

From: [Redacted]
Sent: Tuesday, 12 April 2016 21:27
To: Health:Policy & Legislation
Subject: A.R.T Act Review

Dear Professor Allan,

My name is Ross Hunter and I discovered I was donor conceived in 2009 at the age of 32. The implications of this discovery affect my genetic and ancestral identity, as well as the potential trajectory of my physical health. When so much of what you take for granted comes crashing down around you it impacts on your family relationships and mental health.

I am hoping that South Australia will take some leadership on this issue after the disappointing attempts of the Honourable Ms Skinner and the NSW government in attempting to quash the positive reforms made by the Victorian government in March. As donor conceived (DC) people, we have been consistently failed by the adults around us. We were often lied to by our parents (albeit with 'good' motives) and now these, lies, which we are well aware of as a society as being harmful, are being upheld by politicians and legislatures. And for what? The pressure of powerful industries. Of course this is nothing new. I am not opposed to ART per se- I believe they have a 'right' to make money, which they do- an exponential amount. I am simply appalled that they would claim that the process [of collating records centrally] is too expensive. This would be a TINY fraction of their operating costs. If the end 'product' of their ART processes doesn't even get a decent 'certificate'; we're worse off than the Cabbage Patch Dolls of the 1980s. The stories I have heard from DC people and the dismissive or callous way they have been treated by clinics is appalling and needs to stop.

It is encouraging that the South Australian government has appointed an academic of your stature to review this legislation- rather than merely consulting those who profit from this industry. It seems that many clinics have little regard for the 'end product' of their 'business'. Us. DC people all over the country, growing in number and age, and asking very reasonable questions which concern their lives, and the lives of their children. It is my hope that DC people will be consulted and 'utilised' in the formation of any reforms which are made in this area and that every effort will be made to protect, preserve and centralise records so that those unaware of their DC status will be able to connect with half siblings and donors in the future. Furthermore, it is my hope that SA will adopt the recent reforms made in Victoria in granting DC people access to identifying information about their donors, with contact preferences in place to protect both parties. Anything less than this suggests that DC people, as well as sperm donation in general, is a secret that needs to be kept. This is damaging and demeaning to both parties. Reform of this Act has the potential to finally remove that shameful stigma, promote openness and equality and allow us to get on with our lives.

Yours Sincerely,

Ross Hunter

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