



The American Fertility Association  
666 Fifth Avenue Suite 278  
New York, NY 10103

E-mail: [info@theafa.org](mailto:info@theafa.org)  
Telephone: (888) 917-3777  
Fax: (718) 601-7722  
[www.theafa.org](http://www.theafa.org)

## Talking with Children about Ovum Donation

The first birth of a child conceived through ovum donation occurred in 1984. This important milestone ushered in new era of infertility treatments which have given hope to women unable to achieve a pregnancy because of premature ovarian failure, poor egg quality, cancer treatments or menopause.

In ovum donation, assisted reproductive technologies are used to fertilize donated eggs that are then transferred to the uterus of a recipient. For thousands of couples, ovum donation offers an alternative to involuntary childlessness, adoption, or surrogacy. Mothers can experience pregnancy while in many cases the child is genetically related to their partner. With more couples choosing this option, a greater number of children are now born through ovum donation each year.

### Considering ovum donation

Preparing to parent this way often involves deciding whether to disclose this fact or keep it a secret, to choose between openness and privacy. Prospective parents often wonder if they should tell family and friends about this treatment option they are pursuing. And, if they do tell, what will others knowing about this mean now and in the future? More importantly, they wonder if children born through ovum donation should be told. And, if they are told, how will they feel? Because there has been little practical research showing that telling (or not telling) children about their genetic origins is detrimental, parents must weigh their values and use available knowledge to reach a decision.

While many parents find a level of comfort somewhere in between, it clarifies the issues to understand the arguments that have persuaded those opting for secrecy as well as those who choose disclosure.

### Secrecy

Many experts feel that maintaining secrecy about ovum donation is not the best option for most children and families. They note the risk of an unplanned discovery and the negative impact that holding secrets can have on individuals and families. Despite these concerns, some parents may choose to keep this information a secret in an effort to protect their child and family. They probably do not agree that everyone has a right to know his or her genetic origins and, in the case of ovum donation, conclude that this information may do more harm than good. The child, in their opinion, may perceive this difference as problematic or alienating; family and friends may draw unwanted, unhelpful conclusions that tend to devalue the youngster. Because some religious groups remain wary of advances in reproductive technology, not telling may also provide a safeguard against future ostracism within one's faith.

Recipients often have sketchy information about the donor's medical and psychological history. Those favoring secrecy usually conclude that sharing such incomplete information is likely to confuse or frustrate the child, causing what some have termed genetic bewilderment. These parents may sometimes choose to incorporate the donor's medical history as their own, thus

protecting this information while still providing the most accurate, available details to their children's physicians.

## Disclosure

Parents with a preference for telling generally believe that everyone has a right to know his or her own genetic origins. They, along with many mental health professionals, are also likely to believe that maintaining secrets of this magnitude may be a potential source of psychological harm to the child and to the family. Some research suggests that children not told that they were conceived with the help of a third party sense that something is being hidden. In these instances, children may conclude that parents are maintaining secrecy out of a sense of shame or embarrassment. In an atmosphere of secrecy, there is no way to talk about or work through such negative feelings, which often have an ongoing impact on the family. Thus, these parents conclude that the potential harm for the family and child of not telling outweighs the risks involved in the child knowing.

Parents favoring disclosure also take into account the possibility that children might learn about their genetic origins from someone else or by accident. This could result in irreparable damage to the bond of trust between parents and children. In the future, DNA testing is likely to make it very easy to determine whether any child is genetically linked to his or her parents. From this point of view, parents gain greater control and protect their families better by sharing this information with their children.

## Talking with children

Parents who choose to talk with their children about their genetic origins must decide when and how they will convey this information. In making this determination, they will need to recognize and assess the child's cognitive level and emotional readiness. It is important that parents keep in mind that sharing this information is a process that evolves over time as children's needs and ability to understand develop. Parents should also recognize in advance that their own feelings about having used ovum donation may affect the child as much as the information they are sharing.

Because several decades of studies in the fields of child development, family systems, and adoption fall short of providing tested guidelines, parents through ovum donation who choose to tell must find direction elsewhere. It seems clear that children should learn about their genetic origins from their parents. It is wise to recognize that this information belongs, first of all, to the child because it is the child's history. Very young children love to hear stories about their beginnings. These stories may form the basis of a narrative that can be expanded and elaborated upon as children grow. Young children can be helped to understand that babies grow within the mother's body. By the age of three or four, the fact that people come in two genders and that most families include one of each is firmly a part of a child's awareness. Thus, gay or single parents may need to begin explaining more aspects of the child's conception at this time. For other families, a story that refers to a doctor and others who helped so that the child could be born is well within the grasp of a preschooler's understanding.

The optimal time to elaborate upon the special circumstances of conception seems to be in the early primary school years. The growth in cognitive ability around age seven allows children to make sense of terms such as donor and genetic parent. Delaying much longer runs the risk of adding to upheaval set in motion by puberty. School-aged children are likely to focus on understanding why parents might choose to have a child this way and why a donor might decide to help them.

Parents who feel resolved in their own minds about having chosen to build a family in the best way possible for them are usually better able to help their youngsters assimilate this new information. Parents should remember that true learning goes on at the emotional as well as the

cognitive level. A parent's tone of voice, inflection, facial expression and gestures will have an impact on how children accept this information.

Parents may feel they have conveyed important information only to discover their child's understanding was partial at best. Parents need to gauge a child's needs and understanding on an ongoing basis. Those who convey openness and interest in their children's feelings and questions about this subject are better able to help their children come to terms with the personal significance of this information. Parents need to remain open to their children's concerns and prepared to talk with their children about how these decisions were made.

## Adolescence

The onset of puberty is marked by a growth in the ability to think abstractly. Children at this stage begin to think about themselves and their families in more probing ways. Development at this stage seems to hinge on adolescents being able to make sense of their worlds for themselves.

As adolescents develop an increased ability to take the point of view of another person, they are more likely to wonder about the motives of everyone involved in their conception. It is at this stage that children may request more information about the donor. Adolescence is about developing a sense of self and establishing the independence necessary for adult functioning. To make these developmental leaps, adolescents need to make sense of who they are. Any information about themselves that has an impact on their identity often becomes a source of interest.

Because adolescents often see the world in black and white terms, it may be difficult for them to understand all the viewpoints and circumstances that motivated the choices that led to their birth. Parents need to help their adolescent children recognize that mixed feelings and contradictory motives can and often do co-exist. Perhaps the best that parents can do at this stage is help their children toward developing more flexible thinking and greater tolerance.

## The reactions of others

To handle the reactions of others comfortably, parents through ovum donation must first resolve their own feelings about having used this family building option. For most couples, working through loss of the genetic connection is part of the process of resolving lingering doubts or regrets. Addressing these feelings enables parents to help their children better understand this aspect of their history as they grow. Often the parents' love for the child they have created leads them to accept more fully their use of ovum donation. For many, acceptance fosters a better ability to understand and manage the reactions of others.

Recipients often experience anxiety and worry prior to proceeding with ovum donation. These feelings frequently change during pregnancy and following childbirth. During these times of enormous emotional growth and change, parents who do not share information about the conception with family and friends may feel isolated. Before disclosing this information, however, recipients should gauge the quality of their relationship with the person they are considering telling. For example, if a family member has been highly critical of the recipient or her partner in the past, the couple may choose not to share this information with this person now or even in the future. It is also crucial to consider the impact that telling someone may have on the child in the future.

Since egg donation is a relatively new and complex reproductive option, it is often poorly understood by the general public. One should expect that others will not quickly understand these choices. One needs to think through the pros and cons of when and with whom to share this information. Some choose to reveal the child's origins only to supportive friends and family, educating them about the need to be discreet. Many selectively share this information with their pediatrician, minister or rabbi, or teachers whose discretion they can trust. Others share their

decisions widely, placing their reproductive choice in the open and discussing it freely with their child and others.

## Seeking counseling

Speaking with a mental health professional with experience and training in reproductive issues can resolve impasses and help in making important decisions about discussing ovum donation with children. The counselor provides the supportive environment that allows recipients to explore a fuller range of their feelings and issues about this hopeful but sometimes complex family building option. With the help of organizations like the American Infertility Association, recipients may also develop a network with other families who have shared similar experiences.

## Some Questions Children May Ask

*Preschoolers might ask, "Where did I come from?"*

Mommy and Daddy wanted to have a baby very much. We tried and tried but we couldn't. Then we went to a doctor who helped us. "You grew inside Mommy, in the uterus, for nine months. That's how all babies are born. Mommy took care of you there until you were ready to be born. Then you came out and Mommy and Daddy saw you for the first time. We were so excited to finally hold you."

*Some children ask, <"How did I get inside you?"*

The doctor helped place you inside Mommy's uterus where babies live after they are first made.

*After seven, most young school-aged children are ready to be told more about their genetic origins and might ask, "How was I made?"*

To make a baby you need an egg from a woman and sperm from a man. Together they can grow into a baby. We couldn't use Mommy's eggs (you may want to give a reason) so we went to see a doctor who helped us find a donor.

"What's an ovum donor?"

An ovum donor is a very special woman who gives her eggs to another woman who wants to have a baby, but can't use her own eggs. Most of the time, she gives her eggs without ever knowing or meeting the people she is helping. We learned some things about the donor we used, but we never met her and we don't know where she lives. (This explanation will vary if it is a known donor. You may also want to mention that many men serve as anonymous sperm donors.)

"What's a genetic parent?"

Genes are an important part of the egg, just like they're an important part of the sperm. When the egg and sperm come together and grow, an embryo forms. Genes control traits like the color of our hair or eyes, whether our hair is straight or curly, and how tall we are. Genes determine how we will look and grow. Some of your genes are from the donor and some are from your father (if this is the case). I am your biological connection to life -- I carried you in my uterus and nurtured you from an embryo into a baby.

You may want to reflect with your child that he or she would not have been in your life without the donor. It is also important to share your feelings that he or she is the child you were meant to have.

"Why would someone give her eggs?"

The donor is someone who likes to help others. Though a donor is usually paid for her time and effort, the most important part is that she feels good about helping a family like us.

"What made you pick this donor?"

When children ask questions like this, it provides an opportunity to share how you chose your donor. Explanations may include:

- the emotional connections you made to a donor;
- personal statements a donor wrote in her application;
- family background or personal characteristics;
- the program/doctor helped to make a match and you trusted them.

Discussing this issue with adolescents presents special challenges. Adolescence can be a time of change and upheaval. As adolescents strive to establish greater independence, they may probe more deeply into the choices you made that led to their birth. Adolescents may express some resentment toward you for making them feel different or for complicating their identity by having used a donor.

Many of the questions listed above are likely to come up again as adolescents struggle to understand who they are. What follows is a sampling of additional questions that may emerge during this time.

"Will I ever meet my donor?"

*Here you have to explain the limits of your situation. You may have used an anonymous donor program. You may have used a registry or a donor finder. The following suggests a possible response to an adolescent who asks to meet the donor:*

We were grateful to the donor, who made this decision hoping to remain anonymous. She also wanted us to be able to be our own family. Still, we can understand your curiosity. When you're ready, when you're an adult, finding out about the donor may be something you decide to do, and we would support your search. In the meantime, we can talk about it to try to answer any questions you have.

*If you have a picture or more in-depth information on the donor, you may want to ask the child if he or she wants to have more information.*

"Does this mean you're not my real parent?"

*This is a question that many who become parents through ovum donation fear. We believe it is best understood against the backdrop of adolescent development and the realities of parenting a youngster during the passage from childhood to adulthood.*

*Adolescence is a time of separation. To function more autonomously adolescents must develop their own identity. As they struggle to come to terms with who they are, adolescents must also begin to see their parents in a new light. During this time, parents' faults and limitations are seen more clearly and often exaggerated. Many adolescents express anger at their parents and have fantasies about having different parents.*

Yes, I am your real parent, though I didn't supply the genes to help form you. I am the parent who loves you and always tries to be there for you.

*At the same time, adolescents may wonder whether you regret your decision to become a parent. The lack of genetic connection can make children feel less secure and anxious. Adolescents often make rejecting or defensive statements.*

*They may say things such as: "If you wanted a smarter kid, you should have paid more for a donor! How much did you pay the donor?"*

I know that my expectations can sometimes be high, but it is because I want the very best for you. I'm sorry if you feel that I'm putting too much pressure on you. We can talk about the donor and what she was paid later. Right now it's important to talk about the pressures you're feeling. *(If a child is really curious about payments issue, it is important to address it openly at an appropriate time.)*

*Parents must withstand the adolescent's anger and remain open to talking about the donor and other issues. As an adolescent's abilities and range of feelings expand, their parents' task is to provide the stability their children need to integrate a sense of themselves as they move toward adulthood. Any parent who strives for this will, sooner or later, be fully acknowledged as the **real** parent.*

### **Talking with Children About Ovum Donation: A Guide for Parents**

- While some parents choose either complete secrecy or full disclosure, most choose an option in between these two extremes. They usually provide information in a controlled way and in stages as the child ages.
- Parents ultimately must make their own decisions about telling children, based on their family values, the child's comprehension and comfort levels, concerns about a child's physical or emotional health, a desire to control how this information is presented, and the inter-relationships of family members and friends.
- Young children (age three or four) are usually able to process the fact that a baby comes from a mother's body and that people come in two genders.
- Most children around age seven can understand concepts such as genetic parent or donor.
- During adolescence, children will often want information about the motives of those involved in the donation process, and they may want information about the donor to help them better understand their own personalities and appearance.
- In deciding to tell others outside the family, parents must gauge each relationship and assess the impact that telling will have on the child and the family.
- The counsel of experienced mental health professionals and support from organizations such as the American Infertility Association can offer critical support as parents face this important decision.

*Fact Sheet Prepared by: Gloria Demby, C.S.W. and Patricia Mendell, C.S.W.*

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