

1 **Title:** Constructing and enacting kinship in sister-to-sister egg donation families: a multi family member
2 interview study

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24

1 **Abstract**

2 Although intra-familial egg donation has been practiced for more than 15 years in several countries, little
3 is known about family relationships in this family type. Framed within the New Kinship Studies, this
4 paper focuses on the experiential dimension of kinship in sister-to-sister egg donation families: How is
5 kinship ‘unpacked’ and ‘reconstructed’ in this specific family constellation? Qualitative data analysis of
6 interviews with receiving parents, their donating sisters and the donor children revealed six themes: (1)
7 Being connected as an extended family, (2) Disambiguating motherhood, (3) Giving and receiving as
8 structuring processes, (4) Acknowledging and managing the ‘special’ link between donor and child, (5)
9 Making sense of the union between father and donor, and (6) Kinship constructions being challenged.
10 This study showed the complex and continuous balancing of meanings related to the mother-child dyad,
11 the donor-child dyad and the donor-father dyad. What stood out was the complexity of on the one hand
12 cherishing the genetic link with the child allowed by the sisters’ egg donation, while, on the other,
13 managing the meanings related to this link, by, for instance, acknowledging, downsizing, symbolizing,
14 and differentiating it from the mother-child bond.

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1 **Introduction**

2 Intra-familial medically assisted reproduction entails a number of ethical concerns related to familial
3 closeness between donor and recipients, the possibility of consanguinity, and the nature of the genetic
4 material that is given up for donation (i.e. sperm or egg donation) (ESHRE Task Force on Ethics and Law
5 2010). More specifically, familial closeness between donor and recipients raises questions about how
6 family relationships are shaped and experienced before, during and after the donation. This paper reports
7 the findings of an exploratory, qualitative study of how kinship is constructed and enacted in sister-to-
8 sister egg donation (ED) families. Based on interview data from parents, donors, and children, we outline
9 the attempts by family members to disambiguate motherhood, the balancing that is needed to both
10 maintain close relationships and respect the appropriate distance from one another, and the challenges
11 generated by these kinship constructions.

12

13 *Couples' and donors' experiences of intra-familial egg donation*

14 Studies about recipient couples' experiences mainly focus on disclosure decisions and on the relationship
15 between recipient couples and donors (e.g. Van Berkel *et al.* 2007, Jadva *et al.* 2011). Here, we will focus
16 on the empirical findings on the experience of family relationships only. A number of studies have
17 reported strengthened relationships between the donor and the recipient (Winter and Daniluk 2004,
18 Purewal and van den Akker 2009, Yee *et al.* 2011). The longitudinal study of Jadva *et al.* (2011)
19 including nine intra-family ED families highlighted that the relationships between donors and recipients
20 tended to be strong and stable over time and that the social roles of both the 'aunt' and the 'mother'
21 remained the same. In two of the nine families, donors were appointed a special role, for instance that of
22 godmother. In a study with non-anonymous egg recipients (47% of them receiving eggs from a family
23 member) Van Berkel *et al.* (2007) reported 'difficult feelings' in the recipients and concluded that "egg
24 donation seems to require from the mother a continuous effort to consolidate her motherhood and to

1 become the ‘real’ mother” (Van Berkel *et al.* 2007: 102). In earlier work, Lessor (1993) highlighted the
2 complexities of interacting in a triad (i.e., the receiving woman, her partner, and the donor) especially
3 with regard to careful communication about the donation, the difficulty of sharing undesirable feelings,
4 and the different ‘trajectories’ experienced by donors and couples. Winter and Daniluk (2004), focusing
5 on experiences of successful ED described by three known donors, found that despite enjoying close
6 relationships with their sisters, donors felt the need to guard their negative feelings and adverse treatment
7 experiences to avoid burdening the recipient.

8

9 ***Kinship studies***

10 An interesting theoretical perspective on family relationships in gamete donation families is offered by
11 the New Kinship Studies (e.g. Strathern 1992, Franklin and McKinnon 2001, Carsten 2004). As the rise
12 of reproductive technologies fuelled a renewed interest in kinship in the field of anthropology, New
13 Kinship Studies focused on how different factors that may create kinship are articulated in new and
14 innovative ways (Carsten 2004). Kinship constructions in the context of intra-familial ED might be
15 particularly unique as many pre-existing and future social relationships are at stake here and need to be
16 woven into the family’s story. Carsten (2004: 164) stated that “the manner in which different elements
17 and qualities of technology are selected, highlighted, erased, or interwoven with aspects of kinship
18 suggest quite complex, unpredictable, and creative processes at work when both experts and lay persons
19 confront new developments in reproductive medicine.” According to Carsten (2004: 174), however, only
20 a few studies have scrutinized "what happens to kin relations ... once treatment is over." Some of these
21 studies have explored kinship in the context of anonymous gamete donation (e.g. Hargreaves 2006,
22 Klotz, 2013) and in families with lesbian parents (Nordqvist 2014). One study based on observations
23 within an American infertility clinic (Thompson 2005), outlined the strategies family members used and
24 the ‘manoeuvres’ they performed to delineate motherhood in the case of ED and surrogacy. For example,

1 emphasizing the transfer of substance through the gestational link helped relieve ambiguity about who
2 should be seen as the mother (Thompson 2005).

3

4 *The current study*

5 This study focused on the experiential dimension of kinship in sister-to-sister ED families: How is
6 kinship ‘unpacked’ and ‘reconstructed’ in this specific family constellation? Seeing kinship as susceptible
7 to continuous transformation (Carsten 2004), we focused on practices of ‘doing’ and ‘enacting’ kinship,
8 as opposed to the more traditional view that sees kinship as a fixed state (Thompson 2005). How is
9 relatedness experienced in these families? How do family members handle and manage the biological
10 (genetic) link between the different family members? How are the bonds between donor, parents and
11 child shaped and molded (Nordqvist 2014)?

12 Only a few studies have analysed data from donors and recipient couples together (e.g. Lessor 1993,
13 Laruelle *et al.* 2011). In order to be able to create a systemic perspective on these family realities we
14 obtained interview data from the three parties involved: the donors, the parents, and the children. To our
15 knowledge, the current study is the first study linking donors’ and recipients’ perspectives on an intra-
16 familial level. Moreover, unlike other studies, this study included both mothers and fathers and did not
17 focus solely on the mother-donor dyad. Furthermore, in an area where children are much discussed, their
18 voices remain underrepresented. We therefore included the children’s perspectives as well.

19 The current study is part of an interdisciplinary research project called “Parenthood Research,”
20 combining bio-ethical, medical, and psychological viewpoints. The Parenthood Research project was set
21 up to investigate the meanings of genetic and non-genetic parenthood for families using medically
22 assisted reproduction. A qualitative research methodology was adopted, in order to facilitate in-depth
23 study of the family members’ experiences and moral reasoning. A total of 88 interviews have been

1 conducted with (intended) parents, donors and children in a number of different family constellations. For
2 this paper we draw on data from interviews with three intra-familial ED families.

3

4 *Socio-cultural context*

5 Belgium is a small Western-European country with 18 fertility clinics performing IVF. The Belgian
6 policy takes a middle ground position between the open-identity policies of neighbouring countries the
7 Netherlands and the United Kingdom and the compulsory anonymous systems in France and Spain
8 (Klotz 2013). The Belgian law regarding gamete donation prescribes donor anonymity while known
9 donation is also allowed when both the donor and the recipient couple accept this (Belgian Act of 6 July
10 2007). In practice, Belgian fertility centres perform mainly anonymous donation. In the case of ED,
11 intended parents can either engage in anonymous, known-anonymous (also called cross donation), or
12 known donation (Laruelle *et al.* 2011). The known donor can be either intra-familial or extra-familial and
13 the degree to which the donor is involved in the child's life may vary.

14 In Belgium, a country characterized by its Catholic heritage, there is a custom of choosing godparents (as
15 witnesses for the Catholic baptism) shortly after birth. Usually two people are appointed as the child's
16 godmother and godfather. Before, these godparents typically were members of the parents' families.
17 Today – even though Catholicism is largely abandoned in Belgium – the tradition of appointing
18 godparents still exists but now close friends of the parents often fill the positions of godmother and
19 godfather, not just family members. Furthermore, the roles of godparents and the degree of involvement
20 with the child may vary among families.

21

22 **Method**

23 *Participants*

24 Participants were recruited via the Department of Reproductive Medicine of the Ghent University

1 Hospital. Couples eligible for the study were contacted by their counsellor seven to ten years
2 after undergoing treatment. Inclusion criteria were that they must be Dutch-speaking and have at
3 least one child born after known ED (aged 7-11 years). Two couples refused participation and
4 one pulled out after initial consent. After the parents consented, the departmental counsellor
5 contacted the donors (in every case this was the mother's sister), all of whom agreed to
6 participate in an interview as well. Parents were also asked whether their child (aged 7 to 11
7 years) could also participate in the study. As a result, two girls and one boy were included. It was
8 a condition for interviewing that the children knew of their donor conception. Approval of the
9 Ethics Committee of Ghent University Hospital was obtained. Five parent couples, one mother,
10 six egg donors and three children were interviewed separately. For the purpose of this study, only
11 data from the three families in which all parties (the parents, the donor, and the child)
12 participated, were analysed. All interviews included in this study were performed by the first
13 author.

14

15 *Interviews*

16 Interviews took place between February and October 2014 at the location the participants
17 preferred. Participants gave their written informed consent at the time of the interview and were
18 offered the possibility to contact the counsellor in case questions or psychological needs arose
19 during or after the interview. For the child interviews, written informed consent of both parents
20 and assent of the child was obtained.

21 Child interviews consisted of three successive themes: the family, the conception story, and the
22 donor. To start, an elicitation technique inspired by the Apple Tree Family, a technique for
23 mapping children's views on family relationships, was used (see Tasker and Granville 2011). The
24 three themes served as a starting point to ask further questions during the interview. Interview

1 duration ranged from 40 to 50 minutes. Parent interviews consisted of two parts. The first part
2 included open-ended questions about the fertility treatment, their perspectives on parenthood, and
3 family relationships. The second part included open-ended questions about moral issues such as
4 the parents' opinion on donor anonymity and their thoughts on the rights and obligations of a
5 donor. The parent interviews were joint interviews as these allowed us to study the couples'
6 shared constructions and their interactions during the interview. Parent interviews lasted between
7 75 and 90 minutes. Donor interviews followed a similar structure as the parent interviews and
8 lasted between 60 and 110 minutes.

9 Each interview was audio-taped and transcribed verbatim using pseudonyms. Transcripts were
10 checked for accuracy by team members of the Parenthood Research project.

11

12 *Analysis*

13 Qualitative data analysis was conducted in two phases. The first phase was based on the
14 principles of Interpretative Phenomenological Analysis (IPA) (Smith *et al.* 2009). IPA is a
15 qualitative research method rooted in phenomenology, with a specific focus on the lived
16 experience and how participants make sense of their experiences. This included detailed memo-
17 writing for each interview, line-by-line coding based on the research questions, clustering of the
18 codes and writing up of a narrative for each of the interviews. The second phase was based on the
19 Eisikovits and Koren's Dyadic Interview Analysis approach (2012). Originally designed as a
20 method for the analysis of separate - but related - interviews (e.g. interviews with two partners in
21 a couple), this method provides a framework for analysing interview data from different members
22 of one family unit which allowed us to "weave together threads of individual accounts" (Harden
23 *et al.* 2010: 448) into an integrated systemic perspective. This phase included an analysis within
24 and across families based on the narratives and code systems resulting from the first phase. As an

1 essential feature of qualitative research is going back and forth between a whole and its parts
2 (Smith *et al.* 2009), between more abstract levels of analysis and detailed scrutiny of each
3 meaning unit (i.e. ‘the hermeneutic circle), the two phases in the analysis were intertwined. For
4 instance, the overarching thematic structure was changed and refined a number of times, based on
5 repeated reading of the transcripts and adjustment of the coding. MAXQDA, a software package
6 that aids the storage and analysis of qualitative data, was used to facilitate the analysis.
7 To enhance the trustworthiness of the study, a team of auditors (listed here as co-authors) was
8 invited to challenge the way the first author constructed themes and subthemes at several points
9 in the analysis (Hill *et al.* 1997). Based on extensive research reports, these auditors verified
10 whether the analysis had been conducted systematically and transparently, and whether the
11 research report was credible (Smith *et al.* 2009). Discrepancies as well as gaps in the analysis
12 were identified, which significantly improved the depth of the analysis. The first author has a
13 background in psychology and family therapy. The three auditors have a background in bioethics
14 and social health science, medical ethics and feminist phenomenology, and ethics and bioethics,
15 respectively.

16

17 **Findings**

18 Below, a brief description of each of the families can be found. Parents’ ages ranged from 36 to 41
19 years old and donors’ ages ranged from 35 to 42 years old. One father was Asian and the other parents
20 and donors were white Europeans. In order to assure confidentiality of the findings we changed some
21 details in the stories as well as in the quotes.

22 In the first family, both parents were interviewed together. The father was adopted at a very young
23 age. His adoptive parents also have one biological child. The mother became infertile due to cancer
24 treatment. Together, they have one daughter, aged seven years old. The donor had been married and

1 has children of her own. She was single at the time of the donation. She is also the donor child's
2 godmother.

3 In the second family, the mother was interviewed alone as her husband preferred not to participate in
4 the study. She and her husband sought treatment for fertility problems and found a known egg donor
5 in her younger sister. The parents have one daughter, aged 11 years old. The donor now has three
6 children of her own with her partner who she did not meet until after the ED. She is also the donor
7 child's godmother.

8 In the third family, both parents were interviewed together. The mother also became infertile due to
9 cancer treatment. Her sister suggested herself as a donor. The parents have three children in total. The
10 two oldest children were born out of the donor's eggs. However, the third child was conceived
11 without medical assistance. The oldest son, aged seven years old, was interviewed for the purpose of
12 this study. The donor did not have children of her own at the time of treatment but had since given
13 birth to two children. She is also the godmother of the oldest child.

14

15 *Being connected as an extended family*

16 Family members stressed that their family relationships have always been strong, independent of the
17 ED.

18 I had a lot of contact with her [sister receiving oocytes], especially as I... I was alone at that
19 time. We did a lot of things together. Or we went out for dinner together with her husband. So
20 we already had a good bond. (donor)

21 In a way, the donor in this quote tried to normalize her close family relationships and detach them
22 from the ED: family relationships were not a product of the ED but had always been present.

23 When participants mapped out their family relationships, they seemed to emphasize that they were
24 one big family, of which the donor child was a legitimate part. Rather than having the nuclear family

1 as the main focus, family members often mentioned their extended families including the mother's
2 parents, siblings and cousins when describing the family unit they belonged to. Emphasizing the
3 closeness as an extended family with the maternal grandmother as a central figure, blurred the
4 boundaries between the nuclear families and created the context within which the kinship relations
5 could be pictured. In one family, this idea was reinforced by the parents presenting the sister's genetic
6 material as "99% identical".

7 Mother: Because these are my sister's eggs, so I think, this genetic link...

8 Father:... It's there.

9 Mother: ...is there. And because of that, obviously it's important. I don't know, I cannot say
10 how it would have been if the genetic link hadn't been there like it is. Now it seems it is
11 comfortable, it is ok. And the fact that the genetic link isn't there for the full 100%, that
12 doesn't matter. It's just there.

13 Here, the presence of a genetic link between mother, sister, and child was put forward as a
14 justification of their connectedness as part of the extended family. Thus, while the genetic link
15 between mother and child was less straightforward in this family constellation, this link was
16 substituted by a sense of a broader genetic relatedness within the extended family. Furthermore,
17 resemblances between mother, donor, and child were sometimes framed as an indication that the child
18 'fitted within the family':

19 In fact, she does look like me. I have two sisters. There is a picture of the three of us, from
20 when we were younger, more or less the age [name donor child] is now, and you could really
21 put her in between us. (mother)

22 While in the context of anonymous gamete donation highlighting physical resemblance functions as a
23 way of keeping the donor at a distance (Hargreaves, 2006), here mother, donor, and child hold a place
24 in one imaginary family picture.

1

2 *Disambiguating motherhood*

3 The practice of kinning (Nordqvist 2014) involves family members ‘working with’ their particular family
4 constellation. A central concept in the context of ED is ‘disambiguating’ motherhood (Thompson 2005):
5 spelling out clearly who is the mother of the child, leaving no room for doubt about this. Carsten (2004:
6 186) referred to a process of comparing and weighing the position of the mother and of the donor against
7 one another: “What is so arresting is the very explicitness with which one person’s rights are weighed
8 against another’s, one kind of connection is compared to another, and one source of bodily substance is
9 erased while another is highlighted.” In our data, the mother-child connection was privileged over the
10 donor-child connection. In this respect, one donor expressed her opinion that “being a mother is so
11 unique that it, I think that it is reserved for the one who receives you”. Singularizing motherhood can be
12 seen as a strategy to disambiguate motherhood in this family constellation: only one person can be the
13 mother and motherhood is collectively appointed to the woman receiving the child. Not only the donors,
14 but also the children emphasized the unquestionable position of the mother:

15 Interviewer: So your aunt who gave the egg, what does she mean to you?

16 Child: I really think my Mum remains my Mum, you know. Even though the egg comes from my
17 aunt.

18 Here, although the interviewer directly asked about the meaning of the donor for the child, the child
19 seemed to circumvent the question. By not answering the interviewer’s question she reinforced her
20 message that it is not the donor who matters most to her, but her Mum.

21 Furthermore, donors and mothers often referred to *the feeling* of being the mother (or not). For instance,
22 donors tended to differentiate between how they felt about their sister’s children and the experience of
23 being pregnant themselves:

1 I never experienced it like that, like ‘There, that’s my child right there’. You know, to me, it’s not
2 my child. Maybe this was even reinforced the moment that I, myself, also became a mother, and
3 had the experience of being pregnant. (donor)

4 The mothers, from their part, stressed that they felt a lot of love for their child and valued the connection
5 they felt with their child:

6 To me, [name child] really feels like my daughter. So I cannot, uhm, I don’t say like “Yeah, but in
7 fact she’s not mine”. No, that’s... I carried her in my belly and yeah, right from the beginning,
8 when she was born, I felt an enormous connection with her. (mother)

9 In this quote, a number of elements legitimizing parenthood were emphasized: the gestational link
10 (‘carried her in my belly’), the idea of shared time and space (‘right from the beginning’), and the
11 emotional aspects of becoming a mother (the connection felt).

12 Interestingly, this emphasis on the unique mother-child connection did not only apply to the receiving
13 mother and her child(ren), but also to the donor and her own children. Thus, for the donor, distinguishing
14 the mother-child dyad (in her own family) from the donor-donor child dyad required extra ‘work’ in light
15 of the construction of kinship (Nordqvist 2014).

16

17 *Giving and receiving as structuring processes*

18 The focus on the acts of giving and receiving in the family members’ narratives can be seen as one means
19 to disambiguate motherhood. One child displayed a sliding discourse from ‘giving an egg’ to ‘giving me’
20 and ‘giving me up’ in her account of how she saw her godmother.

21 Child: My Mum's eggs were ill because she'd been ill herself and she even could have died from
22 it. So her eggs got ill in her tummy and then Godmother was kind enough to give her an egg.
23 (...)

24 Child: Yes, because if Godmother hadn't given me to Mummy, then I would never have been

1 here. And that is my memory, that Godmother actually gave me to Mummy.

2 Interviewer: That she gave you to Mummy? And sometimes you think about that? Yes. What do
3 you think about then?

4 Child: Because I think it was so nice of Godmother.

5 Interviewer: That you think it's so nice of her. Ah yes.

6 Child: That she gave me up for Mummy.

7 This girl furthermore added that if her godmother had not given her away, she now would have three
8 children, so including herself. The donor in this family mentioned that it was important for her to be able
9 to give her eggs 'consciously'. In this respect, she referred to the first - unsuccessful - pick-up under
10 general anaesthesia, which was followed by a second - successful - pick-up under local anaesthesia,
11 enabling her to "let it go and give it away." Thus, the acts of giving and receiving seemed to be rather
12 definitive – what has been given cannot be returned or claimed back – and in that sense they could be
13 seen as supporting the disambiguation of motherhood. What prevailed was gratitude towards the donor
14 from both parents and children. One child said: "She helped me get born. Because my Mummy was a
15 little ill with something." For the parents, showing gratitude towards the donor seemed to entail the
16 possibility of reciprocating the gift, of closing the transaction and maintaining the 'right kind' of relation
17 with the donor. This relates to the literature on 'the tyranny of the gift' in the context of organ donation
18 (Fox and Swazey 2002), which focuses upon people feeling that they should reciprocate what they have
19 been given while at the same time experience this as very difficult, if not impossible. Giving back is not
20 possible in the context of gamete donation, still a continuous negotiation of social relationships follows
21 'the gift'. In the next paragraphs, we will go further into this negotiation process.

22

23 ***Acknowledging and managing the 'special' link between donor and child***

24 As outlined above, the genetic link between donor and child helped position the child within the extended

1 family and somehow normalized the child's alternative way of coming into being. However, this positive
2 attribution to the genetic link was contrasted with views on the genetic link as more problematic:
3 attributing too much meaning to the genetic link between donor and child could be detrimental for the
4 position of the mother. In all families, the position of the donor was normalized to a certain extent, while
5 the 'extra' in the donor-child connection was also recognized:

6 Interviewer: What does she mean for you, as a known donor?

7 Mother: She's my sister, just like always. For me that doesn't, that doesn't make her, no, would I
8 [look at her] differently? Maybe yes, maybe just a little bit. It makes her a special sister I guess?

9 Yeah but still, yeah, she's just my sister (laughs).

10 This mother referred to the donor as a 'special sister' and an 'ordinary sister' in one account. This seems
11 to be exemplary for the way in which family members tried to find a balance in terms of the meaning of
12 the donor, going back and forth between acknowledging what is uncommon and special while at the same
13 time normalizing the donor. This process can be seen as an ongoing choreography of approaching and
14 distancing movements entailing constant repositioning, and with no fixed endpoint.

15 One mother articulated the significance of using a known donor. To her, the fact that the donor was part
16 of the child's life made this connection more meaningful.

17 Mother: Because for her [the donor] it is like, she sees her also every... I mean, it's not gone you
18 know, it's not something that's distant, or that you don't see anymore. (...)

19 Interviewer: And does this matter?

20 Mother: Yes, I do think it matters. You know, I can't [donate eggs] myself. But if I were in that
21 position, and you were to do it to help people, anonymously, then I think you should think about,
22 the fact that this bond isn't there. But if it's for you sister, well, then you see the child, and you
23 have a bond with the child anyway, so it is even more special.

1 Here, the meaning of the genetic link and social closeness became intertwined. The genetic link seemed
2 to become more meaningful because the donor also took on a role in the child's life and vice versa. The
3 children for their part acknowledged their aunts' investments in them: "Godmother also does a lot for me.
4 This year she gave me two small gifts, but they were two nice gifts." (Child)

5 At times, the presence of the genetic link between donor and child could be hard to handle. In one family,
6 for instance, both the parents and the donor referred to a period shortly after birth when the donor felt like
7 'the child was hers'.

8 Donor: Um, the one thing I wasn't prepared for, was the birth. That was hard for me because, she
9 was lying in an incubator, and she was such a tiny thing. And then I felt like... it was hard for me
10 for some time, because I felt like "Is this mine?" I think it was because of the blood tie, that it was
11 very special for me. It took quite some time before I could let go of that. (...) I was actually
12 looking at her and [thinking] "Is this mine, or? (...) No, no, it's not yours, but it is...". You could
13 feel that it was something, something primal even. I don't know, it's hard to explain. (...) The
14 attraction was enormous. But that went away, and I was also eventually able to tell my sister. And
15 I think we, together with her husband, we were able to discuss it. (...)

16 Interviewer: And you say that 'It took some time'. Did you do anything special to change this?

17 Donor: Hm, yeah, I don't remember. (...) At that time they also lived a bit further away, so maybe
18 that was good. We saw each other less often, especially in the beginning. With a baby you don't
19 get out as much. And I visited them regularly but that was... I think by creating a little distance,
20 that it was...

21 By keeping some distance and also openly discussing her feelings with the parents, they succeeded in
22 pacifying these feelings. In two families, the resemblance between the child and the donor was obvious,
23 and this was sometimes hard for the mother to cope with. In one family, the physical resemblance
24 between the donor child and the donor's own oldest daughter was striking, not only for the family

1 members but also for the small community both families lived in. Teachers at school, for instance, tended
2 to call the donor's daughter 'little [name donor child]' after the donor child. The recipient mother coped
3 with these constant reminders of the ED in a permissive way, acknowledging the similarities and
4 reminding her daughter of how these similarities had been made possible.

5 While, overall, the role of the mother was clearly distinguished from the role of the aunt/godmother (the
6 donating sister), in two families the donor reported increased feelings of responsibility or even instinctive
7 motherly feelings immediately after the birth of the child. In these families, the fact that the donor was
8 appointed as the godmother seemed to have a symbolic function, capturing the special bond between the
9 donor and the child. The very act of appointing the donor as a godmother assigned her an identity that
10 was neither a mother nor a 'usual' aunt, but something in between. This practice gave her a position, it
11 helped situating the close bond with the donor child in the wider category of godmotherhood.

12 She is also the godmother of [name child]. Uh, we decided that, to let her become the godmother,
13 to, let's say, permit a bond with her godmother; I wanted that. That way, her being the godmother
14 is actually something extra, it is symbolic to me that she [my daughter] can have a special bond
15 with my sister. So I want to give it a place, yeah. (mother)

16 The phrases 'let her become the godmother' and 'permit a bond' seem to indicate that making the donor
17 the godmother of the child was a well-deliberated decision where the parents were in charge of managing
18 the nature of the relationships with the donor. From the donors' perspective, being the godmother enabled
19 them to enact some of the feelings of responsibility or instinctive motherly feelings. For instance, it could
20 serve as a justification for buying the child generous presents.

21 In general, donors saw the children that were the result of their donation as 'their sisters' children', while
22 at the same time they referred to a certain kind of 'conditionality' of their abdication of parental
23 responsibilities: if the child were ever to end up in an adverse situation, they could call upon their
24 parental responsibilities:

1 If she were to need something, I'd be there for her. My sister, and her [husband] are divorced, and
2 they both are in a difficult financial situation. So last year I took my sister and [name donor child]
3 with us on our family holiday. (donor)

4 In two families, the parents explicitly denoted the donor as a 'guardian' in case something were to happen
5 to them. As outlined in the introduction, godparenthood is an existing structure within extended families.
6 Here, however, this structure seemed to serve as a way of normalizing unusual kin relations: a known
7 structure is applied to a complex, rather unknown family constellation. In one family, however, there was
8 no relation between the ED and appointing the donor as a godmother (i.e., the donor was only appointed
9 godmother of the oldest donor child). In the interview with these parents, the father and mother
10 negotiated a rationale for denoting the donor as the guardian:

11 Mother: Imagine something were to happen to us, then I would want them to, or I would assume
12 that they could go there [to the donor]. Well it would make it a little complex, because then there
13 would be five in total (parents laugh), two there and three here, but, to me it's like, that would be
14 the most natural, or the most normal shelter for our children.

15 Father: Yeah but...

16 Mother: Yeah but?

17 Father: Imagine if we had three natural children, you would have had the same idea, in my
18 opinion. You just have a close...

19 Mother: Yeah but now it's even more evident.

20 Father: You just have a close relationship with your sister, simple as that.

21 While the mother referred to the ED as making hypothetical custody by the donor more likely, the father
22 advanced the social bonds between mother and donor as the basis for this consideration. This, more
23 broadly, illustrates the fluidity in meaning making about donation and genetic links (Hargreaves 2006).

24

1 *Making sense of the union between father and donor*

2 One of the specific aspects of sister-to-sister ED is the fact that an egg and a sperm cell of sister and
3 brother-in-law come together to form an embryo and - if successful - develop to become a child. To some
4 parents, this union between father and donor was rather alienating as it created a new, unexpected
5 closeness - that would not otherwise have been tolerated - between the father and the donor.

6 It's a bit strange sometimes, like, this idea, yeah, that my husband and my sister have genetic
7 material that came together inside of me. So, yeah, that's a little weird. And I do notice that he has
8 a special bond with my sister. But I don't worry about that. In that respect, or, or, let's say, I can, I
9 can understand it. (mother)

10 This mother referred to the closeness she perceived between her partner and her sister, a closeness that
11 was also acknowledged by the partner himself:

12 Well, it's a bit hard to say but, it puts me - solely in that respect - a bit closer to your sister, to
13 [name donor], in comparison to your sister. Because this link is, yeah, whether you want it or not,
14 it's there, huh? I certainly don't regard [name child] as me and [name donor]'s child, but
15 genetically speaking I know that is the case. Genet-, purely genetically speaking.

16 In the context of (gestational) surrogacy, the same connection to adultery and illegitimacy of the child
17 exists (Ragoné, 2014). Therefore, similar relational work (Toledano and Zeiler, forthcoming) needs to be
18 done in order to protect and rearrange the boundaries between the receiving couple and the woman
19 helping them fulfil their child wish. In an attempt to cope with such alienating feelings and the perceived
20 closeness between her partner and her sister, the mother in the above family tried to put things in
21 perspective: "Sometimes I can have negative thoughts, but they don't stay long. It doesn't stay long
22 [smiles]. I'll put it like this: I can put things in perspective really easily, yeah." In contrast, one of the
23 donors answered the interviewers question about what it meant to her that the donor child was born out of

1 her egg cell in combination with her brother-in-law's sperm cell rather 'quickly': "That doesn't bother
2 me, no no." Two children mentioned this 'union', but they did not seem to attach a lot of meaning to it:

3 Interviewer: So do you know how you were brought into this world?

4 Child: By my Godmother, and my Daddy.

5 Interviewer: Ah yes, and how did it happen? With your Godmother and your Daddy?

6 Child: Well uhm, they did the two things that were needed, together in a jar, and they put that in
7 Mummy's tummy.

8

9 *Kinship constructions being challenged*

10 The different parties involved in the families built through ED created a unique kinship story that is both
11 carefully composed and dynamic. Throughout the course of their lives, ED had become a 'normal' reality
12 for the family members involved. As we have seen above, social constructions about a number of dyadic
13 relationships (mother-child, donor-child, donor-father) are made and these seem, to a certain extent, to be
14 shared inside and outside the extended family. However, some actors in this process (grandparents,
15 donors' (new) partners, the fertility centre, etcetera) sometimes did not fully subscribe or comply with
16 this 'worked' kinship construction (Nordqvist 2014). For instance, for one mother the remarks by her
17 own mother (the child's grandmother) about the resemblances between her sister and her daughter
18 seemed to be challenging. Furthermore, one donor mentioned that ED would not have been possible had
19 she still been together with her first husband. The partners' willingness to co-construct and support these
20 'alternative' ways of defining kinship seemed to be crucial to the donors (cfr. also Winter and Daniluk
21 2004). In two cases, the donor did not have a partner at the time of conception. This was experienced as
22 something that 'made it easier' for both the donor and the parents (cfr. also Lessor 1993). In all cases, the
23 donor's current partner had been informed. However, the donation was (consciously) not discussed
24 extensively between one donor and her partner.

1 Sometimes I wonder whether it's difficult for him, that he sees that child as the result of me and
2 another man. Actually I don't really know. I have never talked about it with him. I leave it alone.
3 One parent challenged her own constructions, saying "Actually, yeah, it's like so completely normal. I'm
4 actually thinking right now like 'am I just making it so normal myself, or...?'" To her, the fact that the
5 donor child was her daughter seemed to be the most obvious thing in the world. However, at this point in
6 the interview, the mother consciously reflected upon the fact that she constructed her own meanings
7 related to the ED, and she lingered on the relativity of these constructions.

8

9 **Discussion**

10 This paper focused on how people in sister-to-sister ED families enact kinship in many, sometimes
11 conflicting, ways. Echoing Carsten (2004) and Thompson (2005), this study offers a contemporary
12 account of how nature and culture are intertwined, how biogenetic and interpersonal kinship
13 constructions (Strathern 1992) go hand in hand, and how technological innovation shapes the meaning
14 of kinship and vice versa (Thompson 2005). What stood out was the ambiguity of cherishing and
15 valuing the genetic link as partly underlying family relationships (alongside family connections that
16 have always been present and are recognized as strong) whilst also fearing too strong a sense of
17 connectedness between the donor and the child, based on this link. Within the context of highly
18 valued extended family relationships, a lot of 'dyadic work' was performed: first of all, the
19 uniqueness of each mother-child relationship was stressed (referring both to the relationship between
20 the mother and the donor child and those between the donor and her own children); secondly the
21 donor-child relationship was acknowledged; and thirdly the donor-father relationship was discussed
22 within their frameworks of relatedness. A number of existing prototypes served as a point of reference
23 for the moulding of these relationships, for instance the relationship between biological mothers and
24 their children and the godmother-child relationship. For the relationship between father and donor, no

1 examples or prototypes were available. Here, these families can be seen as ‘pioneers’ in shaping and
2 giving meaning to this relationship.

3 With regard to the disambiguation of motherhood, we found that through the indirect genetic link,
4 intra-familial ED brought about closeness between mother and child, but did not offer exclusivity,
5 which was instead constructed by highlighting, privileging and emphasizing the gestational, social,
6 and emotional bonds between mother and child. The disambiguation of motherhood was furthermore
7 installed by a strong focus on the practices of ‘giving’ and ‘receiving’ in the narratives of each of the
8 participating families. Donor gametes had been given away by the donor and received by the mother.
9 In this respect, there seemed to be a striking difference between how the adults in this study engaged
10 in a continuous meaning making process, while the participating children seemed to have a more
11 clear-cut understanding of the donation. To the children ‘they’/‘the eggs’ ‘were given to Mummy’ and
12 the focus was on the generosity of the donor. Given the children’s ages, it is possible that they
13 understood that an egg is needed in order to reproduce, but were unaware of the fact that eggs contain
14 genetic material. We might wonder in what direction the child’s narratives will evolve, if they evolve
15 at all. Will the same balancing of meanings become part of their narratives once they become more
16 aware of biological matters, at a time when they are possibly more affected by the discourse on
17 genetics in our society?

18 When it comes to dealing with the ‘special link’ between the donor and the child, we can identify two
19 different but simultaneous movements: maintaining the right distance while allowing the donor a
20 special position in the family. Parents in this study aimed to create a position for the donor that
21 acknowledged the ED while also limiting the meaning of the donor and her donation. Given the
22 ongoing family relationships, this process of limiting could not simply be achieved by excluding the
23 donor from their lives. This is in contrast to similar studies in the context of anonymous ED (e.g.
24 Konrad, 2005), where the focus is on diminishing the status and the significance of the donor. Here,

1 the challenge is to create appropriate relationships between donor, child, and recipients. Positioning,
2 for instance by appointing the donor as a godmother, seemed to be crucial for the participating
3 families. When family members struggled to find the right position, this created tension and urged
4 them to use new (distancing) strategies to keep relations going. Furthermore, similar to Winter and
5 Daniluk (2004), we found that donors seemed to be pleased if they had no maternal feelings towards
6 the child, trying actively to eliminate them if they were experienced. There seemed to be an
7 imperative of knowing your place as a donor, which is to not get too close whilst not denying the
8 chance of a relationship with the child. Similarly, Toledano and Zeiler (forthcoming) found that
9 surrogate mothers described a ‘third route’ of relating to the child, which was differentiated from a
10 ‘too strong’ emotional bond (encompassing the risk of not wanting to relinquish the child) as well as a
11 bond that was ‘not strong enough’ (which could be potentially detrimental for the child). Finally,
12 some accounts that now were labelled as referring to the meaning of the genetic link could equally
13 well be seen as an expression of the meaning of the act of a gift between sisters. In other words, when
14 family members talked about the special meaning of their donor, this could refer to them
15 acknowledging the genetic link as well as to recognizing the enormous gift the donor has made (cfr.
16 Fox and Swazey 2002) and how this in itself creates a ‘special’ connection. The donor has made it
17 possible for the receiving couple to become parents and for their child to come into being. In this
18 respect, Winter and Daniluk (2004: 487) mentioned a case in which one donor referred to the special
19 bond she had with the donor child, describing it as a “bond that comes from knowing she was part of
20 helping her nephew come into this world.” This reflection touches upon the range and diversity of
21 ‘bonds’ that are possible between donors, receiving parents, and their offspring. It stimulates us to
22 think beyond the mother/not mother dichotomy and illustrates the wealth of different meaningful
23 connections family members may create as part of shared family practices.

24

1 *Methodological considerations*

2 Both at the level of content and at the level of methods, this multi family member interview study
3 (Reczek 2010) is new and revealing. However, some methodological issues need to be considered
4 when reflecting on the implications of this study. More specifically, we discuss the reliability and
5 generalizability of the findings, retrieved from a relatively small sample, and the ways in which
6 anonymity and confidentiality were guaranteed.

7 The small sample size can raise questions about reliability and generalizability of the findings.

8 Possibly, only a fraction of the numerous ways of ‘constructing kinship’ in sister-to-sister ED families
9 were addressed in this study. Other families most likely construct their own – different – stories and
10 practices. Furthermore, it is possible that we only had access to families in which parents felt sure
11 about the family bonds and did not experience any burden of the ED. The participating families
12 seemed to get along very well and possibly these positive family relationships were related to their
13 confidence in taking part in a – rather sensitive – interview study. Especially when it comes to
14 accepting the invitation for the children to participate in a child interview, this confidence might have
15 played a role. As a consequence, we have to be careful when using these findings in contexts outside
16 of this study sample. While we tried to maximize the transferability of the findings by giving
17 information about the study sample and the context of the interviews (Flick 2013), this transferability
18 will have to be estimated by the reader in each specific context (Loaring *et al.* 2015).

19 While the small sample size can be considered as a limitation of the study, it also has the advantage of
20 enabling in-depth analysis of the data. As pointed out in the method section, this study has the unique
21 quality of bringing together perspectives of family members from the same family. Expanding on the
22 work of Loaring *et al.* (2015) who adopted a multiperspectival IPA approach for the analysis of
23 dyads, the current study is the first study to perform this complex qualitative data analysis in the field
24 of human reproduction. In this type of qualitative research, in-depth exploration of participants’

1 experiences is prioritised, therefore requiring a relatively small, homogenous sample (Smith 2007). In
2 practice, analysis of three to six cases is advanced in order for IPA to realise its potential (Smith
3 2011). Conform with IPA's idiographic focus (Smith et al. 2009), a sample of three cases (including
4 nine interviews with different family members) was analysed as this allows for a detailed account of
5 individual experiences and experiences on a family level.

6 Also related to the issues of reliability and generalizability, interviewing family members separately
7 and sequentially impacts on the data (Eisikovits and Koren 2012). For both ethical and practical
8 reasons, the donor and the child interviews were conducted after the parent interviews and with the
9 parents' consent. This implies that the donor might have had certain expectations about the interview,
10 based on information she received from the parents (most probably from her sister) beforehand. In
11 one case, the mother explicitly mentioned making a phone call to her sister prior to the interview in
12 which they "recalled together how it all went at the time of treatment." With regard to the child
13 interviews, parents might have felt the need to prepare their child for the interview, by giving certain
14 messages to the child, e.g., "the interviewer wants to know how you think about your family". Thus,
15 in essence, the stories the interviewees told us were co-constructed. Starting from a social
16 constructionist perspective, which does not subscribe the goal of obtaining 'neutral' or 'objective'
17 data, we tried to take into account these influences rather than eliminate them. In addition,
18 relationships are performed in the stories that are built around those relationships. In a previous study
19 on lesbian parents and their donor conceived children, we found that 'taking care of family
20 relationships' was an essential part of the way the stories about their families were constructed in the
21 interviews (Van Parys *et al.* 2015). This balancing of what can be said and what not might be even
22 more present here, as both the mother and the donor play important roles in the children's' lives.

23 Secondly, multi family member interview studies require specific attention to the issue of participant
24 anonymity and confidentiality. Apart from the 'general' level of anonymity and confidentiality (in

1 which researchers make sure that participants are not recognisable for the reader) there is also a more
2 specific level of anonymity and confidentiality, related to the fact that different members of the same
3 family participated in the study and their accounts were analysed on a systemic level. This is referred
4 to as ‘network confidentiality’ by Harden *et al.* (2010). Here, two issues need to be taken into
5 account. First, there is the issue of network confidentiality during the interviews. Participants were
6 reassured that none of the things they revealed in the interview would be disclosed to other family
7 members. In the more specific case of the child interviews, children were asked whether they wanted
8 to tell their parents about the interview or not, and whether they wanted the interviewer to tell the
9 parents about how the interview went or not. That being said, it is quite plausible that due to the
10 children’s loyalty towards the parents, they did not voice all their thoughts and longings in front of the
11 interviewer. The same may be true for the parents and the donor. Second, there is the issue of network
12 confidentiality when reporting the findings. In order to assure this type of confidentiality when doing
13 research with families, one needs to balance anonymizing details and maintaining authenticity
14 (Harden *et al.* 2010). The topic of family members identifying quotes from each other (stemming
15 from separate interviews) was not addressed explicitly at the outset of the interviews. However, at the
16 time of the analyses of the multi family member interviews for this paper, we were extra vigilant with
17 respect to avoiding recognition of quotes within a family cluster. By changing additional details in the
18 stories and the quotes we tried to make sure that participants from the same family could not
19 recognise each other. Furthermore, we chose not to use pseudonyms, but rather used the general terms
20 ‘mother’, ‘father’, ‘donor’ and ‘child’ as this prevents family members from linking their own
21 accounts to their family members’ accounts and from retracing quotes other than their own.

22

23 *Conclusion and directions for future research*

1 Despite the above mentioned limitations, our data are original and our insights are new. Linking the
2 empirical material to current theoretical perspectives in the New Kinship Studies, this study can help
3 to further our understanding of contemporary kinship constructions. However, new more elaborate
4 studies in different societal contexts are needed in order to further broaden our knowledge on the
5 intra-familial dynamics related to sister-to-sister ED. As mentioned above, a follow-up study
6 investigating how both children's and adults' narratives evolve in the course of the children's
7 cognitive, emotional and social development, would be worthwhile. Secondly, in future research
8 families in which more tensions arise, for instance when a sister has donated her eggs and is later
9 unable to have children of her own, should also be included. Thirdly, more research attention should
10 be directed towards the topic of family communication and the construction of a family narrative
11 around the donor conception. Moving beyond the traditional dichotomy between 'telling' and 'not
12 telling', it would be interesting to further explore the process of family communication and the
13 dynamic nature of this donor conception narrative.

14

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3

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