

Experiences of 2S/LGBTQIA+ Couples with Medically Assisted Reproduction



What this research is about

One-fifth of couples who seek medically assisted reproduction (MAR) identify as two-spirit, lesbian, gay, bisexual, transgender, queer, intersex, and/or asexual (2S/LGBTQIA+). However, these services are often based on medical definitions of infertility that do not account for 2S/LGBTQIA+ couples' inability to conceive. Though research has looked at the impact of MAR on the lives of straight and cisgender people, little has been done to explore the 2S/LGBTQIA+ experiences of this process.

Historically, 2S/LGBTQIA+ people have been mistreated by healthcare systems, such as governments' responses to the AIDS epidemic in the early 1980s. The development of MAR technologies also excluded 2S/LGBTQIA+ people. Previous studies suggest that 2S/LGBTQIA+ people seeking MAR face various unique barriers, including social norms based on a heterosexual model, a lack of tailored services, and discrimination. This study aims to provide a nuanced look at the experiences of 2S/LGBTQIA+ couples actively undergoing MAR procedures.

What the researchers did

This research was part of the broader JOURNEY Study, which investigated the psychological adaptation of couples undergoing MAR. Participants were over the age of 18, within six months of their first visit to a fertility clinic, and fluent in either French or English. Both partners were instructed to complete an online survey independently, without talking to each other. The researchers recruited potential participants through various fertility clinics in Canada. This process included Facebook advertisements and postings on infertility-related association websites.

What you need to know

This study focuses on the experiences of 2S/LGBTQIA+ couples seeking medically assisted reproduction (MAR). It highlights the unique challenges faced by 2S/LGBTQIA+ couples unable to conceive due to their relationship status. The researchers asked 2S/LGBTQIA+ couples an open-ended question about how the process of seeking MAR impacted their lives. The researchers found that a lack of inclusive care, financial burdens, few social models to follow, lack of supports, and emotional tolls were key features of the 2S/LGBTQIA+ experiences of MAR. They conclude that there is urgent need for targeted research and reproductive healthcare reforms to better accommodate 2S/LGBTQIA+ couples.

If participants self-identified as 2S/LGBTQIA+, they were asked an open-ended question at the end of the survey. This question asked about their experiences in seeking MAR, and how the process impacted their life. A total of 78 2S/LGBTQIA+ participants provided responses to this question. Most of these participants identified as women, lesbians, and white.

The researchers used thematic analysis to identify themes connecting the responses. They also looked at how experiences might differ between partners.

What the researchers found

The researchers found that 2S/LGBTQIA+ couples experience many barriers in the process of seeking MAR. Consistent with past research, the 2S/LGBTQIA+ couples in this study often found themselves confronted by language and terminology based on a heterosexual model, misunderstandings

of social infertility (i.e., an inability to have children due to social reasons, rather than medical reasons), and biased social norms surrounding gender and relationships. Medical and social services were often not tailored to their unique needs. Moreover, the partner who was not carrying the baby was often neglected by clinic staff during the MAR process.

Many aspects of the process triggered gender dysphoria (a sense of unease and distress about one's gender identity being different from the sex assigned at birth), stress, and disappointment. This was compounded by the emotional toll of needing to repeatedly come out about their gender identity and/or sexual orientation. Additional factors, including social stigma, microaggressions from family and friends, and the financial costs of MAR, worsened the stress. These negative emotions not only impacted the participants but also strained their relationships with their partners.

However, some participants expressed gratitude that the fertility clinics they went to welcomed 2S/LGBTQIA+ couples. Others also noted that supportive friends and family made it much easier to navigate the MAR process. The fact that the experiences of so many participants resulted in such interconnected themes indicates a complex and deeply rooted social and institutional problem.

How you can use this research

This research can inform researchers, healthcare providers, fertility clinics, policymakers, educators, and support networks. For future research, the researchers suggest more detailed follow-up, to better understand consequences of the barriers identified and uncover new insights. The researchers also suggest adopting an intersectional lens, as other identities such as race and socioeconomic status can also impact fertility. While this study is an important step, we must continue to advocate for and deepen our understanding of the 2S/LGBTQIA+ community, particularly in the context of MAR.

About the researchers

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Citation

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Research Snapshot by Dawn Abraham

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