

Having a live birth through Medically Assisted Reproduction: a socially stratified perspective

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Prior work has highlighted marked social disparities in births after Medically Assisted Reproduction (MAR) as socio-economically advantaged couples are, on average, considerably more likely to use MAR treatments to conceive. Recent research suggests multiple mechanisms – such as the (un)affordability of the MAR treatments and geographic proximity to infertility clinics – are likely to be involved in explaining this association, yet the extent to which these differences are due to barriers in accessing MAR or lower demands for MAR treatments amongst less socio-economically advantaged couples is still not fully understood. An aspect which has so far been overlooked in this emerging area of work is the fact that social disparities in MAR births could emerge not only before but also after accessing MAR treatments. For example, the live birth rate after MAR could be higher for more advantaged individuals who might be able to afford a higher number of treatments and to continue the treatments if the subsidized ones do not result in a live birth. In this paper, using data from Finnish administrative registers covering all childless women in the Finnish population in 1995 who underwent MAR treatments between 1995-2015, we explore for the first time the association between undergoing MAR treatments and having a live birth by socio-economic status. Preliminary results show large inequalities in the probability of having a live birth throughout the MAR process between more and less advantaged women. The results suggest that a non-negligible portion of the social inequalities in MAR births could emerge throughout the MAR process.