

A HOW-TO GUIDE

LGBTQ+ Family Planning with Donor Sperm



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Hello, Future Parents!

For prospective LGBTQ+ couples considering having a child through sperm donation, the medical, logistical, and financial considerations are often front and center stage. Because these factors command a lot of time and energy, the emotional considerations can often be overlooked.

However, understanding and preparing for the emotional side of pursuing parenthood through sperm donation can help set the stage for a more positive family building journey.

I've partnered with Seattle Sperm Bank to provide this guide for intended parents like yourself as a tool to prepare you for working with sperm donors.



Britta became a mother through egg donation and was drawn to working in this field through her own experience with fertility challenges.

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LICENSED PSYCHOLOGIST

Deciding who's eggs and uterus to use



One of the first decisions an LGBTQ+ couple must make when pursuing family building through sperm donation is which partner's eggs will be used to create embryos and which partner will carry the baby. For some couples, this is an easy decision, perhaps it has always felt more important to one of the partners to have a genetic child or to carry a pregnancy. Or perhaps only one partner has a uterus and is able to carry a pregnancy.

However, it can be a difficult decision if both partners feel strongly that they would like to have a genetically linked child or carry the pregnancy. Sometimes it comes down to which partner's eggs are most likely to be successful in creating healthy viable embryos or which partner is most likely to be able to carry a healthy and successful pregnancy to term.

It can be a significant source of disappointment and heartache if one partner or the other is unable to be involved in family building in the way they had hoped to.

In this case, while it is always important to make space and give oneself permission to grieve such losses, it can also be important for couples to reframe their family building:

- Shared decision-making
- Participation in the appointments
- Learning about the baby's in utero growth and development
- Preparing for the new arrival
- Subsequent parenting that make the endeavor very much a collaborative and shared one regardless of who contributed the eggs and/or who carried the child

Donor Selection

Another important decision an LGBTQ+ couple must make when pursuing family building through sperm donation is selecting a sperm donor.

- **Directed Donor** – a donor already personally known to one or both of the prospective parents, such as a friend or family member
- **Non-Directed Donor** – a donor through a sperm bank

This is ultimately a personal decision, and there is no “one right answer,” as there can be advantages and disadvantages to each.



Some prospective parents prefer to choose a directed donor, because they feel more comfortable with the idea of their donor being someone they already know and trust and who will presumably be a part of their lives for the foreseeable future (and therefore available for the future child to meet, know, and ask questions of).

For other prospective parents, choosing a directed donor feels more emotionally complicated or “messy.” For instance, there may be concerns about boundaries or the donor overstepping his role. Or prospective parents may worry that it will feel awkward to them when with their child in the presence of the donor and/or other friends or family members who know the identity of the donor.

Seattle Sperm Bank

Donors



GORAN (14288)



MALONE (12766)



FRANKLIN (12105)

There is no one right way to approach selecting a non-directed donor, or donor from a sperm bank like Seattle Sperm Bank. Before looking at a donor database, it can be helpful to sit down together to discuss what each of your priorities are, such as:

- Race/ethnicity
- Desired physical attributes, such as height, weight, hair/eye/complexion, facial features
- Desired aptitudes/abilities, such as intelligence, academic achievement, athleticism, artistic/creative
- Personality traits (i.e. adventuresome, ambitious, playful, funny, spirited, easygoing, etc.)
- Health history, including medical and mental health (both personal and familial)
- Motivation for donating
- Attitudes toward openness for future contact with the resulting child
- Subjective factors (i.e. similar interests, hobbies, profession, or simply a subjective sense of being drawn to a particular donor)

Looking for specific characteristics in your donor can be challenging.

Prospective parents may focus on trying to find a donor whose qualities represent qualities in the partner whose genetics will not be represented in the child (the partner whose eggs will not be used to create embryos).

Or, it may feel important to a couple to avoid “doubling up” on a genetic risk for certain physical or mental health conditions if these conditions run in the family of the partner whose eggs will be used to create embryos.

**It is important to remember that your child is not going to be a “clone” of the donor.**

While genetics are important “building blocks,” many traits, characteristics, and qualities are determined by a complex interplay between genetic and environmental factors. Also, when choosing a donor, one must choose “the whole package” so to speak---it is not possible to “pick and choose” only certain traits and qualities.

Inevitably, all donors are likely to have a few “less than perfect” aspects of personal or family history. That being said, it’s important to generally feel positively about your selection, as you want to be able to convey your positivity about the donor you chose to your child someday when sharing with your child about his or her “origin story.”

Directed Donors

Initial Considerations

Existing relationship dynamics: You may want to think twice about asking someone to be your donor with whom one or both of you have a history of challenging relationship dynamics, even if the person would otherwise be the “perfect” donor. This could result in unforeseen challenges down the road as you navigate roles and relationships in the future between yourselves, your child, and your donor.

Donor’s personality traits

Ideally you want your donor to be someone who is flexible and collaborative and who is able to prioritize the future child’s welfare and best interests as different decisions, requests, or circumstances present themselves in the future.

Donor’s conceptualization of his role

The donor should be clear that he will have no parental role in relation to the future child (i.e. no rights, responsibilities, or involvement in parenting decisions).



Direct, open, and respectful communication is key.

It is important to talk through preferences and expectations in advance of making a final decision about whether to proceed. A consultation with an experienced mental health professional specializing in family building through third party assistance can be helpful.

In accordance with the American Society for Reproductive Medicine (ASRM) guidelines, some fertility clinics require such a consultation prior to fertility treatment with third party assistance, particularly in the case of directed donation (or gestational surrogacy).

Important topics to discuss and make sure both parties are in alignment with include:

- Any anticipated (or hoped for) changes in the nature of the relationship or frequency of contact between the two parties as a result of the donation
- The anticipated (or hoped for) role the donor will play in the resulting child's life (i.e. aunt/uncle-like figure, close family friend, mentor, etc.)



- Clarity around the donor not having any parental role (including rights, responsibilities, or parental decision-making) in relation to the child
- Disclosure to the child- will the child be informed about his/her donor conception and the identity of the donor (this is recommended); if so, how, when, and by whom?

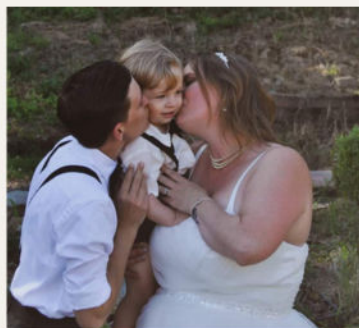


- To mutual friends or family- the parties should agree upon with whom the information about the child's donor conception and the donor's identity be shared, as well as how, when, and by whom
- To others, including social media
- How many children the donor is comfortable with his sperm being used
- In the case of IVF, the possibility that more embryos may be created than you choose to use for your own family building and how decisions will be made about any remaining embryos

Legal Matters

Do I need an attorney?

Sometimes prospective parents using donor sperm worry about whether or not the donor will “change his mind” and try to assume a parental role in the resulting child’s life in the future.



When done properly, legal contracts serve to protect both the donor and the recipients. Not only will the donor not have any parental rights in relation to the resulting offspring, but he will also not have any parental responsibilities for the resulting offspring

Important reminders:

- Be sure to read and understand the terms of your legal contract, whether it be between you and the sperm bank or you and your directed donor.
- For directed donors, it is wise to work with an attorney to create legal documentation prior to initiating treatment.
- Each party should be represented by separate legal counsel to avoid a conflict of interest.
- Different states have different laws pertaining to family building through third party assistance.
- Understand the laws in the state in which you live, the state in which gestation/delivery will occur (if this will be a gestational carrier pregnancy), and the state in which your embryos will be created, therefore consulting an attorney in the applicable state is recommended

What to expect emotionally during fertility treatment

If your insemination plan includes working with a fertility clinic, you can expect to have an IUI or IVF procedure. An IUI involves introducing donor sperm directly into the uterus. Whereas IVF involves advanced laboratory procedures where an egg is introduced to the sperm outside of the body.

Both IUI and IVF cycles require a substantial investment in time, energy, and emotion. You can anticipate a variety of the following:

- dedicated effort to track the different phases of the treatment cycle
- take medications daily
- tolerate potential physical and emotional side effects
- attend frequent medical monitoring appointments
- endure periods of waiting and uncertainty
- absorb potential setbacks or delays when things don't go as planned.

It's no wonder that along with feeling, hopeful, and optimistic, it is not uncommon for people to also feel somewhat anxious, stressed, or overwhelmed at different points in the journey.



Intrauterine Insemination (IUI)

Though typically less medically “involved” than IVF, IUI cycles can involve a lot of intense emotion within a short period of time.

Some patients have likened the IUI journey to an “emotional roller coaster,” with feelings of excitement, hope, and optimism in the weeks leading up to the insemination giving way to impatience and anxiety during the wait until the pregnancy test.



Of course, if the cycle is successful, the waiting stage is rewarded with the joy of success and the sweet anticipation of a baby on the way.

But, if the cycle is not successful, the couple is left with disappointment, frustration, sadness, and perhaps newfound worry about their likelihood of future success.

It is not uncommon for couples to have to undergo several IUI cycles before they are successful, meaning that for many couples, the end of one cycle leads directly to the beginning of a next attempt and getting “back on” the emotional roller coaster.

In Vitro Fertilization (IVF)

IVF cycles are more medically involved, typically requiring multiple daily injections; medications often must be refrigerated, and injections must be administered at roughly the same time each day. Though the injections are not necessarily painful in and of themselves, some patients experience soreness at the site of the injection or a reaction to the medium in which the active ingredient of the medication is delivered. With IVF, the cycle itself takes longer than with an IUI, so more monitoring appointments and lab draws are involved.

For all of these reasons, some patients experience IVF cycles as more intrusive than IUI cycles, though the emotions may feel somewhat less intense due to the fact that the process occurs over a more extended period of time. Though it can be just as devastating when a first attempt isn't successful, there is usually more time taken between cycles and, therefore, couples may have more time to process their feelings, regroup, and ready themselves for a next cycle with IVF than with IUI.



Supporting yourself during fertility treatment

Reduce additional stress

To the extent possible, reduce other sources of stress in your life. Try to minimize taking on unnecessary new projects, responsibilities, or social commitments that don't "nurture" you but feel like obligations.

Self-care

Try to incorporate nurturing, self-care practices and activities into your life. This can include massages, pedicures, taking a warm bath with candles, listening to calming or joyful music, making art, spending time with a pet, cooking or baking, cozying up with a good book, spending time in nature, gardening, taking a walk watching a beautiful sunset, buying fresh flowers, or taking a day trip to a special place.

Stress management tools and techniques

People often worry that their stress will sabotage the success of the treatment and cause the cycle to fail. It is important to realize that some amount of stress is all but inevitable when undergoing fertility treatment. It is not realistic to expect that you will remain in a constant state of "zen" during your treatment cycle. That being said, it can be highly beneficial to your overall sense of emotional and physical well-being to learn and practice healthy stress management tools, such as focused breathing, guided imagery, other types of meditation, mindfulness in daily living, Tai Chi, yoga, or Quigong.



Cognitive reframing

Much of our thinking patterns are so automatic that we don't consciously pay much attention to the thought loops constantly running in our heads. By paying closer attention, you can learn to identify thoughts that increase fear and anxiety and replace them with more positive, realistic, and helpful thoughts.

Social support

Support from those people in your life by whom you feel supported, nurtured, and cared for can help ease the emotional burden fertility treatment. It is important to recognize that you may need to educate people about the realities of your experience, including the stresses and challenges. When people ask how they can help, don't be afraid to tell them specific things that would be helpful (i.e. picking up groceries, walking the dog, dropping off a meal, mowing the lawn). While support from others can be invaluable, some couples find it helpful to create a certain amount of space and privacy around specific details of treatment, such as which partner will be genetically linked to the child or dates when certain results will be known. It can be helpful to discuss with your partner ahead of time what kind of boundaries you want to set and practicing how to respond to well-intentioned questions for which you don't want to give specific answers.

Couples' communication

Even though you are pursuing family building together, you and your partner's experience of this may be very different. You may also have very different coping styles. For instance, one partner may cope best by thinking only of the possibility of a successful outcome, while the other may cope best by preparing for possible failure and having a back-up plan. Members of a couple, too, often have different ways they find it easiest (or most gratifying) to give and receive support. Neither partner is "right" or "wrong" ---differences are normal and healthy. Some couples find it helpful to set aside a regular time to check-in with one another and talk about how each partner is feeling, including hopes as well as fears and concerns, and to talk about ways in which each would best like to be supported by the other.



This is the beginning of something good.

When it comes to family building through sperm donation, there is certainly a lot of information to digest and a lot to think about and process! Understandably, many couples are eager to move forward as quickly as possible to make their dreams of parenthood a reality. But taking the time to think through these and other non-medical considerations involved in pursuing parenthood through sperm donation can help set you up for success and allow you to feel more prepared, confident, and at ease moving forward.

Continue reading for how to get started with **Seattle Sperm Bank**, and to learn more about supportive services offered through our author, Britta Dinsmore, Ph.D.



Next Steps

As you start your journey to parenthood, Seattle Sperm Bank is here to offer support, guidance, and advice through every step.



Step 1. All Access Pass

- Visit seattlespermbank.com to purchase an All-Access Pass for \$50 to view available donors.

Step 2. Browse Donors

- Browse our extensive donor database to find the best possible donor based on your personal needs and preferences.

Step 3. Purchase Your Donor

- Orders can be placed either online or over the phone with our team. We are here to assist you with the shipment or storage of your purchased samples.



Supportive Services:

- Family Planning with sibling vial storage
- Easy vial transfers between partners
- Second parent adoption assistance
- SSB Connects, our internal sibling registry
- Support for Directed Donors
- Photo Matching
- Donor Consultations
- Genetic Counselors on staff to assist with genetic screening results

ABOUT THE AUTHOR

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Britta Dinsmore graduated with a doctorate in Counseling Psychology from the University of Oregon. She is a licensed psychologist in Oregon, Washington, and Montana and has 18 years' experience specializing in fertility challenges, reproductive assistance, and pregnancy loss.

Britta previously served as National Mental Health Advisor for the Parents Via Egg Donation organization. Britta is a member of the ASRM Mental Health Professionals Group, the Oregon Surrogacy Professionals Association, the Society for Ethics in Egg Donation and Surrogacy, and RESOLVE.

She lives in the Pacific Northwest and, in her spare time, enjoys hiking, backpacking, cross country skiing, gardening, travel, and spending time with her family including her dogs Maisy and Riley.



To learn more about services offered by the author, visit BrittaDinsmore.com