miniQ Summary of Research

Common Themes & Pain Points

Financial

Assisted Reproduction is unaffordable for the Queer community.

- Most insurance company policies heavily favor heteronormative couples in fertility coverage, which forces Queer couples/individuals to pay out of pocket for treatment. This ranges between thousands to hundreds of thousands of dollars.
- People don't have a clear picture of potential costs and risks associated with treatment before starting the process.
- Cost-effective options are mostly discovered through word-of-mouth:
    - Surrogacy & egg donors
    - Sperm donors
    - Legal counsel
    - Medications
- There are little to no fertility grants that specifically target the Queer Community.
- Some people turn to family to help offset costs.

Opportunities

- Provide a cost calculator as a form of on-boarding for people who are curious or interested in starting the family building process.
- P2P curated resources to alleviate costs associated with treatment. (Ex: Low-cost or non-agency surrogacy options, med donation program).
- Resources on navigating insurance and identifying loopholes that can potentially offset costs.

Community Support

Most Queer people rely on their personal community (family and friends) for information, resources and support.

- Clinics, egg donors and sperm banks are chosen based on word-of-mouth reviews by peers.
- P2P exchange of excess meds frequently circulate the community.
- Community support is especially vital for Trans/Non-Binary people undergoing fertility treatment, especially for those who are not medically or hormonally transitioning. A support person helps to advocate, educate, and navigate/block toxic people.
- Fertility clinics lack Queer inclusion and competency (form language and terms are exclusionary & no Queer family counseling available).

Opportunities

- Matching program: users will have the ability to search, filter and match with other couples/individuals for emotional support, mentorship and exchange of information and resources. Example of filtering options: location, treatment type, gender identity, partnered/single, etc.
- Users can join support groups that are topic-specific where they can interact with other members.
- Queer-specific family building events
- Peer-rated clinics/hospitals based on Queer inclusion and competency.

miniQ Summary of Research

Transparency in Timeline & Process

No clear guidelines on how long the process takes and what to expect.

- Information for family building is scattered throughout various Queer websites and hard to find without digging.
- Emotional aspect not emphasized enough: stressful, sterile and frustrating.
- Most people are unaware of how long the process can take from start to finish a well as the lack of a guaranteed outcome.

Opportunities

- Provide a guide with steps to take for each sub-community within the Queer population who are starting the family building process.
- Provide an estimated timeline of the family building process based on each sub-community's needs.
- List of risks related to each sub-community.