

**A
CONCEPTION**

CONUNDRUM





MANY DONOR-
CONCEIVED CHILDREN
VOICE "GENETIC
BEWILDERMENT"
ABOUT THEIR
ORIGINS. CAN THE
TREND TOWARDS
OPEN-IDENTITY
DONATION ADDRESS
THESE EXISTENTIAL
CONCERNS?

BY **JENNIFER BLEYER**

PHOTOGRAPHS BY **KENJI TOMA**

HE'S A 45-YEAR-OLD

divorced father of three, but Andrew lives for the text message he'll get from a woman announcing that her pregnancy test showed a BFP—"big fat positive," in fertility-speak—followed by a string of exclamation points.

By that point, he's typically gotten to know the woman over many months, progressing from an initial exchange of emails to phone conversations and, eventually, in-person meetings. He's assessed her attractiveness and confirmed that she's financially secure and emotionally stable. He's put his medical records on the table. With everything in order, he's arranged for the woman to stop outside his home or office to collect a small package.

"Curbside service to go," Andrew says, of the parcel that contains his fresh ejaculate. He's likely already coached the woman on the mechanics of do-it-yourself insemination, with instructions on how to maximize the chances of conception. For certain he has signed a contract renouncing any parental rights or responsibilities. Prior conversations with the recipient have assured him that, should the transaction fully succeed, the resulting child is free to inquire about him or meet him when ready, but there's no expectation of a relationship or regular contact.

Andrew—a pseudonym he uses to protect his privacy—started giving away his sperm about five years ago. He says he likes helping people attain the thing they want most in the world. But he also is motivated by a desire to spread his seed that feels as innate as many women's drive to get pregnant.

"The rush that comes along with that procreative urge is like a drug," says Andrew. "Being somebody's choice to sire a child goes deep into your genes. There are definitely some endorphins at work. It keeps me coming back for more."

The "more" is already quite substantial. Andrew has handed over his sperm to 85 women and now has 24 donor children and five more on the way. Recipients include married women with infertile husbands, single women who just haven't met Mr. Right, and lesbian couples, most of whom want to use free sperm from someone they get to know because it feels less impersonal than buying it frozen from a bank and their children can have some connection to their donor.

He loves it when the women keep him updated on the progress of their pregnancies. He welcomes ultrasound images and follow-up baby pictures in which he can discern his own features.

Fueled by his own mix of altruism and narcissism, Andrew spends up to three hours a day corresponding online with sperm-hunting women. His destination of choice is a website called the Known Donor Registry, which, since 2010, has served as a central clearinghouse for women seeking and men offering free sperm.

The registry claims close to 13,000 registered members, all willing participants in the so-called free sperm underground, a homegrown backlash against the long-standing system of sperm banks, private facilities that offer frozen ejaculate from usually anonymous men for a substantial fee to recipients. Registry headlines like "Give your uterus up to good genes" and "Let me make you a mommy" attract women to donors whose motives vary from pure narcissism to pure altruism to pure creepiness.

Donor conception has actually been around in some capacity for more than a century, but ongoing shifts in demographic patterns, family structures, and social attitudes have made it increasingly popular. An estimated 1 million-plus children have been conceived with donor sperm, much of it brokered by sperm banks. But that is changing.

Technology has increasingly enabled sperm donors and sperm seekers to connect directly, without the need for high-priced intermediaries. Further, it allows them to exchange as much information about themselves as they want and to control the terms under which they procreate.

At the same time, a number of high-profile legal cases have focused on unsavory practices within the fertility industry, such as unlimited use of sperm from a single donor. The very success of donor conception, ironically, is generating fundamental questions about the ethical and emotional consequences of willfully conceiving a child with the gametes of

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someone who isn't committing to being a parent.

Donor-conceived children themselves are raising many of the questions. As the first large wave comes of age, many express unease over their own origins. Some grapple with conception arising not from love but financial incentives—and for them, the word *donor* particularly rankles. Others worry they may harbor a hidden medical condition. Many are frustrated by an inability to identify or contact their "real" fathers, since anonymity has long been the industry standard and the terms under which their existence was contracted. Some express deep anxiety about unwittingly falling in love with a half-sibling.

Something, they believe, is profoundly wrong with the system that literally spawned them. Abandoning anonymity

appears to be essential, although it may not be sufficient to solve all the problems. Whether donor conception violates basic existential needs or simply requires procedural adjustments such as ending anonymity depends on whom you ask.

MIRACLES OF CONCEPTION

FOR WOULD-BE PARENTS patronizing sperm banks, donor conception has been nothing short of a miracle. It bestows life when the old-fashioned method fails or is not an option.

For the assisted reproduction industry—fertility clinics and sperm banks—donor conception is a windfall. According to a 2012 industry report by the market research firm IBIS World, sperm banks generate \$321 million a year, a figure projected to reach \$436 million by 2017 with the rising acceptance of assisted reproduction as well as general economic growth enabling more people to raise a family.

Scientists have been tinkering with artificial insemination for nearly 300 years, starting with animals. The first known successful human insemination took place in 1884 and yielded a baby boy. For decades, it remained a near-secret procedure quietly carried out in doctors' offices. Young men—mostly medical students—were recruited to provide sperm, which physicians discreetly injected in women whose husbands proved infertile. As the only people to know where the sperm was coming from and going, physicians were powerful middlemen.

The 1950s brought development of techniques to freeze and thaw sperm, offering great promise for artificial insemination and leading to the establishment of the first commercial sperm banks in the 1970s. Donor selection remained the exclusive province of physicians, who tended to make choices based on rough physical resemblance to the infertile males they were working with—dark-haired Caucasians to dark-haired Caucasians. Cou-

ples had to accept whatever was decided for them.

In keeping with a general shift toward self-determination and choice in health care in the 1980s, recipients began demanding more information about the “specimens” in sperm bank catalogs. Most were virile young college students and 20-somethings who were seeking pocket change. Today, donors to sperm banks can make up to \$12,000 a year for providing thrice-weekly semen deposits. Studies have consistently shown that financial gain is the main motive in sperm donation.

Over time, sperm banks began asking donors to provide more information—still non-identifying—about themselves: family history, educational records, personal essays, voice recordings, childhood snapshots, even poetry and drawings to show off creativity. Sperm banks claim that only 1 to 2 percent of can-

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didates pass all the hurdles to become donors, including testing for unusually high sperm counts. Recipients enjoy expanded criteria by which to select their child's future.

But providing customers with fuller pictures of donors does not make up for the relative lack of oversight with which sperm banks operate. Parents, children, and donors alike have increasingly questioned the absence of limits on the number of births from any one donor. Some banks are suspected of knowingly creating dozens and even hundreds of offspring of a single donor.

Moreover, there are no federal requirements for genetic



A DAD FOR ALL SEASONS

TIM GULLICKSEN, a 47-year-old real estate agent from San Francisco, spent about a year donating sperm when he was in his early 20s. Having been raised in what he describes as a “very child-centered family,” and realizing that as a gay man he would probably never have kids of his own, he decided to become a sperm donor to assist others in having what he could not.

“I never expected to know these kids,” Gullicksen says. “It was just this very basic impulse of, look, if someone else is in a position to have children

and raise them, I thought I should be able to help them. I didn't think it through much more than that.”

He harbored a desire to someday meet one of his genetic offspring, and he uploaded his donor information to the Donor Sibling Registry as soon as he learned about it, in 2006. First he was contacted by the mother of a 9-year-old boy conceived with his sperm in Texas. Then there was another 9-year-old in Southern California. Then kids in Chicago, North Carolina, and Texas.

He's now in touch with eight of his genetic offspring, and he describes the relationships he's forged with them as welcome, warm, and entirely unique. He sends them birthday and Christmas presents, visits each of them once a year, and vacations with them and their parents in the Sierra Mountains for a week every summer.

“There's no societal box to explain this role,” he says. “But when I meet these kids, all that worrying and anxiety and wondering about structure falls away. It's very organic.”

testing of sperm, and genetic practices in use vary greatly. Nor are there legal requirements that parents report births or the health status of their donor-conceived children—or that sperm donors ever update their medical records. In dozens of documented cases—many are listed by the Donor Sibling Registry, although no one knows the full extent of the problem—donor-conceived children have developed genetic diseases (including heart defects, spinal muscular atrophy, and cystic fibrosis) while the suspect sperm remains on the market, possibly in more than one sperm bank.

Critics charge that the industry milks all it can from stored sperm samples, some of which may be decades old, and resists regulation that might negatively affect its bottom line. “It comes down to money over ethics,” says Diane Tober, associate executive director of the Center for Genetics and Society in San Francisco, a nonprofit organization that monitors applications of genetic and reproductive technologies. “There’s no regulation, no centralized system of reporting, no overall federal policy. Like dentists, every individual sperm bank keeps its own records.”

ANONYMITY UNDER SIEGE

PERHAPS THE BIGGEST controversy has revolved around the issue of anonymity, traditionally thought to serve the best interests of everyone involved. For donors, anonymity offered a bulwark against paternal responsibility and ensured that a stranger would not come looking for a relationship or financial support down the road.

For would-be parents, it assuaged the fear that their child would someday go looking for their “real” father, and it was thought to protect husbands from feeling less of a man or a dad because of infertility. For decades, most heterosexual couples using sperm donors did not disclose the truth of their child’s origins at all, let alone welcome a connection with the donor.

Many couples using sperm donors find it “scary” to imagine that a child might think of the donor as a parent, says Houston psychologist Patricia Mahlstedt, who counsels the infertile. Yet, it turns out, that is precisely what some offspring do. “The fear is: ‘What will this mean for our child’s connection with us? Will our child love this other parent more?’ How threatening is that?”

Artificial insemination was developed to meet the needs of infertile adults. No one ever contemplated the needs of offspring—or imagined that their perspective might differ from that of their parents. Given the shift to disclosure of donor conception—its value supported by research—offspring themselves have begun to express curiosity about their donors as well as deep senses of loss and confusion over the inability to piece together their full biological heritage. “Genealogical” or “genetic bewilderment” is the term used to describe such identity issues.

“It’s not, ‘I need another parent,’” says Mahlstedt. “It’s, ‘I’m just curious.’” In a 2010 survey she conducted, reported in the

journal *Fertility and Sterility*, 76 percent of donor-conceived adults said they wanted to meet, learn about, or develop a relationship with their donor; 80 percent said they had searched for him. The relationship they seek, although not parental, nevertheless feels necessary and even intimate. It suggests a fundamental need for a link to the biological parent. “What frustrates them is that people aren’t thinking of them,” says Mahlstedt. “They’re thinking of the doctors, donors, and parents. For years, I thought of the donor as just the helper. But I’ve learned that the connection is more personal than that. These offspring think of the dad who raised them as their father, and the donor as their biological father.”

“CONCEIVED OUT OF CONVENIENCE”

ALANA NEWMAN, now 27, can hardly remember a time when she didn’t know that she was conceived through an any-

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mous sperm donor. “I have a vague memory of being 4 or 5 and my mom presenting it to me as, ‘We had infertility and we really wanted you, so this is what we did,’” recalls Newman, who grew up in San Francisco.

The “we” was her mother and her mother’s first husband, to whom Newman never felt a fatherly connection; they divorced when she was 8, and Newman never saw him again. Her mother soon remarried, and Newman recalls the relationship with her stepfather as one of chilly mutual endurance.

Off at college, Newman began feeling troubled. She went from one unrewarding relationship to another and found herself consumed with hatred of men. She skipped class to read self-help books. Eventually she dropped out of school. She believed that her problems had something to do with the circumstances of her conception—she was terrified she’d find herself in social situations being asked about her family or her ethnic background, and she yearned to see a picture of her biological father.

So Newman undertook a search. She joined the Donor Sibling Registry, an online portal set up in 2000 for donor-conceived children and their parents to connect with others conceived with the same sperm. She submitted her DNA for analysis. She even hired a private investigator who specializes in helping donor-conceived people find their genetic parent.

“I think that deep down, all donor-conceived people want to know that their parent is proud of them and accepts them,”

Newman says. “That’s the little child in me speaking. But I don’t expect anything more than a coffee and ‘It’s nice to meet you.’”

She concedes that the lack of a loving “social father”—the term often applied to dads who aren’t biologically related—has contributed to her distress. Still, she believes there’s something fundamentally unethical and cruel about cutting off people from half their genetic parentage. As a result, she has become an outspoken opponent of all donor conception, likening the buying and selling of gametes to human trafficking.

“The fertility industry and parents who undergo this try to frame it as a positive thing, but you know, it’s a man who masturbates in a cup and effectively sells off his parenthood,” she says. “I think it’s hard for parents to really be honest about how painful this could be to their child, because they can’t handle knowing they inflicted that pain.”

THIRTY-THREE PERCENT OF DONOR-CONCEIVED PEOPLE **FEEL BAD ABOUT THEIR CONCEPTION**; 25 PERCENT ARE NEUTRAL, AND 40 PERCENT FEEL POSITIVE BUT INTENSELY CURIOUS ABOUT THEIR GENETIC BACKGROUND.

In 2011, Newman started a website, the Anonymous Us Project, for “honest opinions about reproductive technologies and family fragmentation.” Dozens of personal stories from donor-conceived offspring describe deep feelings of grief, bewilderment, and shame over their origins. “It’s very hard for me to accept that I was conceived out of convenience and not love,” wrote one child of a single mother. “I just wish he knew I exist,” wrote another of her sperm donor.

Mental health professionals acknowledge that there are donor-conceived people who experience distress over the circumstances of their conception and feel a fundamental incompatibility between the need for a biological father and their own origins. Mahlstedt found that 33 percent had a “bad” or “very bad” attitude about their means of conception. Some 25 percent of the donor-conceived feel totally neutral about their donor-conceived status, she reports. And about 40 percent lean toward a positive attitude, although they are often intensely curious about their unknown genetic background.

IS ANONYMITY THE PROBLEM?

CAROLE LIEBER WILKINS, a Los Angeles family therapist who focuses on infertility, says that it’s common for parents to worry that a child might seek out and love the donor more than them, and it’s not unheard of for angry adolescents to lob emo-

tional bombs like “You’re not my real father!” But generally, she says, a child’s interest in his or her sperm donor has no bearing on a healthy family bond.

“They’re not grieving the absence of a parent as much as asking, ‘Who am I? Am I tall like that person? Does he like math also?’” she says. “It’s a really strong curiosity in the process of forming a genetic identity. Ultimately, the more information people grow up with about their genetic links, the more whole they’ll feel.”

Given the anonymity that has long cloaked sperm donation, people are figuring out novel work-arounds to find that information. Wendy Kramer created the Donor Sibling Registry in response to her then 10-year-old son Ryan’s intense desire to find out about his donor, whose sperm Kramer had received at a Colorado fertility clinic when there was no other choice besides anonymity. Over a decade later, the organization has

nearly 40,000 members, and more than 10,000 half-siblings and donor-child pairs have found each other through it.

“For some parents, it was just a donated cell,” says Kramer. “But a lot of donor-conceived people are saying, ‘Maybe to you it was just a donated cell, but to me that’s my biological father.’ Why don’t they have the right to go search for their biological parent? Where do we draw the line on what we call family?”

Many former donors do not want to be tracked down—they were broke college kids when they handed over their semen for \$35 or so a cup and are now grown men with their own children. Many feel

ashamed of having needed to donate sperm, studies show. Some donors, however, actually welcome the connection to offspring (see “A Dad For All Seasons” on page 82).

Besides helping facilitate the search for genetic relationships, Kramer has become a prominent critic of what she calls a “broken system,” the extent of which was little known when she was impregnated in 1990. Now she advocates for medical updates and genetic testing of donors, mandatory reporting of births, a national record of births to limit the number that come from a single donor, and above all, an end to anonymous donation. Having seen the frustration and damage that anonymity can cause children, she urges prospective parents to reject anonymous donation.

“It might make you feel better and protected to have an anonymous donor,” she says. “But the choice about what kind of donor isn’t about you. This is a choice your child will live with for the rest of his or her life.” Egg donation, a newer technology, so far appears to be associated with fewer identity concerns.

For would-be parents who don’t want to use anonymous donors but want the legal and medical security that can come from working within the system, many sperm banks and fertility clinics now offer open-identity donors. Such donors typically agree to have their identities revealed when a child turns 18, yet they’re medically screened at the outset and legally protected from being pursued for parental obligations. The arrangements offer a middle ground between the flagrant openness of the free sperm

underground and the traditional ironclad concealment of identity at sperm banks.

The preference for open-identity donors is growing quickly in the U.S. While medical developments enabling infertile men to impregnate partners with their own sperm have greatly diminished the need for heterosexual couples to turn to sperm banks, the number of lesbian couples and single women seeking donor sperm has been on an upward curve.

Hiding the truth isn't an option for lesbians and single mothers as it is with heterosexual couples, observes Lieber Wilkins. Nor do they have male partners whose paternal authority and ego need protection. "They are more comfortable with openness and maintaining options on behalf of a child who's not there yet."

California Cryobank, the country's largest sperm bank, offered only anonymous sperm in the early 1990s, when 90 percent of its customers were heterosexual couples. Today, with lesbian couples and single women making up 70 percent of its clientele, open-identity donors are a third of the bank's catalog. At the Sperm Bank of California, the country's only nonprofit sperm bank and a pioneer in offering open donors, nearly 80 percent of the clientele are lesbian couples and single women, and 85 percent of recipients choose open donors.

As the system inches its way through procedural change, there are still no legislative efforts to mandate many of the reforms that offspring desire, although there is a growing consciousness about what's best for them. Some may be plagued by the hole in their genetic story, while others may be simply curious about it. But by insisting on the use of open-identity donors, parents at least give their future child the benefit of filling in the blanks someday.

"Sperm donation is a conscious means of conception that people think about, talk about, worry about, and, one hopes, when they make a choice to move forward, feel really confident about," says Mahlstedt. "Now they're acknowledging that children often experience angst over the mystery of where they came from, and they're trying to help eliminate that angst for them. That's a positive thing." ■

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play sports watched by parents who are often much more invested in team wins than are the children themselves. Individual players' slip-ups are very public, bringing chagrin if not outright shame.

The pursuit of distinction leaves affluent adolescents with days that are heavily scheduled with academic and extracurricular activities. And while my studies show that extensive time in extracurricular activities is not a risk factor in itself—a sense of pressure, criticism, and overly high expectations from adults matter far more—participation restricts socializing to students in the same activities. Further, the constant competition, along with the necessity to display effortless perfection, demands that students show no vulnerabilities. Secrecy about weaknesses inhibits intimacy and further isolates them in their suffering.

Yet another contribution to vulnerability may be an inflated sense of control over one's life. As my colleague Barry Schwartz has shown, affluence leads people to believe they are wholly responsible for their own success. The wealthier people become, the more they believe that they can control many aspects of their life and design exactly the kind of life they want. They come to expect perfection.

Parents' overestimation of what they can actually control is reflected in the illusions harbored by their accomplished children—that one more point on the GPA, one more achievement, will push them over the edge to success, acceptance to a top-ranked college. The fallout? Any "failure" on any of these fronts can bring a rush of self-blame, shame, and depression.

Tomorrow's Leaders

WHY SHOULD we care about the problems of rich kids? Most important, because no child should be left behind, regardless of parental education or income. Any young person who remains in anguish deserves and needs adult intervention. Minimizing the problems of rich kids is as ill-founded as accepting death by guns as just what happens to inner-city youth.

Further, today's highly educated youths will disproportionately hold positions of power in the next generation.

Their values will disproportionately shape norms in education, politics, and business.

The distress and substance use children are experiencing can have considerable long-term costs. At a personal level, depressive episodes during adolescence bring elevated risk for recurrent episodes later in life. Prolonged feelings of stress can affect not just psychological well-being but also physical health and productivity at work. At a societal level, people who are unhappy, with a fragile sense of self, can be more acquisitive than philanthropic, more focused on gaining more for themselves than on improving the lot of others.

The high levels of substance use can affect the developing brain, impair coping ability, and impede everyday functioning. How many will not mature out of adolescent alcohol and marijuana abuse? If students must have Adderall to maintain 4.0 GPAs, how will they manage when they have real jobs in high-pressure settings?

What Can We Do?

PUTTING A BRAKE on the development of symptoms among ambitious youth is not easy; it will require changes at multiple levels, from systems of secondary and higher education to individual families. At high-achieving schools, the leadership needs to understand that the relentless pursuit of star status can powerfully thwart the well-being of students.

Parents can, and must, play a central role in mitigating pressures on children. They are, after all, the immediate buffers of the culture, with great power to help children remain grounded in a value system that emphasizes decency and kindness as much as getting ahead. The importance of this task is paralleled by its difficulty: It takes an enormous amount of strength to be a lone parental voice amidst a community crescendo of "Do More!"

For some highly educated adults, a sense of success as parents rests on the splendor of their children's accomplishments. That is not a healthy burden for them. Or for parents. In shaping the next generation, parents would do well to ponder: Prestige, power, privilege—at what price? ■

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