

Heterosexual Couples Using Donor Conception

Madeline Licker Feingold, Ph.D. 2011, Updated by TSBC in 2021

Family building through sperm donation can be an emotionally complex process. Yet it is also one that helps couples of all stripes make their dream of family a reality! [Read on for resources and support for your family building journey](#)

Disclosure to children regarding their donor origins allows for open and honest communication, provides children with accurate health information, and lets children know they are loved for exactly who they are. Alternatively, secrets may have unintended damaging effects on family members, harm the parent-child relationship, and perpetuate the stigma of infertility.

Often parents who want to tell their children about their family's origins find themselves delaying because they don't know what to say. These resources can help!

- ***[Common Feelings Associated with Infertility & What Can We Do](#)***
- ***[Donor Insemination: Why Aren't We Happy?](#)***
- ***["My husband is the one who really needs to talk to you, but he won't make an appointment, let alone talk to anyone"](#)***
- ***[Effects on Male Self-esteem](#)***
- ***[Consumer DNA Testing](#)***
- ***[Building Healthy Families](#)***
- ***[Your Child's Health and Medical Records](#)***
- ***[Open-Identity Donation](#)***

Links are from/available at: <https://www.thespermbankofca.org/content/heterosexual-couples-using-donor-insemination>

Fertility Struggles and Emotions

Approximately 15% of all couples in their reproductive years experience infertility, with men and women affected at similar rates. The associated emotional experiences can be quite different however. Historically, women are more likely to have been socialized to express their feelings, which may help in seeking support and resources. Men, on the other hand, are often encouraged to suppress emotion, which may lead to isolation and reluctance to seek help. Additionally, the therapeutic resources available tend to be geared towards women's experiences of infertility, and therapists who specialize in fertility issues are overwhelmingly female-identified. It may also be difficult for some couples to find a therapist who is intimately familiar with how their cultural, religious, and/or ethnic identification may impact their experience of infertility. So what's to be done? Read on.

Common Feelings Associated with Infertility

Struggling with fertility can be an emotionally painful experience that holds implications for marital, sexual, familial, and social/cultural relationships. Although much more has been written about women's reactions to infertility, **both** men and women may become overwhelmed by feelings of depression, anxiety, anger, guilt, or grief. Additionally, because society often links sex and reproduction, socially-constructed views of infertility and gender can provoke feelings of shame and low self-esteem. Irrespective of the cause of infertility, the affected party may feel inadequate or unworthy of their spouse's commitment and love.

Partners often have different ways of communicating, which can lead to feeling disconnected or alienated under stress, even in the strongest of partnerships. Some engage with others as they gather information and support while some are more likely to turn inward to process or avoid these challenging emotions. Even when a couple's infertility is attributed to a male factor, women may be the driving force to consult with doctors and sperm banks to learn about donor conception, and may feel isolated and alone in their family-building efforts. ***It is common for couples to need support in talking about their experience of infertility so that they can understand each other's thoughts and feelings.*** Reaching out to close friends and family about feelings of grief and loss may increase connection, and assist couples in opening their own communication. Additionally, a consultation with a **mental health professional specializing in donor conception** may provide specific information that helps couples more fully understand the process and how that will affect them and their future children. Such a consultation is also likely to improve communication within the couple, increase their intimacy, and help the couple jointly make decisions that will significantly impact the wellbeing of their children and family.

Donor Conception: Why Aren't We Happy?

Doctors often quickly present donor conception as the natural next step for couples facing male-factor infertility. However, you and your partner may experience the road to donor conception as long, winding, and full of mixed emotions. If you are feeling a sense of loss and grief as you consider embarking on this journey, you are certainly not alone.

The transition to donor conception does not feel natural or easy for many heterosexual couples. Couples who try to have a baby that shares both of their genetics often are shocked and devastated by the news that it will not be possible. At first consideration, donor conception may not feel like a viable or comfortable option for family building. Heterosexual couples may be unaware of other people in their community who have used donor conception.

As the female partner you may have always assumed that you would be able to conceive using your partner's sperm. The unfairness of infertility may leave you feeling shaken. You may have a mixture of feelings toward your partner, ranging from empathy, to blame, to resentment, and to guilt, as you

struggle with the idea of creating a family through donor-assisted conception. The thought of using a stranger's sperm may feel uncomfortable or somehow disloyal.

As an intended father, in addition to experiencing the grief and loss associated with not being able to have a child who shares your genes, you may feel worried about the pain and disappointment your partner could feel. You may worry that you will not feel like the "real" father, or that your child will not view you as their "real" dad.

Additionally, you may have tremendous discomfort with the idea that your partner will be using donor sperm. Even though you know that she is not in a relationship with the donor, you may feel jealous and betrayed, and fear that you will think of him when interacting with her or with your child.

Intellectually, you may understand your partner's love and commitment to you but, at least at first, you may also experience a different emotional experience than what you cognitively know to be true.

While couples may find it extraordinarily difficult to talk about male infertility, we have observed that it is important to push through the silence and discomfort and, together, grieve the loss of the child they were not able to conceive. This period of grief can be incredibly important to process before considering whether donor conception is the right next step, acknowledging that your complicated emotions may take a winding course even after a child is born. We strongly recommend that couples examine their feelings about what makes a family, and explore whether a genetic link to their child is imperative for them to be a parent.

Although male infertility may make it impossible for a couple to achieve a pregnancy on their own, donor conception is a form of alternative family building that allows infertile couples to become parents and is a good choice for people who, while acknowledging the importance of genes, believe ultimately that *relationships* are the foundation of a family. ***Your potential feelings of sadness about the child you could not have can coexist with your joy and hope for the child that you will have.***

Shame, Stigma, and Disclosure

It is common for couples to avoid discussing infertility with their otherwise supportive friends, family, and trusted community members. The stigma associated with infertility is well-documented, and palpable in the lived experience of many who have difficulty conceiving. However, we have found that avoidance actually increases future complications.

When left unexamined, the shame and stigma associated with infertility may negatively impact decision-making by causing people to keep secrets. For example, men may agree to move forward with donor conception as long as no one, including the child, is told about the donor. Women, sensing their partner's shame and discomfort, may believe that maintaining secrecy will ease emotional pain and enhance the bond between child and father.

Additionally, adding to a couple's desire to keep donor conception a secret is the ease with which they can "pass" as a "traditional" family. ***In reality, secrecy surrounding donor conception may be***

enormously destructive for all members of the family you have so lovingly created. You may never work through complicated emotions and grief associated with infertility, which can disrupt the bond you have with your child. You may worry that the donor's genetic link could someday trump your central role as the child's father. Additionally, you may resent the genetic connection your partner has with the child, and feel like the "odd man out" in the family. ***By contrast, early disclosure can help build trust, enhance the child's pride in their origins, and strengthen family ties.***

Many donor-conceived people who discover their genetic origins later in life, either by accidental or intentional disclosure, report having sensed all along that their parents were hiding something. Oftentimes they ultimately learn about their origins under difficult circumstances, and the lack of honesty and openness in the family causes psychological harm.

They wished they had been told as children, and that their parents had imbued a sense of pride in their narrative... "We wanted to have you so badly that we went to great lengths to find help. We're so glad you're you, and we're so glad you're ours."

Sperm Mixing

The motivation to mix sperm, while good-intentioned, is based in the desire to erase all traces of infertility and assisted conception. Stigma and shame often underlie a couple's desire to mix the male partner's sperm with donor sperm so that they can hang on to the hope that their child will be genetically linked to both of them.

However, mixing sperm, and subsequently muddling the child's genetic origins, can also produce emotional harm. Sperm mixing is a form of nondisclosure, and as with any type of secrecy, it may be destructive to your family. Sperm mixing may interfere with you fully embracing your child as who they are rather than who you originally hoped they would be. ***Sperm mixing also could negatively impact the intended father's self-esteem, as well as his relationship with his child, because it conveys that genes ultimately are more important than relationships when it comes to building a family.***

Consumer DNA Testing: Secrecy Is No Longer Viable

The widespread and ever-expanding use of at-home genetic testing (ancestry.com, 23&Me, etc.) means that ***many donor-conceived people will find out about their family's donor origins at some point in their life. Even if you do not participate in genetic testing, donor-conceived individuals routinely discover their origins when, unexpectedly, they match with a donor's distant relative, third cousin, aunt, child, sibling, etc. on a DNA website or do NOT match with family members whom they believe are related.***

As a result, your child – whether they are a child, teen or adult – may feel like the "second choice" child, hurting their self-esteem and your relationship with them. The complex emotions surrounding the increasingly common experience of unexpected discovery has led to an entire network of therapists and peer support groups dedicated to working with people who learn through DNA testing that they were donor-conceived.

When sperm donation took off in the 1980s, fertility specialists, sperm banks, and families could not have anticipated the leaps and bounds that science has made in the availability of genetic testing, nor the increasingly connected world made possible through the web and social media. It may seem obvious but, to be sure, there will be continued technological and medical evolution over the course of your child's life. ***We anticipate that these changes will lead to more and more chances that donor-conceived individuals will discover that a donor assisted your family.***

Building Healthy Families: How to Tell Your Child

Research overwhelmingly shows that when children learn about their family's donor origins at an early age, from their parent(s), they have a more positive experience. When donor conception, from their earliest memories, is integrated into their life story with pride, children develop a stable sense of self and of family. When discovery comes later in life, or by accident, donor-conceived people repeatedly share that they feel angry, deceived, and resentful. Their trust in their parents may be shattered and they may question their personal identity. ***Paradoxically, when parents try to eliminate or minimize the donor, the donor may hold greater significance for their child. Correspondingly, parents who choose to share this family information early on report greater ease and less uncertainty with the disclosure process.***

When children learn about their family's donor origins, they may be curious about the donor—even when they have a strong bond and a loving relationship with their parents. When donor-conceived people are not able to find out information about their donor, they often feel as if a piece of their identity is missing. Information about the donor can help donor-conceived people answer the question: "Who am I?"

You may be asking yourself, "So then, how do I disclose? What should I say? How old should my child be when I tell them?" We include information [here](#) that offers guidance and support around this important decision, including a helpful and hopeful article geared towards heterosexual couples entitled [Proud Storytellers](#).

Disclosure and Your Child's Health and Medical Records

Optimizing your child's health throughout their life is another important reason to disclose their genetic origins. Your adult child may have grown up believing, and even reported to their healthcare provider, a family medical history that is inconsistent with their genetic origins. ***Knowledge of their donor's personal and family medical history at the time of donation, and as the donor and his family ages, will help your child optimize their care and screening throughout the course of their lifetime.***

Open-Identity Donation

Parents can increase the ability for their future child to obtain information about the donor by selecting a donor who is willing to share his identity once the child turns 18. ***Even if you are uncertain***

about whether you will want your child to know the donor, you can leave the door open for the child to have a choice by selecting a donor in the Identity-Release® Program. Once you become a parent, your priorities may change and you may feel less worried about maintaining secrecy and more concerned with providing for your child's needs and answering his/her questions, even if your child's queries are about the donor. This has been the experience of many parents.

When considering alternative family building through donor conception, the stigma of infertility may cause couples to keep the donor a secret from family, friends, and even their child, and to choose an anonymous donor. Research on donor assisted reproduction demonstrates that early disclosure is the most beneficial to families, and especially to the children. Selecting an open-identity donor gives your future child the option to learn more about their donor and their genetic origins.

We welcome you to be in touch with us here at TSBC to discuss your concerns around donor conception and/or disclosure. We are also happy to share a list of support people [here](#) who are experts in family building through donor conception.

Additional Resources

Links below are from:

<https://www.thespermbankofca.org/content/heterosexual-couples-using-donor-insemination>

[Building a Family with the Assistance of Donor Insemination](#) by K.R. Daniels (2004), Dunmore Press, New Zealand. Daniels is a social worker who has worked with intended parents, families, donors and donor-conceived people for the last 30 years. He is known not only for his compassion and insight, but also as one of the world's leading academic authorities on this way of having a family.

[Donor Conception Network](#). Non-judgmental space offering information, support, community and resources (including many [books on how to talk to kids](#)) to anyone involved in donor conception, whether personally or professionally. UK-based, but takes the same approach as us. Has a helpful [Why Tell?](#) summary. Offers excellent [workshops](#).

[Elaine Gordon, PhD](#). Elaine's goal is to help individuals build healthy families with the help of donors and/or gestational carriers. Be sure to check out resources at her [website](#). American Society for Reproductive Medicine's Mental Health Professional Group member. Los Angeles 310-454-0502 elainergordonphd@gmail.com

[Madeleine Katz, Psy D](#) provides consultations, education, and resources to help individuals and couples considering and/or doing family building through assisted conception. American Society for Reproductive Medicine's Mental Health Professional Group member. San Francisco 415-937-0425

[Carole LieberWilkins, MA, MFT](#), provides psychoeducational consultations and individual and couples counseling around family building with sperm, egg and embryo donation and/or surrogacy. Carole is well known for her work on talking with children about family building. She is a founding member of Resolve of Greater Los Angeles and a member of the American Society for Reproductive Medicine's Mental Health Professional Group. Los Angeles 310-470-9049, familybuildingclw@gmail.com

[Dr. Deborah Simmons](#) Expert in pregnancy loss & infertility counseling, including psychoeducation for donor eggs, donor sperm, and surrogacy.

[Tonya Wood, PhD](#) provides psychotherapy, consultation, psychological evaluations, education, and resources to help individuals and families through the infertility/reproductive process. American Society for Reproductive Medicine's Mental Health Professional Group member. Los Angeles 310-404-1816

[TSBC Helpful Websites: Male Infertility](#)