

Motivations and attitudes of candidate sperm donors in Belgium

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Objective: To study the motivation and attitudes of a candidate sperm donor population in Belgium.

Design: Anonymous survey.

Setting: Tertiary referral infertility center.

Patient(s): One hundred candidate sperm donors applying to the center for a first semen analysis between April 2013 and March 2016. **Intervention(s):** Invitation to complete an anonymous questionnaire.

Main Outcome Measure(s): Demographic characteristics, recruitment methods, motivations and attitudes toward payment, donor anonymity, disclosure to offspring, donation to lesbian couples and single women, views on the donor children and social aspects of sperm donation.

Result(s): The majority of our candidate donor population were older men with a partner who were donating sperm for altruistic reasons. The financial compensation was only an important motivational factor in 31% of the candidate sperm donors. Eighty-two percent of the men said they were willing to reveal nonidentifying information about themselves to donor offspring, but only 26% were willing to donate nonanonymously. The wish to receive certain information about the recipient family and the donor offspring was linked to men who had a partner and a child of their own.

Conclusion(s): The wish to receive and donate information depends on the characteristics and beliefs of the candidate donors. Also, the donor's characteristics were linked to the acceptance of meeting the offspring in the future: the donors with a partner and donors who said they would donate without financial reimbursement were less willing to meet the donor offspring. (Fertil Steril® 2017;108:539–47. ©2017 by American Society for Reproductive Medicine.)

Key Words: Attitude, demography, gamete donor, motivation, semen

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perm banking is regulated very differently among countries (1), with widely varying legislation concerning, for example, donor anonymity, donation to lesbian couples and single women, and payment to donors; practices even can differ greatly between sperm banks within a single country (2). Since the abolishment of donor anonymity in Sweden in 1985 (3), other countries have followed suit and changed legislation in favor of

an identity-release system in which donor-conceived children at a mature age have the possibility of inquiring about their genetic origin. The impact of this change on donor recruitment is still unclear; some countries removing donor anonymity were confronted with a significant drop in the number of available donors, which led to long waiting lists for patients, increased cross-border health care, and more import of foreign donor sperm (4–8).

Other countries seem to have recovered and have, through intensive campaigning, reached an equal or higher number of donors (9, 10).

Belgian sperm banks at present are facing a shortage in donor sperm due to the increased number of women relying on donor insemination (i.e., lesbian couples and single women) and the high inflow of patients from neighboring countries seeking cross-border reproductive care (2, 11). Current Belgian law allows both donation from anonymous sperm donors as well as from a donor known to the recipient couple or woman from the start (e.g., a family member or friend). In addition, donation is allowed for heterosexual as well as lesbian couples and single women.

Recently, several new law proposals have been submitted. These

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proposals contain a variety of suggestions to address the system of anonymity/identifiability of donors. In one proposal, the initiators propose adding a third possibility-the identifiable donor-to the two existing options of an anonymous and a known donor, leaving the parents free to decide what they think is best for their family. With this identifiable donor system, the donor child will have the opportunity at the age of 18 to know the donor's identity. Furthermore, the proposal would introduce a system by which previously anonymous sperm donors would have the opportunity to make themselves identifiable to their offspring. This system would use two complementary "keys," one to the donor and one to the recipient couple. If both keys are returned to the organization controlling the donor information, the identity data could be exchanged (12). An opposing proposal suggests abolishing donor anonymity completely and moving to an identifiable donor program in which donor-conceived children can obtain nonidentifiable information on their donor at the age of 12 and identifiable information at the age of 16 or 18 (13, 14).

At the moment, very little information is available on the donor population in Belgium. In anticipation of the possible abolishment of donor anonymity, Ide et al. (15) performed an opinion poll among potential sperm donors to evaluate whether they would still be willing to donate if donor anonymity was abolished. About 71% of the men responded that they would not. However, this has been the only study on sperm donors in Belgium.

Belgian fertility centers fear a potential drop in the availability of sperm donors if donor anonymity is abolished completely. Some political parties reject this argument, stating that abolishing donor anonymity does not attract fewer donors but only another type of donors. According to Daniels et al. (16) and Jadva et al. (17), identity-release donation systems attract men with different demographic characteristics and different motivations for donation compared with anonymous systems. The belief of those in favor of this system is that donors in an identity-release system are more likely to be older, to have children of their own, and to donate for altruistic rather than financial reasons. However, other published data contradict these views. In the United Kingdom, for instance, donor anonymity was abolished in 2005. The results from the Human Fertilisation and Embryology Authority (HFEA) (10) have indicated that the proportion of sperm donors in the youngest age group (aged 25 years and under) increased from 15% in the year 2011 to 22% in 2013 and the proportion in the older age groups decreased. In addition, the percentage of sperm donors with children decreased over the years: 41% in 2004, 33% in 2008, and 25% in 2013. So in this particular identity-release system, the donors became younger, and fewer of them had children of their own. More studies are needed to learn how rules and regulations affect donor characteristics.

As a first step, it is essential to examine the characteristics of the current candidate donor population and evaluate their views on sperm donation. Therefore, we surveyed the motivations and attitudes of a total of 100 candidate donors by means of a questionnaire. The results of this study may be of great importance for both clinicians and lawmakers.

Knowledge on the donors' characteristics and motives may help to discern what can be done to improve donor recruitment and predict how changes in regulation may affect current recruitment practices (18).

MATERIALS AND METHODS

This survey was conducted at the sperm bank of the Genk Institute for Fertility Technology (Ziekenhuis Oost-Limburg, Genk, Belgium). Between April 2013 and March 2016, a total of 100 candidate sperm donors who applied to the center for a first semen analysis were invited to complete a questionnaire. The questionnaire was completed anonymously, and the candidate donors were informed that their participation in the study did not influence the selection process. All candidate donors who signed up at the center were approached. All candidate donors effectively provided a semen sample for analysis after filling in the questionnaire (response rate 100%).

The questionnaire was developed based on studies of actual and potential donors mentioned in the systematic review of Van den Broeck et al. (19). The questions and topics used in those studies were compiled to address the most relevant aspects of the institute's donation practice. Afterward, a further selection of the items was made to reduce the length of the questionnaire and avoid overlap. The questionnaire was tested for face validity by experts in the domain of donor conception and recruitment of sperm donation. Questions were evaluated as to whether the questions effectively captured the topic under study and whether the questions were formulated in a way that was understandable to the target population.

The questionnaire consisted of three main sections. First, a list of statements on sperm donation was scored on a 5point Likert scale ranging from totally disagree to totally agree. Statements included topics such as payment for donors; attitudes toward donor anonymity, disclosure to offspring, and donation to lesbian couples and single women; and views on the donor children and social aspects of sperm donation. An example of these statements is "I believe that my (future) partner has the right to know that I am a donor." Second, a list of statements regarding the motivation for donation was presented (such as "to reproduce myself" or "to help people wanting a child"), which was answered on a 5-point Likert scale ranging from very unimportant to very important. Third, sociodemographic characteristics including age, religion, educational level, relationship status, and children were collected. In addition, three questions were posed about the men's familiarity with fertility problems (self or partner), about donor-conceived children, and about men who have donated or want to donate (i.e., "Did you or your partner have fertility problems?," "Do you know people whose children were conceived with donor sperm?," and "Do you know other men who have donated sperm or wanted to donate?"). Finally, information sources were reviewed by asking how the candidate donors came into contact with our center for sperm donation by means of multiple choice questions and the option "other." Multiple answers were possible for this question.

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