

Video Transcript: Infertility and Family Planning Care

This video was created by the Reproductive Health National Training Center, (R-H-N-T-C).

Fertility—and pathways for growing a family—vary across individuals and couples. About 15% of heterosexual couples experience infertility, making infertility one of the most common conditions for people between the ages of 20 and 45. And this does not account for rates of infertility among LGBTQ+ and single people who may need fertility assistance to support their reproductive goals.

Infertility can be physiological or social.

Physiological infertility is a disease of the reproductive system that prevents a person from becoming pregnant or carrying a pregnancy to delivery.

Social infertility is when social or relational factors, such as being single or in a same-sex partnership, limit one's ability to become pregnant.

It's possible to experience both social and physiological infertility.

Three common causes of physiological infertility involve ovarian dysfunction, fallopian tube obstruction, and insufficient sperm production and function.

For instance, **polycystic ovarian syndrome**, or PCOS, causes irregular ovulation. PCOS is one of the most common causes of infertility.

Blocked fallopian tubes prevent an egg and sperm from meeting. Risk factors for blocked fallopian tubes include a history of chlamydia or gonorrhea infection, pelvic inflammatory disease, and endometriosis.

Insufficient sperm is another common cause of infertility. Risk factors for insufficient sperm include infections, hormonal problems, and environmental and lifestyle factors, such as exposure to endocrine disrupting chemicals or smoking cigarettes.

While infertility is common, infertility evaluation, treatment, and assistance are not accessible to everyone. Economic factors are a primary barrier. Fertility treatments are expensive and often not covered by insurance.

Other barriers to infertility care access include: inequitable insurance coverage; cultural stigma; a client's prior negative experiences with the health care system; provider bias; and the inability to take time off from work or to travel for treatment.

Some groups are more likely to face barriers to infertility care access. LGBTQ+ and gender nonconforming individuals can experience bias and discriminatory policies when seeking fertility assistance to build their families. For example, when an insurer's definition of infertility does not include social infertility, same-sex couples can be excluded from infertility treatment coverage. There are also disparities in access to infertility services by race and income. For example, Black, Hispanic, and American Indian/Alaskan Native individuals are all less likely to access infertility services compared to their White counterparts.

Basic infertility services are a core component of family planning services and the Title X Program. Because many people describe Title X clinics as their usual source of care, Title X agencies play a critical role in delivering quality, accessible, and equitable services. Title X agencies and staff can support clients by understanding each client's unique circumstances and goals, and by:

Equipping staff with **knowledge and skills** to provide inclusive and culturally affirming infertility services that support all clients in their family building goals.

Screening for and treating conditions that can impact fertility, such as chlamydia, gonorrhea, and hypertension.

Providing **counseling and education** on fertility, fertility preservation, and fertility awareness to achieve pregnancy.

Providing quality **preconception health services.**

Evaluating infertility by conducting medical and reproductive histories, a review of systems, a physical examination, and laboratory testing as indicated; and

Providing **counseling and referrals**. This includes linking clients to specialist care for medically-based infertility services, and providing clients with information on the social, emotional, and financial aspects of navigating infertility and treatment.

RHNTC's <u>Infertility Services in Family Planning Care Toolkit</u> offers evidence-based recommendations, action steps, and supportive resources to help family planning agencies understand the scope of basic infertility services; and to strengthen and guide their provision of services and referrals to support clients experiencing infertility.

For more information, and to find related resources, go to R-H-N-T-C.org