



Family Building for Transgender Men and Women

A Guide to Becoming a Parent

PATH2PARENTHOOD
path2parenthood.org

Are you a transgender man or woman and think you might want to become a parent?

If you're reading this handbook, you may be a transgender man or woman who is thinking about parenthood. You may wish to have children and wonder if it is possible. You probably have questions about planning a family, but also have concerns. Our handbook is designed to give you the information you need if you are hoping to start or add to your family.

It is our goal at Path2Parenthood to provide cutting-edge knowledge to everyone thinking about parenthood. We work tirelessly to ensure the dignity of all families.

You can find additional articles, videos, and fact sheets on all aspects of family building at our website: **www.path2parenthood.org**. If you can't find an answer there call our toll free number, **888-917-3777** or email us at **info@path2parenthood.org**.



Why Should I Plan Ahead?

Fact: Whether you are single or have a partner or spouse, the first thing you need to consider is whether you wish to have a genetic link to your child.

If you plan to go through hormone therapy and/or gender confirmation surgery, you may want to retain your ability to have a child that is genetically related to you. Hormone treatment can reduce fertility, and this may be permanent even if hormones are discontinued. The removal of sexual organs completely takes away the capacity to produce gametes (sperm and eggs).

Some transgender people may not wish to preserve their genetic material prior to gender confirmation surgery because they don't want to be reminded of reproductive organs that do not match their gender identity. For these men and women, planning for a child may be an emotional roadblock to complete transition. For others, creating a family to which they have genetic connection is separate from their transition.

It's important that you discuss your reproductive options with your physician and a mental health professional **before** you begin transitioning. There are several options for creating a genetically-linked child through assisted reproductive technology, and banking eggs or sperm now can afford you and your partner the opportunity to have a connection to your baby later.

It is up to you whether you exercise your option to have children, and it should not have any bearing on your ability to receive transition-related services. Some states have gender identity-inclusive nondiscrimination laws covering health-care and insurance. For a comprehensive resource:

The Transgender Law Center
www.transgenderlawcenter.org



Protecting Your Fertility

Fact: Everyone who is transitioning should understand his or her fertility preservation options before beginning any treatment.

STAYING HEALTHY

Your health – both emotional and physical – is the first thing you need to think about if you want to preserve your fertility. Some factors to consider:

- Age
- Being overweight or underweight
- Smoking
- Alcohol or drug use
- Exposure to environmental toxins
- Chemicals in processed food
- Self-prescribed steroids
- History of sexually transmitted infections or disease
- Reproductive problems

Transgender people can have the same fertility issues as cisgender people. However, infertility is no longer the barrier to parenthood it once was. If you are a transgender man and interested in carrying a child or a transgender woman interested in conceiving, you and your parenting partner should consult with a fertility specialist for testing and evaluation.

BANKING YOUR EGGS OR SPERM

Cryopreservation is the use of very low temperatures to preserve structurally intact living cells and tissues, including reproductive material (eggs, sperm or fertilized embryos). Storage of this cryopreserved, or frozen, material is called banking. In freezing eggs for future fertilization, hormonal stimulation of the ovaries results in the development of multiple eggs that are retrieved by an ultrasound-guided procedure and banked for future use. This may require 2-6 weeks to complete and may not always be successful.

In sperm banking, semen for cryopreservation is obtained after ejaculation and taken to the laboratory within one hour. The semen is examined to determine the number of sperm it contains and its motility, or ability to move actively. Banking sperm requires the services of a commercial sperm bank, and banking multiple sperm specimens is recommended. Both egg and sperm preservation require fees which your insurance may or may not cover. It is always best to check with your insurance company first.



Using Egg and Sperm Donors

There are two types of egg and sperm donors:

- **Known Donor** – While donors can be anonymous, some people choose to acquire eggs or semen samples from someone they know. Typically, this “directed” option is less expensive but can carry legal, medical and emotional risks. Before you opt in, make sure to speak with a professional such as a reproductive attorney about the issues your family and known donor might face now and in the future.
- **Unknown Donor** – A more common option is to find an anonymous donor through a cryobank. Choosing a donor this way gives you much more control. Cryopreserved donor sperm undergoes testing and quarantine to screen for the presence of sexually transmitted diseases, and both egg and sperm donors receive genetic screening and psychological testing. Make sure your egg or sperm bank is reputable and licensed.



Surrogacy

If neither you nor your partner are able to or wish to carry a pregnancy, working with a surrogate is an option to consider. With surrogacy, eggs may be retrieved from one partner or a donor, fertilized with your or your partner's or donor sperm and the resulting embryos implanted in the surrogate's uterus. There are two specific types of surrogates to consider:

- A traditional surrogate supplies her own eggs and carries the baby to term. She may conceive via intrauterine insemination (IUI) or in vitro fertilization (IVF). Traditional surrogates, when used, are typically friends or family members. In most states, a traditional surrogate is the legal mother and adoption is often required.
- Gestational carriers conceive through IVF with eggs supplied by an egg donor and have no genetic link to your baby. Gestational surrogates and egg donors can be accessed through IVF programs or donor or surrogacy agencies.

Surrogacy laws vary from state to state, and some states may even prohibit surrogacy altogether for trans individuals. Any agency accepting funds from the Centers for Medicare and Medicaid Services cannot discriminate. You should obtain legal assistance from family law attorneys specializing in LGBT issues if you are considering surrogacy.

You can find egg and sperm banks, surrogacy agencies and other services using Path2Parenthood's **Find a Professional** online database.

Protecting Your Fertility

Male to Female Transitioning

Fact: If you wish to be a parent using your own genetic material, you will need to bank your sperm prior to beginning transition.

MALE TO FEMALE

Any person assigned male at birth considering estrogen therapy or gender confirmation surgery should think about sperm banking before beginning transition. Estrogen may reduce libido, erectile function and ejaculation, and an orchiectomy (surgical removal of one or both testicles) is irreversible.

BEFORE TRANSITION: PARTNER WHO HAS FEMALE REPRODUCTIVE ORGANS

If you have a partner or spouse who has female reproductive organs, the easiest option for creating a child is to try traditional conception before beginning estrogen therapy. However, the decision to delay transition needs to be balanced with your need to move forward.

Another option would be to inseminate your partner through intrauterine insemination (IUI) using your sperm before you begin taking hormones. IUI, also known as artificial insemination, is a procedure done in a doctor's office, often done in conjunction with prescribed fertility medication.



BEFORE TRANSITION: PARTNER WHO HAS MALE REPRODUCTIVE ORGANS

If your partner or spouse has male reproductive organs, and you wish to have children who are genetically linked to one of you, in vitro fertilization (IVF) with an egg donor and gestational surrogate will be necessary. IVF, or fertilization of the egg with semen is a high-tech medical procedure which is very common. The semen used in IVF can be yours, your partner's or a donor's. If you require IVF you will work with a reproductive endocrinologist, or fertility specialist, who will monitor your progress.

AFTER TRANSITION: PARTNER WHO HAS FEMALE REPRODUCTIVE ORGANS

If your partner or spouse has female reproductive organs, conception may be attempted using banked sperm to inseminate your partner through intrauterine insemination.

AFTER TRANSITION: PARTNER WHO HAS MALE REPRODUCTIVE ORGANS

If your partner or spouse has male reproductive organs, IVF using an egg donor to provide eggs and a gestational surrogate to carry the pregnancy will be required to have genetically-related children. Banked sperm can be used for insemination.



Protecting Your Fertility

Female to Male Transitioning

Fact: Even though hormones may reduce fertility, transgender men are still at risk for pregnancy.

FEMALE TO MALE

Any person assigned female at birth considering testosterone therapy as part of a gender transition should consider egg retrieval and freezing before beginning transition.

BEFORE TRANSITION: PARTNER WHO HAS MALE REPRODUCTIVE ORGANS

If you have a partner or spouse with male reproductive organs, the easiest option for creating a child is to try traditional conception before beginning hormone therapy. However, the decision to delay transition needs to be balanced with your need to move forward.

Another option would be to undergo intrauterine insemination (IUI) using your partner's sperm before you begin hormone therapy. While you may be anxious to begin hormone therapy, your ability to conceive will be reduced once you begin treatment.

BEFORE TRANSITION: PARTNER WHO HAS FEMALE REPRODUCTIVE ORGANS

Couples in which both partners are assigned female at birth may choose to retrieve the eggs from one partner, inseminate those eggs with donor sperm and have the resulting embryo(s) placed into the other partner, who will hopefully become pregnant via this process. This is called reciprocal IVF. In order to use a transgender man's eggs, they must be retrieved and used or cryopreserved and banked before beginning hormone therapy.

BEFORE TRANSITION: SINGLE

If you are single, having children prior to transition may not be possible, or you may not be ready to have children. If this is the case, you have the option to go through egg retrieval and freezing for insemination with sperm from a future partner or donor.

AFTER TRANSITION: PARTNER WHO HAS MALE REPRODUCTIVE ORGANS

Certain surgical transitions can mean that you no longer have access to your own eggs or uterus, and some hormone therapy can have potential negative effects on the quality or viability of your eggs.

If your partner or spouse has male reproductive organs, you should use protection if you don't wish to conceive. If you hope to conceive, IVF using an egg donor to provide eggs and a gestational surrogate to carry the pregnancy is an option. Your partner's banked sperm can be used for insemination.

AFTER TRANSITION: PARTNER WHO HAS FEMALE REPRODUCTIVE ORGANS

If your partner or spouse has female reproductive organs, conception may be attempted using sperm from a directed donor and your partner's eggs. You also have the option of using your own cryopreserved eggs or donor eggs, with your partner or a surrogate carrying the child. This option would require in vitro fertilization (IVF).



The Adoption Option

Fact: Through adoption and foster care, you can provide a home for a child who needs one.

Adoption and foster care adoption are great ways to build a family if you are not concerned about having a genetic link to your child. Hundreds of thousands of children of varying ages are currently available to be placed in loving homes. One of these children might very well be the right fit for your family.

There are several types of adoption you may wish to consider:

- Individual, or Single Parent
- Joint Adoption of an Unmarried Couple
- Second Parent Adoption
- Step Parent, or Domestic Partner Adoption
- In both Step Parent or Second Parent Adoptions, if there is a second legal parent, their rights will need to be terminated or they must consent to the adoption
- Guardianship

The Supreme Court has ruled that bans on adoption by LGBT people are unconstitutional. However, some agencies in foreign countries may not allow a child to be adopted by a transgender individual. If adoption feels like the right path for you, find an adoption agency or adoption attorney that you can trust, hopefully one that specializes in adoption for transgender persons and understands the laws in your state of residence as well as in the state or country in which your child is born.

A list of adoption agencies and adoption attorneys is available on our website in our **Find a Professional** database.



Legal Implications of Trans Parenting

Fact: If you plan to start a family using any method other than traditional conception, you should consult first with an attorney who specializes in reproductive or family law.

Legal family relationships are often tied to a person's legal gender, and transgender people can sometimes experience legal problems in connection with their relationships with partners, spouses, children, or other family members. You will want to ensure that your gender is correctly represented on legal documents and to protect your legal relationship with your child.

A family law attorney specializing in LGBT issues can help you:

- Ensure that your gender is correctly represented on all essential legal documents
- Enter into or dissolve a marriage, civil union, or domestic partnership
- File documents to give healthcare decision-making power to a partner or other family member
- Secure a parent-child relationship through adoption decree or a legal judgment of parentage
- Protect your ownership of stored genetic material (eggs, sperm, or embryos)

Glossary

Anonymous donor – Obtaining eggs or sperm through an agency, where the donor's identity is not known to you.

Assisted Reproductive Technology (ART) – A medical procedure intended to result in contraception.

Cisgender – A person whose self-identity conforms with the gender that corresponds to their sexual assignment at birth; not transgender.

Cryopreservation – The use of very low temperatures to preserve structurally intact living cells and tissues, including reproductive material (eggs, sperm or fertilized embryos). Storage of this frozen material is called **banking**.

A **directed donor** is a sperm donor selected by the recipient who the recipient knows, other than the recipient's partner, who donates semen for artificial insemination.

Egg banking – Hormonal stimulation of the ovaries results in the maturation of multiple eggs that are retrieved by ultrasound-guided aspiration and frozen for future use.

Gestational carriers/surrogates conceive through IVF with embryos produced with eggs other than the gestational carrier/surrogate. Gestational carriers have no genetic link to your baby. Gestational surrogates and egg donors can be accessed through IVF programs or donor or surrogacy agencies.

Intrauterine insemination (IUI), also known as artificial insemination, is a procedure done in a doctor's office in which sperm is inserted directly into the uterus to achieve conception. IUIs are often done in conjunction with prescribed fertility medication.

In vitro fertilization (IVF), or fertilization of the egg with semen in a test tube, is a form of assisted reproduction technology which is very common. Sometimes, especially with women who are a bit older, **egg donor IVF** will yield the best chance at pregnancy.

Reciprocal IVF – Couples in which both partners have females reproductive organs may choose to retrieve the eggs from one partner, inseminate those eggs with donor sperm and have the resulting embryo(s) placed into the other partner, who will hopefully become pregnant via this process.

Sperm banking – Semen for cryopreservation is obtained after ejaculation, and taken to the laboratory for freezing within one hour of being produced.

A **traditional surrogate** supplies her own eggs and carries the baby to term. She may conceive via intrauterine insemination (IUI) or in vitro fertilization (IVF).

Transgender Man - A transgender person who currently identifies as male.

Transgender Woman - A transgender person who currently identifies as female.

Resources

- Trans Road Map (www.tsroadmap.com)
- University of California, San Francisco, Center of Excellence for Transgender Health (<http://transhealth.ucsf.edu/>)
- American Civil Liberties Union, Transgender Rights (<https://www.aclu.org/issues/lgbt-rights/transgender-rights>)
- Transgender Law Center (<http://transgenderlawcenter.org/>)
- The National Center for Transgender Equality (<http://www.transequality.org>)

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www.RMAspecialists.com
1-855-RMA-inPA (762-4672)

PATH² PARENTHOOD.

Path2Parenthood (P2P) is an inclusive organization committed to helping people create their families by providing leading-edge outreach programs and timely educational information. The scope of our work encompasses reproductive health, infertility prevention and treatment, and family-building options including adoption and third party solutions. P2P is a national, not-for-profit 501(c)(3) charitable organization headquartered in New York City.

www.path2parenthood.org



Highly Personalized Fertility Care

The P2P's education and outreach program for transgender men and women is made possible in part by a generous unrestricted grant from RMA at Jefferson and RMA of Central Pennsylvania at PinnacleHealth.