

Developing further sensitivity to issues relating to donor conception and lesbian couples

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Context

The term ‘Lesbian Baby Boom’ has recently emerged in the literature. Same sex couples achieve becoming a family via a number of routes: some, like single mothers and heterosexual couples conceive with the help of donor sperm within HFEA licensed clinics. Where this is not informal (i.e. with the help of a friend) these families face the same issues as other families using donor conception (DC).

The process of sharing appropriate DC information with children in a developmentally sensitive way is the choice of many families. Each family form has specific factors which may influence the information sharing process and raise challenges. These issues include: donor anonymity and changes in legislation, what information is available about the donor, the possibility of half siblings in other DC families and/or in the donor’s own families and the potential to make contact with them, and ideas about meeting the donor. Children may also be interested in factors such as genetics and DNA. Additionally young people may choose to talk about their conception with their peers and for those in lesbian (or single mother by choice) families, finding a way to talk about the absence of a father can be awkward.

With the increase in fertility provision to lesbian couples, maternity health care services have had increasing contact with lesbian co-mothers. Literature highlighted the need to investigate donor conceived lesbian families and focus on the unique experiences of co-mothers in the maternity process.

Recent research study: Lesbian co-mothers experiences of maternity care services

Method: A qualitative study was carried out involving ten lesbian co-mothers, whose children were conceived via anonymous donor insemination to their partners. Data collection took place in 2009 and involved semi-structured interviews. The interviews were transcribed and analysed using Interpretive Phenomenological Analysis (IPA).

Results/Findings: Analysis revealed two main types of co-mothers’ experiences. Co-mothers felt:

- 1) excluded by heterocentric organisational service structures.
- 2) that experiences with staff were overwhelmingly positive and inclusive.

Despite positive interpersonal experiences co-mothers reported that any ambiguous or non-inclusive experiences with professionals left them questioning whether these experiences were due to homophobic attitudes or professional incompetence.

Quotes:

Organisational heterocentricity:

“I would like it if the forms just said mother’s name or, father’s name, but then underneath a blank you know where you could cross out fathers and could write co-parent.”

Elena

“The NCT leader kept saying ‘right, mums over here, dads, I mean or partners’, so she said ‘dads, I mean partners’ about 74 times before she finally got her head around just saying partners.”

Elena

“You know you get your [diapers] guide to whatever, and they start giving you freebies, and it’s incredibly heterosexual. And, and I found that quite dispiriting really because I thought you know they’re relying quite a lot on giving you this information and they don’t even attempt to make it inclusive, and it wouldn’t take much to use a different language, and I just thought that’s perpetuating a myth that means everybody is sort of colluding in this idea that everybody is heterosexual.”

Ruksana

Positive experiences with staff:

“They just treated me like Jess’ partner you know talking to me as much as they talked to her and treating me like an equal part.”

Maya

“Lili was taken over to be cleaned up and straight away they were like ‘oh, you know, do you want to cut the cord and stuff? Where’s your camera, let’s take lots of pictures’ and they were just so excited and absolutely treating me like the excited parent.”

Amy

Questioning experiences as homophobia:

“Homophobia is so difficult because it’s so invisible and you can never quite tell whether somebody’s doing something because of that or, somebody’s just totally incompetent.”

Monica

“There was again no negativity there at all, certainly not to us um face to face.”

Susan

“They’d put a big asterisk and said check partner, so that they were politically correct so that they didn’t assume that I, it was a man and a woman, they made a note which initially Karen was a bit like ‘oh why did they make such an issue of it?’”

Charlotte

Conclusions: The results indicate that these lesbian co-mothers felt predominantly included and accepted by maternity services. Ambiguous interpersonal experiences, however, evoked doubts in this regard. In addition, organisational heterocentric structural barriers remain. Structural service delivery changes could facilitate co-mothers’ feelings of inclusion and highlight the important role practitioners have in contributing to co-mothers’ experiences.



Implications for practice and/or policy

Practitioners

- Exploration of attitudes to different family forms within a safe environment as part of training
- Avoiding assumptions
- Explicit use of inclusive and affirming language – genuine curiosity and respect regarding how same sex couples want to be referred to

Structural changes

- Explicit reference to lesbian families and single women having babies within maternity documentation
- Use of photographs which are more inclusive
- Options for ‘co-parents’ and ‘partners’ within forms

Training and education

- Workshops to facilitate use of inclusive language
- Greater awareness of Donor Conception issues so that individuals and couples feel more supported

Donor Conception Network

www.donor-conception-network.org

The Donor Conception Network (DCN) is a parent-led ‘self-help network’ of over 1,600 families created with the help of donated eggs, sperm or embryos; couples and individuals seeking to found a family this way; and adults conceived using a donor. The Network’s main aim is to support and guide those who have used or are planning to use donor conception to start or add to their family. It advocates openness with children, and helps parents to think how to talk with their children from an early age. In addition to online and other resources, the DCN runs two national meetings every year and has a range of regional and special interest groups.

Children’s Workshops: For the last six years, half day workshops have run for 8-12 year olds who have been conceived with donated sperm, eggs or embryos or who have siblings who have been. These workshops have provided a welcome opportunity for young people to explore and think about DC issues together. Children from lesbian-led families have always been included.

Workshop Feedback: This has been sought each time but a recent qualitative evaluation (in process of analysis) showed that these were valued by lesbian parents and their offspring.

Children have usually enjoyed the group and said it was fun. Some brief comments have been that it “boosted my confidence,” children “felt more at home and could relate to others who also had a ‘donor parent’ because we understand each other more” and “it felt a bit strange but at school I feel the odd one out but here I am not.”

One child in a lesbian family reported after a recent group that the three things he liked were: Meeting some of my friends who were there last year., I enjoyed talking about my donor and I liked listening to other people’s stories as well. And that they were all different.

Comments from lesbian parents:

“Macy thought it was fun and she enjoyed meeting other children with donors. She was and is very proud of her string, so it was useful to read about how that activity worked. I was impressed with the way the group was run. Macy was very happy and contented in herself straight after the group. Since then she has not talked about it much, but then we are very relaxed about the subject in our house, so I’m sure she would say if there was anything. It has seemed to meet a need for Macy and for our family, so thank you very much for running it.”

Lesbian mother of boy aged 10

“We hoped that the children’s workshop would bring issues of being donor conceived to the surface for us as a family. The issue of donor conception comes up in our home but often it’s we as parents who make a link. We hoped in Douglas coming to the workshop that he could continue to make links and bring up his issues and include them in our family.”

“We also wanted Douglas to start engaging with the fact that his donor has helped other families. We have spoken about this recently but didn’t want to force the idea. So we felt if other children were talking about this he would have another chance to pick up on this if he wanted to. Or on any other issues that were being raised in the group.”

“We also hoped it would give Douglas a space to talk about having received news about his donor [becoming identifiable]. We have spoken about this as a family but he hasn’t been able to speak to children his own age in detail about this. In the days coming up to the workshop and afterwards we as a family did talk a lot about being donor conceived. The workshop gave the focus for talking about issues in a relevant way. We had a reason to be talking about issues at that time!”

“We felt that Douglas had the space to talk about what was key for him on the day. I suppose an issue that continues to be raised is how the donor fits into Douglas’s life, Amy’s life and our family life. I feel we have been able to address it by saying we don’t really know yet and it might be different for Douglas that for us me as a parent, always remembering how thoughtful he must have been to register.”

Lesbian co-parents of boy aged 9 and girl aged 6

“Thank you for the summary. It is good to hear about the group. James seems more relaxed since attending. We met up with Tony and his Mum recently. James told them ... “the group was good because it was like being with bretheren, people who are the same as you. It’s the only place you can talk about it really.”

Lesbian parents of boy aged 11

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