INTRODUCTION

Infertility is projected as the new/latest ‘disease’ and provides the reason for expensive treatment for an otherwise healthy body. It has been seen that even though both men and women are affected by infertility ‘it is often women, particularly in developing countries, that bear the sole blame for childless marriages.’ The stigma that is connected with infertile women in Indian society force women to take help of Assisted Reproductive Technologies (ARTs) irrespective of the health risk and cost that comes from the use of such technology. Hence infertile couples found new rays of hope from the time when the world’s first test-tube baby came into this world. It has been seen that subsequently, ‘reproductive technology has become a lucrative industry. Women are viewed as producers of babies and treated as consumers in this market. Infertility is no more a ‘private matter’; it has become a ‘public matter’ and has largely been medicalised.’

It has been found that available literature presents various consequences of infertility like ‘anxiety, depression, lowered life satisfaction, guilt, helplessness, reduced job performance, marital problems, dissolution of marriage and abandonment, economic hardship, loss of social status, social stigma, isolation and physical violence etc.’ This paper is an attempt to understand the infertility in the context of Indian society and the impact of assisted reproductive technologies on women.

Methodology and Data Sources
The data for this paper have been collected from various secondary sources like books, journals, articles published...
in various newspapers, government reports, unpublished research works and other internet sources. This paper mainly follows the descriptive-analytical method of study.

**UNDERSTANDING INFERTILITY**

Infertility can be analysed from a variety of perspectives. It can be seen as a disease from a medical science perspective that can be cured through treatment. In a society, it is stigmatised and women born the burden of the stigma, although man and woman both can be the reason behind infertility. Infertility deprives a couple not only of personal happiness for not being able to have a child, but it has also social consequences, particularly in developing countries, and it deprives couples of societal happiness too. Indian peoples have been experiencing various kinds of social traditions and such traditions are linked with infertility too.

“In having a child is the couple’s decision, without outside interference. However, in most developing countries, infertility is not a personal problem for the couple. The parents, relatives, neighbours and probably the entire community around the infertile couple are anxious and concerned.”

“In infertility is projected as the new/latest ‘disease’ and provides the reason for expensive treatment for an otherwise healthy body. Also, IVF is incorrectly publicized as an established and successful therapy rather than as an experimental and largely ‘research and development-oriented business’.

Assisted reproductive technologies can be considered as attempts at a ‘quick technological fix’ which are often applied without ameliorating the underlying problem of infertility. Apart from that, the failure to address underlying macro-epidemiological causes of infertility like environmental pollution, workplace, toxicity, iatrogenic factors and untreated or undiagnosed pelvic inflammatory diseases indicates the politics behind scientific research.

**ASSISTED REPRODUCTIVE TECHNOLOGY**

The term “Assisted Reproductive Technologies” (ARTs) encompasses various procedures, ranging from the relatively simple intrauterine insemination (IUI) to variants of in-vitro fertilisation and embryo transfer (IVF-ET), also referred to as IVF and more commonly known as “test-tube baby technology.” It has been seen that such technologies have been developing by leaps and bounds since the latter half of the 20th century. These technologies have also brought changes to how society views issues like pregnancy, reproduction and motherhood. Infertile couples of both developed and developing countries have been benefited from such technologies. Moreover, the growing economic conditions also help such couples to use ARTs and afford such sophisticated treatments. Therefore, a rise in terms of clinics that provides such treatments can also be seen. India has probably recorded the biggest growth in ART centres and the number of ART cycles being performed in our country has steadily risen over the last decade.

In July 1987, the first documented IVF baby came to this world, named Louise Brown. In October 1987 itself, Subhas Mukherjee from Kolkata declared the birth of the first IVF baby of India and the second one in the world, named Durga, but his claim was rejected as the case was not scientifically documented. The first scientifically documented IVF baby of India, Harsha Chawla, was born in 1986 in a collaborative government research programme of the National Institute for Research in Reproduction (NIRR), the Indian Council of Medical Research’s (ICMR) and the King Edward Memorial Hospital, a municipal hospital in Mumbai.

**MOTHERHOOD AND SOCIETAL PRESSURE**

Motherhood is seen as an integral part of a woman’s life in Indian societies. Women are always seen as caregivers and the bearing and rearing of children are considered to be their responsibility. The societal norms are constructed in such a way that to be a perfect woman one needs to be fertile enough to give birth to a baby. In Indian society, a newlywed couple is put under tremendous pressure to welcome a baby to carry the family name forward. This practice is slowly fading in the present day. Infertility or inability to conceive a child is a stigma; women are ridiculed and put under a lot of pressure to adopt any means to have a biological child. Women who are unable to conceive a child are refrained from participating in any auspicious occasions. Motherhood is seen as an essence of a woman in our societies. It is internalised by women to such an extent that the women feel guilty for not being able to conceive. Women and men both can be the reason behind infertility. But it is the woman who has to take the whole burden and guilt of being infertile. Several myths associated with infertility disturb and humiliates the life of the woman in Indian society. It is believed by many people that infertility is caused by past misdeeds; it is a curse or punishment given by God.

In Indian societies, infertility is largely associated with women. The social pressure a woman faces for not being able to conceive is tremendous. The women are isolated, abused and humiliated. They are often not allowed to participate in auspicious ceremonies. The stigma associated with infertility is such that sometimes the women face physical violence and abused by their husbands and the in-law’s family. Even sometimes the husband disowns the wife for not being able to give birth and remarries. The social pressure not only im-
pacts the mental and emotional health of the couple but also on their social life. This pressure makes them use every possible way to have a child. The poor and the less educated section of people initially seek help from ayurvedic or homoeopathic remedies as these are comparatively cheap. If these measures fail then they took help from the allopathic doctors. Assisted Reproductive Technologies are very costly and it takes a long period to show results.

**IMPACT OF ASSISTED REPRODUCTIVE TECHNOLOGY ON THE LIVES OF WOMEN**

Talking about infertility is still a taboo in India; therefore, the medical measure to deal with this problem is also less talked about. But things are gradually changing with the advancement of science and technology and the spread of education among the people. The popularity of Assisted Reproductive Technology is increasing as people want to have a biological child rather than having an adopted child. The impact of these Assisted Reproductive Technologies on the lives of women is manifold. These kinds of treatments have some health-related side effects. The whole process of ART treatment is very long and therefore needs patience on the part of the patients. Most women find it “mentally exhausting”, “tiring” and “frustrating”. The work-life, as well as the social life of the couples, get disrupted because of the “frequent visits to the clinic”. The ART clinics are mostly situated in the big cities; therefore, the patients from other cities need to travel a long distance to get the treatment. Infertility treatment is very expensive, so a lot of families cannot even afford it. In India, women are mostly blamed for infertility and in many instances, the cost of the treatment is borne by the family of the girl.

**CONCLUSION**

Motherhood is seen as a great responsibility on the part of women in Indian societies. The role of women has been largely confined to bearing and rearing children for very long. Although with the advancement of education women have become an active participant in all the fields be it economics, politics, business, health or sports; even today the significance of a woman’s life is associated with the ability to give birth. Women without children are looked down upon in our societies. It is mostly the women who bear the blame for infertility. They are excluded from auspicious ceremonies, abused, humiliated and often threatened that their husbands will remarry. The stigma associated with infertility is such that the women are ready to go to any extent to have a biological child. This is one of the reasons behind mushrooming growth of ART clinics in the country. The treatment for ARTs is very expensive and painful for some women. The medication and treatment sometimes lead to other health issues. But women should have the right to know about the repercussions of taking help from Assisted Reproductive Technology before going through such treatment. ART service providers should inform them about the pros and cons of taking the help of such technologies. Moreover, societies should be liberal enough to not stigmatise women who are incapable to conceive a baby. Apart from this adoption should be considered as a viable alternative to wiping out the soreness of childlessness.

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**REFERENCES**