

## ***Hope in a Freezer: The 21st Century Pandora's Box***

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Pregnancy, Conception, Bioethics

### INTRODUCTION

Pregnancy has become a disease.

Saying as much is hard to stomach, harder even to conceive. But in the current climate of political wrangling over birth control and further contraception,<sup>1</sup> in the restrictive aerospace of reproductive technologies,<sup>2</sup> and in a workplace that maintains imbalances in gender inequities,<sup>3</sup> such a conclusion seems unquestionable, if not altogether tame.

### ANALYSIS

Consider egg freezing. Originally developed for the storage of oocytes under the duress of certain ovarian cancers,<sup>4</sup> the procedure has transfigured into a newfangled panacea against the tantrum tornados that motherhood can birth. Companies like Apple and Facebook, as well as numerous other unofficial law and banking practices, have offered these children-vs-career quashing services as part of their employment packages.<sup>56</sup>

But in a company such as Facebook that employs 70% males<sup>7</sup> and whose board of director is comprised of only two females out of nine, the unquestionable question creeps to the surface: who defines these needs, how are they tested, and how do they relate to the institution's culture, end outcomes, and the women who work there, who don't, and who want to?

Answering these questions is necessary, particularly when it comes to weighing otherwise shaky, still largely experimental procedures such as egg freezing. Doing so also realizes that decisions aren't made in a vacuum; social, political, and environmental factors affect a women's choice in pursuing such an alternative.

Caveats are required, then. First such large corporations may be waltzing along with the North American pattern of starting families later, generally around age 30.<sup>8</sup> As trailblazing early adopters, Apple and Facebook may be both redefining the functionality and narrative of traditional families. If women are postponing childrearing (the rate that woman are having a child in their thirties has quadrupled since 1970)<sup>9</sup>, and if fecundity decreases as the biological window closes (a woman's fertility drops from 86% at age twenty, 52% at thirty-five, and 36% at forty)<sup>10</sup>, the harvesting of healthy, fertile eggs that can be used later may be seen as a godsend against biological mishaps.

Moreover, lives can be built around such policies. By deferring maternity, women can disrupt hypercompetitive professionalism. Rather than rearing their children, they have the time to pursue a Candide-esque cultivation of their own garden. Financial stability can be ensured. A devoted partner can be discovered.

And by encouraging such employment bundles that may go so far to entice generations of younger females, women can not only smash the glass ceiling, but stand on the roof above it.

Yet with glass on the floor, ethical considerations can – and do – bleed into the cracks. Marketed in a plutocratic lens, egg freezing is being couched as treatment. Systems do not need to change; women do. Such a myopic perspective views pregnancy as a condition requiring a cure rather than a modification of workplace behaviours. For example: instead of foregoing motherhood and being blind to the asymmetrical penalty of fatherhood, substantive perks can be offered like on-site childcare or paid maternity leave.

Notably, Facebook offers paid maternity leave, subsidized daycare, and nursing rooms in addition to the new reproductive technologies.<sup>11</sup> But this marginal gain in a hodgepodge of services is scarcely something praiseworthy. Hope is not found in a freezer. Coercion is. Consider the options: the generous wealth of possibilities, including egg freezing, or raising a family during one's peak professional wherewithal. A woman who does not choose the former could be viewed as less serious about their employment. Fewer opportunities could result. Stigma may promulgate. And emotional pressures may influence the family dynamics at home, further worsening the already battered environment.

Still, the reverse option is not necessarily better. If a woman has children later in life – a 40 year old using her 20 year old eggs for example – they will still face all the challenges maternity brings with it (which says nothing of the difficulty of an older woman trying to bounce back from pregnancy compared to someone younger). All that will be different is their experience, standing, relationships, and pay grade. The overall climate wouldn't have revolutionized. Rest would still be required. Careers would still halt. Nothing, it seems, would have changed dramatically except for the passage of time.

But as it passes and as the age piles on atop of it, the little hope of a quieter, more stable life as a result of egg freezing becomes a Pandora's Box. At best, it is parochial; at worst, catastrophically misleading.

The current state of research is hardly comprehensive. Lifting the experimental label in 2012, the American Society of Reproductive Medicine cited that "Data on the safety, efficacy, cost-effectiveness and emotional risks of elective oocyte cryopreservation are insufficient to recommend elective oocyte cryopreservation."<sup>12</sup> The lack of any guarantee – whether in the long term effects of preservation or in the failure rate (flash freezing methods known as vitrification have a 77 percent failure rate among women age 30, and 91 percent at age 40)<sup>12</sup> – skews the consent that can be developed between physician and patient. A physician cannot inform the patient about the certainties of the procedure because they are not known.

While such unknowns are stark enough, it is also worth mentioning that the power dynamics have changed altogether. It is not a physician who is suggesting a procedure, but a woman asking for the medicalization of their body. This warps any form of consent given. A physician is not providing what could be the best alternative; it is the woman who has already surmised the conclusion based on social conditions beyond the doctor's direct control.

Of course, other considerations precipitate: the divide between women of different cultures, races, and social status may be exacerbated by those who can afford the procedures;<sup>13</sup> the exercising of a woman's autonomy in a sphere where she is choosing between the best of numerous bad options; the corporate culture that is influencing a decision as though it were isolated from all others, rather than one element of a greater system.

## CONCLUSION

Forgetting all these disparate yet connected fragments is to forget a women's relation to them. A woman, like a man, is not just an employee. Yet by offering egg freezing as the pinnacle of corporate benefits, liberation

is chained to medicalization, not with possible labour strategies that integrate the intricacies of men and women alike. Ethical concerns suggest that this technology-centric mentality is short-sighted and leads to further questions. Problems create problems, and egg freezing simply delays trying to find an answer.

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<sup>2</sup> Raymond, J. *Women as wombs: Reproductive technologies and the battle over women's freedom*. Harper San Francisco. 1993.

<sup>3</sup> Acker, J. Inequality regimes: Gender, class, and race in organizations. *Gender and Society*. 2006. 20, 441-464.

<sup>4</sup> Wang, C et al. Optimized protocol for cryopreservation of human eggs improves developmental competence and implantation of resulting embryos. *Journal of Ovarian Research*. 2013. 6, 15-21.

<sup>5</sup> Vincent, J. Apple and Facebook offer egg-freezing services to hang on to talented female employees. *The Independent*. <<http://www.independent.co.uk/life-style/gadgets-and-tech/facebook-and-apple-offer-eggfreezing-services-to-hang-on-to-talented-female-employees-9795580.html>>

<sup>6</sup> Tran, M. Apple and Facebook offer to freeze eggs for female employees. *The Guardian*. <<http://www.theguardian.com/technology/2014/oct/15/apple-facebook-offer-freeze-eggs-female-employees>>

<sup>7</sup> Hawver, M. Apple big on hiring white men, not so much women or minorities. *Tech Times*. <<http://www.techtimes.com/articles/12934/20140813/apple-white-mans-employer-tech-titan.htm>>

<sup>8</sup> Bingham, J. Average age of women giving birth now nearly thirty. *The Telegraph*. <<http://www.telegraph.co.uk/women/mother-tongue/10380260/Average-age-of-women-giving-birth-now-nearly-30.html>>

<sup>9</sup> Mohapatra, S. Using egg freezing to extend the biological clock: Fertility insurance or false hope. *Harvard Law and Policy Review*. 2013. 8, 380-410.

<sup>10</sup> Bailey, R. The ethics of egg freezing: What's wrong with women resetting their biological clocks. *Reason.com*. <<http://reason.com/archives/2012/05/22/the-ethics-of-freezing-eggs>>

<sup>11</sup> Shontell, A. Biological moms get preferential treatment over parents who adopt at companies like Yahoo and Google. *Business Insider*. <<http://www.businessinsider.com/maternity-paternity-leave-policies-at-google-facebook-yahoo-twitter-microsoft-2013-8>>

<sup>12</sup> Zoll, M. Will egg freezing liberate women. *Mercatornet*. <[http://www.mercatornet.com/articles/view/will\\_egg\\_freezing\\_liberate\\_women](http://www.mercatornet.com/articles/view/will_egg_freezing_liberate_women)>

<sup>13</sup> Black, D et al. Gender wage disparities among the highly educated. *The Journal of Human Resources*. 2008. 43, 630-659.