**Phase 1 UK, Belgium and Spain Stakeholder Interviews Summary**

Participant summary

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| --- | --- | --- | --- | --- | --- |
| Country | Policy/regulatory bodies | Professional practice | Donor advocacy groups | Recipient advocacy groups | Total |
| UK | 2 | 2 | 1 | 2 | 7 |
| Belgium | 1 | 1 |  | 1 | 3 |
| Spain | 2 | 3 | 2 | 1 | 8 |
| Total | 5 | 6 | 3 | 4 | 18 |

1. **Current and future policy issues**

Participants were asked if they knew of any policy changes on the horizon or if there was anything in particular that their organisation was lobbying for. The most common response was that there is nothing in particular on egg donation going on and no plans for substantial reviews of egg donation policies were expressed at the UK or EU level. Participants felt that there might be but some cross-over with other policy issues including changing legislation around surrogacy and developments in egg freezing. Information provision, anonymity, identifiability, cross-border travel for reproductive donation, facilitation of donor recruitment, emotional support and future contact with donor conceived children were identified as important issues.

In Europe, participants recognised that anonymity is still an issue of contention in many counties. However, several respondents expressed the opinion that anonymous donation will be impossible in the future in light of advances in genetic technology, DNA testing and half-sibling contact (discussed more below).

In the UK, some participants felt that changes in surrogacy legislation might impact on egg donation, in cases where the surrogacy involves egg donation. Facilitation of donor recruitment was also identified as an important issue and some participants recognised the importance of working towards increasing the availability of UK based donors to try reduce waiting times and give patients the choice of having a UK based donor if they want one. Strengthening information provision and emotional support for donors was identified as being important and something that is on the agenda in the UK.

1. **Specific policy issues**
   1. ***Anonymity***

The interviews showed that the anonymity issue is still divisive in Europe. Anonymous donation is preferred in some countries where others have non-anonymous donation. This can cause issues when recipients travel from one country to another for reproductive donation as people are not always clear on the law and differences between countries. There are places where there is no anonymity in law, but there is anonymity in practice due to poor record keeping for example, and in countries with no national registry or database. It would be near impossible to track donors 18 years down the line in these cases.

UK participants spoke about the drive to end donor anonymity in the UK. All 4 UK participants stated that they and their organisations were in favour of ending donor anonymity in the UK.

One participant argued that anonymity is in the commercial interests of fertility clinics, especially in Spain. They felt that clinics are not concerned whether a donor-conceived child would want contact with the donor when they turn 16. The participant claims that a ban on anonymity would be the end of the fertility industry in Spain.

Another participant claims that the anonymity of gamete donors is under question in Belgium and this is high on the political agenda because of proposals to ban anonymity. The participant expects this is happen over the next few years because of societal desire for this. Other participants think that there should be a choice between anonymous and identifiable donors so that people can choose what is right for them.

1. ***Identifiability of donors and future contact with donor conceived children***

Some participants talked about different opinions expressed at an EU wide meeting and noted how some people strongly believe that it is in the best interests of donor conceived children that they should not know about their donor and that the donor conception should be hidden from them. One participant says this is ‘surprising’ as in [country of origin], donors have been identifiable for many years. While some participants feel strongly about this issue, others wondered how much it actually matters to donor conceived families.

One participant argues that the law needs to change in Spain to be more in line with the UK and Belgium where ‘open profile donors’ are allowed so that the child is able to find out information about their donor when they turn 16 and have the possibility of contact when they turn 18. The participant also talked about donor conceived children forming groups online, undergoing DNA testing and initiative called ‘donor detectives’ in Belgium and the Netherlands which allows DNA matching with worldwide databases to find genetic relatives.

It was argued that the identifiability of donors has shifted the sort of person the clinics are recruiting in the UK– donors were often imagined as slightly older people who have had children and are able to reflect a bit more on what they are undertaking. There is the view in the UK that the donor, along with the recipients and the child is a part of the donor - conceived family.

1. ***Remuneration***

In Europe, participants noted that payment for eggs is forbidden. Participants spoke about how compensation can be disproportionate given how the differences in value the same amount of money could have between different groups or individuals within and between countries. Different types of donor, their backgrounds and motivations were imagined. The compensation level in Spain in particular was thought to act as an incentive for poorer women.

In the UK, the decision to increase the compensation level to £750 was taken to strike a balance between adequately compensating women for what they go through to donate without providing an incentive. It was stated by one participant that the increase in compensation has led to a greater availability of donors in the UK. Some participants thought that increasing the compensation to £750 attracts a different type of donor to before. One participant stated that their organisation did not support the increase in compensation levels and would rather have seen ‘an expenses process than a payment process’.