This entry describes the growing phenomenon of contact among families who share the same sperm donor. Lesbian, bisexual, transgender, and queer (LBTQ) parents, as well as sperm donor-conceived children, adolescents, and adults, can use registries at donor insemination (DI) programs or independently established by parents to contact others who have the same sperm donor. The entry reviews research about experiences among people who share the same donor—who are “donor-linked”—and why they might want to contact each other. As research to date is primarily quantitative, this entry also includes more in-depth findings about one set of donor-linked families. These families’ experiences provide insight into the complexity of this new phenomenon and the difficulties with defining their relationships.

**Building Family Through Sperm Donation**

One route to having children among LBTQ prospective parents is with the help of a sperm donor through assisted insemination. The donor can be known to a prospective parent or unknown, as in cases of DI through a fertility program or sperm bank. In DI programs, donors will help multiple families have children; this is rare among known donors. In the United States, unknown donors will assist anywhere from one to 40+, dependent on several variables but, most importantly, the DI program’s family limits. An unanticipated outcome of this type of family building, combined with parents being open about using donor conception, is that a DI family—parents and/or their children/adolescents/adults—may be able to contact others who have the same donor. These “donor-linked” families share genetic links but do not have other features traditionally associated with family, such as shared lives and homes. (Families also exist who share the same known sperm donor or egg donor but are not discussed, as little is known about them.)

**Finding Others Who Share Your Donor**

Most parents do not conceive their children with the intention of creating relationships with donor-linked families; until recently, most did not even know others existed. But once they become known, some seek contact with each other. How do families find each other? Why would they want contact? What kind of families would be interested? How many families are even interested in contacting other families to whom they are donor-linked? And how do they perceive their relationship(s) with one another? Quantitative, primarily survey-based, studies have begun to address these questions among single women (primarily heterosexual, with some bisexual- and lesbian-identified women), female same-sex couples, and heterosexual couples.

Until recently, it was difficult to find donor-linked others (see, e.g., the 2001 documentary *Offspring*, by Barry Stevens). Only one small DI program, The Sperm Bank of California (TSBC), offered parents the opportunity for mutual-consent contact with others who shared their donor. The program’s “Family Contact List” was (and is) a registry of all TSBC parents and DI adults who register their interest in contact. When parents and/or DI adults from two or more families sign up, the registry shares their contact information and then leaves contact up to the families.

Others, such as Voluntary Register of Victoria, Australia, work in much the same way and are now starting to link members. The largest registry is the Donor Sibling Registry (DSR; www.donorsiblingregistry.com), created in 2000 by Wendy Kramer and her DI-
conceived son. Unlike DI program-based registries, the DSR is open to anyone who is donor-linked—parents, donor-conceived individuals, and sperm, egg, and embryo donors. It is limited only by the ability to remember the donor’s number assigned by the program or other unique identifiers. The DSR has led the international explosion of people finding donor-linked others, usually parents and donor-conceived adults finding each other. The majority of research comes from this registry and is about people linked through an anonymous sperm donor.

Estimates of interest in making contact among donor-linked people are difficult to obtain. Research among donor-linked families comes primarily from the United States, where the total number of donor-assisted births is unknown and renders estimates indeterminable. Approximate numbers of families are known, however, at the TSBC program, with about one quarter of all families signing up for donor-linked contact. DI adolescents and adults also express interest in contacting others who share their donor—sometimes as much interest as contacting the donor himself. For example, in 2005, Joanna Scheib and her colleagues found that in a small sample of TSBC adolescents who wanted their donor’s identity, almost 90% also expressed interest in others who shared their donor. In 2010, Vasanti Jadva and her colleagues found similar interest levels among DI adolescent and adult DSR members. While it is unclear whether this extends to the majority of donor-linked people, as of 2014, the DSR had almost 45,000 members with over 10,000 having matched to another parent, donor, or donor-conceived person. Clearly, a significant number of people want contact with donor-linked others.

**Contact Interest by Family Type**

Based on DSR membership (the majority are parents) and the high proportion of “Single Mothers by Choice” members who join their linking registry, interest in donor-linked families appears greatest among DI single mothers. Membership in the TSBC matching registry also reflects this trend. In contrast, the majority of DI adolescent and adult (i.e., offspring) DSR members comes from heterosexual-couple parent families (not single-mother families) and the fewest from families with two mothers. Why there are so few individuals from two-mother families is unclear. One possibility is that there are simply fewer of them, as DI became available to female same-sex couples much later, only relatively recently. But it is also possible that interest differs by family type and by the importance attributed to genetic over social ties in determining who is family and in helping a person understand who they are—that is, their identity.

**Why Do Donor-Linked People Want Contact?**

Based on registry research with parents of dependent children (of whom the most is known), parental curiosity appears to drive the interest in contacting donor-linked families. In addition, parents most often appear to seek contact to obtain (1) emotional and informational support for their children and/or themselves and (2) information about their children’s shared traits and sometimes medical problems. Differences have also emerged across family type, the most pronounced being that heterosexual-couple parents are least likely to even join a registry. In comparison to other family types, female-partnered parents more often nominate information-sharing as the reason for seeking contact, whereas single mothers explain interest in seeking support through knowing other DI, and thus nonheteronormative, families. Some parents hope to create extended family for their children, especially when they are single mothers or parent-
only children (i.e., people with, on average, smaller families). Parents from all family types, however, report believing that finding other children who shared their child’s donor may ultimately give the children better insight into themselves.

Single mothers may be more likely to desire and seek out donor-linked families for several reasons. They are in a unique position with only their children to consider when deciding whether or not to join a registry and whether a genetic link holds an opportunity for the benefits of family, such as support and strong relationships. In contrast, partnered parents must balance the potential benefits of forming relationships with others based on shared genetics with the reality that one parent’s relationship is based on non-normative bonds of choices and experiences, rather than traditional genetic links. For heterosexual-couple parent families, which are traditionally defined (in part) by genetic links, forming relationships with others who share the link they will never have can be difficult to consider and act on, especially if the infertility and family’s donor origins are not known to others. For families with two mothers, there is the need to weigh the benefits of relationships with donor-linked others with the potential impact on the family, especially when the genetically unrelated mother’s legitimacy is challenged. Relationships with those who are genetically linked to her children, but not her, may be perceived as a risk not worth taking. Additionally, unlike heterosexual singles and couples for whom genetic links are perceived as powerfully defining features of important relationships, same-sex couples decrease the emphasis on genetic links as a basis for their families; instead, choices and affective ties are strongly defining features. It is possible, then, that sharing a genetic link holds less interest for and relevance to two-mother families.

When DI adolescents and adults join linking registries, their motives for doing so appear similar to those of the parents. Curiosity seems to drive interest. Individuals raised by single mothers are, like their mothers, more likely to seek contact to find new family. Many adolescents and adults also seek contact for information about their shared genetic origins—medical but also shared looks, personality, experiences—based on the belief that this will give them a better understanding of themselves.

**Relationships**

Little information is available about the ways in which DI people and their families view relationships with others who share their donor. Experiences seem positive enough that many families remain in contact after finding each other, but few studies have explored beyond this. Two sets of study findings from the TSBC registry give insight. When parents were asked to describe their relationships, donor-linked families were most often described as friends, acquaintances, or connected through a unique relationship—in non-kin terms. But when asked to describe their children’s relationships, or how they perceived their children to view the relationships, they were most often described as kin. There was also a tendency for children of single mothers, more often than those of female-partnered mothers, to be described as perceiving the relationships in terms of immediate rather than extended kin. This further supports the idea that family is more rigidly defined by genetic ties among the single mothers, most of whom heterosexually identified, whereas definitions of family are more multiply determined among the lesbian families. But overall, being donor-linked to others is not an immediate, clear path to kinship. The next section illustrates the complexities and ambiguities of being donor-linked.

**Experiences Among Donor-Linked Families**
A 2015 documentary, *An Extended Family*, helps fill the gap in understanding the experiences of donor-linked families. Seven donor-linked families were filmed by spouses Stephen Lee and Susan Czark—whose own family was included—to explore their coming to know each other over an 11-year period. Their experiences provide a glimpse into the complexity of this new phenomenon and the difficulties with applying labels to relationships among donor-linked families. More generally, terminology has been inconsistent, with, for example, “donor-sibling” being used more commonly than “donor-linked.” The latter, however, is less likely to imply familial relations—an important consideration for initial explorations of this phenomenon.

Between 1996 and 1999, there were 12 families who selected the same TSBC donor for their children. The documentary includes most of these families. None of the families knew each other. Many of the families lived near TSBC, but others lived on the U.S. East Coast and dealt with the DI program by mail and phone. Over the next 15 years, eight of those families also agreed to be part of the TSBC donor-linking registry. Lee and Czark’s family joined first, soon after their twins were born in 1998. Two more families joined in 2003; others joined sporadically over the next few years.

The families in the group were diverse: one heterosexual-couple parent family, three single-mother families, and four two-mother families. Two of the same-sex couples had separated but continued to coparent together. Another of the two-mother families had separated, and the parents (and the children, both conceived with the same donor) no longer interacted. One of the single mothers was now female-partnered.

The parents say they sought contact with other families to provide “context” for the children. One mother explained that her family joined the registry to give their son as broad an understanding of himself as possible. She added, “We weren’t looking for family—we had that.”

The relationships between families developed over time but invariably followed the same steps. After receiving another family’s information, interactions between families begin tentatively with e-mails and photo exchanges. Phone calls follow, allowing the parents to share their personal stories and medical information. The families then progressed to meeting in person. The parents swapped stories, watched the teens interact, and pondered the connections. The parents observed that the children’s interactions resemble simultaneously those among siblings, cousins, and friends. The children (seven boys and two girls, ages 15 to 18 years) seemed almost magnetically drawn to each other. They roughhoused with one another—even the children who typically shied away from such activity. One of the mothers observed that all the children seemed drawn to touch their half-siblings, “almost like they are trying to put engrams of themselves on each other.” Another mother commented that the children also appeared to be more engaged and more forgiving of each other than they were with their other peers. She added wryly, “It’s almost like they’re related.”

Like all social groupings, some people were closer to some individuals and families than others. One parent described an early meeting of the families as “we were like parents at our kids’ play date, but with more at stake.” Another parent described the relationship between the parents as “similar to in-laws, but without the negative connotations.” The adults also lacked a term that accurately described the parents’ relationships to each other.
The children have had more workable language to describe their relationships. Initially, the teens usually described themselves as “half-siblings.” As the relationships matured, they now easily referred to each other as brother and sister. Several of the teens also commented that their relationships with their half-siblings differ from the relationships they have with friends, cousins, and their own siblings. One parent observed that the children had all the benefits of siblings, “without having to fight over resources.”

The children in this group were genetically related, but what were the families to each other? In many ways they were friends, but many described their relationships as “more than friends.” Several parents described an underlying bond between the families that many of the parents noted is unique to this group.

Was this group a family? The most accurate answer to this question might be, “It depends.” In certain situations, this group felt and behaved like family—in all the positive and negative connotations of the concept. Several of the parents spoke of the group as an “extended family,” but that also depended on one’s definition of family. As families have grown ever more blended and diverse, the meaning of family has grown far more permeable. One of the teens noted, “I think family is more about the people you want to be with than who you’re related to.” To paraphrase psychologist Madeline Feingold, genes make people, but what makes a family?

Knowledge of donor-linked individuals forces DI families to consider whether or not genetic ties, in the absence of social interactions, are sufficient to merit contact, and even consider donor-linked others as kin. For those interested in contact, sharing the same donor, and thus genetic ties, may give families, when initially strangers, leeway to behave as though their interactions will be long-term, so they may be more forgiving and quicker to connect. But like newer, chosen families, the decision to maintain active contact is likely based on mutually rewarding experiences and bonds—without these, parents may end contact, unless the children opt to continue later on their own, when they are old enough.

Conclusion

Even though maintaining genetic ties is a central feature of DI family-building, this traditional criterion of defining family can be as easily rejected by parents as accepted by their children, when defining relationships among families who share the same donor. At this point in our understanding, whereas most relationships among DI children, teens, and adults appear kinlike, relationships among the parents, when they exist, may be best described as blurring the lines around friendships, sometimes to the extent of creating chosen, extended family. More research is needed to understand this new way of creating relationships and sometimes family, but clearly there is no one way of defining relationships among those who share the same donor.

See also Families of Choice; Heteronormativity; Nonbiological, Nongestational Mother; Sibling Relationships; Sperm Donor, Choosing a

Joanna E. ScheibAlice RubyStephen Lee
http://dx.doi.org/10.4135/9781483371283.n328
10.4135/9781483371283.n328
Further Readings
following anonymous donor insemination. Reproductive Biomedicine Online, 24, 719–726.