



Letter to Editor

Asian Pacific Journal of Reproduction

Journal homepage: <https://journals.lww.com/apjr/>

doi: 10.4103/apjr.apjr_14_25

Countering stigma and misconceptions associated with infertility

Saurabh R. Shrivastava^{1✉}, Prateek S. Bobhate², Nancy Nair³¹Department of Community Medicine, Datta Meghe Medical College, Off-campus Centre of Datta Meghe Institute of Higher Education and Research, Hingna Road, Wanadongri, Nagpur, Maharashtra, India²Department of Community Medicine, All India Institute of Medical Sciences, Vijaypur, Jammu, India³Department of Embryology, School of Allied Health Sciences, Datta Meghe Institute of Higher Education and Research, Hingna Road, Wanadongri, Nagpur, Maharashtra, India

Dear Editor,

Infertility refers to the inability to conceive after one year of regular unprotected intercourse, and as per the available estimates, close to 50 million couples are being affected worldwide[1]. In many communities, infertility is regarded as a sign of personal failure, where individuals are blamed for their inability to conceive[2]. It is not an unusual practice that people with infertility are excluded from social rituals like baby showers or functions related to parenthood[2]. Women are generally considered solely responsible for the condition, while in reality, it can equally affect men[2]. On the other hand, men experiencing infertility are subjected to mockery for a reduced sense of masculinity[3]. In many communities and cultures, infertility is viewed as a genuine reason for relationship strain and eventually divorce[2]. Amid the fear that people will judge them, many couples hide their infertility struggles, and this further plays an important role in increasing stigma[2,3]. Further, in some organizations, employers might not consider infertile persons for promotion under the assumption that they do not have many financial responsibilities[3].

To counter the impact of infertility-related stigma, there is an immense need to implement a comprehensive package of public health measures[1,4–8]. The primary strategy is to organize media campaigns using different modes of mass communication to educate the general population using culturally-sensitive information about infertility, predisposing factors, and the role of both partners in defining reproductive health[4]. At the community level, outreach awareness programs should be organized to provide accurate information about infertility, including treatment options, and specific sociocultural stigma and misconceptions[1,4]. Another strategy would be to create peer support groups, which will give a platform for individuals to share their feelings, reduce feelings of isolation, and extend emotional support to each other[5]. There is a definite need to introduce education about reproductive health in

school settings, which not only improves awareness about infertility from an early age but even makes them understand about medical causes of infertility and available treatment options[6].

Healthcare professionals should be trained to address infertility concerns in a non-judgmental and supportive manner, and they must remain sensitive to the emotional and cultural aspects of infertility[7]. In addition, healthcare professionals should be encouraged to create media content that can dispel common myths and misconceptions about infertility by providing clear and accurate information[2]. There is a definite need to improve accessibility to fertility clinics and available treatment options, and this can be ensured by integrating these services into primary healthcare systems[1]. To minimize the financial load on people, infertility treatment must be incorporated into national and private health insurance policies, as this will make care more accessible and affordable[8].

In conclusion, infertility is a public health priority considering the stigma and misinformation that has been circulating about this condition which tends to have long-lasting consequences. The need of the hour is to implement a holistic package of interventions that are aimed towards changing norms of the society, improving access to care, and encouraging people to seek help early to ensure better outcomes.

✉To whom correspondence may be addressed. E-mail: drshrishri2008@gmail.com

This is an open access article distributed under the terms of the Creative Commons Attribution-Non Commercial-Share Alike 4.0 License, which allows others to remix, tweak and build upon the work non-commercially, as long as the author is credited and the new creations are licensed under the identical terms.

For reprints contact: reprints@medknow.com

©2025 Asian Pacific Journal of Reproduction Produced by Wolters Kluwer- Medknow.

How to cite this article: Shrivastava SR, Bobhate PS, Nair N. Countering stigma and misconceptions associated with infertility. *Asian Pac J Reprod* 2025; 14(2): 95-96.

Article history: Received: 17 January 2025; Revision: 28 February 2025; Accepted: 3 March 2025; Available online: 10 March 2025

Conflict of interest statement

The authors declare no competing interests.

Funding

The study receives no extramural funding.

Authors' contributions

Saurabh R. Shrivastava contributed to the conception or design and drafting of the work, approval of the final version of the manuscript, and agreed for all aspects of the work. Prateek S. Bobhate contributed to the literature review, revision of the manuscript for important intellectual content, approval of the final version of the manuscript, and agreed for all aspects of the work. Nancy Nair contributed to the literature review, revision of the manuscript for important intellectual content, approval of the final version of the manuscript, and agreed for all aspects of the work.

Publisher's Note

The Publisher of the *Journal* remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

References

- [1] World Health Organization. *Infertility–Key facts; 2024*. [Online] Available from: <https://www.who.int/news-room/fact-sheets/detail/infertility> [Accessed 17 January 2025].
- [2] Taebe M, Kariman N, Montazeri A, Alavi Majd H. Infertility stigma: A qualitative study on feelings and experiences of infertile women. *Int J Fertil Steril* 2021; **15**: 189-196.
- [3] De Jonge CJ, Gellatly SA, Vazquez-Levin MH, Barratt CLR, Rautakallio-Hokkanen S. Male attitudes towards infertility: Results from a global questionnaire. *World J Mens Health* 2023; **41**: 204-214.
- [4] Iacoella F, Gassmann F, Tirivayi N. Which communication technology is effective for promoting reproductive health? Television, radio, and mobile phones in sub-Saharan Africa. *PLoS One* 2022; **17**: e0272501.
- [5] Hilevych Y, Claes T. Peer-to-peer counselling and emotional guidance on infertility in Britain and Belgium (1970s-1980s). *Med Humanit* 2023; **49**: 214-224.
- [6] Martins MV, Koert E, Sylvest R, Maeda E, Moura-Ramos M, Hammarberg K, et al. Fertility education: Recommendations for developing and implementing tools to improve fertility literacy. *Hum Reprod* 2024; **39**: 293-302.
- [7] Petra T, Wischmann T, Mayer-Lewis B. Evaluation of infertility counselling in Germany. *Arch Gynecol Obstet* 2024; **309**: 1065-1073.
- [8] Kawwass JF, Penzias AS, Adashi EY. Fertility-a human right worthy of mandated insurance coverage: The evolution, limitations, and future of access to care. *Fertil Steril* 2021; **115**: 29-42.

Edited by Lin LY, Lei Y