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Donor anonymity and secrecy: Where's the evidence?

14 November 2005

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As his commentary in BioNews 333, 'The HFEA's silence on the need for a father', indicates, Dr Evan Harris MP is a champion of evidence-based practice. During 2004 and the early part of 2005, witnesses to the House of Commons Science and Technology Select Committee in its review of Human Reproductive Technologies and the Law were regularly challenged by Dr Harris - as well as by other members of the Committee - to provide evidence to support their arguments and assertions.

However, it seems that the demand for evidence is a standard the Committee (or at least the half of the committee willing to be associated with its final report) considered to apply less readily to itself than to witnesses. I have in mind, in particular, the Committee's claim that there is 'a powerful argument that the ending of [donor] anonymity would result in a greater likelihood of parents not telling the child because the fear (rational or not) of rejection in favour of an identifiable biological parent outweighs the advantage of having identifying information to transmit' (Vol I, para. 157). Perusal of the transcripts of oral evidence given to the Committee shows Dr Harris to be the architect of this presumption (Vol II, Ev 130).

Those of us who have long supported the rights of donor-conceived people 'not to be deceived or deprived of information about [their] personal history' (1) fully supported the government's decision to end the legal protection of donor anonymity. We had been influenced not only by human rights arguments on this matter - arguments which are not necessarily verifiable by empirical evidence, but which have also been promoted by the United Nations Committee on the Rights of the Child (2) - but also by peer-reviewed research evidence showing that one of the reasons that parents of donor-conceived children say they do not tell their children about their conception is because they have little or no information about their child's donor (3). If it were to have any effect on parental disclosure decisions, therefore, the current research base suggests that the removal of donor anonymity would help parents for whom lack of information was such a disincentive towards disclosure. But here was Dr Harris, and subsequently, the Committee itself, telling us that we had misread this situation pretty badly and that in fact we had merely served to sabotage our own well-intentioned efforts.

As someone who has campaigned for the removal of donor anonymity (and who has been supporting individuals and groups in countries other than the UK who wish to see their
governments follow the example of the UK, Austria, Germany, the Netherlands, New Zealand, Norway, Sweden, Switzerland, and the Australian states of Victoria and Western Australia, in removing the legal protection of donor anonymity), if the evidence showed beyond doubt that - ethical arguments aside - this would actually increase the likelihood of donor-conceived people being deceived about their origins, I would readily accept that I had got it wrong.

But just where is the evidence behind this 'powerful' argument? There is absolutely none in the Select Committee's report itself and a close reading of the transcripts of evidence given to the Committee provides a single documented reference to the possible impact of removing donor anonymity on parental disclosure. In response to a question posed by Dr Harris, Professor Susan Golombok referred to (hitherto unpublished) findings from her research with parents: '...on asking parents about their feelings as the current law stands, you get a diversity of opinion about that because some parents say, 'Oh, well, it will be much better because then the children can find out about their genetic origins. Therefore it makes it easier for us to tell them because they can then go out and find whatever they want'. Others will say, 'Well, actually, this might make me less likely to tell them because, although it will ameliorate the secrecy, I am not sure how I feel about the possibility that they will be able to identify the donor'. We have heard both of these views coming from the parents in our study, but it is all very anecdotal. I really could not say what proportion felt they would act one way and what proportion felt they would act the other' (Vol II, Ev 136).

At other times the Select Committee was quite happy to dismiss this sort of evidence as 'speculation based on surmise founded on anecdote' (Vol I, para. 156). So, if there is any sufficiently firm and credible evidence for articulating the 'powerful' argument the Committee, and Dr Harris, claim to exist, they have yet to provide it.

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