Fertility Treatment – and no Child. What to do?

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The purpose of the overall project - Family histories and establishing of daily life after fertility treatment - is to analyze socio-demographic consequences of fertility treatment in Denmark; a medical treatment to which great expectations are attached both from the couples who want to have a child and from the medical profession responsible for the treatment. The project aims at determining how and to what extent selected characteristics of couples and their relationship influence their actual and subsequent family history, especially in the case of not achieving pregnancy during 1-5 years of follow-up after initiation of treatment.

Background

The 'Act no 460 from June 10, 1997 on assisted reproduction related to medical treatment, diagnosis and research etc.' gave for the first time a total legal regulation of fertility treatment in Denmark. The act specified that the treatment could be offered to *couples*, consisting of a man and a woman¹. Similar possibilities became available for couples in a number of western countries during the 1980s. It is noteworthy, that the act in Denmark gives equal access to the assistance, free of charge in the public clinics, to all ethnic, income and social groups and thereby diminishes socio-economic selection².

At present, Denmark is one of the leading countries in fertility treatment both regarding having begun at an early time to use and offer the treatment at no cost within the public health service system, and regarding the relatively large annual number of women being treated (Andersen et al. 2008). Fertility treatment was estimated to account for 6 per cent of all births in Denmark 2003 (Sobotka et al. 2008), and the proportion is at present approaching 10 per cent.

Basic statistics on the women undergoing treatment, such as age and place of living, are available on a routine basis, while no routine information is collected and published regarding their — and their partners' - subsequent situation after ending treatment with or without a child. To our knowledge, no longitudinal approach has been used in analysing the relation between the situations during treatment and the subsequent family life by use of questionnaire data.

A family perspective has previously been included in a Danish register based analysis comparing all couples, who initiated a high-technological fertility treatment at a public or

¹ According to the present act, which includes a number of revisions of the act from 1997, this §3 has been annulled and childless single women now have improved possibilities for being treated.

² Until the recent revision of the act, couples of homosexual women were not covered by the public fertility treatment programme.

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private fertility clinic in 1995-1999³ with all couples in Denmark, having a child during the same period without fertility treatment (Blenstrup 2006). The results revealed that a higher proportion of the IVF-couples managed to maintain their relationship, especially if the treatment resulted in childbirth, which created the hypothesis that this might be a consequence of the couples' conscious and expressed wishes for having a child.

There is, however, a lack of analyses which from a sociological point of view deal with consequences of the treatment and persistent infertility for individuals and couples.

This study tries to fill the gap of missing sociological knowledge about the situation following the treatment by studying the family histories, whether the couples preserve or dissolve their relationships and whether and how they establish a daily life with children subsequent to the treatment, including their own children (with a distinction between spontaneous conceived children, ART-children, adopted children and step-children), and whether they have contact with children they do not live with.

Data

The basic data stem from a 5 year follow-up study of 1.027 couples in Denmark, initiating fertility treatment 1.1.2000 – 31.8.2001 (the COMPI-cohort). Both partners in the couples completed three rounds of questionnaires, irrespectively whether they achieved pregnancy or whether they stayed together. The questionnaires include socio-demographic characteristics, attitudes towards continued medical treatment, whether they consider adoption as an option in case of no pregnancy, how they cope with the infertility and whether the two partners have chosen the same strategy of coping. Further, their family situation was followed in registers.

All couples (1,406 couples) initiating treatment in the five clinics, covering 63 per cent of all in-vitro treatments in the Danish public health services, were invited to participate in the study and 2,250 individuals responded positively and completed the so-called *base-line questionnaire*. The second (after 1 year) and third round (after 5 years) of questionnaires were completed by 1,934 and 1,481 individuals, respectively (Schmidt et al. 2008).

Further, the data set has been supplemented with data from medical records regarding each treatment attempt during the five years and with register information on subsequent family history.

The *baseline-questionnaire* gives, among other topics, information on the respondents' and their partners' reproductive histories before the actual treatment, on the intensity of their wishes to have children and their expectations to the fertility treatment, for instance, how they cope with and communicate with each other about their experience of infertility and whether they experience infertility-related stress.

The 1-year follow-up questionnaire concentrates on the results of the treatment (child or no child) and the couple's evaluation of the treatment. Couples for whom the treatment

³ The women undergoing treatment were identified as being registered in the IVF-register of the National Board of Health

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has been unsuccessful were asked about eventual reasons for deliberately ending treatment, the experience of infertility-related stress, coping, the sense of coherence, their health, and communication between the partners regarding the infertility.

In the 5-years follow-up questionnaire the same information is included as in the 1-year follow-up concerning the couples' situation with specific questions for the couples who did not have a child as a result of the treatment. The meaning attached to having a child, can be analyzed at 1 and 5 years follow-up for couples who have not had a child as result of the treatment.

Analyses

We have chosen to conduct four separate analyses regarding socio-demographic characteristics of couples not getting pregnant, related to

- the couples' attitudes towards adoption or continued medical treatment after one year of treatment without getting pregnant and their characteristics
- the decision paths leading to the couples' decision to end treatment even though they are still entitled to more trials
- whether the couple manage to stay together as a couple during and after the treatment period
- whether and how they manage to establish a daily life with close contact to children.

The presentation will combine and discuss the most important findings into a joint framework of meanings attached to parenthood in late modern society. Not all of the analyses are completed at the date when the abstract is submitted, so the results will follow at the conference.

Literature

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