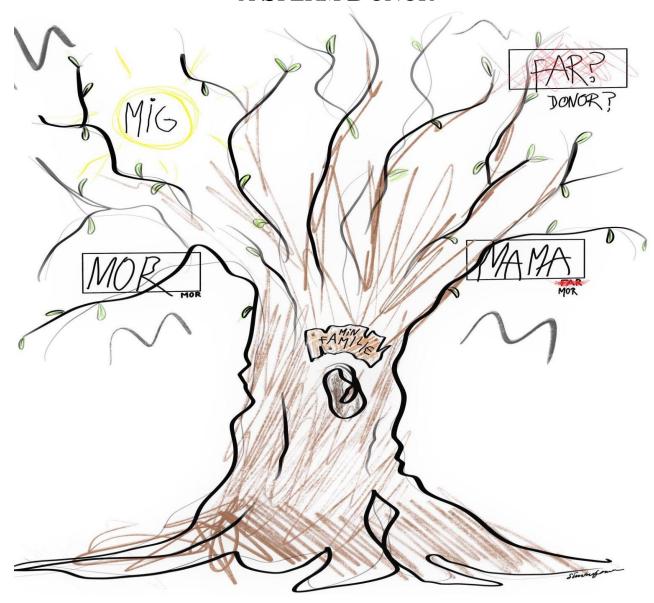
"CONSTRUCTING A QUEER FAMILY:

LESBIAN COUPLES' NARRATIVES OF CHOOSING

A SPERM DONOR"



"[...] but I do not want it [the child] to know that there is a possibility to put anything else than my name where you have to write 'dad' [...]" - Alice

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Abstract

In the last three decades, in Denmark, same-sex couples have achieved several rights to family life. Today, for example, it is possible for lesbian couples to be married and have state-funded access to fertility treatment. However, despite the recent legal changes and the growing number of 'alternative' families, the concept of 'family' remains a very political arena – governed by law and contested by social norms – in which the heteronormative nuclear model figures as a yardstick for legitimacy. In this thesis, I seek out to examine the idea of family constructed by lesbian couples when navigating possible choices relating to having children as a queer family. The focus is on their narratives of choosing a sperm donor from a sperm bank to achieve pregnancy at a fertility clinic. Despite being a seemingly individual process, choosing a donor from a sperm bank catalogue involves a plethora of decisions embedded in larger social discourses of what it means to be a (good) mother. The couples must navigate the law along with their own expectations and social expectations.

I have conducted, three qualitative, semi-structured narrative interviews with three Danish, white, cisgender, same-sex couples, which have been transcribed and analysed using Thematic Analysis. These interviews touched upon key considerations in relation to the choice of donor, such as who should be pregnant, how a donor is chosen, whether the same donor should be chosen for siblings, and the extent to which contact with donors and donor siblings would be desirable. Through the Thematic Analysis, three overarching themes were constructed: 1) Choosing a donor or buying the future, 2) a non-traditional family, and 3) blood, love, and strangers.

The first theme is comprised of codes relating to how the couples construct their narratives around choosing a donor based on the criteria and information provided by the sperm banks. The key findings, employing a theoretical framework comprised of Positioning Theory and Social representations theory, were that all couples wish to use an open donor so that their children potentially can meet their donor one day. The reasoning behind this choice, I argue, is an attempt at constructing a narrative where they as parents are positioned with the duty to ensure the (unconceived) child's rights to choose themselves, and by ensuring this the parents are constructed as 'good parents'. Furthermore, I argue that the couples create narratives of having to choose the 'best' donor for the child. However, the sperm banks provide so much information that it becomes difficult for the intending parents to know what in reality is the best. Here, I draw on some of the findings and arguments brought by Andreassen (2019) as well

as Faircloth and Gürtin (2017) to shed light on how Artificial Reproductive Technologies (ARTs) are contributing to heightened feelings of anxiety in queer reproduction. I argue that there is a considerable amount of pressure and growing accountability for parents to be 'good parents', placing the child's interest higher than that of the parents'. Therefore, the narratives constructed by the participants are very centred on the child's future perspectives, rights, and interests as well as how these are best ensured by the parents when making this choice.

The second theme is constructed based on codes regarding constructing a queer family in a heteronormative context. The key findings were that there are significant restrictions for the couples to construct their family the way they see fit, due to legislation and social norms policing the practice of 'family'. Even the language available to use in their narratives about their family is tied to the heteronormative ideals of 'family'. However, the couples, despite pointing out several instances of discrimination against them as a queer family, continue to maintain that they do not have any problems. I have understood this in relation to Andreassen's (2019) "just great" rhetoric which is considered a survival strategy for queer parents in a heteronormative context.

In connection with the second theme, the third theme is constructed based primarily on the representation of 'family' as based on a heterosexual, nuclear ideal where the family is 'bonded' through a biological kinship. This theme is, therefore, analysed in relation to the narratives the couples construct regarding being related to their children or at least looking like them as well as their narratives on the representation of 'siblinghood'. The key finding has been that there is a negotiation of the ideals pertaining to the heteronormative family in relation to how the couples can construct their family while also maintaining the non-biological mother as a legitimate parent.

Finally, I discuss if the representation of the heteronormative family can be understood as transformed with the changes in family practices or if the inclusion of alternative families merely means that these families reproduce the heteronormative ideals of 'family' by assimilating their family to be as close as possible.

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1. Introduction

In 2006, there was a change in the Danish law permitting lesbian couples to have access to reproductive technologies. Today, lesbian couples in Denmark can be referred to fertility treatment for artificial reproductive technologies $(ARTs)^1$ to conceive a child using sperm from a sperm bank, with both mothers being granted recognition as legal parents of the child from birth (*medmoderskab*). Denmark has also become a big exporter of donor gametes, with privately owned, commercial sperm banks Cryos International and European Sperm Bank (*ESB*) being the two biggest.

When wishing to achieve pregnancy using a sperm donor, there are therefore many different donors to choose between. To be able to select one among the many options, a wide range of information is available to the consumer. This encompasses, for example, how the donors look, their medical history, and education, to aspects such as what hobbies they have, their favourite colour, and what their handwriting and voice are like. It is up to the individuals themselves to sort through the information and choose the donor they want to use to conceive their child(ren).

I will in this thesis examine how the choices pertaining to lesbian couples' choice of sperm donor can be understood in relation to how they construct their idea of 'family'. The idea is that the reasonings, negotiations, and justifications of the donor choice can be understood as constructed based on an understanding of what family is – or rather should be. Furthermore, as the practice of family for a long time has been reserved for the heterosexual family, I am interested in how lesbian couples' construction of family, as an alternative family, is related to the otherwise heteronormative ideals of the nuclear family and discuss if these ideals are changing. I will therefore answer the following problem formulation:

"How do lessian couples construct meaning around the idea of 'family' and how does this shape their choice of sperm donors?"

In order to examine this problem formulation, three qualitative, semistructured, narrative eliciting interviews with lesbian couples are conducted, transcribed, and analysed employing a Thematic Analysis method. All three couples are

1

¹ Throughout the thesis ARTs and MAR (medically assisted reproduction) will be used interchangeably as ARTs are considered the umbrella term and it is the use of sperm donors to conceive that is of interest, not the specific medical procedures.

in different phases of their fertility process; one couple has no children and is contemplating trying to conceive, another couple has one child and is currently trying to conceive their second, and the third couple has one child and is currently expecting a second child. Three overarching themes have been created grounded in the interview data, which are analysed using Positioning Theory and Social Representations Theory (*SRT*).

I will now provide an overview of some of the literature that has been relevant to this thesis.

1.1. Literature overview

The literature I will present here has laid the basis for the scope of this thesis as well as for preparing the interview guide with relevant questions and topics about being a lesbian couple using a sperm donor to try to achieve pregnancy.

Initially, this research set out to examine the concept of 'race' in queer reproduction, which was inspired by for example Karpman, Ruppel, and Torres (2018) who found that queer women of colour opted for choosing a known sperm donor and thereby avoiding using sperm banks, as they were not able to find donors with their desired characteristics in the commercial sperm banks. This could be hypothesised to be linked with the findings by Andreassen (2019) that the commercial sperm banks have a preference for White donors as there is an understanding that White donors are in higher demand. In a similar line, Newman (2019) found that interracial lesbian couples felt that they found themselves needing to do a "tradeoff" between having biologically related children and having children that looked like both parents. As it was near impossible for Newman's (2019) participants to find a donor representing both or all the ethnicities that they wanted. There is also a significant body of research examining the reproduction of 'whiteness' in ARTs, such as Nordqvist (2012a) and Dahl (2018a, 2018b), and Andreassen (2019). In a Scandinavian context, the focus of 'race' has primarily been on 'Whiteness', which therefore created the initial interest in including lesbian couples of colour to contribute to the literature on 'race' and reproduction in Denmark. However, only white participants agreed to be interviewed, which therefore changed the scope of this research to that presented in the introduction.

Concerning the use of a sperm donor, several scholars have also researched the children's perspectives, for example, reported self-esteem and problem behaviours (Bos, van Rijn-van Gelderen, & Gartrell, 2020), their psychosocial adjustment (Chan, Brooks, Raboy, & Patterson, 1998), the children's awareness of their parent's sexual orientation (Stevens, Perry, Burston, Golombok, & Golding, 2003), children's perspectives on their donor siblings (Scheib, McCormick, Benward, and Ruby, 2020), and the children's knowledge of the donor and how they talk about the donor (Vanfraussen, Ponjaert-Kristoffersen, & Brewaeys, 2003; Provoost, Bernaerdt, Van Parys, Buysse, de Sutter, & Pennings, 2018; Hertz, Nelson, & Kramer, 2015). However, this research will solely focus on the parents and will only include the perspectives of the children regarding how the parents *expect* these to be.

Andreassen (2019) has been an important resource for the present research. I will not elaborate much on it here, as her research will be outlined in section 4.2. under the theoretical framework. However, as the title of the book so nicely demonstrates, the research is about "mediating kinship" and explores how newer technologies such as ARTs and the internet offer new opportunities to construct ideas around kinship (Andreassen, 2019).

Another author who has researched the understanding of 'family' is Petra Nordqvist (2010, 2012b), based on interviews with lesbian couples who have used donor conception in England and Wales. Nordqvist (2012b) builds upon the concept of "families of choice" and examines how same-sex couples perceive intimacy. It is argued that lesbian couples conceiving via sperm donation is an interesting and informative arena to explore ideologies pertaining to intimacy and families, as they challenge the normative understanding of conception. Nordqvist (2012b) argues that the lesbian couples wished to construct normative family stories, thereby placing their family within the hegemonic family discourse in an attempt to come off as "ordinary". All the findings were argued to relate to the aim of bringing together complex aspects of family and kinship together to create a notion of 'family' both as biogenetically connected, as well as emphasising interpersonal connectedness.

Research focusing more on the technological and medical side of lesbian reproduction is offered by Mamo (2007) and Mamo (2018). Mamo (2007) is an in-depth study using interviews with lesbian couples who wish to conceive a child. The main theme of the book is how lesbian reproduction using reproductive technologies has resulted in the medicalisation of their reproduction as fertility patients. Mamo (2007) argues that it both contributes to subverting or changing the idea of parenting as heterosexual while also strengthening established ideals of heteronormativity in

motherhood. Mamo (2018) argues how lesbian low-tech reproduction has been occurring long before the technology-based methods were introduced, but as access is granted to the medicalised reproduction it achieves status as the only valid approach – but also bringing in constraints on reproduction such as the control shifts to the medical practitioner and financial restraints, which creates opportunities for discrimination (Mamo, 2007, p. 227). Furthermore, the seemingly lesbian couples' choices, in turn, became shaped and constrained by biomedical organisations (Mamo, 2018, p. 26).

There is also literature researching the concepts of 'siblinghood' where for example Goldberg and Scheib (2016) examined lesbian relationships' ideas of family in relation to donor siblings which they refer to as "linked families". Donor siblings are children conceived using the same donor and can due to the export be spread all over the world. They found that couples struggled with feelings of not having the appropriate language to describe it, where some opted for "half-siblings" or "donor-siblings" others maintained that they could be "acquaintances" which the authors argued were a demonstration of the negotiations of what shared genetics means concerning 'family' and kinship. Besides the donor siblings, other scholars such as Somers, Provoost, Ravelingien, Buysee, Pennings, and De Sutter (2020) have researched the wish to use the same donor to have more than one child. This study included both lesbian intending parents, as well as heterosexual intending parents, in Belgium and found that there was a wish to use the same donor for all their children due to both medical considerations and family and sibling relationships.

The last aspect I will include in this overview is that of negotiations of the sperm donor. Research has for example examined the language used about the donor (Provoost, Bernaerdt, Van Parys, Buysse, De Sutter, & Pennings, 2018), as well as Freeman, Applyby, and Jadva (2012) have studied the use of open donors and what consequences this can have for the parents, children, and donors after the birth of a child.

1.3. Thesis Structure

This thesis will be structured as follows. Following this introductory section, I will outline the approach (2) of this research and the research method (3) including the data collection and the analysis method. The fourth section will outline the theoretical framework which will account for the construction of 'family' in relation to

Positioning Theory and Social Representations Theory, as well as concepts and arguments brought by other literature on conception through ARTs with the use of a sperm donor. The fifth section is the analysis where I will outline and analyse the findings. The analysis is subsequently structured in the three main overarching themes found in the research: "Choosing a donor or buying the future", "a non-traditional family", and "blood, love, and strangers". The sixth section is a discussion of the construction of 'family' considering social reproduction or transformation of the heteronormative ideas of family. The final and seventh sections will conclude on the findings of this thesis in relation to the problem formulation, as well as discuss the limitations and future orientations.

2. Narrative approach

I will in this thesis use the approach of qualitative research as well as a narrative approach in order to answer the problem formulation of how lesbian couples construct their idea of 'family' and how this affects their choice of donor. A qualitative approach is considered the most fitting as it is highly relevant in studies of meaning construction and social relations (Flick, 2014). The qualitative approach applied in this thesis is a narrative approach that builds upon Cathrine Kohler Reissman's (1993, 2008) insights into what narratives are and how they work. I will follow Andreassen's (2019, p. 33) understanding of interviews being discursively constructed experiences – narratives – and not as facts or "testimonies of truth". This means that narratives are "representations" which makes them subject to interpretation and what the researcher accesses, is the participant's imitation – or representation – of for example an experience (Reissman, 2008, pp. 21-22; Reissman, 1993, p. 1). Narratives allow the researcher to get an understanding of what it feels like in that story world, but the researcher must not confuse this with knowing the informant's actual experience (Reissman, 2008, pp. 21-22:28). Therefore, in an interview situation where a researcher asks questions, for example, to elicit narratives, the researcher is just as active a part as the participant in constructing the narrative and meaning together (Reissman, 2008, p. 23).

The narrative approach understands experiences and stories as constructed. This research follows a social constructionist epistemology, meaning that knowledge, and in extension research, is understood as socially constructed and is valuable in the present time and context, but maintaining that knowledge and also practices are dynamic and therefore bound to change. Social constructionism considers

social practices to be at the centre of maintaining the construction. In other words, this means that 'truth' and 'science' are not fixed entities that exist in the world and can be uncovered, rather they are only true as long as they are maintained as such through the social practices carried out by the human beings that created them in the first place (Hviid Jacobsen, Lippert-Rasmussen, Nedergaard, 2012, p. 335).

In relation to this project, I am looking at the socially constructed aspects of 'family', and I am therefore not attempting to examine *how* the biological aspect of reproduction works. Instead, it is the epistemology, or the knowledge, about for example what biology means for constructions such as 'family'.

According to Reissman (1993, pp. 2-3), the act of storytelling is universal and one pertaining to humans alone. The concept 'narrative' is often interchangeably used together with the concept of 'story' (Reissman, 2008, pp. 6-7) and will be used as such in this thesis. Personal narratives are driven by human imagination and agency which enables them to be able to not just tell stories as they have happened but construct the stories of events and their own actions thereby constructing their lives and even identities (Reissman, 1993, p. 2). There are three levels of narrative texts: the practice of storytelling, the narrative data, and the narrative analysis. The first level refers to the way that people use narratives to communicate, the second is the empirical data that is collected during research, and the third and last is the study of the collected narrative data (Reissman, 2008, p. 6). I will now proceed to give an account of the qualitative method of this research.

3. Method

The method section is divided into two other main sections, that of data collection and method of analysis. First, I will give a brief account of some considerations regarding reflexivity, transparency, and transferability of this thesis. This is then followed by the data collection method where I will outline how I came in contact with the participants, the interview method, and the relevant ethical considerations. Last, I will give an account of the analysis method as well as the transcription process.

In qualitative research, the researcher is a central part of the knowledge construction, as I have also mentioned regarding the narrative approach. This means that contrary to quantitative research which often considers the researcher a variable that should be minimised, taken out, and be objective, qualitative research includes the researcher's subjectivity and participation in the knowledge construction (Flick, 2014).

It is, therefore, important that the reflexivity of the researcher is considered by the researcher, meaning that the researcher should be aware of the way their thoughts, feelings, and interpretations become data in their own right (Flick, 2014). In line with this, the idea of making research transparent has also been emphasised as an important aspect of qualitative research (Flick, 2014). Taking these two points into consideration I have strived to be reflexive about the research amongst others by discussing my preconceptions and interpretations both with my supervisor and with colleagues. Furthermore, I have in the previous section laid out the epistemology of this research and will continue to make clear the processes and reasons behind why I have conducted the research as I have. I will, furthermore, attempt at making the research as transparent as possible by including my translated quotes and interview guide as an appendix (appendix B). I will also give a brief account of my position as a researcher in this field of study, as I consider it a valuable way to ensure transparency to make clear the potential biases and preconceptions that can be derived from the positions I occupy.

I am a white, queer, cisgender woman. I am married to a cisgender woman, and we have simultaneously writing this thesis started fertility treatment trying to conceive a child using a sperm donor as well. I chose to make this clear to the participants, as I felt my participants might feel more comfortable opening up about the considerations they have had if they felt that I would understand from a personal perspective. I was, however, also mindful not to shift attention from the participants to myself, and thereby only contributed with personal experiences when it seemed fitting. A consideration I had was the possibility of making the power relation more equal in the relation but at the same time maintaining awareness that I am the interviewer with a Dictaphone and therefore will most likely occupy a position of power in the relation. Furthermore, I have also made my position clear in my discussions with my supervisor and discussed potential blindsides I could have that accompany this position. While being aware of the potential disadvantages, I would, however, argue that it is a benefit in the relation to the participants and is important for research to be conducted from an 'insider position' so to speak. Minority groups often have lived experiences that cannot possibly be understood by a person, not within the group, and I, therefore, believe that it is a valuable contribution to research on minority populations when conducted by people from the minority group.

I will now proceed to account for how the data has been collected for the research.

3.2. Data collection

Initially, for this research, I set out to interview lesbian couples who either had used a sperm donor to conceive children, were in the process of it, or who were considering starting. This research understands lesbian couples as a relationship between two or more women (cisgender or transgender), or other non-normative genders. Considerations when recruiting participants using a 'poster' were given to avoid a reproduction of understandings of queer relationships as binary and monogamous, i.e., the language used in the poster to recruit participants avoided language referring to relationships as meaning two people and avoided binary gendered language such as 'women' and instead used the term LBTQIA+. The exclusion criteria for this study were heterosexual couples that needed to use a sperm donor as the cisgender males' sperm was not viable. Otherwise, queer couples that wished to reproduce using a sperm donor due to not having sperm either because of hormonal treatment or because of the biological makeup of their reproductive system would be of interest in this study. Several studies, as mentioned in the literature overview, have researched lesbian couples from a binary understanding that 'lesbian couples' mean two women in a relationship with each other. This, in my view, excludes several queer identities that also are active participants in reproductive practices and thereby erasing their voices and reducing queer reproduction to binary gay men or lesbian women. I will now account for how I recruited the participants.

For this research participants were recruited through various Facebook groups, as it was thought to be an efficient way of reaching a diverse group of people across social class and geography. Initially, four Facebook groups were chosen which were Facebook groups aimed at people who in some way or another had either donated or received donor gametes. These groups were all international but administered by Danish people. Facebook groups operate in many different ways, and often the groups will be private, meaning that one needs to be a member to see what is posted and to post yourself. Therefore, despite Facebook groups being online and something one can access from the comfort of their home, I would argue that it still follows some of the considerations by DeWalt and DeWalt (2010, p. 42) on gaining access to a field. They point out that gaining permission is the first step, and often when researching institutions, it is important to get permission from the top of the "hierarchy".

The Facebook groups serve as a safe and private online space, where people can share and come forward with personal stories, ideas, and experiences. Therefore, all four donor groups specifically stated in their group guidelines that they would not allow researchers and journalists to enter the groups. Instead, any kind of recruiting had to go through the administrators. Therefore, I started by contacting the administrators of the groups. Out of the 4 groups, all administrators except for one got back to me. I was already a member of some of the groups due to my personal connection to the topic, which turned out to be a big help. All the administrators that contacted me allowed me in only because I "belonged in the group" as they put it. I would, in other words, not have been allowed in the groups if I had not mentioned my connection. In this sense, the administrators could be considered "gatekeepers" (DeWalt & DeWalt, 2010, p. 46).

Furthermore, I had encountered a Facebook group specifically aimed at lesbian mothers, which did not guarantee the use of sperm donors, but would be likely to have at least some that would have experience with sperm donation. All in all, 13 people reached out to me that they would be interested in participating in my study. Of these, all were white, many were solo mothers, two were heterosexual, and only one was not Danish. Of the ones that were within the population of interest, only three wished to be interviewed together. These three couples were white, cisgender, and monogamous and were all interviewed for this study, and will be introduced in more detail in section 5.1.

3.2.2. Interviews

This research has conducted semi-structured, narrative inspired interviews, which are structured in such a way that the participants are encouraged to speak about their experiences in great detail (Bailey-Rodriquez et al., 2019, p. 210; Flick, 2018, p. 205). When conducting an interview, the practice of storytelling will often be done by the participants as it is effective in social interaction, especially in constructing identities. By telling stories people can construct their identity both towards themselves and towards others by telling about who they are, and especially who they are not (Reissman, 2008, p. 8).

Semi-structured interviews are often based on a premade interview guide that consists of open-ended questions (Flick, 2018, p. 207) with prepared follow-

up questions and probes. The premade, open-ended questions are the 'structured' part of the semi-structured interview, but they should be asked and used flexibly allowing participants to bring up the topics relevant to them in the order they tell their stories. It is in a semi-structured interview also important to note that the researcher is their own "interview tool" (Kvale & Brinkmann, 2015, p. 189). This means that it is up to the individual interviewer to be present in the interview and sense what is being said and what to ask. In practice, it is the researcher that follows the participants' flow while also ensuring that the interview is not completely derailed from the research scope (Flick, 2018, pp. 207;209: Reissmann, 2008, p. 24). The interview guide is attached in appendix A to be transparent about the preconceptions and the pre-constructed questions which ultimately will have shaped the interview. I will briefly account for the interview guide in the following.

3.2.2.1. Interview guide

Kvale and Brinkmann (2015, p. 186) write that a dynamic interview will ask "how" questions which are meant to continue a positive relationship in the interview and prompt the participants to share their experiences. Reissman (2008, p. 24) argues that the specific wording of a question is less important than the interviewer's emotional attentiveness and engagement and the degree of reciprocity in the conversation. However, it is preferable to keep the interview guide free of academic language (Kvale & Brinkmann, 2015, p. 186).

To ask questions that would elicit the participants to tell stories about their experiences I structured the interview guide according to the themes that I wanted to cover for the research scope (Kvale & Brinkmann, 2015, p. 185). For the themes, I will refer to appendix A, but the main themes were: 1) Choosing who should be pregnant, 2) donor characteristics, 3) the role of the donor, 4) siblings and donor siblings, 5) social support, 6) the societal level of being a rainbow family in Denmark. In total I made two interview guides as one couple did not yet have any children, nor had they started fertility treatment yet. Therefore, the formulations needed to be slightly different than for the other two couples.

Before the interview questions, I asked the couples if they could introduce themselves and their relationship, which was intended on obtaining some sociodemographic information while maintaining the narrative flow. I would then follow up with the following if they did not bring it up; their pronouns, their sexuality, their occupation, where they grew up, how long they have been together and how many children they had.

3.2.2.2. Online interviews

I provided the option to all participants that we could conduct the interview online, at a library or a quiet café, or in their homes. According to Hanna (2012, p. 239), it can contribute to a more equal relationship between the researcher and the participants if they feel they have a sense of control by being offered choices. I also believed that they needed to be offered alternatives to their homes as I did not want them to feel compelled to invite me into their personal space. I provided them with the online options also due to the current Covid-19 pandemic to allow them to feel safe and because some of the couples have children and therefore might not want to invite a stranger into their homes. One couple out of the three asked to have the interview online instead of in person. This was, therefore, conducted via the program Zoom, where the interview would still be conducted synchronously with the use of video and audio. Despite an online semi-structured interview having many similarities with a non-online interview (Sullivan, 2012, p. 55), having the interview online, especially when it is an interview with three people participating will have a different character than the other two conducted interviews. There are possible advantages and disadvantages of having one interview online, which I will briefly outline here so that they can be taken into consideration when the results are presented in later sections and in the following analysis.

Using the video call function of zoom makes it possible for all those participating in the interviews to use nonverbal cues such as gestures and social cues. The presence of nonverbal communication is, however, restricted as it is often only the chest and upwards that are visible when using a web camera (Janghorban, Roudsari, & Taghipour, 2014, p. 1). It can, however, be experienced as uncomfortable and anxiety-inducing to participate in online video interviews as it then becomes possible to watch oneself as the interview happens (Deakin & Wakefield, 2013, p. 611).

One of the most significant benefits of conducting interviews online is the flexibility that it accompanies, both for the researchers and the participants (Janghorban et al., 2014, p. 1). This means that it is possible to include participants that are geographically located far away from the researcher, which will therefore make it possible to save on both travelling time and monetary expenses related to travelling (Flick, 2018, p. 243; Deakin & Wakefield, 2013, p. 604). The participants can be interviewed while they are at home, which can provide the participants with a safe space to be in during the interview, without the researcher imposing on their personal, safe space (Hanna, 2012, p. 241). The researcher must, however, be prepared for technical problems and have a backup plan or reschedule the interview if significant issues arise (Sullivan, 2012, p. 59).

3.2.3. Ethics

The main principles of research ethics are to avoid harming participants involved in the study (Flick, 2018, p. 136), which according to Kvale and Brinkmann (2015, pp. 119-120) requires the researcher to have integrity. They argue that integrity includes being honest, having experience, and treating the participants fairly. Furthermore, the researcher must be empathetic and sensitive toward the participants (Kvale & Brinkmann, 2015, pp. 119-120). Attention must be paid to the participant's needs and interests, but also that the researchers respect the participants, and their privacy, and inform the participants both of their rights and the aim of the research they are participating in (Flick, 2018, p. 136). Informing the participants of their rights can be done together with obtaining informed consent. Informed consent involves providing the participants with knowledge of what they are consenting to – e.g., research aim, processing of personal data, being interviewed, and recorded. Furthermore, the participants must be informed that their participation is voluntary, and about the risks and benefits of participating (Flick, 2018, pp. 136-137:140; Kvale & Brinkmann, 2015, p. 116).

For this research, the consent form had been sent to the participants prior to the interview and then signed together with the researcher before starting the interview. The form of consent contained a description of the goals and methods of the research, a description of the rules regarding the protection of personal data and what type of data the research would include. It also contained contact information in case of questions, concerns, or the possibility to withdraw the consent. The form, furthermore, contained a list of the elements that the participant would consent to with the possibility of checking either "yes" to consent or "no" to not give consent. The participants were informed that regular, confidential, and sensitive data would be obtained during the interview and that the interview would be recorded, transcribed, and analysed to be published in a master's thesis and potentially an article. The informed

consent form also contained information about the confidentiality and anonymity of the participants as well as the law regarding informed consent and storage of personal data.

The ethical considerations of the online interview are in this research considered to be similar to the non-online interview (Janghorban et al., 2014, p. 2). Some ethical aspects might even be easier during an online interview, for example, if the participants wish to end the interview they simply have to press the "leave" button (Janghorban et al., 2014, p. 2: Deakin & Wakefield, 2013, p. 610).

There are also ethical considerations to keep in mind when analysing the data. When writing about the results of the study and analysing the data one of the first ethical considerations is to live up to the agreement that the participants will not be identifiable, and their names and data will be anonymised. It can sometimes be difficult in qualitative research which often has different aspects that complicate the anonymity. For example, how in qualitative research the participant often shares a lot more information regarding their context (Flick, 2018, pp. 144-145). This study examines LBTQIA+ couples' use of sperm donors in Denmark. As Denmark is a relatively small country with a small population, the study of minority individuals will automatically make anonymity harder and requires careful consideration. It is furthermore important that all the interpretations are grounded in the data and that it is made clear, and that the analysis does not include judgements or diagnostic assessments (Flick, 2018, p. 144).

3.3. Analysis method and transcription

After the data has been collected, the next step is to transcribe the data and start the analysis. I have chosen for this research to conduct a thematic analysis (*TA*), drawing closely on that of Braun and Clarke (2008). TA is "[...] a method for identifying, analysing and reporting patterns (themes) within data. It minimally organizes and describes your data set in (rich) detail" (Braun & Clarke, 2008, p. 79). According to Braun and Clarke (2008), TA is a diverse method of analysis that can be used across various approaches and types of qualitative data. They argue that it is also an extremely common method to use, however, as it is a poorly "named" method, often researchers apply the method without explicitly writing that this is the method they use. Following the constructionist approach, the codes and themes created from the data are socially

produced and constructed and are therefore *not* understood for example a "window" into the actual lived experience of the participants (Braun & Clarke, 2008, p. 95). Braun and Clarke (2008) pose a sex-step guide, which structured the analysis. I will here give an account of the steps and how they were implemented.

THE FIRST STEP, and maybe the most important aspect is to become familiar with the data. As I have conducted all the interviews myself, the data collection is part of the familiarization phase. By collecting the data, I can get prior knowledge of the data, where initial analytic ideas and thoughts already appear (Braun & Clarke, 2008). These were noted down after each interview in the 'post-script', where a short evaluation of the interview was written down, focusing on what went well, what went less well, and if there were any initial analytical interests that came to mind already. Following the data collection, I transcribed all three interviews. Transcription requires listening to the interview several times, and according to Braun and Clarke (2008) transcription is also a crucial analysis phase, where the data is interpreted, and meanings are created – e.g., the transcription requires that I must decide what the speaker is saying and how it is said. The transcription method used in this research follows Braun and Clarke's (2008, p. 88) recommendations to do a "[...] rigorous and thorough 'orthographic' transcript - a 'verbatim' account of all verbal (and sometimes nonverbal – eg., coughs) utterances [...]". Punctuation has been added to assist the reader, but it is recognised that adding punctuation necessarily adds meaning, which speaks to how the transcription process is an interpretative part of the analysis. Table 1 shows the different symbols used.

Table 1

Symbols used in transcription:

- [...] used when something is taken out of context, or if something is omitted.
- [-] short break under three seconds and [-3] with breaks longer than three seconds.
- Hmm has been used when an acknowledging "yes" sound is made.
- Mnnn has been used when an acknowledging "no" sound is made.
- [inaudible] has been used when it was not clear what was being said.
- has been used to show the speaker interrupting themselves to start something new or stuttering to say what they intend on saying.

In the transcriptions, the participants are referred to by their name and the interviewer is denominated as "I" for "interviewer". Furthermore, the quotes have been translated from Danish to English, which also is an interpretative process (see appendix B).

THE SECOND STEP involves creating the initial codes (Braun & Clarke, 2008). I coded the data by reading through the transcripts thoroughly and writing on the sides of the paper codes, ideas, and aspects I found interesting. I used different coloured pens and highlighters to mark different codes, especially the codes that I had initially written in my 'post-script' were allocated a specific colour. Coding is organising the data in a meaningful way and in meaningful groups (Braun & Clarke, 2008).

The themes differentiate themselves from the codes by being on a broader level. Generating themes is a part of interpretation where the codes are analysed and sorted into themes. There are different types of themes, where some are overarching themes, and some will be subthemes. It can turn out that a code can be an overarching theme in itself or a subtheme, or maybe several codes will be put together to form a theme (Braun & Clarke, 2008). To organise my themes, I used a table overview where I made one table per interview, to allow for each interview to contribute with its own codes and themes. But the tables were also compared and several of the themes were repeated.

THE FOURTH STEP was to review the themes. Here it is decided if a theme should be discarded, divided, or maybe added to another theme. To best be able to structure the analysis, each theme should contribute to the understanding of the data set and be relevant to the problem formulation (Braun & Clarke, 2008).

THE FIFTH STEP is to define and name the themes after they have been reviewed. It is important to try and capture the essence of a theme. The theme's name should provide the reader with an understanding of what the theme is about. Subthemes should be used to structure the theme and to assist the writing if the overarching theme is complex (Braun & Clarke, 2008).

THE SIXTH AND LAST STEP is then writing the report (Braun & Clarke, 2008, p. 93).

I will now proceed to outline the theories which will be applied in the analysis to further an understanding of the themes that have been found.

4. Theoretical framework

The theoretical framework applied in this research is composed of theories that will assist an understanding of how lesbian couples construct the idea of 'family' and how this shapes their choice of sperm donor. Therefore this section will begin with an

account of Positioning Theory and Social Representations Theory, which will be followed by an account of concepts and arguments brought by Andreassen (2019) and Faircloth and Gürtin (2017).

4.1. Constructing 'family': Positions and representations

I will start with an account of Positioning Theory, where the aim is to give a thorough understanding of how positions are used and how they are located in a moral framework where *rights*, *duties*, and *obligations* are ascribed to each position. Positioning Theory will provide a theoretical framework for understanding how the couples' narratives of choosing a sperm donor position both them as parents, the children, and the donor.

I will then give an account of Serge Moscovici's Social Representations Theory. The focus will be on the concepts of *anchoring* and *objectification* as well as Moscovici's theorisation of *cognitive polyphasia*. The aim is to provide a theoretical framework for how the couples represent and understand concepts such as 'biology' and 'family' and how these play into the broader construction of their idea of 'family'.

4.1.1. Positioning Theory

Positioning Theory was first proposed by Bronwyn Davies and Rom Harré (1990) with the central concept of "position" to be used instead of the otherwise commonly used "role". The aim was to develop a concept that could highlight the dynamic aspects of social encounters (Davies & Harré, 1990). There are several central aspects of Positioning Theory, e.g., discourse or conversation, *position* and *positioning*, and *right* and *duties*. Furthermore, Harré and Langenhove (1999) operate with a "positioning triangle" where *storyline* and *act* and *actions* are central aspects as well. I will, however, focus primarily on the concept 'position', that of positioning, and the rights, duties, and obligations that are tied to the positions. These concepts are the most central to this research, which is why emphasis will be placed here. I will briefly introduce Positioning Theory generally but then proceed to account for the more relevant concepts.

Positioning Theory operates on a discursive level as positioning most often occurs as a conversational phenomenon. When people engage in such discursive processes it is made possible due to the ability to speak, but just as much due to the

knowledge they possess about the *rules* of conversation. This means that the rules dictate when it is for example appropriate to speak and also what is appropriate to say in that certain context. When all actors possess the skills and know the rules they can participate in joint actions producing the episodes of everyday life (Harré & Langenhove, 1998, p. 4). People are assumed to participate in episodes, but the way that they participate will be influenced by the character of the episode e.g., formal episodes will demand a different form of behaviour (have different rules) than that of an informal episode. I will now give an account of these central concepts starting with positions followed by the rights and duties.

POSITION AND POSITIONING. A position is by Harré and Langenhove (1998, p. 1) defined as "... a complex cluster of generic personal attributes, structured in various ways, which impinges on the possibilities of interpersonal, intergroup and even intrapersonal action through some assignment of such rights, duties and obligation to an individual as are sustained by the cluster". In other words, a person's position is a cluster of attributes in a certain social context, which is directly related to the possible actions of that person in a particular moment. It is one's position that determines the rights, duties, and obligations of a person in a certain social situation as well. A position is, therefore, in short, an actor's rights and duties in a certain, short-term moment (Harré, 2012, p. 193). Positions are not fixed, meaning that they can change and be contested in conversation. To analyse and understand a person's position, it is, therefore, crucial to consider the social situation at the moment. They can emerge "naturally" out of the conversation, but sometimes an actor will take the dominant role in a conversation positioning themselves and others (first-order positioning), which sometimes forces the other speakers into positions they would not have otherwise occupied voluntarily. The initial position can then be challenged (second-order positioning) and if successful, the speakers can be repositioned (Harré & Langenhove, 1998, pp. 18-20:22). There is in other words talk of "positioning", either intentionally or unintentionally.

RIGHTS AND DUTIES. A central aspect hereof is the ways that different actors in social settings will either have or not have access to rights and duties. This means that the individuals' access to these is not considered equal, as there is bound to be asymmetry in resources to perform social actions (Harré, 2012). When referring to a person's access to resources, it is depended on both social and personal attributes of that person in a certain situation (Harré, 2012, p. 194). Rights and duties emerge

from one person's power or vulnerability to another person. There will often be an imbalance of the powers and vulnerabilities of people which leads to the emergence of rights and duties. Those who have the power to help the vulnerability of another have the duty to do so, simultaneously the person with the vulnerability has the right to be helped. This is, however, put simply as the future action of helping the vulnerable as one's right is not a given. It depends on various other factors such as the risks, consciousness, and the presentation of needs (Harré, 2012, pp. 196-197). It is important to note that the rights and duties can be, but is not restricted to explicitly formulated rules such as national laws etc. They can be, and often are, unchallenged patterns of action.

4.1.2. Social Representations Theory

Social representations are "[...] concepts, statements and explanations originating in daily life in the course of inter-individual communications" (Moscovici, 1981, p. 181). They are closely linked to what often is referred to as "common sense" (Moscovici, 1981, p. 186). Furthermore, social representations can be thought of as culturally specific systems of beliefs, opinions, and knowledge. They are purposeful and function as ways of organising the social world, understanding it in a socially shared way, but also a way of actively constructing the world through communication (Rateau, Moliner, Abric, & Moliner, 2012).

SRT is based on an understanding of humans as autonomous individuals who are actively part of the production of representations. In other words, people are actively and constantly attempting to understand the world around them (Moscovici, 1981). Meaning that SRT's epistemological stance can be understood in line with that of social constructionism as it understands the world as constructed through psychological processes (Duveen, 1997). Rooted in Durkheim's "collective representations", SRT have in more ways than one moved beyond Durkheim's static understanding of representations as something given (Moscovici, 1981). Instead, Moscovici (1981) has proposed to view representations as a particular way not only of acquiring and communicating knowledge but also a way of ordering and reproducing the social world that we all participate in. SRT views social representations as flexible, dynamic, and changing. SRT operates with an understanding of individuals as autonomous, however, no individual thinks alone and in isolation (Provencher, 2011). Provencher (2011) uses the concept of "social individuals": "Social individuals have agency – not

as sovereign individuals but within the context of internalised constraints, a common history and culture, and shared projects" (Provencher, 2011, p. 379).

Social representations play a vital role in the way that we perceive and understand the social world around us. One of the most important aspects is the ability to make the unfamiliar, familiar. They, therefore, play a central role in *familiarization*. When navigating the world, people will attempt to make sense of and understand the objects, individuals, and events around them, to create a sense of order and reduce anxieties. This is achieved by taking the unfamiliar, threatening, remote object and locating it within a category or frame of reference that is known and recognized. Social representations are made, or "generated" via two processes of familiarization, namely *anchoring* and *objectification* (Moscovici, 1981). As these two concepts are central to this research, I will elaborate on both concepts below. This will then be followed by a brief description of *cognitive polyphasia*.

ANCHORING is, simply put, the process of labelling, naming, and/or classifying. Moscovici (1981) also refers to anchoring as a form of "assimilation" meaning that the unfamiliar object is categorized and then assimilated into a common member of the category (Moscovici, 1981). When the object has become 'assimilated', it will be ascribed the values and meanings that are already known within the category – and is expected to follow the norms of the category (Rateau, Moliner, Abric, & Moliner, 2012, p. 482). What is more, is that the anchoring might be recognized as a less than perfect reconstruction but will or can despite this recognition be maintained as long as it is useful in making the otherwise unfamiliar, familiar. If something is not yet anchored it will be perceived as alien or threatening, sometimes as non-existing (Moscovici, 1981). It is important to note that the process of anchoring can never be neutral but will always be hierarchical and ascribed a value, whether positive or negative. It also means that the classifying of an object ascribes that object to certain behaviours and rules.

OBJECTIFICATION occurs in two phases; 1) matching the concept with the image, 2) "[...] the perceived replaces the conceived and is its logical extension [...]" (Moscovici, 1981, p. 200). In other words, the unfamiliar object is first compared to an established and known concept or object, secondly, the previously unfamiliar object transcends the comparison and *becomes* the extension of the compared object (Moscovici, 1981). It is a process of simplifying an object and creating an image of it. The process requires some of the characteristics to be removed and sorted so that

it fits better with the image. This occurs through communication and once the object has been simplified, communicated, and shared, it can be understood as "naturalised" and "obvious" (Rateau, Moliner, Abric, & Moliner, 2012, p. 481).

COGNITIVE POLYPHASIA was coined by Moscovici, to encompass his understanding of how humans think and communicate (Marková, 2012). It refers to a cognitive strategy, where there is accounted for the existence of different and various rationalities that can be equally functional (Provencher, 2011, p. 392). Moscovici, according to Marková (2012), argued that there are different "modalities of thinking and communication [...] which co-exist in communicative actions, contribute to viewing the issue in question from different perspectives, and so enable formulations of diverse arguments" (Marková, 2012, p. 499). This way of thinking is tied to the socially shared beliefs from a specific social group and locates the individual within a specific position. Thinking should therefore be thought of as heterogeneous, where different "modes" of thinking will be employed in different situations around different people. It is, however, important to note that this does not mean that people constantly change their thinking and thereby perception from situation to situation, but rather that the dialogical nature in which humans interact with each other, enables us to employ different modes of thinking in respect to the situation and others in the conversation (Marková, 2012, p. 499). Cognitive Polyphasia has been argued to occur especially when groups or members hereof, are faced with the need to cope with new circumstances and therefore need to transform their thinking.

4.2. Queering reproduction

The two theoretical frameworks outlined above will be supplemented by some of the findings by Faircloth and Gürtin (2017) followed by Andreassen (2019). These will provide a basis to understand some of the aspects relating to creating an alternative family through the use of MARs and ARTs based on previous empirical findings.

4.2.1. Anxious reproduction

Faircloth and Gürtin (2017) focus their research on all reproductive agents, and their use of ARTs, and is therefore not specifically related to the construction of queer families. However, all aspects are pertinent for the lesbian couples in my research, as they in Denmark have access to reproductive technologies equal to infertile heterosexual

couples. The authors identified four interlinked themes that they have named: 1) reflexivity, 2) Gender, 3) Expertise, and 4) stratification (Faircloth & Gürtin, 2017). I will in this section account for the first (reflexivity) and the last (stratification) as they are the two most relevant discussions for the present research.

REFLEXIVITY. Faircloth and Gürtin (2017) argue that there today is an immense importance on parenting and that there is a growing requirement of "accountability" for reproductive agents. This means that these agents must account for and explain all choices made, big and small, e.g., why they are becoming parents and why they have chosen a particular parenting style. They argue that the reason for the growing accountability is due to a normative expectation that can be seen as reinforced by ARTs. They argue that there is a duality where ARTs both allow for an expanding of choices and therefore a diversification of family forms for example same-sex couples, but also reinforce heteronormative expectations of family life, parenting, and conception for example as being biologically related to one's children (Faircloth & Gürtin, 2017). Faircloth and Gürtin (2017) argue that contemporary reproduction is under heavy surveillance and normative pressures and that "[...] the moralization of reproductive decisions in a risk-conscious, child-centred culture means parents' choices around making or raising their children have intersected with parental (and specifically maternal) identity in an unprecedented way" (Faircloth & Gürtin, 2017, pp. 989-990). It becomes a moral domain were choices made by parents, and especially mothers, come under the scrutiny of 'being a good/bad mother', judged especially from the concepts of the children's welfare as needed to be placed higher than the parents' (Faircloth & Gürtin, 2017).

An important point is also how these findings do not only relate to parents but also intending parents where people seeking fertility treatment must demonstrate a commitment to parenting and behave. Especially important for this research is Faircloth and Gürtin's (2017) argument that not only can ARTs be seen as preying on and responding to the anticipatory anxiety of people as "pre-conception parents", but that this is intensified in cases with involuntarily childless intending parents "[...] who are explicitly required to jump through a series of hoops as they prove themselves deserving recipients of treatment, or adoption procedures, aligning themselves much more closely with the ideals of an intensive parenting culture than many actual parents do" (Faircloth & Gürtin, 2017, p. 990). Meaning that despite ARTs helping families

such as same-sex couples to have children, it also places those parents with an extra commitment to parenting norms.

STRATIFICATION. The authors argue for using the concept of "stratified reproduction" to draw attention to the inequalities in ARTs within broader social and global relations. The concept enables a discussion of both the sexual politics, but also the political economy of reproduction making it so that "[...] some reproductive futures are valued and encouraged, while others are despised and discouraged" (Faircloth & Gürtin, 2017, p. 993). The concept can further an understanding of the above-mentioned moral aspect of 'good parenting' as well as the legal, ethical, and economic regulations of ARTs. Faircloth and Gürtin (2017) point out that intending parents must undergo assessments and be deemed suitable as parents before any reproductive assistance can be given – with the suitability of the parents is framed around the principle of 'the child's welfare' (Faircloth & Gürtin, 2017, p. 993).

Concludingly, Faircloth and Gürtin (2017) point out that it can be considered a paradox the way that ARTs are offered as assistance to reproductive agents, but that it can also be seen as "[...] generating new choices, burdens, responsibilities and accountabilities. The result, unsurprisingly, is increasing anxiety for parents and intending parents [...] [leaving parents] feeling overwhelmed, scrutinized and 'not good enough'[...]" (Faircloth & Gürtin, 2017, p. 995). Parents or intending parents are therefore positioned second to their child's welfare, whereas Faircloth and Gürtin (2017, p. 995) make the argument for a more holistic approach that considered the "welfare-of-the-family".

4.2.2. Mediated kinship

Andreassen's (2019) focus is on solo mothers, meaning women who choose to conceive children without a partner, and lesbian couples conceiving using a sperm donor. She takes a starting point in how these alternative families are constructed using MARs and ARTs, but also through new possibilities of relations and kinship offered by what she terms "the internet 2.0". Andreassen (2019) uses empirical data from interviews she has conducted with both solo mothers and lesbian couples, data she has 'observed' and gathered online in Facebook discussions, as well as data she has obtained from tv-and radio programmes from the UK. I will here account for some of the arguments and

findings that are relevant to my research, which I have structured into four subsections; the child's best interest, consumerism, biological kinship, and the "just great" rhetoric.

4.2.2.1. The child's best interest

Andreassen (2019) argues, in line with Faircloth and Gürtin (2017) that the seemingly progressive and liberating development in legislation regarding lesbian couples' access to ARTs could be a possibility for challenging the traditional understanding of family, especially as something based on biology. However, Andreassen (2019) references Laura Mamo (2007), whom I have also mentioned in the literature overview, and argues that the possibilities offered for lesbian reproduction instead can be seen as constraining and oppressive, as it "risks positioning lesbian women within the conventions of heterosexuality" (Andreassen, 2019, p. 17). Andreassen (2019) points out that those that are granted access to MARs and ARTs are those that reproduce or adhere to the normative gender roles and family structures, such as reproducing heteronormative standards like being a monogamous couple (Andreassen, 2019, p. 75). Furthermore, this is according to Andreassen (2019) related to the idea of being a "responsible relationship", which throughout her book is connected to the argument of what is in "the child's best interest" (Andreassen, 2019, pp. 75:79).

The notion of 'the child's best interest' is argued by Andreassen (2019) to also historically have been seen as 'progressive', despite often overlooking marginalised communities for example by prohibiting homosexual couples to have children. The legislation on ARTs and the political agenda have a strong narrative of the traditional family as being a mother and a father, where the child's best interest is of the utmost importance (Andreassen, 2019, p. 74). A concrete example, relevant to this present research, is Andreassen's (2019) example of how choosing an open sperm donor (meaning the child can ask for contact when 18 years old) is recommended and in some European countries forced, based on the 'child's best interest' argument - implying "[...] that lesbians and single women wishing to reproduce without a father (e.g., via anonymous donor sperm) are not 'responsible' and 'good' parents" and thereby maintaining the idea of heterosexuality" (Andreassen, 2019, p. 74).

Besides concrete legislation and political agendas located within ARTs, the argument of the child's best interest and how this is achieved by for example using an open sperm donor is also internalised in intending parents (Andreassen, 2019, p. 71). The ideology of the heterosexual nuclear family, where the child has the right to

know their 'biological father' has been taken in by many lesbian and solo mothers making them not only choose an open donor for themselves but also participate in active policing other mothers' choices of sperm donor status. However, some of the lesbian couples in Andreassen's (2019) study wished to use anonymous sperm donors, arguing that they did not want any male interference in their family making and to be able to better preserve their ideal of the nuclear family. The open sperm donor thereby becomes a potential threat, a biological 'parent' that can be sought out and included in their lives despite their wish to be a (nuclear) family, which as a lesbian couple does not involve the presence of a man who is also a stranger.

4.2.2.2. Consumerism

Lisa C. Ikemoto (2010) and Daisy Deomampo (2016), as referenced in Andreassen (2019), have argued against using the term 'donor' in connection with gamete transactions. They argue the procurement of gametes, such as eggs and sperm, are bought by the banks as the 'donors' are paid for their gametes. The recipients also purchase the gametes from the banks afterwards, making the transaction a financial purchase. However, the sperm banks frame the procurement as an altruistic gift by referring to them as 'donors'. Instead, it is argued that it would be more accurate to name them 'providers' because this would make clear the commercial aspects instead of masking it behind the reference to the altruistic 'donation' (Andreassen, 2019, p. 5).

Continuing the discussion on the gamete industry as a commercialised arena, Andreassen (2019), referencing Lise Jean Moore and Marianna Grady, argues that the online shopping experience of buying donor sperm is created to be a familiar experience to that of other types of online shopping. The familiarity of the website presumably should ease the stigma and fear relating to buying donor sperm. The factors that make the 'shopping' experience similar is for example the use of dropdown menus to enable filtering the variety of choices to match one's preference, and the use of a 'shopping basket' to place the order once a choice has been made (Andreassen, 2019). Andreassen (2019, p. 122) uses the familiarity of the online platform as an argument that it "[...] functions as a 'neutraliser' in customers' selection of the race, eye and hair colour of their sperm donor [...] [where] race is reduced to consumer choice" (Andreassen, 2019, pp. 123-124). Andreassen (2019) here focuses on the racial aspects of choosing a sperm donor as her chapter centres on "race in reproduction" – but I include this aspect here as it extends to all aspects of the donor. All the characteristics

of the donor that the sperm bank highlights, and the choosing of a donor, or the discarding of a donor, become familiar and thereby reducing reproduction to consumer choices. Andreassen (2019, p. 123) appropriately links this consumerism argument with that of a neo-liberal discourse, where the individual and their personal choices, preferences, freedom, and privacy are framed as important and positive (Andreassen, 2019, p. 124).

4.2.2.3. Biological kinship

One of Andreassen's (2019) main research areas is how solo mothers and lesbian couples navigate the 'donor siblings' or 'diblings'. Andreassen (2019) talked to mothers who have chosen to seek out these 'donor siblings' while they have had smaller children, and often arrange 'play dates' for the children. In my research, none of my participants, except one, wanted to find donor siblings, which is why I will focus on the reasons proposed by Andreassen (2019) to why the couples may not want to seek out the donor siblings.

One of the arguments Andreassen (2019) found against seeking out the donor siblings is that the mothers believe that it should be the children's wish and would therefore wait until, or if, the children themselves ask to seek out the donor siblings. Andreassen (2019, p. 45) describes an ambivalence from the mothers towards the idea of the donor siblings and argues that it might be due to a lack of conventions and therefore uncertainty in how to define the relations. There were different discussions of the hierarchical positions of siblinghood where some believed the donor siblings to be "real" siblings and others that did not. Those arguing that the donor siblings are not siblings argue that a 'sibling' is somebody you grow up with – thereby negotiating the concepts of social proximity in relation to biological relations (Andreassen, 2019, p. 47).

Concerning lesbian couples specifically, Andreassen (2019, p. 48) argues that they attempt to stress the importance of the non-biological mother by minimising the importance of biology. However, the donor siblings are seen as a threat to this as they re-inscribes biology as a factor in a family. She goes further and argues that it is possible to interpret the rejection of donor siblings as an "... attempt to maintain one's family in line with traditional (nuclear) family narratives; such an attempt would suggest donor families' fear of failure" (Andreassen, 2019, p. 48). The importance of stressing the non-biological mother can be explained by a fear that she can

be "replaced" as she is not biologically connected to the children – thereby making the donor siblings a threat to the ideal of the nuclear family. The lesbian couples may attempt to compensate for the initial failure in not being a traditional family by instead performing the normative nuclear family as closely as possible as a lesbian couple (Andreassen, 2019, p. 50).

4.2.2.4. The "just great" rhetoric

A final argument I will bring in by Andreassen (2019) here, is how lesbian couples have been found to use a strategy of employing a "just great" and a "heteronormative issues" rhetoric. This is argued by Anna Malmquist and Karin Zetterqvist Nelson (2014), as cited by Andreassen (2019), where the "just great" rhetoric refers to how the women interviewed downplayed experiences of discrimination and argued that everything is "just great" being a queer family. However, they simultaneously explain in great detail various experiences of discrimination they have experienced, for example, arguments that the non-biological mother was less legitimate. This they referred to as the "heteronormative issues" rhetoric, where experiences of discrimination were based on how they fell outside the heteronormative framework (Andreassen, 2019, p. 85). According to Andreassen (2019), it can be seen as a survival strategy utilized by the lesbian mothers in a homophobic context where this rhetoric is employed to position themselves as similar to other mothers and the 'just great' narrative would preserve the mothers as 'good mothers' and competent parents (Andreassen, 2019, p. 85).

5. Analysis

This section will start by presenting the three couples that have been interviewed for this research. I will start by introducing Alice and Astrid, then Betty and Bea, and finally Caroline and Camilla. I will give an account of their sociodemographic details, their relationship, and their fertility journey. Furthermore, I will outline some of the characteristics that were central in their interviews.

After the three couples have been introduced, I will present the results as well as an analysis of these findings. As mentioned, I used Thematic Analysis as the analysis method, meaning that the data has first been coded and then used in creating the themes. The final overarching themes are as follows: 1) "Choosing the donor", 2) "a non-traditional family", and 3) "blood, love, and strangers". The analysis will be structured according to these themes, and I will now introduce the couples.

ALICE AND ASTRID have been in a relationship for three years and currently live together in a small suburban town in Jutland. They got married about half a year ago and do not have any children, nor have they started fertility treatment. They told me that they are thinking about starting fertility treatment soon but are not completely sure when. Both are in their mid-twenties with Astrid being a few years older than Alice. It is Astrid who will become pregnant with the child, which is very important for Alice as she has a very strong opinion about not passing on any of her genetic material. Astrid has accepted that she will be the one to be pregnant despite never really having a desire to be pregnant. Astrid describes feeling very afraid that it will be hard for her to become pregnant and that her eggs will not work. They are both white, cisgender women, with Alice currently working in an unskilled profession and Astrid is looking to do a PhD. Astrid is originally from a smaller town whereas Alice is from a bigger city. Alice identifies as bisexual and Astrid as a lesbian.

Both Alice and Astrid's parents are divorced and now have new partners. For Alice, her narrative of her "blended family" is central to her narrative of her ideas of family and that of choosing a sperm donor. Alice bases many of her arguments on her family and experiences growing up. Alice's parents got a divorce because, as she puts it, her mom left her dad for another woman. Her dad got custody of her and her two other siblings and he got married to a new woman who already had two children. Her mother also had another child with the woman she left the dad for, they had a donor child that is not biologically related to Alice's mom. So, in total, she has five siblings. Astrid's parents' divorce was, according to her, much less chaotic. Her parents divorced and have now both found new "normal" partners, as Alice puts it. She has one sister who was from before the divorce. Astrid does not talk a lot about her mother but is very close to her dad.

BETTY AND BEA have known each other for almost 20 years and married for a bit more than half a year. Together they have Bo, a young boy under 5 years old with whom Bea was pregnant. They all live in Copenhagen and Betty and Bea are in their mid-to-late-thirties, white, cisgender women. Betty works in journalism and Bea in education. Betty is currently trying to become pregnant with their second child. They are not using the same sperm donor, because they forgot to buy extra straws and now the donor has sold out. Betty has never really wanted to be pregnant but is trying for their second child, as it is very important for her to be biologically

related and see what a child using her eggs would look like. She especially wishes for a child with her brown eyes. It is central to their narrative of choosing a sperm donor and their idea of family that they very much disagree about the role and importance of biology. For Betty, biology is a basis for family and for Bea biology means nothing compared to social proximity.

CAROLINE AND CAMILLA have been together for seven years, and they have been married for about 4 years. Caroline was pregnant with Clara, and Camilla is currently pregnant with their second child. They have chosen to use the same donor for both children and have extra sperm straws reserved for a potential third child. Both are white, cisgender women, and they are roughly the same age. Carline is currently a student in the medical field and Camilla holds a master's degree but currently works with childcare. They live on Funen but hope to move back to Copenhagen where they met. When asked about their sexuality, they both hesitate, and especially Caroline is reluctant to define her sexuality. She says that often she just says that she has a wife, but that if she had to, she would say that she is "into women". She would never use the term "lesbian". Camilla is also hesitant and says she typically describes herself as "homosexual" and very rarely as a "lesbian". She also often settles by saying that she is married to Caroline.

What is very characteristic of this couple is their emphasis on the personal characteristics of the sperm donor. They have smaller disagreements throughout the interview, but they are mainly in agreement about most decisions. Camilla's parents are divorced, and she has a "bonus mother". Caroline's parents are not divorced.

Caroline and Camilla were interviewed online.

5.1. Choosing a donor or buying the future?

This section relates to the 'criteria' or 'filters' that are used when choosing a sperm donor online at a sperm bank. When wanting to become pregnant with a sperm donor, it is up to the individual(s) themselves to select a sperm bank from which they want to purchase sperm. Often some clinics will have collaborations with certain sperm banks which can either give a discount (if it is a private clinic) or the sperm can be for free (if it is a public clinic). After deciding on a sperm bank, there is a wide selection of sperm donors to choose between, which needs to be narrowed down to one. Often the sperm banks will, as mentioned, prompt the consumers to filter the options by

providing a drop-down menu where selections can be made for example regarding the donor status, hair and eye colour, height, race and ethnicity, and more. This section is therefore focusing on the narratives on what the couples either have or will be prioritized when looking for a donor. The section is divided into two subthemes where the first is "donor status", and the second is "information and consumer choices".

5.1.1. Donor status

One of the first filters the consumer is faced with is the decision to choose the status of the donor. Sperm banks such as Cryos International or European Sperm Bank, which are the primary sperm banks used by my participants, operate with two "types" or "identities": 1) identity release and 2) non-ID release. It is up to the donor what status they wish to have, but common for both types is that none of the donors has a legal responsibility nor rights to paternity. The first type is the one commonly referred to as an "open donor" which means that when the child becomes 18, they are allowed to know the donor's identity by contacting the sperm bank which will then reach out to the donor and ask if he wishes to be put in contact with the child or not (European Sperm Bank, Nd.).

Choosing the donor status is a central aspect of all three couples' narratives of choosing a sperm donor. They All have different narratives and thoughts about the status of the donor, but they all have chosen (or will choose) an open donor. The most common argument is not wanting to decide *for* the child but leaving the choice to the children when they turn 18 years old. Both Betty and Bea and Caroline and Camilla have always agreed on wanting an open donor. Alice and Astrid, on the other hand, have not yet made their final decision and have disagreed on which to choose. During the interview, they discuss their opinions with Alice initially leaning towards choosing an anonymous donor, and Astrid leaning towards an open donor. Suddenly, in the interview, they both start to change their minds as they have convinced one another. Astrid's preference is influenced by her friend who very late in life found out she was a donor child, and she has been very sad that her donor is anonymous. According to Astrid, Alice feels the opposite of her, to which Alice responds:

"Hmm no I do not feel the opposite, I understand what you are saying and of course, I want to fulfil a responsibility to give my children all the information they could want to have, I am scared to death of being replaced (I

+ Astrid: hmm) hmm, I want to be to be so good parents that my child never has to think about who it is that is my biological father it does not matter 'I have parents what do I need a father for' and I also do not want to umm that our donor is called 'father' (I: mmh) [...] I have felt that it had to be an unknown donor (I: hm) because I do not want to be replaced' (Alice, Il. 1120-1132, Q1)

Alice starts by acknowledging her responsibility as a parent to provide her children with all the information they could want. This idea of being responsible to the child and providing the child with information that they most likely will want in the future is also the main argument brought by Betty and Bea and Caroline and Camilla. For example, Betty and Bea wish that Bo can "gain insight into who his dad is when he turns 18", which is "very important to them" as they are sure he will have questions.

Alice also expresses her concern in the excerpt about being replaced by the donor. Alice describes how this fear might come from her having tried to replace her mom with her father's new wife. When Alice describes her fear of being replaced she tells the story of how she as a young girl struggled to fill out the 'family tree' they were asked to do in school. The family tree becomes a symbol of how Alice's alternative, blended family did not fit in the normative frames of the family tree drawing, which she is afraid will happen to her child as well. I have chosen to use that image as the cover for this thesis as I propose that it demonstrates both how the view of the child is central in all three couples' narratives, as well as how there is a heteronormative script for how to construct family which shapes and constricts how my participants can construct their families. The drawing also shows how the construction of alternative families requires erasing the existing categories and replacing them with new ones.

I would argue that all three couples' narratives of how they decided on choosing an open donor follow Faircloth and Gürtin's (2017) arguments that the "preconception parent" must embody and demonstrate being 'good parents'. This is achieved by constructing a narrative where the unconceived child is positioned as powerless or without a voice, having the right to an imagined future choice. Positioning the child as powerless then positions them (as parents) as powerful since positions are relational. Following Harré (2012) the parents with the power to help the powerless child have the duty to do so. They, therefore, are positioned with the duty to choose an open donor, so the child can have the right to choose themselves when they turn 18.

Taking up these positions in their narratives the couples are constructing their identity as "good parents", by stressing their duties and the child's rights.

The consequence of stressing the child's rights is minimising the parents' rights in favour of their duties. For example, when Alice explains that she is afraid that she will be replaced, she still counters her fear with her willingness to live up to her responsibility as a parent. She draws on a normative expectation of what it means to be a good parent, as she says that she "of course" wants to live up to her parental responsibility. It is therefore an uncontestably, obvious fact that she will do what is her duty, while also struggling with her fears. Astrid, however, complicates the previous positioning of their duties as parents to choose an open donor:

"Umm no but it is again that thing about, (pause) that if the information is available (I: hmm) then I am afraid that that it induces more need in the child to so to that is to meet or find or in some way or another find out who the father is (I: hmm) than if it is unknown and just cannot be possible (I: hm) that is that it is that it-it just is a person and now you exist kinda, umm (pause), yes (Alice: and because) it is maybe also because I myself am so overwhelmed by all the choices that I would like to take some of the choices away from my child (I: laughs) it that is it is though an absolutely overwhelming process this" (Astrid, II. 1141-1152, Q2)

Astrid describes that she is very overwhelmed by all the choices related to choosing a sperm donor, which is a very common theme for Astrid. Throughout the interview, Astrid describes feeling overwhelmed about the fertility process and says it causes her a lot of worries. I will elaborate on these feelings in the next section. As she herself is so overwhelmed by the many choices, she suggests that perhaps her duty as a good parent would be to shield the child from having to decide by choosing an anonymous donor. She describes the anonymous donor as a simpler narrative for the child that they exist because there once was this donor and that is it.

Besides wanting an open donor both Betty and Bea and Caroline and Camilla think it is important that the donor lives in Denmark. Not only should the child be able to get to know the donor when they are 18, but the child also has the right to have easy access to the donor. Their duty as parents is therefore to choose a geographically close donor. Caroline and Camilla also position themselves with the duty to choose a Danish donor as they expect him to be culturally similar to the children. This for them means that it will be easier for the children and the donor to relate to each

other. For Caroline, the donor must be Danish as she believes a Danish donor would be more accepting of their (queer) family constellation. They had looked at a very religious donor from the USA, and not only did Caroline not relate to him being religious, but she also said that:

"It was mostly just important for me in relation to that I just thought very much ahead into the future if they wanted to meet him (I: hm) that then it would be important that they had a good experience with it (I: yes) (Camilla: hm) and that they thought that the way we live and the way Clara has parents is a good idea and that they are happy that they have been a part of helping with that [...]" (Caroline, II. 293-299, Q3).

The construction of the donor status narratives where the construction of family revolves around the unborn child's rights is in line with both what Andreassen (2019) argues about the nature of the 'child's best interest'. Summing up, Andreassen (2019) argues that the political and legislative framing of ARTs is constructed within a strong narrative of the traditional family as being a mother and a father, where the emphasis is on the child's best interest. At present, Danish laws do permit the use of anonymous donors, but several NGOs are working on making it prohibited to use anonymous sperm donors, which has already been put into law in several European countries. Despite being a possibility in Denmark, all three couples construct similar narratives of the child's right to be able to know their "father". I would therefore argue in line with Andreassen (2019) that the couples in this study have internalized the social discourse that to be responsible and good parents, they must subscribe to the normative family image where reproduction entails a mother and a father.

From the perspective of SRT, I would argue that the sperm donor in the narratives is represented as a 'father'. Through objectification, the unfamiliar object of a 'sperm donor' has been compared to the image of a father as known from a heterosexual family. In this process, the sperm donor becomes naturalized and simplified then through anchoring the characteristics of the category 'father' is attributed to the sperm donor. In a heterosexual family, a father is a legitimate parent with parental rights, an obvious part of a child's life and someone that a child wishes to have contact with. As with anchoring, the sperm donor is then expected to follow the norms of the category it has been placed in, here a 'father'or 'parent'. As this process of anchoring is not neutral, the donor will be ascribed with either positive or negative values. I would therefore argue that all participants take part in representing the sperm donor as a

'father' which both explains why the child has an 'obvious' and 'natural' right to get to know the donor, as well as explain Alice's fear of being replaced by the donor. However, the representation of the donor as a father is not uncontested, and as can be seen in the abovementioned extract, Alice simultaneously says she is afraid of being replaced by the donor but does not want the donor to be referred to as a 'father'. I will elaborate on this ambivalence towards to representation of the donor as a 'father' in section "5.2.1. 'mor', 'mama', and 'dad'".

5.1.2. Information and consumer choices

As mentioned in section 4.2.1. on "anxious reproduction", the new reproductive technologies such as choosing a sperm donor, offer a whole new world of possibilities, especially for queer families to have children. However, they also create new pressures and anxieties for intending parents by providing them with a lot of information and the need to filter and choose from the information.

All this available information makes the decisions increasingly complex for the couples to navigate. As already demonstrated in the previous section, Astrid feels the whole experience of having to choose and make decisions regarding the sperm donor is very overwhelming. Contrary to Astrid, Bea has a complete disinterest in choosing a sperm donor and instead suggests the simplest form possible: Completely removing the choice and, instead, mixing all the sperm in a bottle and randomly distributing it. Bea focuses on the outcome, the child, and less on the means of getting the child. She constructs her narrative of choosing a sperm donor around two central aspects – that the donor is open and from Denmark – all so that Bo can get into contact with the donor. I will though argue that Bea's reaction can also be understood as a response to the available market as providing too much information, unnecessarily complicating the process. Similarly to Astrid, however, more discreetly, Caroline remarks that it is difficult to assess the donors based on all the information. Caroline jokingly remarks that: "[...] sometimes you would maybe like that there would sit a whole team of experts, (Camilla: laughs) a psychologist and a doctor and a pedagogue and something and is just like can you not tell me what the benefits of these are that we have selected" (Caroline, Il. 532-536, Q4).

Astrid often in the interview compares her situation with that of heterosexual couples, constructing a narrative of the heterosexual couples' reproduction as straightforward in contrast to their (queer) experience which is overwhelming and stressful. I have chosen the extract below as an example of how Astrid relates to the information provided by the sperm banks:

"[...] It is you see also a big responsibility in a different way than if we two could have a child together because then it would be in some way or another with the flaws that now and then come, but it is that thing that one has to choose one's child's heritage in this way, then then you also want to ensure that that it will get as good genes as possible now that you have the opportunity to choose umm (I: hm) then I also think that is that it is in reality good and nice that you get um (laughs) can get so much information but it also just makes it really difficult to choose because you want what is best for the child and it is just difficult to know (I: hm) what it is in reality that is the best (I: yes) that is if you are making the right choice (I: hm) and that is just a big responsibility to have for a being that does not even exist yet (I: hm, yes)" (Astrid, 11. 648-663, Q5).

Astrid describes ambiguity towards the information, as she feels overwhelmed by it but also feels that it is necessary to have the information. The latter point is echoed by her wife Alice who argues that she needs to be able to research the donors completely otherwise she would be an "irresponsible parent" (Alice, Il. 889-890). Caroline and Camilla's narrative about the information is that it must be there, so they have something to base their decision on. For Caroline, the most important is that she can "vouch for" their choice of donor, which she elaborates by saying she would not be able to "vouch for" choosing a donor where she knew her child could have an increased chance of getting cancer.

I will here argue that the reproductive opportunities for lesbian couples using a sperm donor position the couples as having the agency to filter through the information and choose their donor. The information is provided by the sperm banks as a marketing strategy where the donors become much more than a number and a photo, but instead the couples can get a general, whole impression of who the donor is. This positions the donor and his characteristics as not just a provider of sperm, but an individual taking part in the fertility process. A person whom the consumer can get to know. Providing this information, the sperm banks not only shape what is relevant for the couples to know about the donor but also create pressures and thereby anxieties in the couples as intending parents. The couples' needs to be able to 'vouch' for their

choices or feel they must choose the best donor is also in line with Faircloth and Gürtin's (2017) argument that there is a growing accountability for reproductive agents even before they conceive. I would argue that the couples construct their narratives centred on *their* choice as individuals with agency. However, I would argue that it can also be understood as the sperm banks being the ones positioning the parents as agents, which are then internalized and reproduced by the couples. The sperm banks are marketing their company within a neo-liberal context where the individual is positioned as desiring freedom, individuality, and choices. Caroline and Camilla mention that they found ESB to have too little information and therefore preferred Cryos. Cryos has therefore successfully marketed its product toward the neo-liberal consumer.

The consumerism aspect of buying sperm was also directly brought up in the interview with Caroline and Camilla. In Caroline's answer to how she has experienced the whole process of choosing a sperm donor she says: "I think it has been really overwhelming [Danish: grænseoverskridende] that is it (Camilla: yes) it really is (Camilla: It is crazy, it) a crazy choice you have to make and it is like a little bit like shopping for a pair of trousers" (Caroline, Il. 476-479, Q6). Here, comparing the experience of choosing a sperm donor to the experience of buying a pair of pants, Caroline has experienced it as "crazy" and "overwhelming". The "shopping" experience is also briefly and jokingly remarked by Betty (Il. 1046-1047, Q7) as she says, "Then the child better have brown eyes, otherwise it will be completely-, then it will be returned (I: laughs)".

As mentioned, Andreassen (2019) describes how the familiar interface of the sperm banks can make the experience easier as it is familiar. I would argue, however, that for Caroline and Camilla familiarity with the website is recognized as something they do when for example buying pants. The familiarity makes it easy to use, technically and skills-wise, but for Caroline and Camilla I would argue that the comparison to other online shopping websites was almost alienating, and it seemed to minimise the importance of the choice, reducing their choice – and potentially their future child – to a material good such as pants.

Summing up, the argument of this section so far has been that the sperm banks market the sperm donors as consumer choices in a neo-liberal discourse where the couples' freedom and agency to choose is framed as a positive aspect or possibility. However, it is also argued that the price of this marketing strategy is what Faircloth and Gürtin (2017) coins "anxious reproduction", leaving the couples to navigate the

many choices. Additionally, as exemplified by Astrid the anxiety is installed due to the social and internalized narrative of a 'good parent' where responsibility is placed on her shoulders as an intending parent and an expectation for her to be accountable for her decision.

Betty and Bea's narrative initially did not seem to be as centred on the information available, nor include the anxious aspects of choosing a donor. As mentioned, Bea seemed slightly indifferent to choosing a donor and Betty, despite finding it to be an important decision said it was not difficult for her to choose. However, as they then proceed to tell the story of how they chose their donor for Bo, they described in great detail how they had some nice food, some gin and tonic and sat down together to choose the donor. Unfortunately, that donor then became unavailable, and they had to choose a new one, again sitting down together but this time without the gin and tonic. The second donor they chose also had issues that made them unable to use that one, which repeated with the third choice. Finally, sitting at the hospital they had to order their fourth choice, but they had forgotten who they had chosen. Therefore, they had to choose a new one, and rather quickly, in the basement of the hospital. When it turned out that Bea had become pregnant they got curious as to what donor they had chosen because it had all gone so fast. To their surprise, the donor was not a very tall person. I will now include a longer excerpt of how the conversation unfolded as I will argue that it exemplifies how their choice brought about the anxious feelings described by the other two couples, but that Betty and Bea attempt to renegotiate the decision to relieve the anxiety:

"Betty: [...] he was also not so hysterically big when he, when he was born but he is a, he is a strong little guy (I: hm) and his donor-dad is also [omitted: physical sports player] (I: okay) so it it probably is in the genes so that is always something, then something good has he gotten from those genes there, soo (I: yes) so yes, so yes, it was that way, then we have chosen our donor (-) dad (I: yes) a bit tacky (-) the last

[...]

Betty: But he looked cute in the picture

Bea: yesyes but it was not so, the last, the final choice was not so well

thought out

Betty: no

Bea: it was pretty fast

Betty: it is a burden we have put on our sons' shoulders (I: laughs)

Bea: It will be fine it was the one that worked

Betty: yes that is true, otherwise he would not have come

Bea: no

I: no

Betty: no that is of course also true

[...]

Betty: no it is also, that is, I like, like, to see if, if his, Bo's biological f-ummm, granddad is [omitted: Creative job position], Bo's biological grandmom is [omitted: Creative job position] and things like that so some creativity is also involved (I: hm) and that [...]" (Betty and Bea, Il. 486-518, Q8)

In this story, Betty and Bea describe how they chose the donor for Bo in a 'tacky' way, which Betty in a playful way calls a "burden" for their son. The narrative that Betty and Bea are constructing around choosing their sperm donor, demonstrates their normative expectations of how they *should* have chosen the donor. When they say that it was fast and tacky, they are telling the story of how they deviated from the normal narrative of choosing. The normative narrative positions the parents with the agency and duty of choosing a donor, and that the 'good parent' would choose the best donor for the child as argued in the sections above. Instead, since they had to choose fast, they 'failed' their duty as parents, with the outcome of Bo most likely will be short of stature.

I would argue that Betty and Bea in the extract are trying to recreate the initial narrative of 'failing' and thereby attempt to reposition themselves as 'good parents'. This happens by Betty counterarguing Bo's short stature with the possibility of Bo being strong due to his "donor dad's" genes. She then also argues that the donor did look cute in the photo, meaning that they did not choose *completely* recklessly. Bea then joins in to help the justification with the primary goal, Bo's existence. It was the donor that worked, it was the donor that helped make their son Bo. The attempt to change the narrative can therefore be seen as a way to reposition them as 'good parents' by justifying the choices and undermining the negative aspects. Betty also mentions how she likes to look at the donor profile and see information about how Bo's "biological grandparents" had creative jobs and in this sense, Bo might be short, but

he might also be strong and creative. This I interpret as a form of self-comfort, reassuring herself that they made a good choice.

5.2. A non-traditional family

This section will focus on some of the narratives about being a queer, non-traditional family. This research operates with an understanding of 'queer' as an umbrella term for a variety of sexual identities, as well as the meaning of being strange, different, or unusual. This means that this section refers to both the narratives of creating a family as queer-identifying, but also as a family that is different from what is often considered 'the norm' or 'traditional'. This section is structured using two subthemes, the first being "'mor', 'mama', and 'dad'" and the second "constructing a queer family in a heteronormative context". I will, although, start by analysing the narratives constructed around that of being two mothers.

All three of the couples bring up the possibility of adopting a child as an alternative way of having children to using a sperm donor. However, none of the couples believes that it is a good option for them. What is more, is that they all also mention an aspect of discrimination in their explanation of why adoption is not a good option. They mention how it can be harder for homosexual couples to adopt as it is not all countries that allow adoption for homosexual couples. They also mention how an adopted child will often have something uncomfortable in their "baggage". I will here use the example of Betty (II. 401-407, Q9):

"we-w-we were maybe not the family that should have a damaged child already because i-i-it- already like then you are, then you are, the child belongs to a minority a minority when they have (I: hm) um a lesbian parent couple right? (Bea: hm) (I: yes) so there is enough you like have to think about so there is no reason that we also should have a child who had other things (Bea: no) that should, like be digested right"

Betty argues that as lesbian parents their children will belong to a minority and how that can be more than enough without adding more problems to that child. This idea of having lesbian moms as something that will cause the children problems is also expressed by Alice (Il. 1581-1583, Q10): "[...] I am going to give them enough problems (I: hm) with family trauma and two mothers and uncomfortable people in the world [...]". In this narrative, Alice expresses that she has the duty to ensure

that her children are "full" siblings, as she will already cause them many problems for example by having lesbian mothers. The idea of "full siblings" will be elaborated in "5.3. blood, love, and strangers". In Alice's narrative about her family, and her parents' divorce it becomes evident that 'homosexuality' has been a difficult subject. This transcends into her narrative of being a lesbian parent where she negotiates whether or not it can even be a 'responsible' decision. This is exemplified in a conversation where Astrid mentions that she feels optimistic and safe in the idea of being a queer family and points out how schools and upbringings today are more open and diverse. Alice says (II.: 1447-1500, Q11):

"[...] my dad did not know that my um mother also was into women so that entire experience that my dad has been left (I: hmm) for another woman has made its mark, deep marks in my family (Astrid: yes) (I: hm) to a point where [...] a lot of that anger, that he of course had and sadness (I: hm) instead turned against homosexuals (I: yes) [...] I really do want to believe that they [children in school] learn something new and that not all are like my family (I: hmm) but it is just really difficult to look beyond (Astrid: hm) (I: yes) and I really want to protect my children against the same experience (I: hmm) so I am very nervous that there are people in Denmark that that will look disapprovingly at us (I: hm) and that cannot see that, that two women can also have children and that we are also a family (I: hm) [...] yes but I do not know maybe it is just been like that in my home that it has been irresponsible for two women to have children (I: yes) that is, it is difficult to let go (I: yes) (Astrid: hmm) [...] and again that responsibility for this unborn child about that I have to do my very best (I: hm) and I will fail it if it thinks the same (I: hm) no, arrgh"

Alice describes how in her upbringing there has been a lot of hatred aimed at homosexuals and that she has been brought up with the feeling that it would be irresponsible for two women to have children together. This also has affected the way she expects the rest of society to see her family. Alice is constructing a narrative of being a queer family, drawing on her personal experiences, as a less legitimate family and therefore a contestable family form. This is strongly influenced by the social narrative of the heteronormative ideal family as being a mother and a father.

I will here argue that the extracts from Betty and Alice are constructions of narratives, where lesbian mothers are positioned as less than or at least more

problematic than having heterosexual mothers. The child, I would argue, is positioned outside the 'queer' as someone who has been made queer by having queer mothers. Because the child is positioned outside, the child gains the right to not be discriminated against and the mothers have the duty to protect against discrimination. Betty protects by not having a child that already struggles with trauma, Caroline says she does not want a "mulatto" child as she does not want the child to have "an extra stigma" (Caroline, Il. 1212-1217), and Alice wants to protect the child from the same homophobic experiences she has had. I will elaborate on this narrative of the child's rights to be protected from discrimination in section 5.2.2. I will now continue to the subtheme regarding the terminology used when a child has two mothers and a donor.

5.2.1. 'Mor', 'mama', and 'dad'

In the Danish language, parents are usually referred to as 'mor' for mom and 'far' for dad. No other words exist for this, nor are there informal names or nicknames to use. In the case of divorce, the 'new' parent is often referred to as 'step' or 'bonus' parent. I will in this section continue using the terms 'mor' and 'mama', as it is a specific language issue and therefore find it unnecessary and inappropriate to translate them. Furthermore, I will note that Alice and Astrid did not talk much about the use of 'mor' and 'mama', besides recognising that they would be using these terms. Therefore, they are less represented in this section.

Both couples with children opted for the solution of using 'mama' and 'mor'. 'Mama' is not a common word used for 'mor' in Danish and often has a 'foreign' ring to it. It also becomes evident in the interview with Betty, Bea, Caroline, and Camilla that having more diverse family groups in their children's institutions, for example, people from other countries, assists in expanding the language use and normalising using words such as 'mama'. This quote from Bea sums up what both couples described:

"yes (-) yes and then, also that thing that he is, has not wondered about that thing with 'mama' but he has also, that is just in his kindergarten there are there are at least three others who nam- call their mom 'mam' um (Betty: yes) and we also have a, a couple we are friends with (Betty: but it is because they are foreigners) where they also, yes, because they are foreign right (I: hm) and then we also have a couple we are friends with where

there is one that call um their mom 'mama' no, so it is like, so that thing with hearing the word 'mama' is not like um so distant for him (I: no)" (Bea, II. 701-709, Q12).

The two couples with children have chosen different ways of deciding who should be called 'mor' and who should be 'mama'. For both couples, however, they argue that both parents are 'mor' in the technical term of being their children's mothers, i.e., the mother 'role'. They all assert that this is an important distinction, as the 'mor' and 'mama' are simply 'names'.

Betty is referred to as 'mor' and Bea 'mama', where Bea has been the gestational parent. For Caroline and Camilla, they have decided the opposite where Caroline, the gestational parent, goes by 'mor' and Camilla by 'mama'. Both couples have now chosen that the mother that was *not* pregnant last time, will be the one to be pregnant with the second child. However, being the non-gestational parent was a big part of why Betty wanted to be 'mor', she says (Il. 780-784, Q13):

"yes (-) yes, no but it is because, it is not important for Bea to be 'mor' and I am, I would very much like to be 'mor' (I: hm) also because I think it is so distancing to be, first of all I have not given birth, (I: hm) to my own child, then I will be-, then I won-, even be called 'mor' [...]"

Betty describes that she would be unhappy with the name 'mama', especially since she has not given birth. I interpret this as Betty creating a narrative where she as the non-biological parent positions herself as a 'second' mother. I understand this in a hierarchical sense as a less legitimate mother than Bea, the birthing mother. She therefore actively tries to reposition herself by taking the more established, normative, and thereby more legitimate name of 'mor'.

Bea on the other hand describes how she is okay with "standing out", which I interpret as demonstrating how 'mama' is considered less normal, thereby making Bea stand out. Bea says she is often a person that stands out, and therefore she does not feel as strongly about doing it now by being 'mama'. I would, however, argue that it is also possible that Bea's attitude is supported by having been the 'biological parent' and thereby feeling more secure in the 'odd' name. She also does point out how despite that she is called 'mama' she is still a mom 'of role', thereby establishing, or positioning, herself as a legitimate mother. I would also argue that positioning theory can help understand the importance of the name/role division as the name is separated from the 'role', thereby the position. If both occupy the same position of 'mother' they

have access to the same rights and duties as a parent, and the name, therefore, becomes subsidiary.

For Caroline and Camilla, it was especially Caroline that wanted to be called 'mor'. She does, however, struggle to explain her reasoning and resorts to saying that she has always imagined that she would be called 'mor', despite previously having said that there in Denmark is no other word for it. She continues that she could not see herself being called anything else and that it is because:

"I just think it was the whole image up in my head about that when I would be a parent that someone would call me 'mor' um and I think maybe also because you [Camilla's] parents are divorced then you are used to calling someone other things whereas my parents are not divorced so I have a 'mor' and a 'far' (I: hm) so I am not so open to calling it something else (laughs) (I: no) whereas there you have your bonus mom that you have always had and (Camilla: yesyes, hm) it I think that has probably also been a possible factor (Camilla: yes, definitely) (I: hm) that I am a little more traditional if you can be that (laughs)" (Caroline, Il. 1024-1033, Q14).

She has this image or a narrative, that parents are called 'mor' and 'far' traditionally, which is a narrative that she has been used to from her own family. It is therefore hard for her to imagine breaking this narrative and not being 'mor', despite her saying earlier in the interview that Camilla is also 'mor', it is only the name that has changed. I would therefore argue that she attempts to divide 'role' and name as argued earlier, but that the characters that she operates with which her narrative of 'family' revolve around 'mor' and 'far', thereby making it hard for her to let go of. Ultimately, she does not complete the role/name division as the name is tied to a particular position within the family, namely that of the mother. She then attempts to legitimise her argument by mentioning that Camilla does not have as strong a narrative of the 'traditional family' as her parents are divorced, making her more familiar with other legitimate parental positions being taken up such as 'bonusmor'.

Following SRT, having two equal mothers is unfamiliar. The non-biological mother becomes secondary and less legitimate than the biological, birthing mother. I would argue that the couples are trying, in different ways, to complete the objectification process where the non-biological mother is compared to the already known object of a 'mother' and to some extent it could even be argued that the objectification is towards the known object of a 'father' as a second, non-birthing parent. For this to occur the characteristics of a 'mother' or even 'father' being biologically related to their children must be removed and instead emphasise the 'role' or position of a parent as someone present in child-rearing as for the unfamiliar object to fit the image of a 'mother' better.

After the objectification phase, the object must be anchored, named and classified. Here the non-biological mother must assimilate into the common category of mother and follow the ascribed values, meanings, and norms. However, this becomes problematic when the norm in Denmark is for a mother to be called 'mor', but there in this case are two. This process is important as it, as mentioned, is a hierarchal process of positioning and ascribing values. I will here argue that Betty insists on being called 'mor' as she is attempting to successfully anchor her position as the non-biological mother as a completely assimilated to the 'mother' category and thereby be able to be recognised as a legitimate mother equal to other mothers.

5.2.2. Donor as 'dad'

A very central code created by the participants was the positioning of the donor. As already touched upon in the analysis of the donor status, the argument *for* an open donor is to not take away the child's rights to choose if they want to know their "biological dad". The donor is in this discussion then already positioned as a type of 'dad' when talking about the status, but often with an emphasis on his right to the name 'dad' only in connection with the description 'biological'.

Throughout their interview, Alice and Astrid refer to the donor both as "donor", "dad", and "biological dad". There seems to be a difference between when talking about finding a donor on the sperm bank's website, and when it is talked about in relation to the future child. In the former context, they typically use the term 'donor' and in the latter, they are more likely to use the term 'dad'. As mentioned, Alice does not want the donor to be referred to as 'dad'. Later in the interview, I point out that they often use the term "dad" themselves despite not wanting to. Astrid responds by saying she does not have too many problems with the word "dad" but that it depends on what is meant by 'dad'. She argues that their child will not have a "dad" as in a present male parent, but that they will have a "dad" as in a biological dad because "that is how children are created". Alice then adds that she believes the difficulties with the terminology come from the fact that they grow up thinking that both 'types' of 'dad'

are the same – the role and the biology. Both Alice and Astrid think that "donor" sounds too clinical. Alice furthermore elaborates that she thinks maybe her issue with calling the donor for "dad" comes from negative experiences with homophobia, where there is often an insistence that all children have a father.

Betty and Bea have opted for a mix, and they have decided to refer to the donor as "donor-dad" (*donorfar*). Bea says:

"Bea: [...] and say that you have a donor-dad, also because then you sort of have the word 'dad' on it but also made a distance to that it is something else right (I: hm) [...] that is [...] there is something familiar in being a dad, if you then are told that you have a dad then you might go around as a 3, 4-year-old and think like where is that dad and why is he not like (I: yes) because and therefore then and to say a donor-dad [...] also if he tells the kindergarten pedagogue like, it might not be everyone that just knows Bo's family situation [...] but if he sort of immediately talks about it 'I have a donor-dad' then the adults he tells it to will also immediately be able to understand the situation and know that this is something else right (I: hm) [...]" (Bea, II. 725-746, Q15).

Bea attempts to create a way for Bo to be able to talk about his donor in a way that is familiar to others, but still indicates that it is not a "father" in the normative understanding of the word. Instead, it is a donor, not a "father". Betty is okay with calling the donor for "donor-dad", but does not see much of the reason for it as she thinks of the donor as Bo's dad:

"Betty: I think it sounds pretty reasonable when Bea calls it a 'donor-dad' but, like, yes, i-it is Bo's dad (I: hm) like (-3) is what I think soo but, but I will go along with starting calling i- umm I already call it donor-dad now (I: hm) and so on, but, but I do not think like that it is so important for me to make that difference between it because he is Bo's dad (I: yes) to some extent, there is no other man involved" (Betty, II. 751-758, Q16).

Betty's narrative of 'family' is a representation of a heterosexual nuclear family. Betty considers the donor to be the "dad" of Bo, as he is a biological parent, making it less important to differentiate between 'role' and 'name'. She further justifies her argument with the fact that "there is no other man involved". Here, Betty reproduces the narrative that children have a mother and a father, and since there is no other man to be the "father" then that makes the donor the "father". I interpret this as

it is not necessarily the biological relationship that makes the donor the 'dad', but instead the absence of a proximal 'dad', meaning that a heterosexual couple using a sperm donor might in Betty's view make the donor not a 'dad'. For Bea there is no need for a 'father' as she constructs an alternative narrative of the lesbian nuclear family, where they are two parents, thereby making the donor as a parental role redundant.

Caroline and Camilla primarily refer to the donor as "donor", which is very important for them. They mention that sometimes other people refer to Clara's donor as "her dad" which they find very "annoying" and then they correct them. They explain that 'donor' and 'dad' are not the same things, because a father is somebody who is in your life and the donor has only provided the sperm. The problem for Caroline and Camilla is not only that a 'dad' is somebody present in the child's life, but that they wish to be her *only* parents:

"Caroline: [...] and then t- then it is just that thing about that we really want to be her parents only (Camilla: yes) so when there is someone that says 'father' then [overlap]

Camillla: yes then there is all of a sudden a third that, like it is just, yes (Caroline: yes) for us it is just a little bit of a difficult word in some way [...]" (Caroline and Camilla, ll. 745-750, Q17).

When other people refer to the donor as 'dad', Caroline and Camilla feel as if a third parent is added, thereby challenging their wish to be Clara's only parents.

In line with the argument made regarding the position of 'mor' and 'mama', I would argue that there is a role/name division, where the role pertains to social proximity and the name can be accepted for the biological relatedness as long as it is *not* confused with the role. If the sperm donor occupies the position ('role') of 'dad' then that traditionally comes with the right to be the child's legal guardian and the duties to raise the child. This, in turn, creates a worry in the couples that referring to the donor as 'dad' thereby either adds a third, unwanted, parent or for Alice potentially can replace her as a parent.

I would argue that the negotiations by the couples regarding what to call the donor can be seen as an attempt to transform the representation of the sperm donor as a biological 'father'. There is a representation of the sperm donor as a 'father' created through the processes of objectification and anchoring which is considered legitimate in the heteronormative context. The result is what Betty expresses, and what

Alice is afraid of, that all children must have a father because that is how children are made. The boundary between a social father and a sperm donor becomes blurry as the representation has become common knowledge, reproduced, and legitimised. Attempting to transform this representation is then done through the process of anchoring, where the sperm donor is given a new name and a new category, not as a 'father' but as a 'donor'. It is not an easy transformation, however, which becomes evident in the couples' narratives of how they encounter other people who continuously use 'father'.

5.2.2. Constructing a queer family in a heteronormative context

When the couples in this study construct their family, they are, as demonstrated, doing so within a heteronormative context where the traditional, nuclear, heterosexual family is idealised. I am in this section arguing that constructing a queer family, is not an individual issue but one that is constricted and shaped by legislation and social norms. The ways that this becomes evident will be illustrated by the couples' experiences of being two mothers, and their encounters with health professionals, fertility clinics, and legislation on MARs and ARTs.

After the law changed in Denmark in 2006, lesbian couples have been granted access to assisted reproduction, but only on the same terms that infertile heterosexual couples have access to. This means that for lesbian couples to conceive a child in which they will both be registered as mothers from birth without going through adoption processes, they must go through state-regulated fertility processes. This starts by being referred to 'treatment' for the involuntary childlessness by a general practitioner whereafter a referral is made to a fertility clinic. The general practitioner will assess the parental abilities of the couple, and will also assess other aspects such as BMI, mental and physical health, and smoking and drinking habits. For Betty and Bea, they tell the story of how they realised that they had been assessed by their doctor without them knowing which they found strange. Bea (II. 1634-4, Q18) says:

"[...] where you also just think what the hell, y- what, do you need an assessment like i-i-i- but it like I-I did though read that heterosexual couples should also if they start fertility, like in that way (Betty: yes) it was not because I felt discriminated I just think that it was so strange like (I: hm) (Betty: yes) everybody can be allowed to have children so it was just like (sigh) it is just a weird thing right, like (Betty: yes) (I: hm)".

When the couples have gotten their referral to start the fertility treatment, they can choose between a public or a private clinic. In both places, it is state covered, but the two main differences are that at the private clinic the cost of sperm is not covered, which it is at the public, but the public clinics have a much longer waiting list than the private clinics. Both couples with children were misguided by their general practitioner about their options, yet both couples tell the story of how *they* had not researched their options well enough. Betty and Bea even directly asked their GP about the difference but were informed that there was none. This led to both couples paying for the sperm themselves, believing that they had to. Both couples admit that it is a lot of money that could have easily been spent somewhere else, especially as new parents with a newborn.

Having the fertility process state-regulated also poses other obstacles for the participants of this research. Alice and Astrid discuss the possibility of them doing the insemination at home instead of at a clinic. They mention that they feel they must choose between doing it at home which is romantic or doing it at a clinic that more resembles a medical treatment. Astrid, who is the one that will be pregnant, prefers the clinic as she feels it is safer since if anything goes wrong it would not be her fault. They then discuss how home insemination would cause problems for Alice being registered as a mother and she would instead have to adopt the child when the child is about two years old. This Alice finds problematic, but as a necessary evil if Astrid preferred home insemination – the first and foremost goal is to get a child, then the paperwork comes after according to Alice. The fact that the couples will be sanctioned this way by choosing home insemination resembles the arguments by Mamo (2018) that the medicalisation of queer reproduction has made this technological reproduction the only acceptable form of reproduction thereby excluding possibilities of low-tech reproduction.

Another aspect of how the conception options are regulated by the state is demonstrated in Betty and Bea's narrative of their fertility journey. Initially, they wanted Bea to be pregnant with Betty's eggs, which at present moment is not legal in Denmark *unless* there is a medical issue with Bea's own eggs. They, therefore, contacted a clinic in England but ended up deciding against it as it was expensive and time-consuming and therefore not a realistic option for them. For their family this would have been a perfect solution as Bea had a strong desire to be pregnant which in no way is shared by Betty, however, Betty has a very strong wish to be biologically

related to her children, which Bea does not necessarily prefer. Betty says that having a child this way would almost make it a "mutual child", whereas Bea is very critical about why they are not allowed and says:

"[...] why does it mean anything because I would be allowed if there was something wrong (I: yes) so why does there have to be something wrong with me for me to be able to get it like I want it right, like (I: yes) It is like a bit weird, because then it is not an opinion that there is anything wrong with getting that egg then there is just an opinion to you not being allowed to choose it (I: yes, exactly) like" (Bea, II. 325-331, Q19).

Besides these two examples of regulations of how to conceive, the state also regulates who can be parents. Another option researched by Betty and Bea was using a known donor and, in that way, having a present father for Bo as well. Betty and Bea ended up going away from this possibility as it is in Denmark only possible to have two registered parents, and they were, therefore, afraid of Betty not being a registered parent and thereby not having the same rights as she otherwise would have. This could have potentially been solved by forming a legal contract of the known donor giving up his parental rights, but Betty and Bea felt it was a very insecure situation as the donor could potentially wish to get custody of their child and Betty would in that way be in an insecure position as a parent. All these examples provided so far, I would argue speak to how the legislation on ARTs, despite being available for queer families, is heavily governed by heteronormative standards and ideals that the queer families must assimilate into these normative ways of constructing a family to be able to take advantage of the access they have been granted. The access is therefore not equal and it is not as progressive as it may seem as several rules are gatekeeping the options for family formation and construction.

Moving beyond the fertility process itself, all three couples also tell various stories of encounters with homophobia – despite not recognizing it as such and not calling it homophobia. Examples are Caroline and Camilla who talk about how Camilla's colleagues are thrilled that Camilla is pregnant with their second child because as they put it they then have "a child each". Betty's parents and how they express concern about not feeling the same connection and bond with Bo because it would not be their biological grandchild. Astrid mentions the homophobia that her dad has demonstrated while she was growing up. These examples, together with the abovementioned examples of issues in the fertility process and also the mentioned awareness

of being a minority family and that being something causing the children problems, I would argue are all examples of the resistance to queer families and the heteronormative expectations there are placed on these. Several of the stories told by the participants I would argue to be homophobic or rooted in it at least. However, when asked directly, all except Alice, say that they do not experience any problems being a queer family in Denmark. I will here argue following Andreassen (2019) that the couples are constructing the "just great" narrative and the "heteronormative issues" narrative. To recall this point, it is a narrative where the narrator describes in detail the issues they have as a queer — or non-heterosexual — family, but simultaneously downplays these experiences and argues that there are no problems — or at least no 'real' problems. As mentioned, this narrative is by Andreassen (2019) seen as a survival strategy used by queer mothers in a homophobic context where they attempt to position themselves as equal to other mothers, and even as 'good' mothers.

The couples repeatedly and steadfastly say that everything is "just great" being a queer family in Denmark, and then right after proceeding to answer the question with examples of issues they have had since they are two mothers – the heteronormative issue. I will exemplify this with the interview with Betty and Bea where I ask how they "experience that of being a family that consists of two mothers in Denmark", to which they replied that they have not "met anything" and that they find it "very easy" (ll. 1530-1531). Right after this, they start telling stories, one after the other, for example how despite having filled out several forms and doing everything they thought they had to do when Bo was born Betty was not properly registered as his parent. This then proceeded to take several months to fix causing problems with their maternity group and their baptism plans as examples. They then finish the stories by summing up that they have not, so far, experienced any problems or discrimination. They mention that since they live in Copenhagen there are many types of families, which might be why they have not had negative experiences. They, therefore, initiate with the "just great" narrative, proceed to use construct the narrative of "heteronormative issues" and then finally re-establishing the "just great" narrative again.

Following Positioning Theory and Andreassen's (2019) arguments of these narratives being 'survival strategies', I will argue that these couples are positioning their children as innocent, with the right to be protected from discrimination. The child is, as argued earlier, positioned as 'not queer', but having been born into a queer family. I would argue that when the child is positioned with the right to live a life

without discrimination, the responsibility of the parents is thereby constructed in relation to these rights, positioning them as parents with the duty of protecting the children from discrimination. As the parents cannot change social norms and prevent discrimination, they instead resort to the survival strategy of constructing the narrative that everything is "just great" as it minimises the issues. The issues are minimised, and they are positioned as equal to "other mothers" as Andreassen (2019) argues, which ultimately positions them as competent, legitimate parents.

I will here add that following SRT some of the issues that the couples experience concerning the current legislation could be argued to be due to the attempt at representing the lesbian, queer couples, as a family where the template for what a family is, is the heterosexual nuclear family. The lesbian couples are sided with infertile heterosexual couples and treated similarly. Furthermore, restriction on how their family can be for example concerning being more than two parents or donating eggs to each other is not possible as these fall outside of the heteronormative understanding of family. It is, however, difficult for the couples to attempt to transform this representation because creating and legitimising the representation of the lesbian family being similar to a heterosexual family has been the strategy to achieve the rights to family life. It has therefore been an advantage to be seen as equal, but it also restricts the queer family and forces them to comply with the values, meanings, and norms ascribed to the heterosexual nuclear family for them to assimilate into the category.

5.3. Blood, love, and strangers

This section is the final overarching theme of the analysis, which is constructed by the variety of different stories and negotiations that the participants constructed regarding what makes family and what is family. A very central code in constructing this theme was 'biology' and how there is a sense of ambiguity in the meanings ascribed to biology. I have structured this overarching theme with two subthemes, the first is 'sameness' with the idea of looking alike, being culturally similar, and sharing DNA is analysed in relation to understandings of 'family'. The second subtheme is 'siblings and diblings' which is an analysis of the narratives constructed around siblinghood.

5.3.1. Sameness

As mentioned in section 5.1. one of the common themes that were created from the interviews was a wish to find a donor that looks like or resembles the features of the non-biological mother. This is also the finding emphasised by Andreassen (2019), however, in this research, it was not as straightforward as that. For Alice and Astrid, they initially state that they filter the donors after "tall, dark-haired men" to have a donor that would look like Alice. Alice says:

"And it like and it it is definitely the starting point when we the first time sat down and looked at the donors (I: hmm) umm but like I, I am still not really decided because I think that on the one side it is really nice to, like to look alike, like that you should take my um characteristics, but it will always, like it will be, still only hair colour, eye colour, height and weight (I: hmm) um and like my characteristics are not going to go through, no matter if they are there or not, you will not be able to see my dace in the child's so I am also just like that child will know that it has two mothers and that we are not both biologically there (I: hmm) so why not just take some man who not necessarily look like me but who is just a beautiful man, like (I: hm) get a mulatto, get a like um a Eastern European, or [...] ummm but no no, but it it is it, it doesn't need to look like me, I cannot, I cannot figure out what I think is the nicest (I: no) should it look like me, should it umm like should it just be a beautiful child (Astrid: hmm) to a large degree I think I would rather have a beautiful child (I: hmm) than one that looks like me [...]" (Alice, Il. 555-577, Q20).

Alice questions to what extent it is even possible to achieve a sense of sameness with the child by choosing a donor that resembles her characteristics. She furthermore separates the 'dream' from 'reality' by both saying that it would be nice to look like the child, but on the other hand, the child (and everyone else) knows that they are two mothers and that not both can possibly be biologically related to the child. Therefore, Alice thinks she prefers choosing a beautiful donor, over choosing a donor that looks like her. She takes it even further and proposes that they could use a Black donor or Eastern European donor. The narrative of choosing a dark-skinned donor, because Alice thinks a mixed-race child is "cute" is present on more occasions during the interview and is echoed by Camilla as well.

For Betty, the idea of looking like your children is very important. Her mother has always drawn attention to the fact that they look alike in her family, which has become an important factor for Betty. Bo's donor was based on Betty's looks, with dark eyes, and dark hair, but Bo became a very blond, blue-eyed boy instead and looks a lot like Bea. The idea of sameness, not only the appearance but also in sharing genetic material, means a lot for Betty, as it did for her parents. She says:

"no, like it does not make any difference today when we have Bo but (I: no) but I think it is just a curiosity in seeing, like will the child then get brown eye and small ear or wh- or things like that right (I: yes) it could just be interesting like my own parents or my parents also felt like, I wonder if we will have the same relationship as you might if it had been our own genes and so forth they were also curious and actually also pretty open about how they felt (I: hm) but, but it-um it does not mean anything (I: no) today [...] That is an honest thing like I- I think everybody has thought a little bit about (I: hm) if, will you be just as close now that it is not your own genes and so on, but um, you do (I: yes) that is for sure" (Betty, 11. 359-379, Q21).

This excerpt shows both how Betty is "curious" and "interested" in seeing what a child using her eggs would look like, but also how the influence of the genetic sameness is seen as something that serves as a function of relationship for Betty's parents. I would argue that this is also an example of the heteronormative context in which Betty and Bea (and the other couples) are trying to construct their idea of family. Betty's parents are constructing a narrative of biology as essential to relational ties and the construction of 'family'. Following Positioning Theory, I would also argue that Betty's parents are positioning themselves as the norm and therefore have the right to question the legitimacy of their family. As they position themselves as the norm, they also forcefully position Betty and Bea outside the norm, creating a hierarchy of who can determine what is family and what is not. Furthermore, I would argue that Betty's recognition of her parents' comments as being "honest" and legitimate questions to have, downplays the power relations at hand and again reinforces the heteronormative assumptions that her queer family is the one that is different and therefore can be put under scrutiny.

5.3.2. Siblings and diblings

This section aims to understand the different narratives constructed concerning the importance of biology when the couples are talking about siblings. All three couples wanted to use the same donor for all siblings, but likewise none of the couples intended on contacting the potential 'donor siblings' (diblings). Betty is the only participant expressing that she would like to contact the diblings and could see something positive in it. I will start by demonstrating the arguments for using the same donor for all children, and then after I will proceed to the arguments against seeking out diblings.

Caroline and Camilla have always agreed that they would use the same donor for all their children. When asked why that was important for them, Camilla mentions that they both wanted to be pregnant, and therefore they wanted to ensure that the children could see some resemblance between each other, where Caroline adds that they would have a "biological bond".

For Alice and Astrid, it is primarily Alice that has the strongest feelings toward using the same donor for all the children. When talking about this, Alice starts by bringing up her experience with having five siblings, but not being biologically related to all of them. She starts by saying:

"[...] like I very much feel that all my siblings are my siblings (I: hmm), but now that that has been said then there has also been a lot of resistance from outside and actually also inside the family from my different sibling groups (I: okay) my biological sister they talk about us as 'real sisters' (I: yes) and does not see our blended sisters-siblings as a part of our siblings (I: no) and I really struggle with that [...] I have really benefitted from my siblings and been like those are my siblings and it is us against the world it is us against our parents (Astrid: hmm) um and that has been difficult when my siblings have been finding against and been like 'yes but we are the real siblings and then there are the others outside' (I: yes) so for me it is really important in relation to this with the donor that it is the same donor and that it is the same 'mor' as well, I need my children to be full siblings" (Alice, Il. 1553-1572, Q22).

Alice ends by saying that she needs it to be the same donor and the same mother so that her children will be "full siblings". I tell her that I was surprised to hear her answer to which she responds:

"Alice: No, but th-th-that I do understand and that was also Astrid's first reaction it was like 'why do you want that' (Astrid laughs) but I need there to not be any doubt (I: okay) [...] I am going to give them enough problem (I: hm) with family trauma and like to mothers and uncomfortable people in the world, if I can do something right then that is that they at least are going to be them against the world (I: hmm) I have met a lot like also from um also from people at school like my friends and stuff who have looked at me and my siblings and been like 'those are not even your real siblings' (I: hmm) that, I need that [...] there will not be anyone who will dispute because there will be no doubt that they are siblings" (Alice, II. 1576-1594, Q23).

Alice says that despite her feeling like all her siblings are 'real' siblings, she has experienced it as hard to have the resistance to the legitimacy of being siblings. As she believes that she, as her children's mother, will give them enough problems, for example by being a lesbian couple, she feels that it is her duty to protect them from additional harm. Alice believes that the best way to protect them is by making sure that no one can contest the fact that they are siblings. I would therefore argue that Alice is constructing a narrative where being 'legitimate' and therefore unquestionable siblings require being biologically related. The representation of siblinghood is therefore constructed of biological relatedness over that of social proximity. Furthermore, she is positioning herself in the narrative with the duty to shield her children from 'more' problems than what she will already undoubtedly give them. The constructed narrative of biological relatedness is legitimised only within the heteronormative context in which she participates. Alice has already experienced what it means to be a child in a non-traditional family in a normative context and she is now producing strategies against it, which ultimately reproduces the normative representations of family.

Betty and Bea did not end up getting the same donor for all their children, despite Betty wanting to. They say that it was because a lot of things were happening at the time and that it also was expensive to have to buy all the extra straws at a point in time, when there were many other things, they needed the money for. Bea did not need to use the same donor but would not have minded it. Their conversation went as follows:

"Betty: and then we had also talked about that we would like to have siblings straws like that that it would be so that Bo would be half- I at least wanted (I: hm) that we should buy extra straws um, but Bea did not care and um we did not get it done (I: no) and now he is sold out (I: yes) so now it will not be a half-siblings for Bo (I: no)

Bea: yes it will, it will be a full siblings to Bo

Betty: yes but half-siblings [overlap]

Bea: we are a family

Betty: full siblings, full, fully constructed siblings to Bo

Bea: yes

Betty: and Bea says it does not matter and (I: hm) I accept that that is how

it is (I: hm) [overlap]

Bea: because we are family in here [gesture to the heart space]

Betty: yes we are family and we love each other and that is in reality the most important" (Betty and Bea, ll. 1114-1129, Q24)

In this conversation Betty says that she wishes they had gotten the same donor so that Bo would be able to be a "half-sibling", but Bea challenges this notion by saying that Bo will be a full sibling to which Betty jokes "fully constructed sibling". I understand Betty's statement as a demonstration of how her narrative of 'family' is constructed around the heteronormative understandings of biology as the basis for family. When she says that their children's siblinghood will be "fully constructed" I interpret that as her meaning that their siblinghood based on social proximity is a constructed one in opposition to an otherwise 'natural' one had they been biologically related. She reproduces the normative representation of siblinghood, and family which therefore is 'obvious' and legitimised.

As all the couples have constructed narratives of siblinghood as represented by a biological 'bond', when asked about the donor siblings the narratives changed. I will now provide an analysis of this.

5.3.2.1. Donor siblings

All three couples acknowledge that if their children at some point in the future wishes to get to know any of the other children conceived using the same donor, i.e., donor siblings, they would be supportive of that. However, all except for Betty agree that there is no reason to seek these children out until their children choose to do so themselves. This is already setting the ground for how the couples construct a narrative of the donor siblings as both to some extent legitimate siblings that their children have an

understandable and legitimate claim to get to know, at the same time as they are not seen as an important part of their children's lives and therefore not really siblings. In the interview with Caroline and Camilla, it came as almost a surprise when I asked if they had considered the possibility of the donor having donated to other families. They do say that they will not be in the way for Clara if she decides she wants to seek out these other donor children, but that:

"[...] in my world they are strangers (Camilla: hm) like all or strangers and familiar like everyone is [...] I think like also from the start because of the way we have created a family then we have sort of said already that the biological is not what makes us a family (I: hm) so when you have already thrown that away then those siblings are just not siblings (I: no) they are just someone that has also used the same donor (I + Camilla: hm) it might be that they look alike and maybe have something in common but they have grown op in two different environments and we believe that yes you have a starting point from your biology but your environment affects you so much in becoming the person that Clara and the baby will become (Camilla + I: hm)" (Caroline, II. 1133-1149, Q25)

Caroline argues in this extract that "those siblings are not siblings" but strangers. Here, constrained by the normativity of the language, she must resort to using 'sibling' as a name for biologically related children, but then separates it from the position of 'sibling'. She justifies her argument by saying that because of the way that they have *created* a family then they have from the beginning written off that biology is not what makes them family. I would argue that what Caroline and Camilla are attempting here is to create a new narrative of family or to reimagine what family is. This is based on the fact that the rhetoric of their family is in opposition to the social narrative of the normative family. Caroline and Camilla are therefore describing the way that they relate to the normative family and the way that they move away from it by recreating the narrative of biology as a basis for family relations. By using terms like "we create" and "we believe" Caroline is in her narrative of 'family' also demonstrating what the normative view of family is. Her understanding of 'family' is not a given or something taken-for-granted, but instead something she actively defends as "their belief" and "their creation", as in opposition to the common belief. I would argue that as individuals, Caroline and Camilla position themselves as having the right to determine what family is for them, but as parents, they have the duty or responsibility to ensure their children's rights. Their children, as individuals, also have the right to determine what family means, so if they wish to seek out these other children or the donor they will not stand in their way. When they acknowledge the child wanting to seek out these donor siblings and say that they would "understand it", I would argue that it refers to the fact that they understand the child's wishes as it is located within the larger, and legitimate, social narrative of what family is. The child's rights and claim to recognise these children as "siblings" is therefore legitimate and they as parents position themselves with the duty to respect it.

The negotiation of biology as a legitimate basis for family and here siblinghood is actively constructed in the interview with Betty and Bea as they do not agree with each other. Betty describes how she is concerned that Bo will be alone as he has no cousins, and therefore it is a comforting thought for her that perhaps he has some "half-siblings". Bea then adds that she disagrees, she does not think that Bo will be lonely, nor does she see these children as his "half-siblings". She says:

"Bea: [...] I do not think they are half-siblings (Betty: no) or that it is just biology again so I do not think you are half-siblings just because you you share a a sperm donor like

Betty: but you are though

Bea: but I do not think that like, maybe you share some biology but you could do that with all sorts of people that like that, that, that I consider as a very small factor and I,- no that is what I think, no I really don't think that it is- [...] but for me family is not biology for me and the family like it is a feeling and a, a, a love [...] I just think it becomes such a weird [...] way like to recognize that biology as being a family bond a that I do not think it is like [...] then like the father is not a father then the siblings are also not siblings it is just donor siblings at most (I: hm)[...] like it is strangers to me and, and I cannot see that biology has anything to say for that but, yes" (Betty and Bea, Il. 916-957, Q26).

"Bea: [...] I definitely think he should think of that himself and that (I: hm) like and have a desire for it because then it is something different some considerations that was behind it, instead of it being something that is presented for him like as if it is like an expanded family (I: hm) because I would never think that it was like and what feelings he would then have to

it is up to him to find out at that point what he feels about it at that (I: hm) but if you like received now and you like talked about is with 'but you are together because you have the same dad all of you' and like that then, then I think it has become something weird, a weird constellation of a fake family, you like yes (I: hm)" (Bea, II. 1018-1029, Q27)

In the first excerpt, Betty and Bea are struggling to find consensus as they have competing narratives of their ideas of family. Bea argues that they do not qualify as siblings solely because they share a sperm donor, to which Betty answers "but they are though". Similarly, to what Caroline says Bea is defending her position, but is restricted to use the language that is available and says "then siblings are not siblings, at most donor siblings". I would argue that the two narratives of 'family' portrayed here represent the two competing narratives. Betty's narrative of family reproduces the heteronormative narrative of biology as a legitimate, incontestable basis for family. Bea on the other hand attempts to create a different narrative of family, similar to that made by the other participants interviewed. I would argue that they are two different attempts at legitimising their own family. Betty, instead of creating a new narrative, tries to insert her family or adapt it, to the larger established narratives of the normative nuclear family, so that they can be perceived as a family. Bea on the other hand tries to legitimize her family by removing it from the heteronormative narrative and stressing other factors that make family such as love and being present. She argues that if they as parents would present these donor siblings for Bo now arguing that they are siblings, which Bea never would consider them as then that would create a "weird constellation of a false family". Demonstrating that for Bea, the donor siblings are a completely illegitimate family construction and therefore would be a "false family".

I will proceed to the next section where I will discuss some of these findings in relation to if it can be understood as a transformation of the heteronormative representations or a reproduction. There I will also return to the sibling/dibling narratives which will be further discussed.

6. Discussion: Transformation or reproduction?

My analysis has focused on the main overarching themes constructed from the couples' narratives of choosing a sperm donor. I will now turn to a discussion on the findings, proposing that the heteronormative context surrounding the couples shape and constrain their construction of family. I will discuss this in light of the SRT concepts of social transformation or social reproduction, which I will discuss together with some of the arguments brought by Andreassen (2019).

As the approach of this research has followed social constructionism and a narrative approach, the problem formulation presented works from the assumption that humans have agency and are through that agency co-constructing the knowledge about the world that they inhabit. As a result, representations are dynamic and subject to change Whether or not a representation changes depends on if it is reproduced or transformed. The two main theoretical domains I have employed in this research, Positioning Theory and SRT, both operate with an epistemological assumption that positions and/or representations are not fixed. This is, however, not to say that the transformation process is easy, nor happening often. The representation of 'family' as being a heterosexual, nuclear family have been dominant in a Danish context for a long time. As the practice of 'family' is changing and there being a growing number of alternative families, this then posed the question that scholars such as Mamo (2007) and Andreassen (2019) have asked; can alternative families be seen as transforming the representation of family? However, Andreassen (2019) concludes:

"In conclusion, alternative families do expand practices of family and kinship but they do not dismantle them; they do not erode the norm of the nuclear family, but expand it to include two mothers and children (see also Dahl, 2014). Thus, alternative families expand norms and practices, but only within the limits of existing gendered and racial structures" (Andreassen, 2019, p. 170).

The findings of this thesis seem to support this conclusion by Andreassen (2019). However, I will here discuss the ways that the reproduction/expansion/transformation processes can be understood as a more nuanced and complex debate. I do not intend criticise the findings by Andreassen (2019). Instead, I wish to contribute to the understanding of this process.

The final part of the analysis focused on the narratives on siblings and diblings. I argued that the narratives constructed 'diblings' as not being considered siblings in the same hierarchical sense as siblings that grow up together in the same household. Therefore, the narratives on diblings can be argued to be constructed as an attempt to transform the normative understanding of biology as a basis for family relations. Nonetheless, Andreassen (2019, p. 165) argues:

"Many mothers who argue against viewing donor siblings as 'real' family argue that family (including siblings and/ or a father) is defined by physical proximity, care and love, not by blood or genetics. The tension between biology and social proximity runs through many of the family narratives, but, importantly, both strands (biology versus social proximity) are employed to narrate and present these alternative family forms as close to the ideal of the nuclear family as possible".

Andreassen (2019) does not perceive of the resistance towards the donor siblings to be an act of transformation as much as it is a different strategy to reproduce the same heteronormative ideals of the nuclear family. Following this argument both Bea and Betty, who completely disagree on the meaning of biology for their idea of 'family', would both be attempting to reproduce the heteronormative family ideal as the same goal, but using different strategies and routes to get there. I would argue that this is too simple an argument when considering Bea's narrative construction and will therefore argue for some of the nuances.

While I would argue that Betty's construction of 'family' is particularly influenced by the heteronormative understandings and ideals of family, it is not the case for Bea. My data has clearly demonstrated that there are several different narratives constructed around 'family' and the choice of sperm donor and not only across the couples but also within the couples. Despite this, there are several instances where the couples agree on the choice but might have different reasonings. Bea, on the other hand, often seem to distance herself from several of the choices that most participants make e.g., she does not want to use the same donor, she does not really want to choose a donor nor find it important, she does not have any preference in being a biologically related mother, nor being called 'mama'. She often come across having a rather pragmatic approach to choosing a donor with the primary goal being to have a child. The other couples are more engaged with the idea of choosing the *right* or even the *best* donor, where more or less any donor seems to be acceptable for Bea as long as a child is conceived. Andreassen's (2019) argument, therefore, in my view removes some of the agency from Bea to transform the representation of biology.

I would argue that despite participating in a monogamous, lesbian, nuclear family, Bea does transform the normative representation of family. Her construction of the idea of 'family' can be considered transformative, however, she is restricted both by legislations not allowing her to receive Betty's eggs, nor to have three parents

registered for Bo; she is also restricted by Betty, who reproduces the normative representations of family, and also by the normativity that lies within the Danish language restricting her possibilities of anchoring the donor siblings as strangers instead of siblings. I would, therefore, argue that Bea on a surface level seems to fit Andreassen's (2019) analysis of the reproduction of the normative nuclear family values, but the narratives that Bea constructs demonstrate a clear transformation of these ideals and ideologies. She is although restricted in her agency, as Provencher (2011) argues, because she can not exercise her agency as a sovereign individual but is located in a shared history and culture where for example laws and political agendas place constraints on her individual agency.

Similarly, I would argue that the statements from Alice also open up a new discussion as to the extent of the reproduction of the representation of family as the heteronormative nuclear family. It has been argued by Andreassen (2019) and supported by this thesis that the idea of the child's best interest has historically overlooked marginalised communities and used as a strategy to influence how people parent. I have, then using Positioning Theory, analysed the ways in which the participants positioned themselves as the powerful agents with the duty to ensure the powerless child's rights post-conception. One of these rights have been the right to not be discriminated against. Alice tells the story of how she has struggled in the past because people have tried to invalidate her relationship with her siblings with whom she is not biologically related but has grown up with. When she then wants to use the same donor for her children so that no one can question the legitimacy of their siblinghood, this is in practice a reproduction of the essentialised heteronormative ideas of biology as a basis for family construction. However, it is not a mindless reproduction. Going back to SRT then a representation becomes naturalised, obvious, and transcends into 'common knowledge'. When Alice directly explains her choice as a strategy to protect her children, which is her duty as a mother, the normative representation of biology is neither naturalised nor obvious, instead it is recognised as wrong and transformed in Alice's construction of her family narrative. Alice is aware of the representation of siblinghood as having a biological connection and she is aware of the normative forces that attempts to discipline people into maintaining and reproducing that representation. This goes to show how difficult the transformation is and that all the participants have agency to construct their own ideas of family and transform or reproduce the normative representations, but there are consequences and social and legal restrictions to how possible it is for the individual couple to transform the practices.

Therefore, I would argue that yes, Andreassen (2019) is right when she says that the alternative families expand the practices of family life and she is also right when she says that it is *only* an expansion and not a transformation. However, it is in this thesis clear that the reproduction of the heteronormative representations and practices of family, does not happened mindlessly, nor easily. I will argue that the couples in several ways demonstrate agency in their narratives constructing 'family', but that their options for transformation are severely limited and restricted by social and political forces policing and shaping how families can be constructed.

I, furthermore, consider the construction of narratives such as Alice's where a choice is made in order to best be accepted as a legitimate family - is also an act of agency. Despite the family construction being influenced by the normative regulations, the narratives the participants construct often demonstrate significant consideration on how to *best* construct their family for themselves and their children to be granted and to keep the rights to family life and be recognised as such.

Considering what I have just argued above, cognitive polyphasia, is in my view, a useful and nuanced way of understanding how the couples utilise different cognitive strategies to be able to tackle the issues from different perspectives. As cognitive polyphasia is based on the assumption that individuals have and can exert agency, it becomes a relevant consideration in this discussion. As the couples are alternative and queer families, they may have a shared a shared belief that social proximity is a more defining factor of kinship and family than biological ties are – which is a basis for legitimising the non-biological mother. Nevertheless, assuming that this belief will be the one they act on is to disregard the fact that they are also located in other socially shared contexts which are influenced by alternative beliefs. The couples must therefore be able to handle these different modes of thought which then enables them to participate in different practices and conversations and depending on the situation the different modes are enabled. Cognitive polyphasia can thereby be an explanation for the above mentioned that the couples are also demonstrating agency when choosing to construct their family in a way that follows the dominant norms and ideals of 'family' which is then seen by the couples to be a way to ensure their rights and legitimacy.

7. Conclusion

In this thesis, I set out to examine the problem formulation "how do lesbian couple's construct the idea of 'family' and how does this affect their choice of sperm donor". I conducted three semi-structured narrative interviews with three lesbian couples, living in Denmark. Through a Thematic Analysis, I then created three overarching themes around that of 1) choosing the donor focusing on characteristics, consumer choice, and the choice of an open donor, 2) being a non-traditional family in Denmark and the issues pertaining both to the limitations of language but also legislation and social norms, and finally 3) the narratives of what defines a family especially concerning social proximity and biology. Subsequently, I explored the narratives that the participants in this study have constructed have then been explored using the theoretical framework proposed.

My main arguments in the analysis have been two-fold. I argued that the choices around selecting a sperm donor are often framed around the best interest of the child, thereby positioning the mothers as 'good mothers', as they emphasise the child's rights above their own, and in turn stress their duties to the child. This is especially evident in the narratives around choosing an open donor as opposed to an anonymous donor.

Second, the findings have also demonstrated how the construction of 'family' for the individual couples is highly influenced by the norms and ideals pertaining to the heterosexual nuclear family. Amongst others, the construction of 'family' is shaped and constricted by legislation and politics. Besides legislative restrictions, there are also social norms of what it means to be a 'family' and a 'good mother', which are tied to heteronormative ideals which shape the couples' narratives on various aspects, such as the representation of family as something bonded by biology and 'sameness'. I discussed these heteronormative ideals in relation to the alternative families' potential to transform these ideals as well as their continuous reproduction in the alternative family practices discussing amongst others their agency in their family construction.

I therefore conclude that lesbian couples conceiving with a sperm donor construct their idea of 'family' by negotiation, in their narratives, the different modes of thought pertaining to family practices. They thereby construct the narratives in ways that will simultaneously legitimise the non-biological mother, as well as make them

recognisable and legitimate as a family in the heteronormative context in which they live and perform family in. The sperm donor choice is a choice entrenched with values and is an arena where the couples must demonstrate that they will be and are good parents as well as achieving a legitimate family status by assimilating to the heterosexual nuclear family.

Following the conclusion, I will also briefly discuss some of the limitations of this research as these are important to consider when taking these findings into consideration. First, I did not manage to reach the intended population of people of colour. Instead, all my participants are white, cisgender, married, have family support, and have a steady income. I consider it a limitation that the population examined is one with significant privilege in several aspects and therefore are afforded the privilege of being able to (or allowed to) assimilate to the heterosexual nuclear family and draw benefit of the rights to family life. Future research should aim at including ethnic-and gender minorities as they are very underrepresented in the literature on alternative families in a Scandinavian context and can offer new insights, especially regarding the discussion on reproduction of transformation of the heteronormative ideals. Research in this area should therefore be mindful of the implications of intersectionality, which this research falls short of.

Second, the research design causes limitations in relation to the extent of which the findings demonstrate the 'construction of family'. Examining the choices pertaining to choosing a sperm donor has been an insightful way to understand how the couples construct the idea of family as preconception parents. Despite two of the couples having children, they all have small children. This means that the findings and conclusions on how the couples construct the idea of 'family' is seen from a very specific time and context, whereas other practices relating to being a family will not be able to be included in these findings. Future research would therefore benefit by examining different life stages as the construction of 'family' is a dynamic ongoing process and should be treated as such. Furthermore, future research could also benefit from examining the institutional aspects of family construction focusing both on the fertility clinics specifically as well as for example childcare institutions.

This thesis does, however, contribute to the knowledge production of this field with findings such as the implications of the heteronormative context on the possibilities for queer families to construct their own ideas of 'family'. These findings, I would argue, are transferrable onto other topics of research and provide a starting point in examining other types of alternative families be that ethnic minorities or gender minorities. The heteronormative ideals of the traditional, nuclear family are alive and well and not only shape but constrain the potentials of family construction for families that are considered to be 'alternative'.

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