Australian sperm donors: Public image and private motives of gay, bisexual and heterosexual donors

ABSTRACT

This paper contributes to debate in Australia about sexuality-based restrictions on access to Assisted Reproduction Services, particularly sperm donation by gay and bisexual men. It utilises content analysis of print media and reveals that the public image of sperm donation is saturated with concern about risk, particularly risk to heterosexual donors and their property, from claims made by recipient women and their children. In contrast, a detailed analysis of the profiles of men who register to donate sperm through the Australian Sperm Donor Registry reveals that most donors are open to identity disclosure. However, a marked difference is evident between heterosexual and gay/bisexual donors, with the latter being significantly more likely to desire contact with children born of their donations. It appears sperm donation offers gay and bisexual men an opportunity for family formation and parenting which is denied by Australian laws and clinical practices that exclude them from Assisted Reproduction Services and adoption.

Received 1 March 2008               Accepted 11 June 2008

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Background

The Australian context in which this paper is written is marked by ongoing public and parliamentary discussion about the appropriate level of information which children born of donor insemination (DI) should have about their donors. Advocates of open-identity DI make a strong claim based on the principle of ‘best interests of the child’ that children have the right to know their biological heritage. Debate ensues about whether this necessarily requires the identity of the donor to be known, or whether the ‘right’ attaches only to de-identified medical and descriptive information. The case against open-identity sperm donation is often made pragmatically, assuming men will be more likely to donate if they can do so anonymously. A second argument against open donation emanates from discussions about what constitutes a parent, the argument being that sperm donation does not constitute ‘fatherhood’ in any meaningful sense because parenthood is a social relationship based on the act of parenting rather than on biological links per-se.

The recent trend in Australia, as in many other western countries, has been toward open-identity donation. This has exacerbated concern that a ‘drought’ of sperm donors, which has already been reported by Assisted Reproduction (AR) clinics in Australia, will worsen. Alongside these debates about the meaning and pragmatics of donor conception run ongoing political and policy considerations about who should have access to donor conception. Concern by many public commentators has typically focussed on the eligibility of single women, older women and lesbians to access DI services and on gay and bisexual men as donors. In contrast, social justice advocates are concerned about the discriminatory effect of eligibility criteria for AR Clinics which effectively preclude lesbian and single women.
from accessing DI and precludes gay and bi-sexual men from becoming sperm donors through AR clinics.

My paper engages with each of these public discourses through a focus on the public representation of sperm donation and the individual motivations and expectations of one sub-group of sperm donors: those who register as potential sperm donors through the Australian Sperm Donor Registry (ASDR). My purpose in undertaking a two dimensional approach is to contrasts and compare the public representation of sperm donors with the profile that emerges from donor self description. My particular focus is upon the impacts of sexuality on the motivations and expectations of this group of ‘known donors’.

**Donor relationships to the recipients and to children born of donor insemination**

Men become sperm donors through a variety of pathways which are likely to be important to their understanding of their relationship to the recipient and to children born from DI. A simple distinction between ‘known’ and ‘unknown’ (anonymous) donors is meaningful from the viewpoint of the recipient and children born of the DI, but from the standpoint of the donor this does not describe the complexities of donation. A continuum of relationship from that of anonymous donation to an AR clinic through to ‘known’ donation to friend or family member captures one dimension of the complexity. A second dimension relates to the extent of contact donors seek with children born of their DI.

An important distinction may well be between men who self-identify as donors and who initiate the donor relationship, and those who agree to DI following an approach by a particular individual or couple. Very little is known about the differences in motivations, expectations or experiences of donors who self-identify and those who are in some sense ‘recruited’. We do know that the latter group necessarily ‘know’ the recipient personally and the dynamics of their recruitment has recently become the subject of Australian research (Riggs 2008; Ripper 2007). In contrast, the group of self-identified donors is comprised of two groups. The first of these is constituted by those who donate through a non-personalised relationship with a clinic rather than to particular women. In these cases the identity of the recipient and the outcome of the DI typically remain unknown to the donor, at least at the time of donation. Increasingly children conceived of DI are likely to identify themselves to their donors as Australian legislation and clinical practice moves toward open-identity DI. Of the research about donor motivation and expectation which has been conducted both in Australia and world-wide, most has been conducted with clinic donors and much of it has focussed on the impact of open-identity versus anonymous donation.

A second group of self-identified donors are those who initiate personalised donation through informally negotiated arrangements, either through advertisement or through networks such as the Australian Sperm Donor Registry. By definition these men become ‘known’ to the recipients, but only (or initially only) in relation to the DI process. Very little is known about the motivations and expectations of this group of self-identified donors. My study of the ASDR registrants provides a profile of these donors and explores their expectations about preferred recipients and the level of disclosure, contact and involvement they seek with children born of their DI. In order to provide a context for this discussion I turn to a brief overview of what is already known about donor motivation and expectations in jurisdictions such as Australia where payment is not a motivating factor.

**Sperm donor motivations and expectations**

Existing Australian research about what motivates men to become sperm donors is predominantly based on studies of men who donate through AR clinics (Daniels 1989; Rowland 1983) and the results are necessarily influenced by the fact that Australian donors are not paid for their donations and by the legal and clinical requirements about donor identification. Relatively few studies have been done with donors who provide sperm in the ‘informal’ sector which generally involves direct negotiation between the donor and recipient.
Very little is known about the motivations and expectations of men who self-identify as sperm donors and negotiate DI relationships independent of AR clinics in jurisdictions such as Australia. Work by Maggie Kirkman (2004) includes the experience of one Australian sperm provider ‘Evan’ who donated to people he knew. Kirkman’s participant was motivated to do so in part ‘to reproduce in the absence of children of his own’ (2004:326) but also as a political act of ‘helping lesbian couples and single women who asked him to be their donor’ (2004:327). Kirkman’s narrative analysis of interviews with sperm providers, recipients and offspring offers a glimpse of the complexity of the public and private representation of sperm donors. She documents the negative impact of a public representation of donors as sexualised ‘wankers’ and/or motivated by financial compensation (Kirkman 2004:327). Kirkman also identifies a popular discourse in which the donor relationship is likened to adultery with the donor replacing the ‘cuckolded’ husband (2004:325).

Kirkman’s study provides important glimpses into the way sperm donation is understood. Her work demonstrates the need for further exploration of the experience of ‘known donors’ in contexts where motivation is not financial. Damien Riggs’ (2008) qualitative research with South Australian sperm donors opens up this complex area, and compliments the results of my analysis of men registered on the Australian Sperm Donor Registry. My study builds on Kirkman’s work to the extent that it explores both the public representation of sperm donation and the motivations and expectations of donors themselves. It differs however in that my sources of data are not first hand accounts but a combination of print-media representations and sperm donor registrants’ self-descriptions.

The impact of open-identity donation on donor availability
A study of the effects of law reform requiring open-identity donation in the Netherlands indicates that when the possibility of anonymous donation ceases, the number of donors offering open-identity and making private arrangements increases steadily. However the absolute number of donors is reduced because there are far fewer identity-release and known donors than there were anonymous donors prior to the change in the law. Janssens and colleagues report that in Holland in 2005 there were less than half the number donors as there had been anonymous donors registered in 1990 before the legislation changed (Janssens et al 2006:855). The international consensus seems to be that it is feasible to recruit donors in a non-anonymous system but an initial drop in donor numbers occurs when laws requiring ‘open-identity’ donation are initially put in place (Scheib and Cushing 2007:232). My study, undertaken in 2007, is situated amidst legislative change toward open identity donation and concern about a consequent ‘drought’ in sperm donation.

The research question and design
The aim of the study is to explore the similarities and differences between public representations of sperm donation and the representations invoked within self-identified donors’ descriptions of themselves and of the donor relationships they seek to establish with recipients and with children born of their DI. A second dimension is to investigate the extent to which donors’ sexual orientation and relationship status impacts on their motivations to become a donor and their expectations and desires about involvement in the lives of recipients and their children. An analysis of the ASDR allows such an examination of the intersections of donors’ sexuality and their motivations and expectations because, unlike Australian AR clinics, it does not preclude registrants on the basis of their sexual orientation or practices.

In comparing media representations and donor self-descriptions I in no way presume the level of donor registration or the content of the donor profiles is a simple or direct reflection of media messages. Rather my aim is to locate the registrants’ self-descriptions within the broad discursive context of which they are part.

Media Analysis
Australian newspaper articles about sperm donation were collected for the period February to August 2007. All articles which included the term ‘sperm donor’ and/or ‘donor insemination’
Margie Ripper

in the headline or lead paragraph were retrieved using the Factiva database. Duplicate articles were excluded and the remaining unique articles were subjected to a content analysis with both a quantitative and qualitative dimension. Although content analysis is traditionally thought of as a quantitative research strategy it can be extended to link with qualitative textual analyses including narrative analysis and discourse analysis (Lupton 1994; Carabine 2001). In this study I use a quantitative dimension descriptively to provide a sense of the volume of print-media attention being paid to sperm donation and to categorise the different themes and issues. The qualitative dimension allows a narrative analysis of the articles to reveal the discursive sub-text of concerns which lie within and beneath the overt content.

Analysis of donor profiles on the Australian Sperm Donor Registry.
The ASDR lists donor profiles of men who self-identify as sperm donors seeking to establish informal donor arrangement. The profiles includes demographic information on age, sexuality and marital status as well as information about the donor’s motivation for registering, their preference regarding ongoing contact with children conceived through their DI and any specifications they have about the ‘match’ characteristics of recipients. In analysing these donor profiles I take a similar approach to that used with the print-media, beginning with a quantitative description of the demographic characteristics of the registrants before moving to a more interpretive (qualitative) reading of their comments about reasons for donation and their expectations of the recipient and level of identification/contact/involvement with children born of their DI.

Results: Sperm donors in the news
My search of the print-media reportage about sperm donors undertaken for the period February 1st to September 1st 2007 returned forty-five unique articles. The dominant themes in this news coverage are summarised in Table 1. Although the largest number of articles is about the shortage of sperm donors, the pervasive underlying message throughout the media coverage is that sperm donation is inherently ‘risksy’ for both donors and recipients. This message is carried in the thirty articles that report on three different court cases where sperm donation had negative consequences.

Table 1: Themes within Australian newspaper reports about sperm donation published 1st February to 1st September 2007. N=45 articles with 47 themes.

<table>
<thead>
<tr>
<th>Predominant theme of each article</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>The shortage of sperm donors in Australia.</td>
<td>14</td>
</tr>
<tr>
<td>Australian court rules that the children of a ‘sperm donor’ inherit his estate.</td>
<td>12</td>
</tr>
<tr>
<td>Report of an Irish court ruling that the donor conceived child of lesbian couple must remain in proximity to the donor ‘father’.</td>
<td>11</td>
</tr>
<tr>
<td>Report of a USA court ruling of sperm donor required to pay child support.</td>
<td>7</td>
</tr>
<tr>
<td>Other human interest ‘first hand account’ reports:</td>
<td></td>
</tr>
<tr>
<td>• The special gift of donating eggs.</td>
<td>1</td>
</tr>
<tr>
<td>• Infertile man’s quest to save the $800 needed for he and his wife to afford DI in South Australia.</td>
<td>1</td>
</tr>
<tr>
<td>• A very positive mother’s day story about diverse families including sole and lesbian DI families.</td>
<td>1</td>
</tr>
<tr>
<td>Total themes</td>
<td>47</td>
</tr>
</tbody>
</table>

Media representation of sperm donor shortage
The shortage of men willing to donate sperm to Australia’s AR clinics was the dominant concern of fourteen of the articles published in newspapers from New South Wales (NSW), Victoria (Vic), Western Australia (WA), Tasmania (Tas) and Queensland (Qld). Five of these articles reported that the shortage is so severe that clinics, unable to recruit local donors, have resorted to importing sperm from USA clinics. Overwhelmingly these articles attribute the Australian ‘drought’ in donor sperm to the existence of, or prospect of, legislation that allows DI conceived children to have access to identifying information about the donor. Typical of these articles is one in the Hobart Mercury headlined: ‘Tassie SOS for Sperm Donors’ (Paine...
Australian sperm donors

2007:3), in which the head of the reproductive medicine clinic TasIVF is reported as saying that only two new donors had been recruited in the past eighteen months which he attributes to legislation which has prevented or made uncertain the anonymity of sperm donor: ‘Since 2000, Tas IVF has required donors to agree to be identifiable to offspring when they reach 18. National guidelines requiring this were put in place more recently’ (Paine 2007:3).

No evidence is offered in support of the underlying assumption that sperm donors prefer to remain anonymous, yet experts in the field of assisted reproduction are repeatedly quoted as saying that this is so. This view is at odds with international literature on sperm donation which reveals that in Sweden, Norway, UK and USA the move to ‘open-identity donation’ has not necessarily discourage donors (Frith et al 2007). Indeed, a recent USA study found that where clinics offered donors the choice of open or anonymous donation, an increasing proportion of donors opt for open donation (Scheib and Cushing 2007:232). Caution must be exercised when generalising findings from the USA with its highly privatised health system, donor payment and flourishing market in egg, sperm and surrogacy transactions. However the research findings from the UK and Scandinavia, both of which have health and legal systems more akin to Australia, also indicate that open donation does not necessarily discourage donation (Lalos et al 2003; Daniels et al 2005).

However a Western Australian study among clinic donors who had previously donated anonymously suggests that less than half would donate if their identity was released to offspring (Godman et al 2006).

It is possible that a different cohort of men are attracted to open donation than those who donate anonymously. This was alluded to in the one dissenting voice reported within the print-media. In an opinion piece in the Victorian *Herald-Sun* titled: ‘Not everyone wants to know Dad’ Professor Gab Kovacs, the national director of The Victorian Reproductive Medicine Clinic Monash IVF observed that ‘the shortage [of sperm donors] preceded the legislation and I do not believe identity discourages the type of men we are keen to recruit as sperm donors’ (*Herald Sun* Sunday 19 July 2007:21).

It seems that journalists were able to locate numerous expert commentators to reiterate the taken-for-granted assumption that sperm donors prefer anonymity presumably because of uncertainty about their paternity status. Fear that donors may be charged with parental responsibility for children born of their DI was also fuelled within the print-media.

**Media representations of the dangers of sperm donation**

Anxiety about the parental status of sperm donors was the focus of 30 of the 47 newspaper articles. Concerns were raised that donors will be held responsible for child maintenance (either by the authorities or by the mothers of DI conceived children). DI conceived children are presented as successfully claiming inheritance rights in regard to the property of their donor ‘father’. Additionally, the uncertain legal status of lesbian parents is accentuated in news articles that report donor success in gaining child contact or custody.

The person positioned as victim in all these articles is the well-meaning sperm donor, typically implied to be a heterosexual ‘family man’, whose altruistic act has put him or his ‘legitimate’ family at risk. The seriousness of the risk is underscored by the fact that the reports all focus on outcomes of court cases, implying that there is no legal protection for sperm donors.

Thirty newspaper articles report on three court cases involving sperm donors. A closer interrogation of this news coverage demonstrates that it is confused and confusing particularly regarding Australian law regarding the difference between a sperm donor and a father. At one level this confusion is not surprising given the differences in laws between states, between state and commonwealth jurisdiction and between the various acts that define family and parental status and responsibility. But the articles rarely inform readers about the legal complexities, instead they reinforce the idea that sperm donation puts men and their families at risk.
Court case one: ‘Sperm donor’s children inherit his estate’

Twelve separate newspaper articles report on a ‘battle’ in an Australian court over the estate of Mr. Willem Wijma who fathered three children outside his marriage and two within it. The three ex-nuptial children sued successfully for a share of Mr. Wijma’s estate. What is interesting about this case is that the newspaper articles consistently refer to the deceased man as a ‘sperm donor’ to the ex-nuptial children despite the fact that they were conceived through a sexual and allegedly romantic ‘affair’ with their mother who had subsequently allowed her husband to believe that he was the biological father of the three children. The judgement in favour of Mr. Wijma’s extra-maritally conceived children was widely reported to have ‘serious ramifications’ for all sperm donors and DI conceived children. For example, an article from The Daily Telegraph which is headlined ‘Children of donor win right to inherit’ concludes that this ‘landmark decision … raises questions about the legal rights of thousands of men who have donated sperm - and alarm among the men’s families who face sharing their inheritance with a stranger’ (Fife-Yeomans 2007:7).

In Australian law the method of insemination is crucial to the definition of a sperm donor because the act of coitus invariably confers parental status and responsibility whereas conception through artificial insemination does not. All twelve of the articles about the Wijma ruling referred to Mr. Wijma as a sperm donor. The failure to report the crucial fact of intercourse conferring parenting status allows an alarmist and inaccurate application of this court ruling to be made donor conception through insemination. This contributes to a climate of uncertainty/anxiety about the property rights of children conceived through sperm donation. In this case the perceived risk is to the birth-right of ‘legitimate’ children born to a heterosexual ‘sperm donor’. The Irish case highlights the ease with which courts invoke hetero-normative assumptions where there is no law to the contrary. The assumptions that are evident in this judgement are that:

1) fatherhood (social fathering) is bestowed through biological/genetic connection;
2) every child needs a ‘father figure’;
3) lesbian parenting is deficient; and
4) sperm donation to lesbians is unwise because they cannot be trusted to recognise men’s interests, or even those of children. The stereotype of lesbian parenting as ‘selfish’ is therefore invoked.

The news reports fail to acknowledge that in Australian law paternity rights do not flow from biological connection in the case of DI, though this is less clear for informally arranged DI than for that offered through AR clinics. So, although this Irish case has little relevance to the Australian context, its extensive news coverage contributes to the sense that genetic fatherhood has the possibility of ‘winning out’ over any alternative (‘deviant’) parenting claims such as those by single or lesbian mothers.

Court case two: ‘Sperm donor awarded child contact’

The second most widely reported case concerns a ruling from an Irish court but, with eleven separate news reports, it is almost as extensively covered in the Australian press as is the local Wijma case. The Irish court ruled in favour of a sperm donor to prevent the lesbian woman who had conceived through an informally arranged DI from taking her son out of the country. The reason given by the judge is reported to have been that had the child been allowed to leave the country the donor/father would be deprived of contact with his ‘son’. The salience of the article for Australian audiences seems only to be that the woman intended to travel to Australia with her lesbian partner.

Court case three: ‘Sperm donor liable to pay child maintenance’

The third most widely publicised court ruling was the subject of seven separate newspaper reports. It concerns a USA court which deemed a sperm donor to be responsible for child maintenance payments for children born through DI to a lesbian couple whose relationship had subsequently broken down. No information is
provided beyond this (for example whether the donor had contracted with the women to have a parenting role in the children’s life). The bizarre fact that the ruling was made against the estate of the donor following his death carries the additional impression that sperm donors can be held responsible for child-support even beyond the grave. Again the circumstances of the case and the differences between the USA and Australian legal system make the relevance of the case to an Australian audience tenuous, however the cumulative effect of headlines across the country is to create the impression that sperm donors are financially liable for child maintenance, for example headlines assert that ‘Court rules donor liable’ (Qld, NSW) ‘Dead donor father liable’ (South Australia) ‘Alimony donor liable’ (Qld) and ‘Sperm donor hit with bill’ (Vic). Once again the sperm donor is heterosexual, but here the threat is from lesbian women, women who are presented as having ended their relationship and sought to provide for their child by making a paternity claim on the sperm donor. The stereotype of same-sex relationships as ‘unstable’ and lesbian mothering lacking commitment are readily invoked, even in the sketchy level of detail that the articles include.

The combined effect of an emphasis on donor shortage and the dangers of donation presents sperm donation as being in crisis predominantly because of the possibility that donors may be deemed to be a ‘father’ and held financially responsible for children born of their DI. Within the news coverage of sperm donation the overwhelming message is one of concern about sperm donors’ parental status. It is carried both by the absence of any positive stories about successful donor experiences combined with the accumulated impact of the extensive coverage of three negative court rulings, only one of which was made under Australian law. The men at risk in the three court cases are presented as being well-meaning heterosexuals whose motivation was to help women have the children they desired. In two of the three cases the women are lesbian and in all cases the women act deceitfully, one toward her husband and the other two toward the donor.

This media depicts and reproduces concern about risks that sperm donors are exposed to, and implies that men are wiser and safer if DI is anonymous and untraceable. The implicit (and sometimes explicit) message is that the drop in the number of sperm donors registered with assisted reproduction clinics is a rational response to a real risk. It is therefore something of a puzzle to find that throughout the years that Australian AR clinics have experienced a ‘drought’ in sperm donors, an online sperm donor register - The Australian Sperm Donor Registry - has remained viable, and appears not to have experienced the same dramatic drop in donor registrants as have AR clinics. An analysis of the donor profiles on the ASDR captured in August of 2007 sheds some light on this question and on the motivations and expectations of this group of self-identified sperm donors.

**The Australian Sperm Donor Registry**
The Australian Sperm Donor Registry has been in operation since 2003 and is run by the company: The Sperm Donor Consultants. ASDR is not an insemination service, but simply a service that facilitates contact between women wishing to conceive and men willing to donate sperm. Men register as donors by placing their profile online. Potential recipients are able to view the donor profiles and if they find someone with whom they wish to make contact they register with ASDR and pay a fee to receive contact details of the donor/s they have chosen. Negotiations between donors and recipients are a private matter, not brokered by ASDR.

In its four years of operation ASDR has had a fluctuating number of men registered as sperm donors. The current number appears to be about half that of the peak registration in 2004 however ASDR has remained viable despite being the target of a campaign to close it down which was spearheaded by conservative commentators including South Australian MP Robert Brokenshire and media personality Bettina Arndt (Ninemsn News 19th September 2004).

My analysis of the profiles of donors listed on the ASDR website on August 24th 2007 provides a demographic overview of this group of self-
identified donors and relates the demographic characteristics to their preferences about anonymity/contact with children and their motivation for, and expectations about, donation. At that time that my ‘snapshot’ of registrants was undertaken 40 donor profiles were available from men offering to donate in Australia. This number excludes New Zealand based donors. It also under-represents the usual number of Australian donors because donors from Victoria had been temporarily removed under instruction from the Victorian Minister for Human Services pending their ‘approval’ by the minister. An explanation on the website reads:

We have currently had to suspend our Victorian donors as we have received a letter from the Department of Human Services indicating any donors from Victoria must have written permission from the minister to be listed on our website. We will update you on any further changes. If you are considering becoming a Victorian donor please email us for more information on how you can comply with this (http://www.australianpermndonorsregistry.net/viewed August 20th 2007).

The managers of ASDR advised me that about 20 Victorian men had been on the register prior to the ministerial intervention, which they see as being part of an ongoing campaign against the service (pers comm. Sept 3rd 2007).

The profile of self-identified donors registered with ASDR

The profile of donors listed on the ASDR includes details about each donor’s age, sexuality, marital/relationship status and whether they have children. In summary it indicates that:

Men are registered from all states and territories of Australia except the two smallest (Tasmania and the Australian Capital Territory). Donors are predominantly single men (29 of 40) with a fairly even mix of sexuality with 21 being heterosexual and 19 ‘non-heterosexual’ (15 gay and 4 bisexual). Most donors do not have children (32 of 40), and their average age is late thirties (38.7 years). Most want to have contact with children (21) whereas (16) are flexible about this having indicated that they are ‘open to discussion’ about contact. Only two registrants specify that they want ‘no contact’ with children, preferring that their identity not be disclosed to children born of their DI.

At first glance this profile stands in stark contrast to the image of sperm donor presented in the media and those who donate through AR clinics. It is likely that the Sperm Donor Registry attracts a different demographic than clinics especially in terms of the sexuality of donors and the exclusion of gay and bi-sexual men. It is also probable that men seeking to have some contact with children conceived of their donation would be attracted to known donation offered by the ASDR compared with the anonymity that has historically been associated with clinics.

A more detailed breakdown of the information indicates some important differences among the donors depending on their age, relationship status and sexuality. First an exploration of the relationship status of heterosexual, gay and bi-sexual men shows that the majority of donors are single (29 of 40) and that single donors are equally likely to be gay/bi-sexual as heterosexual whereas donors with partners are predominantly heterosexual.

Table 2: Relationship status and sexuality of ASDR sperm donors listed at August 24th 2007, n=40

<table>
<thead>
<tr>
<th></th>
<th>Heterosexual</th>
<th>Gay</th>
<th>Bi-sexual</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>13</td>
<td>12</td>
<td>4</td>
<td>29</td>
</tr>
<tr>
<td>Coupled</td>
<td>8</td>
<td>3</td>
<td>4</td>
<td>11</td>
</tr>
<tr>
<td>Total</td>
<td>21</td>
<td>15</td>
<td>4</td>
<td>40</td>
</tr>
</tbody>
</table>
Australian sperm donors

The age of donors also differs according to sexuality with the average age of heterosexual registrants being 43 whereas gay men are a decade younger (with an average age of 33) and bi-sexual men are in between at 36.5 years old.

Very few of the registrants have children (8 of 40). Those who do so are most likely to be heterosexual (7): both single and coupled. Interestingly three of the single heterosexual men had children from previous sperm donation. None of the gay registrants had DI children although one reported having donated previously but the pregnancy miscarried.

**Donor sexuality and preferences for contact with children**

In relation to the registrants’ desires regarding contact with children born of their DI, there is a dramatic difference according to sexuality, as summarised in Table 3. Gay men overwhelmingly want some contact with children (12 of 15) and for the remaining three gay men contact was a matter for discussion with the recipients. None of the gay men wanted to remain unknown to children born of their DI.

Among the 12 gay men who wanted contact with children seven were seeking a definite ongoing parental role with several using expressions such as ‘co-parent’, ‘weekly’ or ‘regular close’ contact or a ‘definite role’ to describe their expectation and one gay man sought a woman ‘willing to carry his child’ in order for him to take a full parenting role with the assurance that the birth mother ‘may have contact’. In contrast a minority of heterosexual men wanted contact with children born of their DI (8 of 21), and more (10) were flexible about contact depending upon the recipient’s wishes. Two heterosexual donors wished to have no contact, both of these were married, one was soon to have his own family and the other had no children. Of the eight heterosexual donors who wanted child contact only two sought a ‘definite role’, both were in their forties, one was a single man whose ex-wife had not wanted children and the other a married man without children who wanted to ‘help to raise a family’. Among the four bi-sexual donors two were flexible about contact and two-wanted contact: one with a definite role.

This overview suggests that when considering the group of donors as a whole it is extremely rare that men want to remain unknown to the children born of their DI (2 of 40). However it is also evident that the majority of donors (28 of 40) are not seeking a substantial parenting role through their sperm donation; they either want minimal child contact or are open to discuss/accept the preferences of the recipient in this regard. Of the ten donors who did seek definite, close, or regular child contact nine were single, eight were gay, and none had children. The age of the gay men seeking a parenting role was mid to late 30s whereas the heterosexual and bi-sexual men were in their early 40s. It would seem that those donors whose

<table>
<thead>
<tr>
<th>Sexuality/relationship status</th>
<th>Preferred amount of child contact</th>
<th>Missing</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>None</td>
<td>Flexible/discuss</td>
</tr>
<tr>
<td>Gay coupled</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Gay single</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Heterosexual single</td>
<td>7</td>
<td>5</td>
</tr>
<tr>
<td>Heterosexual Coupled</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Bi-sexual single</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Total 40</td>
<td>2</td>
<td>15</td>
</tr>
</tbody>
</table>
sexuality largely precludes them from having children are more likely to seek a parenting role through their DI whereas men who are heterosexual rarely seek to know or parent the children of DI. A Chi Square test of association between donor sexuality and the amount of child contact sought indicates that non-heterosexual donors (gay and bisexual) are a statistically significantly more likely to seek child contact than heterosexual donors, p = < .05 (Chi square 4.496 DF=1).

The amount of child contact that is sought by donors is illuminated further by the men’s answers to two further questions on the donor registrar. One asks donors to describe their reason for donating and the other asks what (if anything) are their ‘match requirements’. Here donors record any preferences they have regarding the recipients of their donated sperm.

**Donor motivation for offering DI**

Thirty-eight of the forty registrants recorded at least one reason for becoming a sperm donor. Mostly they describe their motive as wanting to help others to conceive (24 of 38). Sometimes this reason was framed explicitly as providing the ‘gift’ of parenthood/family to somebody who could not otherwise conceive. Five donors explicitly mention their desire to facilitate motherhood for single or lesbian women a finding which echoes Kirkman’s (2005) finding of ‘political’ motivation.

A substantial minority 45% (17 of 38) were additionally motivated by their desire to parent. These responses were predominantly from gay men (10 of 12 gay donors) and were expressed in phrases such as ‘having my own child’, ‘someone to look after’, ‘to be a parent’, ‘to be a provider for a family’ or ‘to father a family’. A further two of the single men (one gay and one heterosexual) sought paternity rather than a parenting role, expressed as ‘knowing there is part of me out there’. Four of the heterosexual men motivated by the desire to be fathers reported that their ex-partners had not wanted children. It seems that they were motivated to experience paternity and in one case parenting through DI because they had previously ‘missed out’ on fatherhood.

**Table 4:** Donor sexuality by preferred amount of child contact. ASDR August 20th 2007, n=39. (One registrant did not designate a preferred amount of child contact)

<table>
<thead>
<tr>
<th>Donor Sexuality</th>
<th>Preferred amount of child contact</th>
<th>None or flexible</th>
<th>Some required</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-heterosexual</td>
<td>5</td>
<td>14</td>
<td>19</td>
<td></td>
</tr>
<tr>
<td>Heterosexual</td>
<td>12</td>
<td>8</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td></td>
<td>17</td>
<td>22</td>
<td>39</td>
<td></td>
</tr>
</tbody>
</table>

**Table 5:** Reasons for registering as sperm donors by registrant’s sexuality and relationship status. ASDR August 20th 2007, n=40

<table>
<thead>
<tr>
<th>Sexuality/relationship status</th>
<th>To help others</th>
<th>To be a parent</th>
<th>To self replicate</th>
<th>No reason given</th>
<th>Total number of reasons/donors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gay coupled</td>
<td>2</td>
<td>1</td>
<td></td>
<td>1</td>
<td>2/3</td>
</tr>
<tr>
<td>Gay single</td>
<td>4</td>
<td>10</td>
<td>1</td>
<td></td>
<td>15/12</td>
</tr>
<tr>
<td>Heterosexual single</td>
<td>9</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>8/7</td>
</tr>
<tr>
<td>Heterosexual coupled</td>
<td>6</td>
<td>2</td>
<td></td>
<td>1</td>
<td>12/13</td>
</tr>
<tr>
<td>Bi-sexual single</td>
<td>3</td>
<td>3</td>
<td></td>
<td></td>
<td>6/4</td>
</tr>
<tr>
<td>Totals</td>
<td>24</td>
<td>17</td>
<td>2</td>
<td>2</td>
<td>43 reasons from 38 donors</td>
</tr>
</tbody>
</table>
Australian sperm donors

A Chi Square test of association between donor sexuality and the reason they gave for being a sperm donor shows that non-heterosexual donors (gay and bisexual) are statistically significantly more likely to be motivated by the desire for parental involvement than are heterosexual donors, who are more commonly give the reason of helping others, p = < .02 (Chi square 5.581 DF = 1).

Table 5 shows the reasons given by men of differing sexualities and relationship status for their decision to register as sperm donors. Several donors gave more than one reason and two donors gave no reason.

The widespread desire among gay donors to become active parents reinforces the earlier finding that gay single men were more likely than any other donors to seek a definite relationship with children born of their donation. It is perhaps not surprising then that it was this group of men who nominated more ‘match requirements’ than did heterosexual registrants.

A Chi Square test of association between donor’s sexuality and whether they nominated match requirements in the recipient indicates that non-heterosexual donors (gay and bisexual) are statistically significantly more likely to nominate match requirements than are heterosexual donors, p = < .05 (Chi square 4.496 DF = 1).

Characteristics that donor’s seek in recipients

The final question addressed through this analysis of ASDR registrant profiles is whether the characteristics sought in recipients (the ‘match requirements’) were different for gay/bi-sexual donors than for heterosexuals and whether there is a difference in the ‘type’ of woman being sought/imagined by donors who want to have ongoing contact with children and those who do not.

For the group of registrants as a whole, most (26 of 40) identified some requirements in the DI recipient. I have categorised the requirements into five broad types:

1) Character traits/personal attributes,
2) Demographic characteristics, such as age, religion, race,
3) Relationship status/family structure,
4) Sexuality, and
5) Other.

Table 7 shows the number of different types of match requirements specified by donors of different sexuality. It illustrates that for the donors as a whole it is personal characteristics of the woman which are most commonly specified (29 of 53) but that these are most often sought by gay rather than heterosexual men. Indeed many heterosexual donors specified no match requirements of any sort. Those heterosexual men who did specify characteristics listed fewer than did their gay or bi-sexual counterparts and were as likely to specify relationship attributes as personal characteristics. In particular a higher proportion of the heterosexual donors sought to donate to couples, usually designated as ‘loving couples’ or those in a ‘stable relationship’ with one specifically mentioning ‘no single mothers’ and another specifically precluding donation to lesbians. Comparatively few (four) of the gay and bi-sexual donors specified that they would donate only to couples, and two explicitly stated that they were equally open to donating to ‘Gay or Straight’ recipients.

Table 6: Donor sexuality by nomination of match requirements in recipients. ASDR August 20th 2007, n=40

<table>
<thead>
<tr>
<th>Donor Sexuality</th>
<th>Specified</th>
<th>Match requirements</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>none required</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heterosexual</td>
<td>9</td>
<td>12</td>
<td>21</td>
</tr>
<tr>
<td>Non-heterosexual</td>
<td>17</td>
<td>2</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>26</td>
<td>14</td>
<td>40</td>
</tr>
</tbody>
</table>
Gay men specified an average of two requirements in recipients with the majority of these (21 of 32) being character traits. It seems that gay and to a lesser extent bi-sexual donors are more prescriptive of the sort of woman they prefer as recipient than are heterosexual donors. A comprehensive analysis of the all the match characteristics mentioned by registrants demonstrates that gay men overwhelmingly specified that recipients have personal characteristics which are hallmarks of good mothering such as being loving, responsible, caring, emotionally mature, intelligent, calm, thoughtful, considerate, friendly, kind, capable and happy. The few heterosexual men (5) who specified recipients’ personality characteristics similarly sought women who were loving and thoughtful. Very few explicitly specified the recipient’s sexual orientation, though many donors, both heterosexual and gay/bi-sexual, sought to donate to couples where the relationship was ‘committed’ or ‘loving’. This implies an interesting difference in what constitutes a family, with heterosexual men explicitly specifying the need for two parents whereas gay/bi-sexual donors focus much more on the parenting (mothering) qualities of the recipient.

**Discussion and implications**

These analyses show that far from there being a ‘drought’ in self-identified sperm donors in the informal sector that there are two somewhat different groups of men who seek to donate sperm. The first is those who fit the description of ‘altruistic’ donor who are motivated primarily by a desire to ‘help someone who is keen to have children’ to do so. This group does not have a strong preference for contact with children born of their DI but are typically open to this if contact or ongoing involvement is desired by the recipient. This group are somewhat older, are predominantly heterosexual and seek to donate to couples in ‘committed relationships’. Their donation could be seen to be compatible with normative family structures of producing children for a loving couple to parent.

The other group of donors are distinguished both by their same-sex sexual orientation (as gay/bisexual) and by their stronger preference to having contact with children born of their DI. A substantial sub-group of the gay male donors seek to be actively involved in parenting the children born of their DI. These men are more prescriptive of the characteristics that they require in the recipient, particularly in relation to personal traits and capabilities that are commonly attributed to ‘good mothering’. On the one hand this group of donors offer a challenge to hetero-normative family structures as gay men seeking a role in child raising (and in some cases co-parenting), yet at the same time their match requirements (which heavily emphasise motherly traits) reinforce normative gender roles.

It is not possible to judge the extent to which the findings of this study of donors in the informal sector can be generalised to the regulated RA clinic sector, however one could speculate that the

<table>
<thead>
<tr>
<th>Sexuality of donor</th>
<th>Number and type characteristics sought in recipient</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Character traits</td>
</tr>
<tr>
<td>Gay N = 15</td>
<td>21</td>
</tr>
<tr>
<td>Bi-sexual N = 4</td>
<td>3</td>
</tr>
<tr>
<td>Heterosexual N = 21</td>
<td>5</td>
</tr>
<tr>
<td>Totals</td>
<td>29</td>
</tr>
</tbody>
</table>
shortage of sperm donors to clinics is at least part due both to the exclusion of gay and bi-sexual donors, and to the past practice of donor anonymity. It could be concluded that there is an untapped pool of gay and bi-sexual donors who, more than their heterosexual counterparts, prefer to have their identity known to the children born of their DI. The level of child contact sought by, or acceptable to, the donors on ASDR is much greater than that which is becoming established as standard practice in AR clinics. Typically, identity release does not imply contact or involvement of the donor in the lives of the children born of his DI. Rather, it means that the donor identity can be obtained by DI conceived children when they reach the age of eighteen. This would suggest that there will continue to be a place for informally negotiated DI conception especially among gay, lesbian and bi-sexual people who for the most part are precluded as donors and/or recipients of AR Clinic services in many Australian states. This study has shown that the news media contributes to a climate of anxiety about the riskiness of sperm donation and thus presents the shortage of donors as a rational response by ‘risk averse’ men. My analysis of the motivations and expectations of sperm donors in the informal sector suggests that the ‘drought’ of donors may be considered largely the result of discriminatory practices in AR clinics which have not facilitated the donation by gay and bi-sexual men and not facilitated contact between donors and children born of that donation where such contact was mutually agreed.

Acknowledgement
This study was funded in part by a grant from the Faculty of Humanities and Social Sciences at the University of Adelaide and enabled by a sabbatical at San Diego State University’s Department of Women’s Studies.

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Australian Sperm Donor Register: http://www.australianspermdonorregistry.net/ [Date of access: 18.8.07].