FOR MORE INFORMATION:

IUI, IVF & Fertility

contact your local fertility clinics

Surrogacy

www.qld.gov.au/law/births-deaths-marriages-and-divorces/surrogacy

queenslandlawhandbook.org.au/the-queensland-law-handbook/family-law/same-sex-relationships/surrogacy-laws-applicable-to-same-sex-couples/

Fosterina

www.qld.gov.au/community/caring-child/foster-kinship-care/foster-kinship-care-about

Adoption

www.qld.gov.au/community/caring-child/adoption

Disclaimer: The information in this pamphlet does not constitute medical advice.





Rainbow Families Qld is an organisation that supports & advocates on behalf of LGBTQIAP+ (lesbian, gay, bisexual, transgender, queer, intersex, asexual, & pansexual) parents & carers and prospective parents & carers across Queensland. RFQ runs weekend monthly meet-ups, & weekday playgroups for families with kids under 5 across the state, as well as annual events.

For more information:

www.rainbowfamiliesqld.com.au

Email: rainbow.families.qld@outlook.com

f Join "Rainbow Families Qld Community" on Facebook.

Like our page Rainbow Families Qld & search groups tab for all our other communities & groups.



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RAINBOW FAMILIES

& making rainbow babies



This resource has been developed by Rainbow Families Qld to assist the LGBTQ+ community to understand their options in starting a rainbow family.

There's lots of different ways to start your family. For many the first step is choosing an egg or sperm donor.

SELECTING A DONOR

RFQ strongly recommends you talk to your children about being donor conceived from the very beginning.

Anonymous Donor

How: access frozen donor eggs or sperm from Australian or international donors through your local fertility clinic.

Benefits: easy accessibility, very low STI/STD risk, & no risk of donor wanting to be a parent.

Bisks: high cost, limited information about donor no

Risks: high cost, limited information about donor, no opportunity to meet til child is 18, unable to do home insemination.

How: ask friends or family (e.g. a sibling of the

Known donor

non-gestational parent) or use a donor website or FaceBook group like Sperm Donation Australia.

Benefits: reduced costs, potential to do home insemination, able to have the donor in the child's life.

Risks: donor might decide they want to play a more active

parental role than originally agreed, STDs/STIs, potentially unsafe if meeting a stranger.

Becoming a Known Donor

How: donate eggs or sperm to friends or family members Benefits: helping friends or family, possible to be a part of the child's life.

Risks: egg donation is lengthy & sometimes painful, recipient family might change the terms of your involvement.

Both parties need to consider what role the donor will play, have clear discussions around involvement & expectations, & document this. Donor arrangements are not legal documents, regardless of whether they are made at home or in a clinic, but are helpful in showing intention. Check out www.iclc.org.au/talking-turkey/ for a suggested donor agreement template. You may also want to consider legal advice on this matter. If doing home insemination we recommend STD/STI checks.

Unless in a relationship/co-parenting agreement together intercourse is not recommended as a way to conceive: the donor will then be legally considered the other parent, & there are also potential health risks. In Australia it is illegal to pay someone to provide you with sperm or eggs, though you may pay any costs incurred (e.g. flights, doctor visits etc).

HOW TO MAKE A RAINBOW FAMILY

DIY Insemination: when the prospective birth parent has a functional uterus, ovaries, regular periods, no known fertility issues, & access to a known donor (see next page for detailed explanation of how to inseminate at home).

Intrauterine Insemination (IUI): in the fertility clinic, using frozen anonymous or known donor sperm, blood tests/ ultrasound are used to determine the point of ovulation. A tube is then placed in the cervix and the sperm deposited directly into the uterus.

Invitro Fertilisation (IVF): if IUI has been ineffective or when personal circumstances warrant early intervention. IVF is a complex process that involves medication, blood tests, ultrasounds, & surgery to extract eggs from the ovaries. The eggs are fertilised in a petri dish with known or unknown donor sperm. Healthy embryos are either transferred into the uterus &/or frozen for later use.

Surrogacy: when prospective parent/s do not have a (functional) uterus. Surrogacy can occur with various arrangements i.e. donor egg & parent sperm, surrogate/parent egg & donor sperm etc. The egg is fertilised in the laboratory & embryo is transferred to the surrogate. Some people ask a family member or friend and others use websites to find a surrogate. In Australia surrogacy must be altruistic (the only money that changes hands is for genuine costs incurred) but international agencies are able to arrange overseas surrogates for a fee.

Fostering or adoption: same-sex adoption & fostering is legal in Australia, though some agencies do still discriminate against the LGBTQ+ community. Australia recognises international adoptions-- these can be both lengthy and costly, involving different criteria & eligibility requirements depending on the country.

Under Queensland law when a defacto couple conceive a baby using donor egg or sperm both can be included on the birth certificate & the donor has no rights or liabilities in relation to the child. In the case of a planned solo pregnancy or surrogacy, please seek legal advice.

HOW TO DO A HOME INSEMINATION

Track your period cycle for at least 3 months prior to the first attempt. This allows you to know your cycle length, fertile days, & fertility signs. Try a free app to keep a daily record. Take your temperature before you get out of bed in the morning. You will notice a significant drop in your baseline temperature just prior to ovulation (i.e. egg release).

The cervix forms the bottom portion of the uterus & the top portion of the birth passage. While you are on the toilet, use a finger to locate your cervix, feel how firm it is, & whether there is an opening. A fertile cervix is easy to reach & soft, with a small circular opening. Fertile mucus is clear & stretchy, like egg-white.

There are several ways to inseminate at home, the most common being to use a 10ml needleless syringe or silicone menstrual cup (both available from chemists). On your fertile dates ensure you have provided your donor with either a sterilised specimen jar or menstrual cup for their donation. Keep the donation at body temperature (i.e. under your arm) & use within 30 minutes (or use immediately if in a menstrual cup).

Make sure you're comfortable & relaxed, usually with a pillow under your hips to tilt the pelvis. If using needleless syringe, holding the plunger end of the syringe dip the opposite end into the semen & gently pull the plunger up until all the semen is in the syringe. Then insert the syringe into the birthing canal towards the cervix, & slowly depress the plunger, gently coating the cervix with semen. You may wish to orgasm just prior to or just after insemination-- orgasm stimulates the cervix causing it to pulsate, which potentially can help draw the semen up into the uterus. Continue to lay with hips tilted for 15 minutes. Dispose of/sterilise equipment as necessary.