[redacted]

Committee Secretary

Legal Affairs and Safety Committee

Parliament House

George Street

Brisbane Qld 4000

RE: SUBMISSION TO THE INQUIRY INTO MATTERS RELATING TO DONOR CONCEPTION INFORMATION [redacted]

I have a masters level qualification in counselling and have worked for 10 years as a professional post adoption counsellor. This work included supporting people affected by adoption to access their adoption records, to outreach and make contact with birth relatives, and to deal with post adoption impacts including managing relationships following contact with birth relatives.
I am also the non- biological grandmother of 2 donor conceived grandchildren.
This has given me an understanding of the issues and support needs of parties to donor conception.

Based on my professional and person experience, I make the following comments on the issues being considered by the committee.

a. Rights of donor-conceived persons, including to know their genetic origins

This right to information about genetic origins for donor conceived people has already been established by legislation in other states of Australia e.g. Victoria, WA, SA and NSW. In February 2011, the Legal and Constitutional Affairs References Committee published its report into the past and present practices of donor conception in Australia. The report called for Queensland to introduce legislation to regulate donor conception but this has not yet occurred.

Access to information about an adopted person's genetic origins has been enshrined in law throughout Australia and donor conceived people should also have same access to information about their genetic heritage.

In my professional role as a post adoption counsellor I have seen how important it is for adopted people to have access to information about their genetic heritage not just to know their medical history but to support psychological wellbeing and identity. I have had contact with donor conceived people wanting the same access to information and witnessed how damaging it is for them not to have their rights recognised.

b. Extent to which identifying information about donors should be given to donor- conceived persons, taking into consideration the right to privacy of donors

As per legislation in some other states e.g., Victoria all donor conceived people should be able to access identifying information about their donor.

Past practices in donor conception including undertakings of anonymity for donors should not override the needs of donor conceived people. In balancing rights, the best interests of the donor conceived child/adult should be given priority over those of parents and donors.

Parties including donors and donor siblings could be given option of registering contact preferences but non- compliance should not incur any legal penalties. This is consistent with Qld adoption legislation which removed legal penalties for non- contact statements in amendments passed in 2016.

As in the area of adoption, Government funding should be provided for a service with appropriately trained staff to provide intermediary and support services to assist with outreach to donors and vice versa.

For those wanting to register a non- contact preference, information about DNA tracing should be provided so they make an informed decision. Given the availability of DNA testing donors should be made aware that donor- conceived children may seek them out through DNA testing and it could result in other family members being approached first, if they themselves are not on DNA databases.

c. Access to historical clinical records and implications of retrospectivity

Donor conceived people should have the right as any other people would have to clinical records which relate to them.

d. Access to support and counselling for donor-conceived persons and donors

It is essential that support and counselling is available not just to donor conceived people and donors but also their families including non- biological parents/ grandparents and families of donors. There is a potential for highly emotional, stressful and major shifts in family dynamics that may require support and sometimes counselling to navigate in the best way possible.
Government funding should to be made available for an agency that is independent of fertility clinics to provide support services to people affected by donor conception including

- parents who are need assistance with how and when to provide information and support at different stages as their children grow into adulthood. This is a challenging task for parents and one that requires support.

- Donor conceived adults over 18 years seeking to access information about their genetic heritage. These adults may be dealing with barriers such as not knowing how to access the information, managing issues such as not wanting to upset their parents and fears about what the information may reveal.

e. Whether a register should be established

Yes, a register is essential as a centralised source of information for all donor conceived parties but must be compulsory and not voluntary. This register should be a government service independent of fertility clinics.
Past donor conceived records held by clinics must be provided to the register agency.

f. Benefits, risks and implications on donor conception practices arising from any recommendations

The benefits of appropriate legislation are critical for the wellbeing of donor conceived people and their families.
Risks can be managed in a number of ways. For example through the provision of a public awareness raising campaign leading up to the legislation to inform the public about the forthcoming changes (e.g., access to information, registry) and support services that will be provided.
Any register must have appropriate resources and trained staff dedicated to it so that it functions efficiently and can assist those who may be experiencing high levels of anxiety about the changes. It is very important that those who apply do not have to wait an excessive period of time for their information. The wait time target should be no more than 3 months.
Support services with trained staff (to assist with information, counselling and tracing and intermediary services) should be funded so that it is fully functioning by the time the register is operational. Post Adoption Support Qld provides a model if the type of service needed.
Funding to support peer support services similar to those currently operating for adopted people and birth parents. Jigsaw Queensland could serve as a model for the provision of peer support.

Concluding statement

Currently people affected by donor conception are seriously disadvantaged by a lack of legislation compared to those in other states of Australia. It is very important that Queensland move to enact legislation that addresses this inequality as soon as possible.

Fertility clinics in Qld may claim that there is no need for legislation as they have the national NHMRC guidelines that they follow. In practice these guidelines do not seem to be being followed in a way that results in the outcomes intended in the guidelines particularly in relation to access to information about donors and support services for people after conception.

It is very important that Qld legislation provides for a registry and support services that are independent of clinics as there are issues that would cause a conflict of interest as has been experienced in Victoria with the VARTA model.

I request that my name not be made public for personal reasons.