CHAPTER 11

'Spunkles', Donors, and Fathers
Men, Trans/Masculine, and Non-Binary People's Accounts of Sperm Donors and Their Relationships to Children

Damien W. Riggs, Sally Hines, Ruth Pearce, Carla A. Pfeffer, and Francis Ray White

11.1 Introduction

It might be premature to say that, as we enter the third decade of the twenty-first century, pregnant men are 'everywhere', but their cultural presence in the Westernised world over the past decade has undeniably accelerated. Trans, intersex, non-binary, and gender-nonconforming individuals have, of course, been experiencing conception, pregnancy, and childbirth throughout human history. For example, Fausto-Sterling (2000) describes reports of Austrian soldier and blacksmith Daniel Burghammer giving birth in 1601, and Lothstein (1988) provides several clinical case studies from the mid–late twentieth century. What has changed is that men's pregnancies in particular have achieved spectacular media prominence in recent years, fuelled by sensationalist headlines and growth of trans liberation movements.

However, the apparent visibility of pregnant men masks a deeper sense in which their possibility, their realness, is continuously denied. Either men who experience pregnancy are framed as not 'really' men; or they are seen as having temporarily suspended their masculine status or are legally defined as 'mothers'. It is as if the spectacle of the 'pregnant man' is presented only to reaffirm its impossibility. The debate this produces has tended to focus on whether or not a man can be pregnant, should be pregnant, or why they would want to be pregnant in the first place. Not only does this discourse reproduce the assumption that pregnancy is a quintessentially female experience and one equated only with cisgender women's bodies, but it directs the focus onto the person's gender, often ignoring the experience of getting and being pregnant.

While the primacy of the body for cisgender women's everyday lives, identities, and social practices has a long history in feminist work, the significance of the body in the construction of masculinity is more of a recent

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development, emerging from media studies and cultural sociology in the 1990s. Early empirical studies on the embodied nature of masculinity were diverse, encompassing topics such as the economy and the workplace, consumption, health, the media, education, sport, and interpersonal violence, as sites of the construction of hegemonic masculinity (Connell, 1995). As Gill, Henwood, and McLean suggest, uniting this work was a consensus amongst masculinity scholars that 'a significant change has occurred, in which men's bodies as bodies have gone from near invisibility to hypervisibility in the course of a decade' (2005, p. 44). However, work on masculinity and embodiment has largely concerned the experiences and practices of cisgender men, leaving the bodies of trans/masculine and non-binary people largely unaccounted for.

In this chapter we draw on our international study of 51 men, trans/masculine, or non-binary people's experiences with pregnancy. Specifically, we draw on a subsample of nine participants who conceived using a known donor. Most of our participants conceived with a cisgender male partner (and for most this occurred after they had transitioned), and a small number used anonymous donor sperm from a fertility clinic. Our interest in this chapter, however, is on how those who conceived specifically via a known donor navigated social scripts about disclosure and relationships with donors. As Nordqvist (2021) argues, while telling children about their conception is increasingly seen as important, cultural scripts for doing so are lacking. Drawing on social scripting theory (Gagnon & Smith, 1973), Nordqvist argues that 'scripts operate as a kind of grammar for how people make sense of themselves and the relationships in which they are embedded' (p. 680). Social scripting occurs on three levels: (1) broader cultural narratives, (2) interpersonal interactions, and (3) intrapsychically within individuals as they take up broader cultural narratives that potentially guide their decisions and actions. In the context of donor conception, and in the absence of widely available social scripts circulating as cultural narratives, individual families may find it difficult to navigate talking about donor conception.

If the above is true for cisgender heterosexual, lesbian, and/or single parents of donor-conceived children, then it is likely especially so for men, trans/masculine, and non-binary people. As we explore below, gestational parenthood for this diverse group of people is framed by social scripting at all three levels described above, yet is largely lacking a positive focus on scripts about men, trans/masculine, and non-binary people and conception, including in regard to disclosure of donor conception to children. Our argument in this chapter is that the lack of such scripting likely has implications for the decisions that men, trans/masculine, and non-binary

people make about the disclosure of donor conception to their children, and how relationships are formed with donors after the child's birth.

To provide a framework for our data, we first briefly explore the three levels of social scripting outlined above as they specifically apply to pregnant men, trans/masculine, and non-binary people, before then outlining our study and describing our findings. The chapter concludes by considering the types of information and support that might benefit men, trans/masculine, and non-binary people sharing information about conception with their children.

11.2 Social Scripting and Trans Reproduction

As previously noted, there are three levels at which social scripting operates: the broader social context, the interpersonal, and the intrapsychic. In terms of the broader social context, it is arguably the media through which scripts about trans people and reproduction are most obviously disseminated. In their analysis of media scripting about trans reproduction, Lampe et al. (2019) argue that a repeated theme in media accounts of trans men and pregnancy is the idea that each account constructs such pregnancies as something 'new' or as the 'first'. As Pearce and White (2019) note, such framing involves the active production of ignorance about the long histories of trans reproduction. Further, we suggest that for men, trans/masculine, and non-binary people specifically, narratives of 'newness' may prevent people from connecting to existing narratives of trans reproduction (such as Califia's, 2000, first-person account of Matt Rice's pregnancy), thus cutting them off from information that may help them navigate conception and ways of disclosing and talking about donor conception to children.

Lampe et al. (2019) further note that media representations function by centring cisgenderist accounts of trans reproduction, such that men, trans/masculine, and non-binary people who experience pregnancy are made intelligible only through recourse to cisgender women's pregnancies. This ignores the unique differences at both the level of biology (i.e., those in receipt of testosterone prior to conception are likely to have markedly different experiences of conceiving) and the social (i.e., men, trans/masculine, and non-binary pregnancies are 'read' in markedly different ways to pregnancies by cisgender women). In this chapter, we refrain from using literature on cisgender lesbian women and donor conception as a counterpoint, as we believe it would only serve to perpetuate assumptions of commensurability, and indeed foster the idea that cisgender women's pregnancies are the normative point of comparison for men, trans/masculine, and non-binary people.

Indeed, Riggs (2014) has examined how this incommensurability is routinely resisted and denied by some trans men. For example, Riggs (2014) notes that in Oprah Winfrey's interview with Thomas Beatie and his then wife, Winfrey repeatedly pressured Beatie to explain to the audience how it was that he could be a pregnant man. This included asking Beatie to share his experiences around the death of his mother (with Winfrey suggesting that the death of Beatie's mother meant he had 'no feminine images'), Winfrey repeatedly contradicting Beatie's account of his masculinity (which he framed as a lifelong feeling, and Winfrey countered this with a focus on Beatie taking part in Miss Teen Hawaii), and Winfrey insisting on a prurient focus on Beatie's genitalia. Throughout the interview, Winfrey drew on highly normative cisgenderist ideologies to suggest that pregnancy is the same for people of all genders, that there are only two genders, and reinforced a normative account of Beatie's reproductive and sexed body. Throughout the interview, Beatie effectively countered Winfrey's line of argument, yet in so doing was repeatedly forced to adopt a relatively normative account of his gender as masculine.

Such negotiations with masculinity are replete across the literature on men, trans/masculine, and non-binary people and pregnancy. Riggs (2013), for example, explored how trans men, in their public self-representations, account for masculinity as part of their pregnancy journeys. For some men, their masculinity is positioned as tenuous in the face of highly feminised narratives of pregnancy. More specifically, their masculinity is positioned as tenuous by *other people*: by people who misgender them in hospitals, strangers who refuse to view them as pregnant men, and broader discourses that position all pregnancies as, by default, undertaken by women. Other men may feel that pregnancy compromises their masculinity, particularly in regard to inhabiting a pregnant body they struggle to view as masculine. Yet other men may refuse the feminisation of pregnancy, instead seeing their pregnant or lactating bodies as serving a purpose, one that does not inherently undermine their experience of masculinity. Indeed, in an account of their own pregnancy, Wallace (2010) discusses the 'manly art of pregnancy', noting that a

> pregnant person is at once a biologist, a mechanic, a weight lifter, and someone providing for hir family. Women can do those things, of course, but our culture still views them as masculine things, and in this way pregnancy made me more of a man, not less of one … Pregnancy helped me look, feel and act more like an archetype of Man, and eventually lifted me to its pinnacle by making me a dad. (p. 133)

Finally at the social level of scripting, Lampe et al. (2019) note that both sensationalist (i.e., 'first', 'new') and cisgenderist media accounts serve to marginalise experiences of discrimination among men, trans/masculine, and non-binary people in the context of reproduction. This occurs because acting as though each pregnant man is a 'first' ignores the experiences of the considerable number of pregnant men who have come before, each documenting and resisting the marginalisation they experience. While recognising and celebrating the joys of reproduction for growing numbers of men, trans/masculine, and non-binary people is important, this should not come at the expense of recognising the significant challenges that many men, trans/masculine, and non-binary people experience in seeking to conceive.

This brings us to the level of interpersonal and social scripting. The small body of literature on men, trans/masculine, and non-binary people, and conception suggests that fertility clinics often enact cisgenderism, including in terms of misgendering people's genders and bodies, failing to understand the specificities of trans people's reproductive needs, and outright hostility (e.g., Charter et al., 2018; James-Abra et al., 2015). For some of our participants, seeking known donor sperm was a product of previous negative experiences with fertility clinics (Riggs et al., 2021). Further, at the interpersonal level of social scripting about trans reproduction, family members may also be a source of negative messaging about trans reproduction. In our study, we found that some men, trans/masculine, and non-binary people were reticent to tell family members about trying to conceive, out of concern about negative responses (Riggs et al., 2021). Feeling cut off from family members at such a crucial time can mean that some men, trans/masculine, and non-binary people are prevented from opportunities to practise or discuss available social scripts for talking about donor conception.

Finally, at the individual or intrapsychic level, known donor conception is framed in the few studies that focus on this for men, trans/masculine, and non-binary people, as 'easier' than conception through fertility clinics, but not without challenges. Charter et al. (2018) found that participants experienced known donor conception as 'easier' and 'less confronting' compared to experiences with fertility clinics. Riggs et al. (2021) similarly found that negotiations with known donors in terms of receipt of sperm were often framed through the use of jocular language, making light of the situation. Yet at the same time, some participants spoke of challenges in negotiating receipt of donor sperm, particularly when known donors sought to conceive through intercourse. Again, we would propose that the

considerable emotion work undertaken by many men, trans/masculine, and non-binary people seeking to conceive via known donor sperm may reduce opportunities for attention to what comes next, namely disclosing donor conception to children.

While it is certainly the case that similar accounts of engaging with known donors are evident in research with cisgender women, our argument in this chapter is that this is not commensurate to the experiences of men, trans/masculine, and non-binary people. This is for at least two reasons. First, while accounts may seem similar, they are provided by people with different genders. As the long history of so-called 'sex difference' research has demonstrated, people of different genders may have similar experiences, but the social meanings of those experiences are particular. In other words, men, trans/masculine, and non-binary people's experiences of conception are distinct from those of cisgender women due to their positionality and the web of historical and ongoing social relations in which they are embedded. Second, these differing social locations and relationships fundamentally shape how men, trans/masculine, and non-binary people are 'read' by others. When it comes to known donors specifically, how men, trans/masculine, and non-binary people are 'read' by donors is likely different to how cisgender women are 'read' again due to normative gender and sexuality assumptions.

At every level of social scripting, there are barriers to men, trans/masculine, and non-binary people thinking ahead to the matter of disclosure. These barriers encompass negative media scripting that both ignores continuities in community knowledge about conception and emphasises comparisons to cisgender women. This is at the expense of considering the specificities of men, trans/masculine, and non-binary people's experiences. For example, negative clinic experiences for men, trans/masculine, and non-binary people might keep them from benefiting from what might otherwise serve as a useful resource for disclosure scripting; transphobic experiences with family might prevent access to safe discussions with them about disclosure scripting; and challenges for this particular population in the context of known donor conception might steer focus away from looking further into the future to consider scripting about disclosure. These gaps in social scripting about disclosure are especially salient given Bonan et al. (2021) found that almost all trans men in their study who conceived using donor sperm intended to disclose information about the donor to their children in the future. In other words, there is a potential gap between intending to disclose and having the available social scripts and scripting resources through which to do so.

11.3 The Study

The broader international study reported in this chapter was funded by the Economic and Social Research Council (ES/N019067/1). Inclusion criteria for participants were: (i) identifying as a man, trans/masculine, or non-binary; (ii) having experienced at least one pregnancy; (iii) living in Australia, the European Union (including the United Kingdom), the United States, or Canada; (iv) being at least 18 years of age; and (v) having conceived after coming out or beginning a social and/or medical transition. Ethics approval was granted by each of the authors' universities. A purposive sampling technique was employed to obtain participants using social media and social network recruitment, including targeted recruitment distributed to groups comprised of men, trans/masculine, and non-binary people of colour. Research information and recruitment flyers were posted to social media accounts (e.g., private Facebook groups), shared at community conferences and events, and circulated via researcher and participant networks.

Semi-structured interviews were conducted either in person or via tele- and/or videoconference facilitated by Skype, Whereby, or Zoom, by a research associate of the first author (for Australian interviews), by the third author (for interviews in the European Union), or by the fourth author (for interviews in the United States and Canada). Interviews were conducted between June 2018 and October 2019. In terms of interview questions specific to the present chapter, a general question was asked about experiences of pregnancy, with a specific follow-up probe asking: 'How did you become pregnant?' Interviews ranged from less than 60 minutes to over 3 hours, with an average length of 100 minutes. Interviews were transcribed by a professional service and participants either chose their own pseudonym or were allocated a pseudonym if they did not opt to choose their own. Participants were also asked about pronouns, with most using either he/him or they/them.

Given the relatively small subsample included in this chapter, we only provide limited demographic information and we present it collectively, rather than by individual, so as to ensure anonymity (information about the broader sample is available in Riggs et al., 2021). In the subsample included in this chapter, the average age was 34 years (range 24–49 years). Participants described their gender as non-binary, trans male, trans man, transmasculine, or genderqueer. Participants described their sexuality as queer, pansexual, or undefined. Most participants had one child (range 1–3). Of the subsample participants, three were single, two were in relationships with women, and four were in relationships with men. Participants

lived in Australia, Germany, Canada, the United Kingdom, or the United States. However, almost half of participants included in the subsample were from Australia. All participants included in the subsample conceived using sperm from a known donor who was either a friend or an acquaintance.

11.4 Thematic Analysis of Interviews

For the purposes of this chapter, responses to the probe question, 'How did you become pregnant?', were extracted for analysis. Importantly, while this question was included in the interview schedule and purposively selected for analysis in the present chapter, the analysis itself was inductive. Having extracted interview responses in relation to becoming pregnant, the first author coded the data according to the approach to thematic analysis outlined by Braun and Clarke (2006). The first author read all transcripts three times, looking for repeated topics or codes. The first author then developed themes based on the codes. While codes encompass broad salient topics repeated across the data set, themes by comparison organise codes into logical and coherent sets of information. Themes developed are indicative of topics seen as salient by researchers, rather than being exhaustive of all possible readings of the dataset. Further, codes and themes were not mutually exclusive across participants; some gave interview responses located within more than one code or theme. The first author then identified and collated representative quotations for each theme. As such, the quotations included in the results are indicative but not exhaustive of each theme. Having identified representative quotations for each theme, the first author then compiled the thematic groupings and developed the results reported below.

11.4.1 Theme 1: Navigating the Donor's Role

In this first theme, participants spoke about the role of donors, primarily in regard to their potential involvement in the child's life. Most participants spoke about being clear from the outset what they wanted from a donor and used this to guide their search for a donor. Most participants clearly stated they did not want a co-parent, but at the same time wanted someone who could be known by the child. As Benjamin suggests:

> I know other people for them it's less of a thing, but it felt, I don't know, this whole question of finding a sperm donor who is agreeing to be an open donor but who doesn't want to be a father, like for me it was like,

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> I don't know, an act of rebellion but also solidarity, of queer solidarity. I always wanted to have an open donor, I find it very important for the kid to be afterwards able to at least see a face and reach out. I don't want any responsibility for the other biologically involved person, but I find it's very important for the kid to be able to at least get an impression of you.

To be an 'open donor' but not a father is, for Benjamin, an act of queer solidarity and rebellion. This, we would suggest, references the separation of genetics from identity, such that providing sperm does not by default make one a parent. In the context of societies where the two are presumed to be one and the same (Moore, 2008), seeing sperm donation as just that is indeed an act of rebellion. In some respects, Benjamin's account creates a possible space for scripting disclosure: that a child could be told that their parent(s) and donor engaged in an act of solidarity and rebellion in conceiving them, acts that at the same time allow a space for the child to at least have 'an impression' of the donor.

Finn, by comparison, was more blunt about what he wanted from a donor, without the same focus on what a child might want:

> So I was like, okay, from among friends I had asked one person who was at the time a lover of mine. But who was not interested in co-parenting. And I was not interested in having a co-parent. It was like, will you please be my sperm donor and not be a co-parent?

In some respects, Finn's account may be seen as instrumentalising the role of the donor. Yet we suggest that accounts such as Finn's highlight that, for some men, trans/masculine, and non-binary people, when it comes to negotiating receipt of donor sperm, what is most salient is finding a donor who will respect their decisions about parenting. Given the donor was a lover, it would appear important to Finn that there was a separation between their role as kin-adjacent in terms of Finn, and their role as a sperm donor. By contrast, a small number of participants were open to donors playing more of a role:

> Denver: For me, I had … he was a donor, but he was also involved. I wanted to know the donor, and I wanted to know that I could trust them, and things like that. And I trusted him as a dad, he's a great father, and all of that, I just didn't trust him with me [in terms of how] he viewed me [as a trans person].

Denver narrated a complex series of shifts, from the donor being simply a donor, to being someone involved in their children's lives, to being a father. The complexities, for Denver, related to their own relationship with, and trust of, the donor, though at the forefront for them was a focus

on allowing the children to determine their relationship with the donor, as we will explore in the final theme later on.

11.4.2 Theme 2: Kinship in the Context of Donor Conception

In contrast to some of the more instrumentalist accounts included in the first theme above, or Denver's account which recognised the donor's relationship to the children without necessarily signifying a relationship between Denver and the donor, participants included in this second theme spoke about creating kinship with donors. Echoing Weston's (1997) account of families of choice, participants such as Dee developed their own language for talking about the role of both the donor and their extended family:

> We spent time contracting together and figuring out what it is that felt important to us. And so, he's the kid's Spunkle, and in their lives as extended family. His parents are GrandSpunkle and GrandSparkle, and know the kids, and the kids know them. And that's actually been a very rich and lovely process …

INTERVIEWER: If you think about your children and their grandparents. How many sets of grandparents do you consider your children to have?

DEE: I mean they would only count [partner]'s parents and my parents as their grandparents. Grandspunkle and Grandsparkle are a different deal. They're not grandparents. I don't know. They're grandparent-adjacent.

Here, Dee makes an interesting set of claims. First, the process of 'contracting' was reciprocal, a process of negotiation, resulting in kinship terms for the donor and his parents. At the same time, when asked about the child's grandparents, a line is drawn between Dee and their partner's parents as grandparents, and the role of the donor's parents as 'grandparent-adjacent'. The language of 'spunkle', 'grandspunkle', and 'grandsparkle' brings the donor and his family into relationship with the recipients and their child, but it is a mediated relationship. It is a relationship that is 'rich and lovely', but at the same time it is a relationship wrought primarily by the fact of conception, rather than by a claim to kinship in the first instance. Other participants noted more traditional kinship claims between donor and child, such that genetic relationships were equated with kinship:

INTERVIEWER: Is he ever going to be involved in her life?

CHARLIE: He is involved. He's uncle Michael. We made it clear from when we started that he would always be uncle and that we'd involve his family if they're interested. So she sees her Irish nana as she's called, as often as she can. So she's still gonna know where she's come from, she's gonna have all the links to any cousins and stuff. And obviously we're gonna meet her

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> cousins. Because I don't see pretty much any of my family. [Michael has been] one of my best mates for years, so his family is kinda like my family anyway. So it was nice and it was effortless.

Here, Charlie notes that he and his partner were the ones directing the relationship ('we made it clear'), designating an uncle role from the outset. Importantly, while this is a kinship designation, it is nonetheless a chosen kinship designation (i.e., uncle rather than father). This represents an interesting reworking of traditional kinship relations: the donor is genetically related to the child but is not their father, arguably because the donor is a 'best mate' and 'pretty much part of the family' to Charlie, perhaps akin to his brother. Emphasised here is the relationship between Charlie and Michael first and foremost, even if by extension that grants a relationship to the child.

11.4.3 Theme 3: Children's Agency in Directing Relationships

In this final theme we explore how a number of participants oriented to the idea that relationships with donors should be determined by children, albeit with this requiring that parents create a space for this possibility:

> SAM: There were sometimes people asking around who I was with or making assumptions of whether I was in a relationship or not, so I was quite conscious of kind of explaining that I was doing it as single person with a donor. And at that stage, I guess I wasn't explicitly including the donor in the family structure that would unfold, so it wasn't till [child] was a toddler, and donor was kind of visible in his life, that we started talking about donor dad, or Dad, or the distinctions of those things.

For participants such as Sam, openness to the role of the donor as determined by the child was somewhat unintentional. Sam was clear they were conceiving as a 'single person with a donor', with no role for the donor in the 'family structure'. But as Sam notes, the unfolding of life after the arrival of the child meant that the identity of the donor shifted as the child grew. By contrast, for participants such as Denver, there was a sense of purposiveness in ensuring from the onset that a relationship between donor and children was possible, even if the relationship was to be determined by the two in conjunction:

> DENVER: For me, I wanted to have him involved, because I felt that, because he was … or, if he wanted to, I felt like his relationship with his potential children was his business, not really mine. That's how I felt about it. And I didn't feel like, for the kids, I wanted to step in the way of what they wanted either, so I just sort of left it to him if he wanted to be involved or not, and for them to be able to establish their own relationships.

Despite some of the challenges that Denver experienced in their relationship with the donor, as indicated in the first theme, Denver was willing to step back and leave space for the donor and children to determine their relationships. This required that the donor be visible in their lives from the onset, while at the same time not predetermining what they all might decide about the nature of the relationship.

11.5 Conclusion

In this chapter, we have explored how a subsample of men, trans/masculine, and non-binary people talk about known donor conception, and the relationship of children to donors. Alongside our review of the literature on social scripting for men, trans/masculine, and non-binary people in regard to conception, we identified potential barriers to social scripting that require attention. The first of these are analogies made between cisgender women and men, trans/masculine, and non-binary people in terms of reproduction. As we have argued elsewhere, a more productive analogy is between cisgender men and gestational parents who are men, trans/masculine, and non-binary (e.g., Riggs et al., 2020). While we would not wish to suggest that all men, trans/masculine. and non-binary people subscribe to masculinist norms, we do wish to reiterate that men, trans/masculine, and non-binary people navigate donor conception in a way that is not commensurate to the experiences of cisgender women. Going forward, then, it will be important for research to examine how men, trans/masculine, and non-binary people who are gestational parents navigate masculinist norms in regard to donor conception, and how challenging such norms may help to address barriers to developing scripts about disclosing donor conception (e.g., see Barnes, 2014).

A second barrier relates to competencies among fertility clinic staff to meet the needs of men, trans/masculine, and non-binary people. While not all people may choose or be able to access donor sperm via clinics, even if such clinics are trans inclusive, it is vital that this is a possibility. This is important given that fertility clinics, as part of fertility counselling offered, are typically likely to address the topic of scripting for disclosure (Goedeke & Payne, 2010). Research has identified barriers to trans inclusion in fertility clinics (e.g., see Bartholomaeus & Riggs, 2020; Epstein, 2018), outlining clear steps that clinics can take to ensure the inclusion of trans people seeking to access reproductive services.

Another barrier pertains to family support and its role in scripting about donor conception. While families can certainly be holders of secrets about

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donor conception, family relationships can also be a key context through which people navigate decisions about disclosure (Dempsey et al., 2021). Research on therapy aiming to support trans families suggests a number of key avenues for undertaking this work, including focus on how best to support pregnant trans people (e.g., Blumer et al., 2013; von Doussa et al., 2021).

Among our participants, many spoke about purposive contracting with donors, specifically focusing on their role, legal requirements, and financial responsibilities to the child. Yet, despite this clear focus on contracting, often missing was a focus on scripting for disclosure to children, and how relationships between the donor and child would be navigated. In addition to addressing the barriers outlined above, then, additional forms of social scripting disclosure, that are specific to men, trans/masculine, and non-binary people who conceive using known donor sperm, are needed. Since the experiences of men, trans/masculine, and non-binary people who conceive using known donor sperm are not commensurate to the experiences of cisgender women, existing social scripts may be inadequate. For example, while cisgender women are likely to need to script ways to tell their children that donor sperm was used in their conception, they are unlikely to need to script that, as women, they gave birth. By contrast, for men, trans/masculine, and non-binary people, there is likely the need to script both donor conception *and* gestational parenthood in a world where it is presumed that only women give birth.

Drawing on our findings, our first suggestion in terms of scripting for men, trans/masculine, and non-binary people would be the importance of honouring and sharing the long histories of conception and gestation by men, trans/masculine, and non-binary people. As Lampe et al. (2019) discuss, too often Thomas Beatie is heralded as the 'first pregnant man'. Yet, men, trans/masculine, and non-binary people have spoken about being gestational parents in the media, to researchers, and in medical settings for decades (e.g., see Califia, 2000; Lothstein, 1988). Ensuring that long-standing histories of men, trans/masculine, and non-binary people navigating conception are made available, including considerations of how they script disclosure, is an important aspect of ensuring that future individuals navigating conception do not feel like they are reinventing the wheel. Indeed, documenting these histories and making them available publicly is an important task that lies ahead for those working in the space of trans reproduction.

Second, the idea of donor conception being an act of rebellion and solidarity offers an important opportunity for scripting about disclosure, an opportunity that both celebrates the joys of conception for men, trans/

masculine, and non-binary people, as well as recognising the marginalisation that men, trans/masculine, and non-binary people too often face in conceiving. Talking about the *need* for rebellion and solidarity offers men, trans/masculine, and non-binary gestational parents opportunities to talk about cisgenderism with their children, and to frame their conception and the role of the donor as an act of resistance to cisgenderism. This offers a unique trans-specific form of social scripting that introduces children not just to their conception and donor, but to the broader social contexts in which their conception occurred.

Finally, in terms of trans-specific social scripting for disclosure, our findings suggest the importance of exploring which kinship or kinship-adjacent relationships are made salient among men, trans/masculine, and non-binary people. Part of acknowledging the formative role of cisgenderism in the conception experiences of men, trans/masculine, and non-binary people involves acknowledging that decisions about kinship and the role of donors are likely shaped by what is intelligible, what is expected, and how gender plays a role in this. Particularly when it comes to cisgender men as donors, how social expectations about such men as donors shape openness to disclosure is a topic that warrants closer attention in social scripting. While research suggests that trans men, in particular, are very open to disclosure about conception to children (e.g., Bonan et al., 2021), whether this actually occurs in practice will likely be shaped by views on how donors relate to or impact upon cisgenderist assumptions. Exploring ways to script for known donors in ways that do not overwrite the role of men, trans/masculine, and non-binary people in their children's lives is thus an important avenue for future research.

Beyond trans-specific social scripts for disclosure, ongoing attention is needed to what is required to ensure children can determine the nature of their relationship to their donor. While some of our participants spoke about making donors salient in terms of racial matching between donors and recipients, and others spoke about a purposive desire to create a space for relationships between donors and children, we must wonder what this means for the agency of children in determining relationships. At the very least, mechanisms that protect the needs of children are needed, which would include mechanisms for recording information about donor conception that is enduring and not dependent on the parent(s) as the sole holders of the information. As explored above, there are a number of barriers and potential facilitators of donor linking in the lives of men, trans/masculine, and non-binary people who are gestational parents. But beyond parents themselves, it is important that future avenues are created

and formalised for the children of men, trans/masculine, and non-binary people to make agentic decisions about accessing information.

Donor registers are one obvious avenue but, as we would argue, accessing donor registers are in a sense an end point to a journey that starts well before that. Given that known donor conception often occurs in the shadow of the law, existing donor registers may be insufficient. Talking about donor conception by creating trans-specific social scripts is one part of that journey. Having children's picture books about donor conception that are trans-inclusive are another. Having public stories that celebrate trans conception and recognise its long histories are another part of that journey. Creating spaces where a diversity of kinship relationships with donors are possible, and indeed intelligible, are yet another part of that journey. In other words, what is needed to ensure children's agency in the context of donor-linking are a diversity of trans-specific and trans-inclusive approaches to scripting donor conception that challenge cisgenderism and create possibilities for futures where children are able to create their own scripts about their families and all those involved in their conception.

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