

Included in the print edition
number 6 (July)ISSN: (Print) (Online) Journal homepage: <https://www.tandfonline.com/loi/wwah20>

Infertility awareness: why should we care?

Márcia Mendonça Carneiro & Márcia Crisitna França Ferreira

To cite this article: Márcia Mendonça Carneiro & Márcia Crisitna França Ferreira (2021) Infertility awareness: why should we care?, *Women & Health*, 61:6, 501-502, DOI: [10.1080/03630242.2021.1935269](https://doi.org/10.1080/03630242.2021.1935269)

To link to this article: <https://doi.org/10.1080/03630242.2021.1935269>



Published online: 29 Jun 2021.



Submit your article to this journal [↗](#)



Article views: 1194



View related articles [↗](#)



View Crossmark data [↗](#)



Infertility awareness: why should we care?

The ability to get pregnant and have a child as well the right to have access to information regarding reproductive health is a fundamental human right. The Universal Declaration of Human Rights (The United Nations 2021) states that “Men and women of full age, without any limitation due to race, nationality or religion, have the right to marry and to found a Family.” Infertility however affects as much as 186 million people worldwide and remains a major neglected health problem. According to the World Health Organization (WHO), (World Health Organization 2021) Infertility is defined as inability to to achieve a clinical pregnancy after 12 months or more of regular unprotected sexual intercourse. June is World Infertility Awareness Month and in 2021 the focus may be shifted to the possible effects of COVID-19 on fertility rates around the globe.

The need to address infertility stems from its effects on a personal level as well as the social and economic consequences of reduced fertility rates. Although infertility is a medical condition which can be successfully managed with a variety of advanced treatments the focus should also be put on ways to avoid it. Apparently very little attention has been paid to the matter over the years as infertility is stays adrift under the much wider concept of reproductive and sexual health. Despite efforts such as the 2030 Agenda for Sustainable Development, very few people have access to adequate diagnosis and treatment . Sadly, the matter seems worse in developing countries and the poorest regions of the planet.

Unfortunately infertility has not been given priority by public health policy-makers and governments and received very little investment to support research and provide everyone with access to preventive services, diagnosis, and medical treatment . In fact, when resources are scarce, infertility management receives little priority. The consequences may be tragic and widen the gender-gap as many infertile women are left without options and may face rejection and extreme suffering. Regrettably in many cultures women take the blame for infertility and childlessness even if current evidence says male infertility may account to up to 30% of couple’s infertility. It goes without saying this helps widens the gender gap and leave women suffering from infertility more vulnerable.

The development of assisted reproductive technologies such as in vitro fertilization (IVF) has opened up new opportunities for people to achieve a pregnancy, but despite the global spread of IVF clinics, the unmet need for such costly treatments remains high. The development of IVF brought a better understanding of the role of male and female factors in infertility and made pregnancy possible even in severe hopeless cases. In addition, a better comprehension of male and female reproductive physiology may have helped reduce stigma as couples understand the part each one plays when infertility is the issue and seek adequate care. In that context initiatives that aim at providing affordable access to IVF such as low-cost IVF are of paramount importance. Moreover, IVF opened up options to parenthood for homosexual couples and transgender people and thus it is a vital aspect of equality and inclusion. According to the American Society of Reproductive Medicine, people with transgender identity and nonbinary persons should have the right to consult with a multidisciplinary team and have access to fertility preservation and IVF (ASRM 2021). It goes without saying that governments should also take their responsibility as infertility care should be viewed as an essential human right and therefore actions directed at fighting preventable causes of infertility and provision of diagnosis and treatment to infertile people or anyone who might require it should be part of a responsible public health agenda.

Reduced birth rates are among the many changes brought on by the pandemic. The Center for Disease Control (CDC) in the USA reports a 4% reduction in birth and fertility rates in 2020 (Hamilton, Martin, and Osterman 2021). The long-term consequences of such a reduction will be felt in the years to come mainly in developed countries where population aging is a growing concern.

Therefore, fertility education and reproductive planning must be implemented. There is no denying the disruption COVID19 caused in health systems around the world. Some believe the resulting economic crises during the pandemic may further aggravate the access to fertility treatments and thus reduce the chance to obtain a pregnancy for those needing IVF. Moreover, many women all over the world chose to delay childbearing or decided to have less children in the face of this unprecedented health crisis. In this context, egg freezing presents an option for the very few who can afford it as the technique is not widely offered by public health systems.

It is about time we see infertility care as both a medical and social problem. Women living the poorest countries have the least access to fertility care and face a cruel social burden. Providing adequate infertility care is also a way to fight gender-gap as women take the heavier medical, social and economic burden when compared to men. Infertility is not a life-threatening condition but as COVID-19 rages on, we must find a balance so that other relevant health issues such as infertility are not completely forgotten. Developing a public health agenda that includes not only prevention and treatment but also education and research so people are allowed the chance to make free informed choices whenever they choose to have a child should be a priority even during the pandemic as the future of millions may depend on that.

References

- Ethics Committee of the American Society for Reproductive Medicine. 2021 Apr. Access to fertility services by transgender and nonbinary persons: An ethics committee opinion. *Fertility and Sterility* 115 (4):874–78. doi:10.1016/j.fertnstert.2021.01.049.
- Hamilton, B. E., J. A. Martin, and M. J. K. Osterman. 2021 May. *Births: Provisional data for 2020. Vital statistics rapid release; no 12*. Hyattsville, MD:National Center for Health Statistics. doi:10.15620/cdc:104993.
- The United Nations. 2021. The Universal Declaration of Human Rights (UDHR). Accessed May 23, 2021. <https://www.un.org/en/about-us/universal-declaration-of-human-rights>
- World Health Organization. 2021. Infertility. Accessed May 24, 2021. <https://www.who.int/news-room/fact-sheets/detail/infertility>

Márcia Mendonça Carneiro, MD, PhD

Women & Health, Department of Obstetrics and Gynecology, Universidade Federal de Minas Gerais, Belo Horizonte, Brazil

 marciamc.ufmg@gmail.com

Márcia Crisitna França Ferreira, MD, PhD

Women & Health, Department of Obstetrics and Gynecology, Universidade Federal de Minas Gerais, Belo Horizonte, Brazil