

SUBMISSION
BY A QUEENSLAND FORMER SPERM DONOR
TO THE QUEENSLAND PARLIAMENT
ASSISTED REPRODUCTION TREATMENT (ART) INQUIRY
INTO MATTERS RELATING TO
DONOR CONCEPTION INFORMATION

24 APRIL, 2022

By

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Queensland (1979 – 1985) and [REDACTED]

[REDACTED] **Queensland (1980 – 198-??)**

INTRODUCTION:

I am pleased to be able to respond to the call for submissions to this ART Inquiry, and personally thank Ian Smith (Monash University) and BIODADS Conversation (Facebook), as well as Katharine Gelber (Submission 0001) and the staff at Jigsaw for their encouragement and support to date.

This Queensland ART Inquiry is providing all Parties with the best opportunity to put across our articulated Submissions to help augment the donor conception sector.

We are all hopeful for an immediate nationwide supportive set of ART legislations and Government ART Policies, and funding, that positively augment the Donor Conceived Sector.

I am a Sperm Donor from Queensland (residing in Queensland from 1971-1991) and present the following account as a true and accurate representation of my willing past and willing future roles and understanding of being a privileged Sperm Donor.

However, in the past 18 months, I have been blessed with 4 beautiful 40 year old DCPs. We are yet to meet, but we have shared names and addresses, photos and stories, websites and social media platforms, even shared our personal and professional passions.

The rights of the Donor Conceived Person (DCP) is paramount to me, but I would like to argue also for the rights of Sperm Donors as well.

1. SPERM DONOR RIGHTS (Implying mutual consent where applicable)

As a Sperm Donor some 40 years prior, I would like to have the right to know:

- (i) If any Donor Conception Persons (DCPs) resulted from this ART in the early 1980s, especially if research records exist today at any relevant 'fertility clinics' in Queensland, interstate or even internationally, that may help me identify what happened to all my Sperm Donations, both in the past and at this present moment. I would like to know how many DCPs exist with my shared DNA and to what extent, if any, were my sperm donations exported by Parties involved intrastate, interstate and even internationally. These research records may still exist today at various fertility clinics in Queensland and elsewhere.
- (ii) If I can contact these DCPs, by mutual consent, and
- (iii) If I can contact the Recipient Mothers (RMs), by mutual consent.

Unnecessary anxiety has existed, in my case, where RMs and DCPs have been unable to identify their Donor, despite numerous requests made to the Queensland Fertility Clinic, Fortitude Valley, Queensland. Both my Recipient Mothers and their DC children have had varying degrees of difficulty accessing identifying information about their Donors from their 'fertility clinics'. I have experienced the same difficulty and frustration when this information was sort from the

If accurate Donor Conception records were provided by 'fertility clinics' to a governmentcontrolled donor conception register, then all relevant Parties would have access, by mutual consent, to records identifying the Donors, their Recipient Mothers, the DC children as well as their DC siblings.

I, therefore, support the principle of retrospectivity when legislating to provide for the release of identifying information about Donors to Donor Conceived Persons, and vice versa (i.e. the

release of identifying information to donors about their DC offspring). This identifying information should be made available by mutual consent.

2. RESEARCH AND ETHICS COMMITTEE APPROVALS

As a Sperm Donor, I would like to access copies of the University of Queensland Research and Ethics Committee Approvals for the conduct of this Human Donor Conception Research and Practice, from the outset, within the Faculty of Veterinary Science at the University of Queensland where I was enrolled/employed from 1972 to 1987 as a Veterinary student, tutor and/or Post-Graduate student.

I would also like a copy of any documentation that I may have signed agreeing to anonymity as a Sperm Donor, and any other information that I may have agreed to at the time with my fellow ART researchers.

CONCLUSIONS

Professionally, I gained a lot from this ART research at the Faculty of Veterinary Science whilst researching infertility in koalas, and take this opportunity to thank my Veterinary Professors for their perseverance and world-renown achievements in ART research in Queensland.

From an ART researcher's perspective, we were discovering the ART technologies that were so desperately needed in order to gain a better understanding and treatment of infertility in both human beings and animals.

As relevant ART Parties, we can't change or hide our DNA and medical/research records any longer. All parties need to be eventually on-the-same-page, where possible, albeit somewhat uncomfortable for some of us at times. We must allow the rights of DCPs to win-out all the time, and apply the principle of mutual consent where necessary.

I trust that this Submission is of value to this Queensland ART Inquiry, as well as of considerable value to my 3 Recipient Mothers, my wife, my 4 DC offspring (thus far) and their 4 Recipient (social) Fathers, our 13 grandchildren/nieces/nephews/cousins, and my 4 offspring. Sadly, it has been important for one of my DC offspring to find out about my family medical history, particularly important as his eldest son (my grandson) suffers from a number of conditions including autism, Sensory Processing Disorder and ADHD, as well as Neurofibromatosis (a genetic disorder) that has been impossible to investigate fully without the medical history from both sides of the family (including mine as the Donor). A second DC offspring has a child also with ADHD, and it would have been equally important to have had early access to my Donor identification contact details when needed (and hence medical records, albeit by mutual

consent). As a Donor, I would always want to consent to providing a full medical history where needed.

The best outcome from this Queensland ART Inquiry, and subsequent ART legislation, therefore, would be the formulation of imminent and successful Government ART Policies, and necessary funding, being put in place harmoniously across all Australian States for the immediate benefit of all DCPs, Recipient Parents and, of course, Donors.

Tupaemanaia Dr. Anthony Stephen Brown

April 24, 2022