are donor-conceived—and who have been told at different ages—but also for different family types. Donor-conceived children, like other children, are not all born into stable, mum-and-dad families with a sister and a brother. And one mother suggested that the available books tend to be a bit earnest and bland: "You need to find a balance between an engaging book for children who would happily read it even on their own and a book which offers a scientific explanation."

Parents are particularly alert to what donor-conceived adults have to say and endeavour to learn from their happy and unhappy experiences. This mirrors the views of some of the donor-conceived adults, one of whom said: "It should be mandatory that couples watch videos of grown-up DI children, or listen to audio tapes of us speaking about what we feel...They need to be able to see every side, every possible side of the coin. Everyone's position: the recipient, the parent, the donor even; maybe understand why donors do donate and reasons for it. Even if it's someone like us [told in late adolescence] and someone who has known since they were little."

A donor-conceived adult emphasised that counselling should be able to help prospective parents decide against donor-assisted conception; they "are busy dealing with their issues of loss and infertility. They are not focusing on the feeling of their child, although it might not be relevant for years for the family. Could there be a way to gauge if the parents are going into the process in the right frame of mind? I've heard that families are utilising DI because adoption is too difficult and IVF is too expensive. It is the easiest, cheapest option." This young woman also wants counsellors to make fathers aware that, if they are not the genetic parent of their child, there may be 'ownership issues' and an "obvious imbalance in the relationships between the mother and the father and the child," which was her experience.

Attitudes to counselling and expectations of what it can or should provide are varied. Some parents are happy with a single information session; others would like counselling to be available at significant periods. A mother who had postponed telling her daughter partly because of her husband's resistance, but also "for fear of burdening her with the burden I've felt for a number of years," thinks that counselling would have helped her to search for the sperm provider and tell her daughter sooner. A few people feel that counselling has failed them, or are aware that counsellors themselves are in the process of learning how best to advise all participants in the experience of donor-assisted conception.

Mother of two toddlers conceived through DI:

"People have no idea about the treatment. They don't understand that we haven't been through IVF. They still think I have. It would be good to have recommended ways to explain it easily. I find myself saying to people that it's a straightforward process, like a pap smear, very unromantic, and that's it: 'We found out about his infertility and chose to use a sperm donor.' Often I choose not to try to explain any further. The second time around, during the procedure my close friends started asking more questions. Most people have no idea whatsoever."

The ease with which parents can discuss donor-assisted conception with their children is influenced by their own acceptance of the need for a donor. If, for example, parents have not fully come to terms with infertility or the absence of a partner, counselling may help them work through what it means to them, enabling them to feel less threatened in dealing with their children's responses. One mother experienced donor insemination as being "like having an affair", and is being helped by a counsellor to understand it in a less troubling way. Reflecting her own anxieties, this mother's biggest fear continues to be that her son "will feel what I've done is disgusting, seeing it as me having an affair".

Counsellors stressed the need for parents to have access to a range of resources as they needed them; they should not be expected to take in all the information at one session before pregnancy occurred. When all energies are being directed to achieving a baby, it is hard to remember details of guidance on what to do or say to a child or adult.

Parents and donor-conceived adults made suggestions for some very practical resources to help parents: seminars with donors, recipients and donor-conceived people; seminars or support groups specifically for families, couples, fathers or mothers; audiovisual material including interviews with mothers, fathers, donors, and donor-conceived people; free CD-ROMs available through clinics; books and pamphlets about all aspects of gamete donation; detailed information on a user-friendly website; and easy access to what the relevant legislation says and what the registers are all about. For example, a mother of two donor-conceived children said, "We would definitely have liked to have got a packet letting us know that the details are registered and what it all meant. And also, as far as the voluntary registers go, examples of what you really can lodge with the register...Do we write a letter? Do we put in photos? Is it appropriate to send a thank you letter to the donor?...[I've heard] that there's very few that have accessed the register, but I think it's because we don't know how to. Where do I go?" Another mother searched the internet, but would have been grateful for an accessible list of useful local resources so that she could go straight to what was relevant to her.

Counsellors added the warning that unsolicited information mailed to parents can be very distressing, because it may be opened in front of someone who does not know about the donor conception.

Not everyone wanted more resources; one father of two young donor-conceived children said they were “not looking for more resources at present”; they had found the long counselling session “very helpful”, and think “each family needs to work out what’s best for them”.

Donor-conceived adult, told in mid-teens:

“I’d probably want to know my medical genetic history. Sometimes I can’t believe, when the whole procedure was starting, that medical professionals were very relaxed about it...But I would hate bringing up the issue of finding out who [the donor] is; there’s no point...I have a father...I wouldn’t want to know what they look like or anything like that. What they do, why I have the interests I do; just general things, I guess. Nothing that I really ponder over. It would be interesting to see how many half-brothers and -sisters I have. I think I could put up a wall against all that stuff, as the sperm doesn’t really have an identity to me.”

It is not only their own difficulties with which parents must deal, but reactions of families and friends. One’s mother-in-law “is heavily into kinship...they are the kind of family that lives by the blood.” She and others would appreciate resources they could use with their family and friends to help them accept the use of donor gametes, or even just “fact sheets to give to family members”, as another mother said, to explain the process. A mother in a same-sex couple found that people tended to overstep boundaries of privacy: “Already with our baby, people want information about the donor. It’s confidential, but lots of our family want to know. And if she goes to a play group, there will be challenges there, particularly for confidentiality and implications for people’s privacy.” A pamphlet that explained it for them without leaving people feeling that friendly overtures were being rejected, would be a welcome resource.

Finally, some parents (but not all) are concerned that there is little understanding of donor-assisted conception in the community, or that there may even be hostility. One father perceived “stigma” for men: “it seems more acceptable for the woman to receive assistance”. One mother had encountered disapproval arising from the belief that those who used donor-assisted conception did so because “they had left their run too late”. Another, who had used IVF as well as donor insemination, found “a lot of negative reactions; that only the wealthy went on the program”. She felt judged, but thinks her daughter “will benefit from growing community acceptance”. Resources that help to inform the community and make donor-assisted conception more familiar and acceptable were advocated by some people. Even among these parents there was someone who thinks that IVF is “extreme”; she “would not be prepared to go to that extent”. This exemplifies the subtle shades and variations in attitudes to all kinds of assisted conception, no matter what one’s experience, and the wide range of opinions and needs that resources must accommodate.

WHAT SUPPORT AND RESOURCES ARE REQUIRED?

Donor-conceived children and adults

The resources suggested by and for donor-conceived people overlap with those suggested for parents, but extend to include help in dealing with the sperm (or egg) provider. There was general approbation of the registers and regret from those who were too old to be assured of benefiting from them. However, there was still some lingering anxiety among a few parents that the registers leave them or their children vulnerable to unwelcome approaches by sperm providers. At the same time, there is concern for donors in case they or their families are startled by a request for information, so resources that benefit children or adults should also be sensitive to the needs of their providers and the anxiety they can arouse.

Mother of three donor-conceived young adults, told as young children:

“There may have been issues growing up at adolescence, but never an issue of them being DI-conceived...They felt perfectly comfortable with it. The only problem was that two were conceived before the time of information on donors, and they’re denied any information on their donors...The children do handle it differently...One child is very inquisitive. He has no desire for another father figure; he’d like to know what he looks like. It’s human curiosity to want know what they look like; to see genetic parts from the donor. It’s so frustrating. This generation of DI children will not have this frustration...My older children’s generation is being denied what everyone takes for granted with a biological mother and father.”

Materials suggested to aid parents in telling their children range from brief picture books for pre-school children through to books for adults. Resources at each stage need to be appropriate both to children or adolescents who have always known about their conception but want more information or more sophisticated understanding of the ramifications, and to people who have only recently learnt about their conception. The needs of children who have grown up with the knowledge of donor-assisted conception and of adolescents and adults who are coming to terms with a startling revelation are very different. And although older people are currently the product only of donor insemination, material for young people now and adults in the future must incorporate egg and embryo donation. Resources also need to acknowledge and cater for a variety of family types, including single parents, same-sex couples, and blended families, as well as families that encompass children conceived in different ways.

The media have a particular role to play, and some donor-conceived adults want stories to be initiated and carefully managed as part of the resources for donor-conceived people. One young man said that good donor-conception stories in the media “allow the subject of DI to come up in conversation”. They can also be informative; for example, “when I saw the Andrew Denton show, I realised the issues about half-siblings and so on”. These young adults included those who welcome stories of how donor-assisted conception can damage the lives of donor-conceived people, and those who said, “The 60 Minutes type, I think, should be stopped: ‘I feel so lost without my biological father’. I kind of sit there and feel no association with this. My dad is my dad, and he’s been such a figure in my life I don’t feel empty at all.”

Tastes differ among donor-conceived adults as they do among the parents; what one person would consider a good story or a charming book another perceives as tacky or inappropriate. One donor-conceived adult was particularly offended by a book that symbolised the donor as an angel. She queried, "How does that help someone understand that they're related to someone who's not a part of their biological family?" Resources, therefore, need to cater for a range of likes, dislikes and attitudes. Among the donor-conceived adults was both a preference for "family structure" to be emphasised treating donor-assisted conception "like adoption and not a medical treatment" and preference for the scientific details to be presented, with the emphasis on Mum and Dad being helped by a doctor.

Donor-conceived people who had made contact with their donors and parents whose children had done the same gave accounts of various kinds of relationships, although the most usual seemed to be minimal contact, often by telephone, letter or email. Resources are wanted that give advice on managing this unusual relationship, especially when it is unsatisfactory or when other people, such as the sperm provider's partner, find it threatening. Once again, narratives of other people's experiences were thought to be helpful, although there was also a call for practical information and advice. Some donor-conceived people want information about half-siblings connected to them through their sperm provider and guidance in managing a relationship or the unfulfilled curiosity.

Donor-conceived adult; told as young adult:

"We are placed in a position where we feel we have to protect people other than ourselves. That is what donor conception does. It talks about everyone except the child...[Privately], I call [the sperm donor] 'my father', but in public life I call him 'my biological father', and if I am in a position where I think I'm going to cause a riot, then I'll refer to him as 'my donor'. But it shouldn't be like that. I should be able to say what my feelings are, but because you have this social situation where it is unacceptable to use that language because DI is viewed as a medical treatment the relationship that exists can't be said."

Where donors could not be easily identified, some adults suggested that a dedicated system of help with searching needed to be provided. One young woman sympathised with the doctor who complained about being unable to deal with all the requests for information he received, but said that she hates being made to feel "a nuisance".

Donor-conceived people may want counselling at various times throughout their lives. Those who learn about their conception as adults may need particularly intense guidance, but they also want accurate information and assistance in identifying their sperm provider, if that is their goal. One donor-conceived adult, who was told as an adult, talked about her changing requirements. The counsellor whom she found by telephoning a hospital put her in touch with the Donor Conception Support Group, who helped her to search for her donor. This was her primary goal. Once she had found him, she needed "support with trying to work out what my relationship is with my donor and with his family. That's just as important as everything else. In some ways, it can be more difficult, because there are less of us who have met our biological parents. So there are less people for me to talk to about it, apart from adoptees."

Donor-conceived adult, told in mid-teens:

"I would feel uncomfortable talking about 'biological fathers', because I think once you bring the word 'father' in, there's kind of an emotional attachment. For me, it was something that happened in a lab. It was kind of a scientific procedure; that's half, but my dad's my dad and the emotion is with him. I hate the word 'biological father'. That doesn't stay with me. I always keep it impersonal, as I think it's an impersonal procedure and it becomes separate from the father figure: the father who helps you become who you are. Personality stuff."

It is important to donor-conceived adults that counsellors be appropriately trained in the ramifications of donor-assisted conception. A few young adults felt that the counsellors they approached were unable to provide them with any real guidance, but acknowledge that they were probably among the first newly-told donor-conceived adults they had seen. However, contact with other donor-conceived people is even more valuable to some because, as one young woman said, "[we] need to be able to talk to someone who is in a neutral position; someone who is not an infertility counsellor...And I wanted to be able to discuss issues that I couldn't get out of a book." Another young woman, who was told in her mid-teens and has not been able to identify her donor, was particularly grateful for contacts with other donor-conceived people and their parents. These contact details were in a pamphlet compiled by the Donor Conception Support Group and given to her by a counsellor, and she described the encounters as invaluable: "When I spoke to [another donor-conceived person], I felt privileged because his story was exactly how I felt at the time. I was amazed someone in the whole world felt the same way as I did."

Donor-conceived adult; told as teenager:

"The next year or so [after being told], I was really upset about it. My initial thoughts were, 'Oh, my god! I'm not related to half of my family'. My dad's side of the family was the family we had grown up with and spent most of our time with. I was really annoyed and angry. I felt that I wasn't a part of their family any more. When we went to family events, I sat there and looked at everyone else and was jealous. I was happy to have my sister there...I felt really abandoned [by the donor], for some reason. Even though he didn't physically give me away, I felt that he helped to create me and should have been around, although my dad and mum were around. I remember crying a lot because I had no one to talk to. I only told one of my friends...a year later. She was as shocked or more than me...She couldn't get it to sink in. So I had no one to talk to, and it was really hard. I saw [a counsellor] as well,...through my own searching on the Internet. It took me ages to work up the courage to see her, and that was three years later."

WHAT HAVE WE LEARNT?

These 34 people have made it clear to the Infertility Treatment Authority that donor-conceived people should be told about their conception when they are young and by their parents and that a wide variety of resources is required to assist parents and their children in this process. Because it cannot be assumed that parents will tell infants or young children, resources should cater for telling adolescents and adults. Donor-conceived people want information suitable to all ages and needs, including adults who are coming to terms with the knowledge of their conception and may be searching for their donor. The Authority will, as a result, continue to promote the resources developed by others and will increase the range of resources it provides. To this end, it will maintain consultation with donor-conceived people, parents, donors, counsellors and researchers.

The relatively small number of people interviewed encompass a wide range of experiences and attitudes, which should alert us to the danger of assuming that we know what donor-assisted conception means to individuals. There are likely to be other stories, hopes and needs not captured in these interviews. However, just as “telling” is a process, so is learning how best to provide institutional support. The role played by these people and others prepared to share their stories is invaluable in teaching us all.

NOTE

The Infertility Treatment Authority gratefully acknowledges the participants in this investigation who generously shared their insights and experience. Details that might identify them have been changed or omitted.

The investigation was commissioned by Dr Helen Szoke, then Chief Executive Officer of the Infertility Treatment Authority, and funded by the Infertility Treatment Authority. Interviews were conducted by Caryn Kakas and Helen Szoke. Permission to conduct the investigation was granted by the Human Research Ethics Committee of the Department of Human Services, Victoria. All participants gave informed consent. This report was written by Dr Maggie Kirkman, who also analysed the data.

Mother of baby conceived with donor egg:

"I'm in the process of re-reading the Lorbach book, and I want the grandparents to read it as well. I'm not sure how much they'll get out of it. As time goes by, I have different feelings. During the pregnancy and early in her life, I felt very conscious that she was born as a result of an egg donation. It was a predominant thought, and I read Lorbach's book thinking about myself and my feelings and how we're going to cope. Now that she's born and is developing into a person, and there's clearly a bond between us, I want to reread the book from her perspective, her needs, and what is best for her...It's hard to get good information, especially about egg donors. The more I come to terms with the fact that we used a donor, the more I feel that I will get back in touch with the Donor Conception Support Group and offer something back by telling our story. One of the important things was to listen to other people telling their stories, and I feel that they were so generous and it was so helpful that we should do the same in due course."