

Egg freezing has little to do with inflexible workplaces

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As [June Carbone](#) and [Naomi Cahn](#) have put it, ambitious women currently engage 'in what amounts to a reproductive game of chicken'. Delaying childbearing has many advantages, giving a woman time to both establish themselves in her career and secure a stable and comfortable home life, but at the same time, it increases the risk that she will not be able to conceive at all. Does egg freezing take the gamble out of this risk-benefit calculation, and finally enable women to 'have it all'? Or does egg freezing individualise the problem of a mismatch between when women feel ready to have children and their declining fertility? Should feminists celebrate the widening of women's 'window of opportunity' for childbearing, or should they be concerned that egg freezing pushes women into undergoing burdensome and costly medical procedures?

It has been argued that egg freezing is an invasive medical 'solution' for an essentially social problem. Rather than expecting women to freeze their eggs so that they can concentrate on their careers until their late thirties, critics maintain that would be preferable to make it easier for women to have children when they are younger. Family-friendly workplaces are, on this view, a better, collective solution to age-related fertility decline than women undergoing hormone injections and surgical egg retrieval, and then paying for extended storage. If women's options are constrained by structural conditions that make it difficult to combine career progression and young motherhood, it is those structural conditions that should be changed, rather than marketing to better-off women an expensive and physically invasive way to work around those conditions.

There is, however, an interesting mismatch between this criticism of egg freezing and the reasons women give for freezing their eggs. Most women do not freeze their eggs because their workplace is insufficiently flexible; much more commonly women are freezing their eggs because they do not have a (suitable) partner, or they have a partner who claims to be not ready for, or sure about, fatherhood. Similarly, in studies of why women delay childbearing, hardly any cite their employers' attitude or conditions at work. Rather in over 90 per cent of cases, it is because they do not have a suitable partner. If egg freezing is a medical solution to a social problem, the social problem may have less to do with employers' attitudes to younger motherhood, and more to do with those of men.

While egg freezing might be able to level the playing field for career-focussed and ambitious men and women, it also

potentially widens the class divide. Egg freezing is expensive and only ever likely to be used by women who want to combine (comparatively) high-income employment with motherhood. For unemployed women, or women in low-status and low-income employment, there are seldom many reasons to delay childbearing. It is already the case that richer women have children later than poorer women, but egg freezing has the potential to make the gulf between women's experience of motherhood, depending on their social class, even wider.

A more persuasive way in which egg freezing might be said to be part of a trend towards medicalization is that it massively expands the potential pool of candidates for private infertility treatment. Until recently, women would make use of fertility services only when they were unable otherwise to conceive. Fertility treatment is gruelling and stressful, and people undergo it only because they feel they have no other choice. In contrast, if clinics can also market elective fertility services to fertile women, the market is potentially huge. All pre-menopausal women become potential consumers of fertility treatment.

There are potentially huge profits to be made from selling an invasive medical treatment to retrieve eggs from women who are unlikely to ever actually use their frozen eggs. It is therefore critically important that women have all of the information they need in order to give fully informed consent. It is also important that clinics do not oversell this technology, as the 'ultimate family planning technology', capable of 'stopping the biological clock', 'cheating biology' and 'preserving a woman's fertility indefinitely'. Egg freezing does not preserve a woman's fertility, which will continue to decline. Instead, while it might increase the chance of successful IVF treatment in one's forties, IVF fails more frequently than it succeeds.

It is therefore crucially important that women understand that there are no guarantees that egg freezing will enable them to have a baby later in life. There is a danger that women with frozen eggs may be lulled into a false sense of security, and further delay childbearing as a result, making their future childlessness more, rather than less likely. As well as the immediate health risks and discomfort of ovarian stimulation and egg retrieval, women also need clear and frank information about some of the difficult decisions they will face in the future.

Egg freezing is commonly compared to taking out insurance: you may never need it, but it gives you peace of mind to know that it is there. But few of us would take out an insurance policy costing at least £4000 when the chance of it paying out were as slim as the chance of success with frozen eggs and IVF. Egg freezing is an insurance policy which will provide peace of mind only with a hefty injection of hope and optimism.

Launch of pop-up shop to raise public awareness and debate on egg freezing and the future

In response to growing public interest in egg freezing, a fictional beauty brand called Timeless will 'pop-up' in London's Old Street from 29 February to 5 March 2016. The project has been designed and led by UK-based creative consultancy [The Liminal Space](#) with support from the [Wellcome Trust](#) and expert advice and research from LSE. The store will explore how social egg freezing may impact the world of work, relationships and wider society. The pop-up will feature a range of provocative beauty products including a '3-Step Solution for egg freezing', a bespoke perfume line called 'Eau so Pressured', and a range of age defying serums that inform about fertility decline. It will also feature a short film and a programme of live talks by leading experts in reproductive medicine and gender politics, and women with first hand experience of egg freezing.



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Notes:

- *This post gives the views of its author, not the position of LSE Business Review or the London School of Economics.*

- *Featured image credit: [Anna & Michal CC-BY-SA-2.0](#) Photo of fictitious products: [The Liminal Space](#)*
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