

# Wealthier women more likely to use fertility services

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Overall, fewer women are seeking help with getting pregnant than in years past, report shows.

(HealthDay)—New U.S. government statistics show there's still a major divide among women when it comes to infertility: Poor, nonwhite and less educated women are the least likely to seek services to get pregnant.

A federal report released Wednesday also showed that the percentage of [women](#) aged 15 to 44 who have sought [infertility](#) treatment or assistance has actually declined since 1982, despite advances in technology designed to help women have babies.

This could be a sign that women are waiting longer to try to have children, since the researchers didn't track women beyond age 44.

Still, "we're not seeing dramatic increases over time in women who have had any type of medical service for infertility," said report author Anjani Chandra, a health scientist with the U.S. National Center for Health Statistics.

Chandra said federal researchers launched their report in an effort to understand trends in [fertility treatment](#), "especially given that there's so much media coverage about the esoteric and unusual situations that arrive with multiple births. There's definitely an impression in the media that these treatments are dramatically increasing over time, and that infertility itself is also on the rise."

A previous report, co-authored by Chandra and published last August, found that infertility itself isn't increasing. It had actually dropped from 8.5 percent to 6 percent of married women between 1982 and 2010, the researchers found. The new report is based on surveys of more than 22,000 men and women aged 15 to 44. The surveys were taken between 2006 and 2010.

Researchers found that 17 percent of women aged 15 to 44 had sought fertility services, which include seeking advice about getting pregnant, infertility testing, artificial insemination and drug treatments. That number was 20 percent in 1995. Among women aged 24 to 44, advice, testing, drug treatments and medical assistance to prevent miscarriage were the most commonly used services.

The percentage of women who had never had children and sought fertility services also dropped, from 56 percent in 1982 to 38 percent in the new study's timeframe.

"We think this is a consequence of delayed childbearing among all women," Chandra said. "They're not necessarily getting married or trying to have a child until later on, and may be more likely to pursue infertility

[services] beyond the age of 44."

Arthur Greil, a professor of sociology at Alfred University in New York who studies access to treatments for infertility, said Chandra's speculation makes sense.

"Women, and especially middle-class white women, are delaying having a first child even longer than before," he said. "Part of that reason may be because they have confidence that infertility treatments, when they need them, will work. For a lot of them, it's a false confidence because the treatments work better when you're young."

The researchers behind the new study found that 21 percent of the wealthiest women had sought fertility services, compared to 13 percent of the poorest women. Fifteen percent of white women aged 15 to 44 had gotten medical treatment for infertility, compared to only 8 percent of Hispanic and black women.

Previous research has shown that fertility rates among women are about the same, regardless of income levels and race, Chandra said. And research suggests that poorer women and minority women share the same desire for children as other women, she added.

So why the disparity?

Lack of money and insurance definitely play a role, said Greil. The treatments can be very expensive and may not always be covered by insurance.

But money isn't the only issue, he said. "Whites and Asians are much more likely to have partners and families who encourage fertility treatments. African Americans and Hispanics, to a lesser extent, are less likely to be encouraged by family members and partners to use fertility

treatments. Part of the issue may be that these groups have less trust in medical institutions," he said.

It's unclear how much difference health care reform under Obamacare will make in terms of access for the number of poor and nonwhite women who turn to infertility treatments, Greil said. Research in Massachusetts, which has a health care system similar to the one that's now being adopted nationally, suggests that "even when health insurance covers in-vitro fertilization, women of color and poorer women were still less likely to get treatment," he said.

The message, Greil said, is: "There's more going on than just access."

**More information:** For more about [infertility](#), visit the U.S. National Library of Medicine.

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