



Strategic Plan 2026-31

August 2025

Contents

Contents	2
Introduction	3
The Scale of the Problem	3
Who We Are	4
Our Mission	5
Our Vision	5
Our Values	5
Why We Exist.....	5
What We Do	6
Our Organisational Pillars and Strategic Aims	6
1. Support	6
2. Education.....	7
3. Advocacy.....	7
4. Operational	7
Key Outcomes (2026–2031)	8
Short-Term (Years 1–2).....	8
Mid-Term (Years 3–4) Develop activities from years 1-2 plus:	8
Long-Term (Year 5) Develop activities from years 1-4 plus:	8
Indicators.....	8
Conclusion: A Paradigm Shift	10
Key Contacts	10

Introduction

This five-year strategic plan sets out how Donor Conceived UK (DCUK) will respond to the urgent and growing needs of donor conceived people (DCP) and others affected by donor conception. It articulates our vision for systemic change, defines our roadmap to sustainable impact, and reinforces our commitment to centering lived experience in all we do.

We aim to:

- Remove key barriers to truth, identity, and wellbeing for DCP
- Build the UK's first trauma-informed, lifespan-focused support infrastructure
- Influence public understanding, professional practice, and policy reform
- Establish strong financial, operational, and community foundations for long-term sustainability

The Scale of the Problem

Every DCP can tell you exactly where they were when they discovered, or fully understood, that they were donor conceived. This moment is life-altering—a seismic identity shift that starts a deeply personal, often overwhelming journey.

Donor conception has been practiced in the UK since the early 1940's, primarily to help infertile couples have children. While donor conception doesn't cure infertility, it is termed to be a 'treatment' by the fertility industry that many in the Donor Conceived Community believe to be a misnomer. For decades, doctors providing this service advised recipient parents not to disclose the nature of the conception to their children, and to this day parents are not obliged by law to disclose if donor gametes or embryos were used.

There is now so much evidence of donor conceptions complex and changeable lifespan impact for all those affected, but the UK government, regulator and fertility industry's focus has remained squarely on their duty of care in relation to the period surrounding 'treatments' and donor recruitment and have largely avoided accepting any duty of care for the psycho-social fallout from the lifespan implications of creating life in this way. The HFEA's decision to cut all commissioned support services for post-1991 DCP and donors in 2024 further deepens this void.

More than 70,000 donor conceived people have been born in the UK since 1991. With donor births rising from 1 in 450 in 2006 to 1 in 170 by 2019, the numbers continue to grow.

Before the fertility regulator, Human Fertilisation and Embryology Authority (HFEA), was established in 1991, responsibility for records was solely down to fertility clinics and fertility practitioners. Most either destroyed their records or did little to no record keeping, therefore it is not known how many donor conceived people were born prior to this date, but the majority of the DCUK community were conceived prior to August 1991.

We are at a pivotal moment: In 2005 the HFE Act was updated, meaning the majority of donor conceived people conceived in UK licenced clinics after the 2005 law change are now able to access basic identifying information about their parents Donor from the age of 18, with more than 11,000 expected to reach this milestone by 2030. Yet many will remain unaware of their donor origins, and those who do know often face emotional trauma, legal confusion, and social stigma, especially when discovery is accidental.

DCP can only access this information if they KNOW they are donor conceived, if they are informed by their parents or if they find out from other means. It is thought that up to two thirds of parents still do not inform their children of their donor origins.

The popularity and availability of commercial genetic testing sites such as Ancestry and 23&Me has effectively ended anonymity for all donors, regardless of the legislation in place at the time. This has seen a floodgate open of shock misattributed parentage events (MPE) by 'late discovery' donor conceived adults and has given agency and autonomy to DCP seeking answers about their genetic origins.

Who We Are

DCUK was founded in 2023 following extensive consultation with the donor conceived community and our stakeholders. Our founder, trustees, and leadership are all donor conceived themselves. This gives us unmatched authenticity, credibility, and clarity of purpose: to speak with and for the DCP community, and to build the support structure we were never given.

We are the UK's only national, peer-led organisation by, and for, donor conceived people.

DCUK is in the process of becoming a Charitable Incorporated Organisation (CIO) — a vital step towards long-term stability, legal capacity, and operational resilience.

Our Mission

To centre the rights and well-being of donor conceived people through education, advocacy, and support, empowering them to achieve their best possible outcomes.

Our Vision

We imagine a society that:

- Recognises the relational and psychological legacies of donor conception
- Affirms every person's right to know their genetic and medical history
- Supports donor conceived people to explore their identity with dignity and compassion

Our Values

These are important in setting the tone for how we go about conducting DCUK. They represent what we want to be known for:

- *Welcoming (don't turn people away, signposting as a minimum)*
- *Compassionate (empathetic, understanding and tolerant)*
- *Integrity (honesty, transparency and truth)*
- *Member focused (the community we represent is at the heart of all we do)*
- *Tenacious (we go the extra mile, we don't give up)*
- *Collaboration (supporting each other within DCUK and working with others sharing ideas, resources and skills)*

Our values should be at the heart of everything we do and the Trustees and Leadership team have an important part to play in bringing them to life at Donor Conceived UK.

Why We Exist

The need for Donor Conceived UK is clear and pressing:

- There is no existing peer-led support infrastructure in the UK for DCP
- The withdrawal of HFEA-funded support services creates a critical service gap

- The fertility industry and media often marginalise DCP voices in favour of parent-centred narratives

We exist to fill this gap—creating safe, empowering spaces for truth, connection, and healing.

Charity Object

(1) To support and represent UK Donor Conceived People.

(2) To support historical donors and others affected by donor conception practices in the UK.

(3) To advance public awareness of the donor conceived experience by championing, empowering and amplifying the voices of the Donor Conceived Community in the UK through support, education and advocacy.

What We Do

DCUK is already delivering impact:

- A private peer-led online community of 800+ members
- Over 20,000 website hits since March 2024
- Responsive email and phone support
- Annual in-person events for connection and healing
- Public storytelling to validate experiences and reduce isolation
- Policy advocacy and media engagement that has directly contributed to former donors waiving anonymity

“DCUK is a support network of people who’ve all gone through the same thing. I wish I’d found it sooner... I’ll never feel alone again.” – Community member

Our Organisational Pillars and Strategic Aims

1. Support

Mission: Establish a sustainable, trauma-informed support infrastructure:

- To establish a sustainable mental health informed support infrastructure for DCP and those affected
- To build peer support services including 1:1, group events and interest groups
- To provide online resources to enable beneficiaries and professionals working with DCP and historical donors to help and educate themselves

2. Education

Mission: Empower DCP and those around them through information and understanding.

- To build an online resource hub providing information, inspiration and guidance
- To expand DCUK reach to more and diverse DCP, including young adults, LGBTQ+, ethnically diverse and defrauded DCP
- To encourage disclosure by historical Recipient Parents to their adult donor conceived children.
- To increase professional understanding and knowledge of Donor Conception through training, consultation, and representation on relevant bodies

3. Advocacy

Mission: Shift legislation, policy, and culture to respect and reflect DCP rights.

- To improve legislation and policy, such as the HFEA Proposals on Modernising Fertility Law, to ensure that the rights and needs of donor conceived people are respected and protected and are central to the law.
- To increase the number of historical donors waiving their anonymity through a public awareness campaign
- To support donor conceived people (individuals and interest groups) to champion their human rights

4. Operational

Mission: Build a resilient, future-ready charity:

- To establish a fully compliant and impactful Charitable Incorporated Organisation (CIO)
- Ensure long-term sustainability through diverse funding streams
- With a dedicated team of volunteers and staff, commit to delivering our mission with integrity, effectiveness, and lasting impact

Key Outcomes (2026–2031)

Short-Term (Years 1–2)

- 250+ people supported through peer-led services and events
- Launch fundraising strategy and build £30k–£40k income pipeline
- Secure monthly monetary donors from our community base (£30k/year target)
- Grow strategic partnerships to sustain and amplify our work
- Secure charitable status (CIO)
- Recruit paid leadership (with initial funding from The Fore)
- Create a robust fundraising strategy, aiming for £30–£40k annually
- Create Community-Informed Support strategy
- Develop income streams from consultancy, membership and partnerships
- Represent DCP in academic, policy, and industry forums
- Champion DCP-led reform in national law (e.g. HFEA Modernisation)

Mid-Term (Years 3–4) Develop activities from years 1-2 plus:

- Build a comprehensive online resource hub for support and learning
- Expand volunteer training
- Begin delivering funded training to professionals and clinics
- Amplify calls for retrospective information access for pre-2005 DCP
- Encourage anonymity waivers from historical donors
- Develop professional training and consultation services
- Reach underserved communities including LGBTQ+, ethnically diverse and defrauded DCP
- Promote and support truth-telling by historical recipient parents

Long-Term (Year 5) Develop activities from years 1-4 plus:

- Recognised as the UK's leading voice and support provider for DCP
- Influence lasting policy and legal reforms grounded in lived experience
- Be a self-sustaining charity with national reach and impact

Indicators

We plan to evaluate how we will know if the objectives have been achieved by:

1. Monitoring Client outcomes - This is how we want donor conceived people, historical donors and others intergenerationally affected by DC practices to feel, think and do when experiencing our service:

- *safe and supported*
- *listened to*
- *confident someone cares*
- *no longer alone in their situation*
- *know more about the next steps to take*
- *more empowered to act*

2. Anecdotal and case study evidence. Document scenarios and ways our members interact with Donor Conceived UK:

- **Track the growth of the Donor Conceived UK Community.** By measuring the number of active Facebook group members, the number of email and phone call interactions, numbers signing up to our newsletter and downloading resources from our website, following our social media accounts and monitoring the Donor Conceived UK website statistics.
- **Donor Conceived UK Community Survey.** We will monitor how effective we are in achieving client outcomes through our periodic Donor Conceived UK Community survey. Along with geographic and demographic information, the survey will collect well-being data carried out with a sample of members plus our customer service survey which examines members opinion on the basics of our service delivery. We plan to augment these procedures by trialling the Warwick-Edinburgh measurement [How to use WEMWBS \(warwick.ac.uk\)](http://warwick.ac.uk/wemwbs)
- **Monitoring progress and reviewing activity with the assistance of Donor Conceived UK Charity Trustees.** Testing the strategy to ensure there is strong evidence of need, that Donor Conceived UK is fundable, and that planned activity is in line with other providers and stakeholder strategies and that the planned activity is a match to our organisational capacity and skills. Trustees in turn will comply with the requirements of the Charities Act 2011 and their obligations to Donor Conceived UK as outlined in DCUK Governance Document.

Conclusion: A Paradigm Shift

We are not just creating services—we are changing the narrative. Donor conception is a life-long intergenerational process and has far reaching social implications. Donor Conceived UK is pioneering the shift from secrecy to truth, from isolation to community, from marginalisation to empowerment.

With support and investment, we can build a future where every donor conceived person feels safe, seen, and supported—for life.

Key Contacts

Laura Bridgens (Founder): laura.bridgens@donorconceiveduk.org.uk

Louise Stokes (Operations): louise.stokes@donorconceiveduk.org.uk

Cat Perry (Chair) C29Perry@gmail.com

Joanna Nuttall (Treasurer): joanne.nuttall@donorconceiveduk.org.uk

Vanessa Burns (Secretary): vanessa.burns@donorconceiveduk.org.uk



SWOT Analysis on delivering mission



Strengths

- Collaborate well with others
- Strong brand identity
- Experienced volunteer team
- Active and supporting existing community
- Effective Internal Social Media

Opportunities

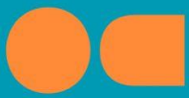
- Growing community
- Emerging DNA Technologies
- Changing attitudes
- Strategic Partnerships
- Global advocacy prospects
- Influence on research, media and policy

Weaknesses

- Minimal reputation
- Limited digital presence
- Lack of regular funding
- Dependency on Key Partners
- Reliance on volunteers

Threats

- Inexperience
- Public empathy gap for DCP
- The opposing agenda of the Fertility Industry
- A legacy of secrets and deception



ANALYSIS OF THE WIDER CONTEXT

PESTEL

