



**fertility
matters**
@work.



The Impact of Fertility Challenges at Work: International Insights

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Introduction

In early 2025, three organisations came together to conduct groundbreaking research exploring workplace experiences for those undergoing fertility treatment: Fertility Matters at Work, a UK-based organisation focusing on improving workplace support for fertility patients, Ferring Pharmaceuticals, as project lead and funder, and This Can Happen, who conducted the research and provided insights.

The research was first conducted in the UK, then extended to four further countries—Australia, France, Japan and Poland—working in close collaboration with patient advocacy groups within each nation, including The Pink Elephants Support Network in Australia, Collectif BAMP in France, Fine and Forecia in Japan, and Nasz Bocian in Poland. This ensured findings reached local employees and employers in each country and reflected diverse experiences and cultural contexts.

The initial report, published in June 2025, *"Is Your Workplace Ready to Support Fertility Journeys?"* was based on the UK data and examined latest findings, lived experiences, and practical solutions to foster fertility-inclusive workplace cultures in the UK.¹


Following the UK publication, statistics from this report have been cited by Members of the UK Parliament to inform lawmakers about the national climate on fertility support in the workplace.² This aimed to review gaps in existing policies and protocols, strengthen inclusion strategies for employees undertaking fertility treatment, and encourage employers to prioritise these initiatives using data-driven insights and the lived experiences of employees who are completing or have completed their fertility journeys.


The intention of this report is to build on this foundation with an international comparative analysis that examines the bigger picture in the context of workplace support. It captures the lived experiences of both employees and employers, taking into account the cultural nuances and complexities of each country, to provide real insights and practical recommendations.

Why is this research so important?


Setting the global context for fertility challenges, we know that fertility challenges can affect 1 in 6 people of reproductive age globally.³ With assisted reproduction therapy, including IVF, egg freezing and donor conception, already accounting for up to 12% of births in some countries,^{4–7} employee expectations are rapidly shifting.

 The UK (England and Wales) had a total fertility rate of 1.41 children per woman in 2024⁸

 Japan had a total fertility rate of 1.15 children per woman in 2024⁹

 France had a total fertility rate of 1.62 children per woman in 2024¹⁰

 Poland had a total fertility rate of 1.099 children per woman in 2024¹¹

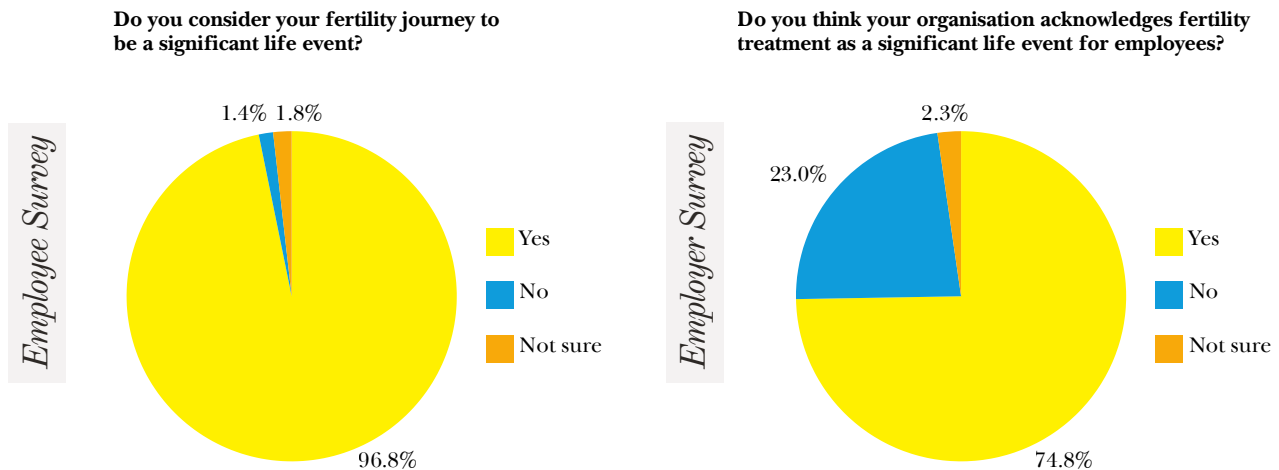
 Australia had a total fertility rate of 1.481 children per woman in 2024¹²

All five countries are significantly below the replacement rate of 2.1 children per woman needed to maintain population levels without immigration¹³, with Poland having the lowest fertility rate and France the highest among the group.



Over the past four years, Fertility Matters at Work has identified the need for greater awareness and support for those facing the challenges of fertility treatment whilst working in the UK, and has provided guidance and training to over 70 organisations, many of whom are now accredited as “Fertility Friendly Employers”, including Ferring Pharmaceuticals. However, this isn't just a topic relevant to the UK: it reflects an experience that fertility patients across the globe face within their workplaces. This is the reason behind the research project being extended to four other international markets, to gain an understanding of the challenges faced.

These charts highlight the misalignment and two differing perspectives between employees and employers about how fertility treatment is perceived:



A key goal is to bridge the gap between employees' lived experiences of fertility treatment and employers' awareness of these challenges, whilst demonstrating the business case for implementing positive and inclusive workplace changes.

“Trwa to już 8 lat, więc to duża część mojego życia. Wszystko planuję na ostatnią chwilę, bo może akurat będę w ciąży albo będę miała wizytę u lekarza. Do tego, kiedy transfer się nie udaje lub są inne przeciwności biorę to do siebie i czasami czuję się winna, gorsza.”

“It has been going on for 8 years now, so it's a large part of my life. I plan everything at the last minute, because maybe I'll be pregnant, or maybe I'll have another medical appointment. And when a transfer fails or something goes wrong, I tend to blame myself—sometimes I feel guilty, or simply not good enough.” - Polish Employee

Methodology

The research project was undertaken across five countries (Australia, France, Japan, Poland, and the UK) to deepen understanding and support workplaces and employees navigating the complex challenges of fertility treatment. The work was conducted by This Can Happen in partnership with Fertility Matters at Work and Ferring Pharmaceuticals.

The research activities were designed to create an international tracker to measure and understand the current state of fertility awareness and workplace support, informed by employees' lived experiences and outcomes.

Stage 1: Design Phase

The research was designed to establish a tracking measure and associated reporting framework to understand the state of workplace support for employees experiencing fertility challenges. The methodology included two questionnaires:

- A questionnaire for employees with lived experience of fertility treatment whilst working
- A questionnaire for HR, wellbeing, and occupational health leads responsible for supporting employees and shaping organisational messaging and culture around fertility treatment

Respondents from each of the five countries were sourced primarily through organic recruitment via social media engagement and snowball sampling within the partners' networks. Where response rates were lower in Australia and Japan, a specialist panel partner was engaged to achieve minimum sample requirements.

Local market patient advocacy organisations and key stakeholders were engaged to support communication of the research, questionnaire design, market adaptation, and translation.

Stage 2: Data Collection

Online questionnaires were used to collect feedback from employees and workplaces within the five countries:

- UK: March/April 2025
- Australia, France, Japan, Poland: August-October 2025

Stage 3: Analysis and Reporting

Data was collated by This Can Happen and analysed by Fertility Matters at Work, with findings reviewed and discussed with representatives from each local market to ensure cultural context and nuances were appropriately reflected. These insights were synthesised to produce this international report, highlighting both universal themes and country-specific considerations.

Research groups sample sizes

Employer					
Japan	Poland	France	Australia	UK	Total
134	137	105	105	158	639
Employee					
628	170	965	301	966	3030

Survey Demographics

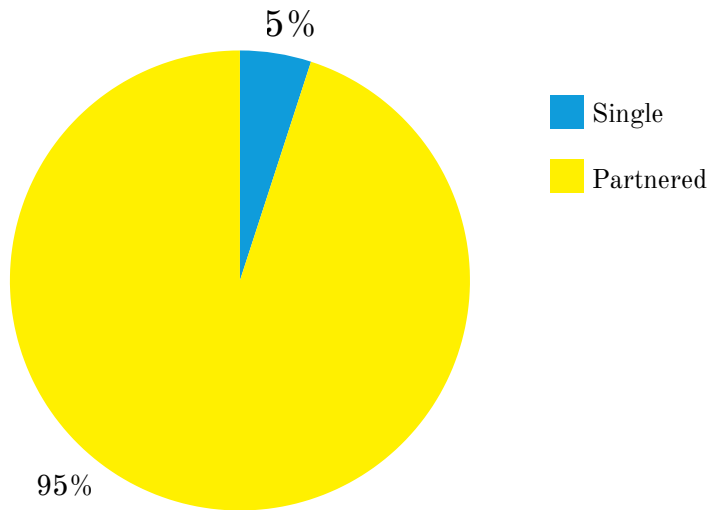
The majority of respondents were of working age, with 95% partnered and 5% single, with most falling within the 25-34 and 35-49 age groups, reflecting the typical age range for individuals undergoing fertility treatment. Interestingly, Japan had a larger proportion of respondents over 50 years of age compared to other markets, suggesting that some Japanese participants may have experienced fertility treatment some time ago.

The respondent breakdown by gender was 85% female, 13% male, and 2% preferring not to say. Australia and Japan showed a notably higher proportion of male respondents (39% and 37% respectively), significantly higher than other markets. This serves as an important reminder that fertility treatment is not solely a women's health issue but impacts men too—it is fundamentally a people issue that affects individuals and couples regardless of gender.

However, it is important to acknowledge that, despite fertility being a shared concern, the nature of fertility treatment means that the physical demands often fall disproportionately on the female partner or person with a uterus. Hormone treatments, invasive procedures, and the physical impacts of treatment create an unequal burden that employers need to recognise when developing support policies and workplace accommodations. Whilst fertility support should be inclusive of all genders, organisations must be mindful of the particular physical impact on those undergoing the medical procedures directly.

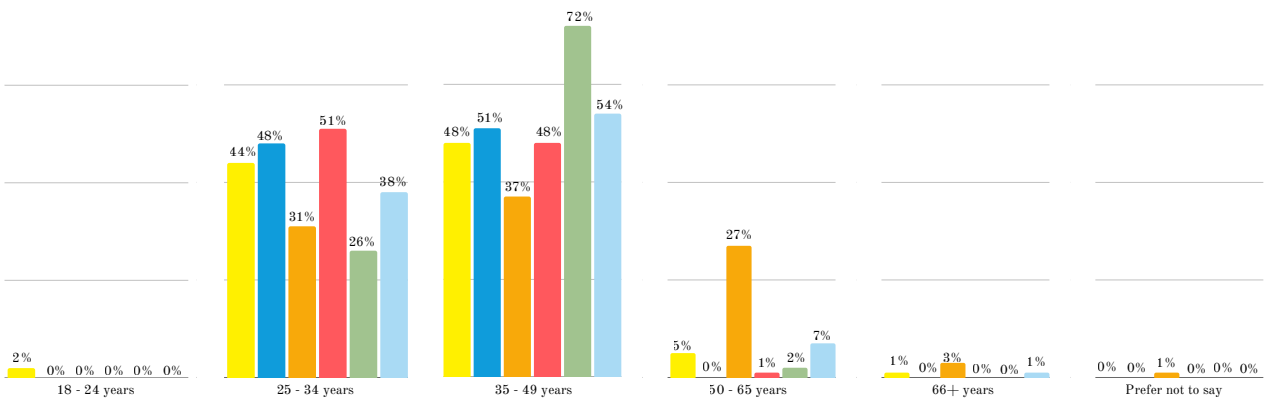
Please note: While this report primarily uses the term 'women' to align with international data sources and research terminology, we acknowledge that fertility treatment is relevant to all people who can become pregnant, regardless of gender identity.

Whilst going through your treatment, please could you share your relationship status:



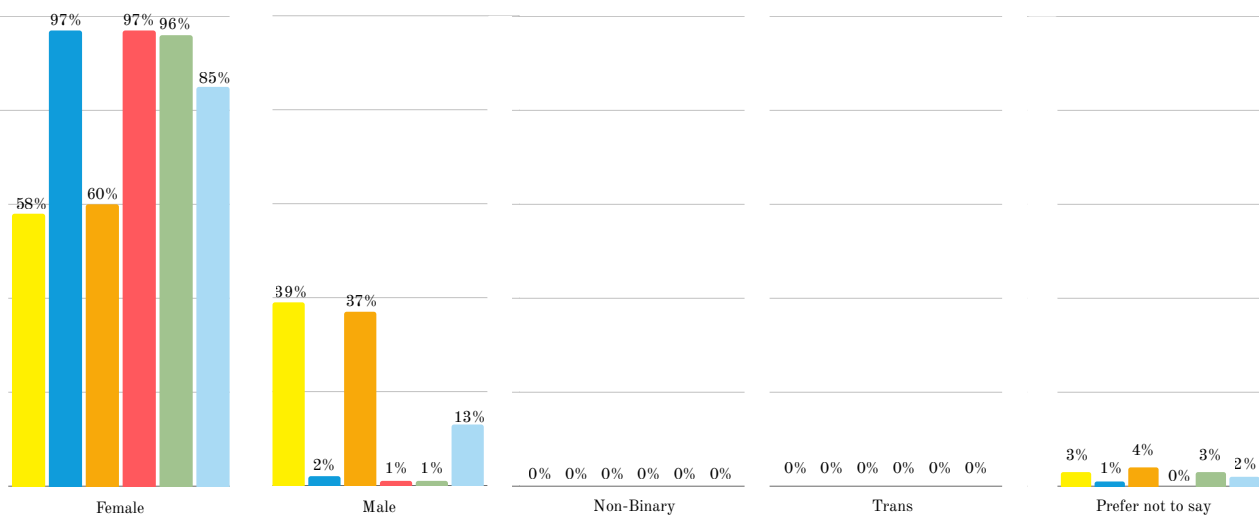
Please tell us what age group you fall into:

Australia France Japan Poland UK International



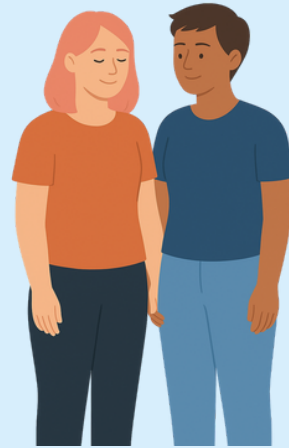
How would you describe your gender identity?

Australia France Japan Poland UK International



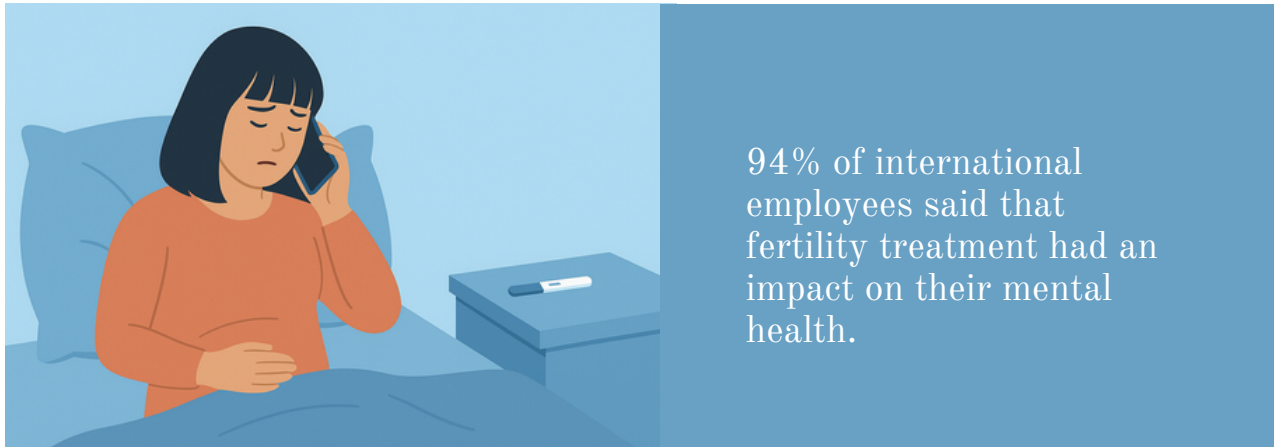
Key Statistics

- **97%** agree that undergoing fertility treatment is a significant life event, yet only **27%** of employees feel their employer acknowledges fertility treatment as a significant life event (compared with **75%** of employers who believe they do)
- **39%** of employees have left their job or are considering leaving due to fertility treatment challenges
- **94%** of employees report that fertility treatment affects their mental wellbeing
- **80%** experience anxiety or depression during their fertility journey
- **69%** say fertility treatment impacts their work performance
- **67%** of employees say their workplace does not offer support for employees undergoing fertility treatment
- **79%** took time off work during their fertility treatment
- **60%** said they were not entitled to clear time off for fertility appointments
- **73%** of those experiencing fertility challenges say they would be attracted to a role that provides fertility support
- For those who disclosed treatment, **67%** felt their organisation responded positively



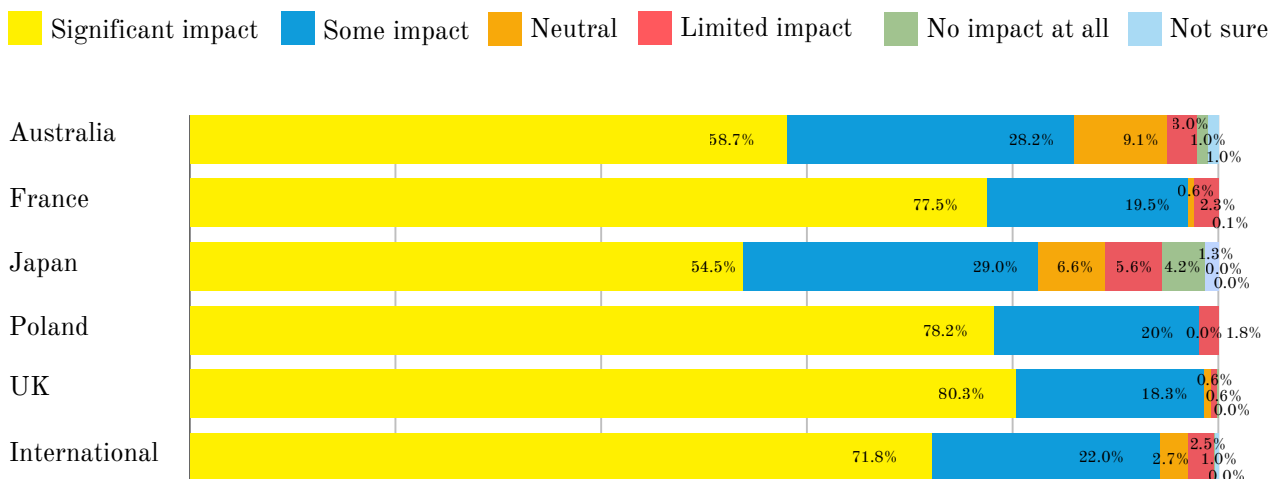
Mental and Physical Impact

Fertility treatment extends beyond medical procedures, often placing significant stress on employees whilst they continue to work. The combination of hormonal medications, invasive procedures, and numerous medical appointments can have a detrimental effect on both mental and physical wellbeing. The scale of this challenge is clear: 97% of respondents across all five nations agreed that undergoing fertility treatment is a significant life event, yet only 27% of employees think their employers recognise this. This makes supporting colleagues undergoing treatment with empathetic management and appropriate workplace adjustments essential to safeguard psychological safety and maintain engagement. In this section, we examine how fertility treatment impacts employee emotional and physical wellbeing across the five nations.



The consistently high responses across nations provide a clear indication that mental health needs to be considered by employers as a critical aspect of fertility support. The UK and France reported the highest figures at almost 99% and 97%, respectively, whilst Japan's notably lower figure of 84% may reflect cultural norms where mental health remains a less openly discussed topic. Even accounting for these cultural differences, the overwhelming consensus demonstrates the universal mental health impact of fertility treatment.

Please rate the impact that your fertility treatment had or is having on your mental wellbeing:



「自己否定感、無力感、焦燥感、孤独感、自己嫌悪など多くの感情を抱き、沈んでいました。結果的に授かったから今は前向きでいられますが、授からないままだったらどうなっていたかわかりません。」

"I was overwhelmed with feelings of self-denial, helplessness, impatience, loneliness, and self-loathing, and I felt deeply depressed. Now I can stay positive because I could eventually have a baby, but I don't know what would have happened if I hadn't." - Japanese Employee

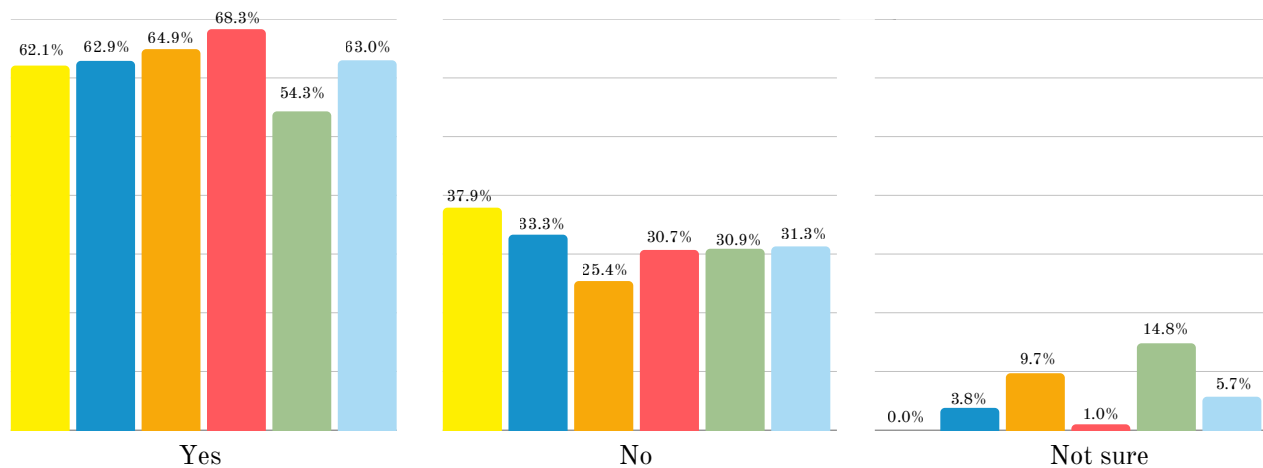
"Fertility treatment has been the most significant and life disrupting event I have ever experienced" - UK Employee

Overall, 80% of employees have experienced anxiety or depression during their fertility treatment, with over half seeking counselling or support. Japanese patients reported lower levels; however, in reviewing this finding with Fine and Forecia (Japanese patient organisations) we speculate this may reflect cultural tendencies to handle fertility issues privately rather than share them with others, which may result in under-reporting despite carrying a significant psychological and physical burden.

Organisations are recognising the impact on their employees' mental health, but their responses (63% across all five markets) do not reflect the extent or the gravity of how individuals are struggling.

Do you think your organisation ensures that employees feel supported and understood regarding the mental health impact of fertility challenges?

■ Australia
 ■ France
 ■ Japan
 ■ Poland
 ■ UK
 ■ International



Cieężko skupić się na obowiązkach, gdy wciąż trzeba czekać - na wizytę, na stymulację, na wyniki punkcji, na transfer. A w międzyczasie wydarza się coś niespodziewanego i trzeba np. odroczyć stymulację czy transfer."

"It's hard to stay focused at work when everything is about waiting — waiting for a consultation, waiting to start stimulation, waiting for the egg retrieval results, waiting for the transfer. And in the meantime, something unexpected can happen, and suddenly the stimulation or transfer has to be postponed again." - Polish Employee

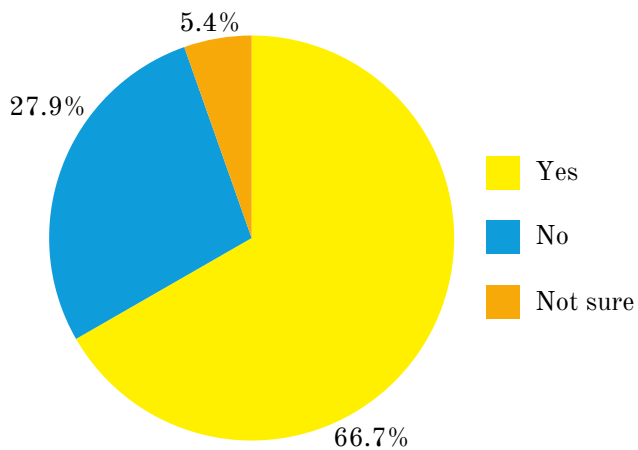
As part of the emotional toll, employees undergoing fertility challenges also contend with a sense of isolation, doubts about self-worth, identity, uncertainty about the future, and often grief. This can be seen particularly in France, where 89% reported experiencing anxiety during their programme, and Poland at 90%.

Fertility treatment is far more than a series of medical appointments. It involves multiple short-notice clinic visits for monitoring, invasive procedures such as egg retrievals and embryo transfers, and hormone treatments that can cause physical impacts including nausea, fatigue, headaches, and bloating. The physical demands are compounded by the unpredictability of treatment schedules, which often require employees to adjust their work commitments at short notice and manage the recovery time needed after procedures.

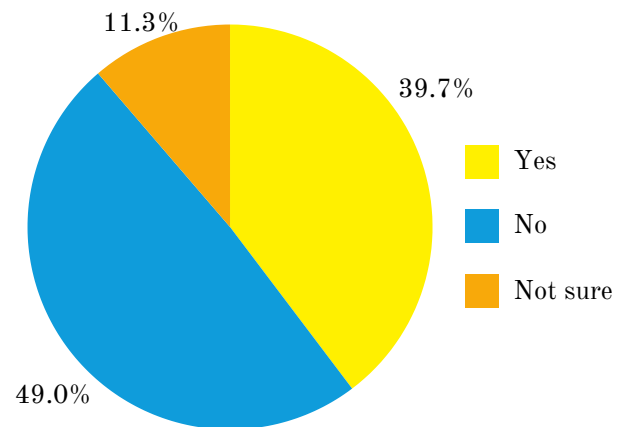
This latest research shows that 67% of respondents were physically impacted by fertility treatment, yet this impact was underestimated by employers, where 49% said they didn't recognise or support this impact. Among the employees who took sick leave during treatment, 37% stated that it was because they felt physically unwell, highlighting the tangible physical toll that treatment takes on the body whilst employees continue to manage their professional responsibilities.

Given these challenges, employers need to consider what adjustments might help employees manage the practical, physical, and emotional impact of treatment. Employees are looking for support such as practical facilities to administer injections privately at work, flexible working arrangements to accommodate unpredictable appointment schedules and recovery needs, and access to counselling support to help them navigate the emotional demands of their fertility journey alongside their careers. Across all markets, only 49% of respondents stated that they felt supported by their organisation, and 82% said that they were not offered any practical facilities during treatment.

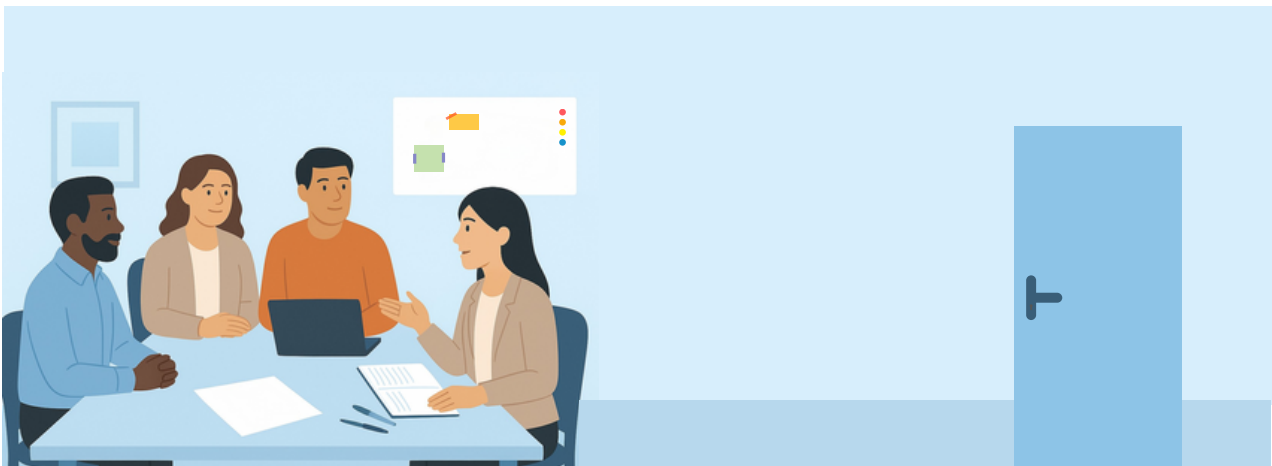
Do you feel that your fertility treatment has had or is having a physical impact on you whilst at work?



Does your organisation recognise the physical challenge of fertility treatment and take steps to ensure employees feel supported?



“The treatment has caused significant weight gain, extended periods of time off work and stress. It’s very hard to juggle working full time and actively going through treatment.” - Australian employee



Performance and Career Progression

Fertility treatment has a significant impact on employee performance and career progression. Only 22% of respondents across the five countries said their fertility journey had not affected their work performance, with 39% having even left or considered leaving their job. These figures reveal how overwhelming the struggle to balance treatment with career can become, creating serious implications for both employees and businesses, which we explore later in the report.

Performance

The physical and emotional demands of fertility treatment create a significant impact on employees' work performance. Hormone treatment can cause illness and require downtime, whilst the emotional strain of uncertainty, time pressures, logistical challenges, and concerns about employer reactions or letting colleagues down all contribute to employees feeling they are unable to perform at their usual professional standard.

This perception is reflected strongly in the survey data. Country breakdowns reveal that 73% of UK respondents and 70% in France believe their fertility treatment has affected their work performance. Across all five countries, the consensus is clear: the majority of employees (69%) perceive fertility treatment as having a tangible impact on their ability to do their job effectively.

Additional deep-dive survey questions point to a number of factors feeding into these results. We've already noted the physical and emotional impact across all five markets, with 94% of employees sharing an impact on their mental health and 67% say they have noted a physical impact at work during treatment. In this context, the research also shows that:

- 51% have felt a knock to their confidence levels
- 50% have felt an impact on their relationships at work
- 36% of respondents have felt pressure from employers during their treatment

Absenteeism plays a big part in a drop in performance with 57% taking sick leave, often due to a lack of flexibility in work arrangements, feeling unwell, and not feeling comfortable to share the real reason for absence.

"Yes, I need to take sick leave and I don't have enough hours and have to opt for taking annual leave instead. I feel I am being judged and being misunderstood. I need time off but there are unavailable leave entitlements." - Australian employee

However, presenteeism can also be a challenge as many employees make efforts to continue working while undergoing treatment and suffering from side effects such as a lack of concentration.

"Fertility treatment has affected my productivity, and at times I've felt like I'm letting my team down by not being able to carry the same workload I normally would. The physical and emotional demands, combined with time away from work for appointments and recovery, have made it harder to perform at my usual level. While I'm doing my best to stay engaged and contribute where I can, it's been challenging not being able to show up for my team in the way I'd like to." - Australian employee

The employer perspective

From the employer perspective, most companies report not noticing or being made aware of any performance impact from employees undergoing fertility treatment. The UK (28%) and Japan (34%) show the lowest rates of noting performance decline, though both rank highest in the 'not sure' category (9.8% and 7.5%, respectively). This gap between how employees perceive their performance and what employers observe may indicate that employees are more self-aware and conscious of their own struggles, detecting changes in their capacity that aren't immediately apparent to others.

Context is crucial here: almost a quarter of respondents haven't disclosed their fertility journey at work, with Japan recording the highest non-disclosure at 43%. Without disclosure, employers cannot possibly identify or address the impact of treatment, leaving employees to manage both the physical and emotional challenges and their concerns about performance entirely alone.

Career progression

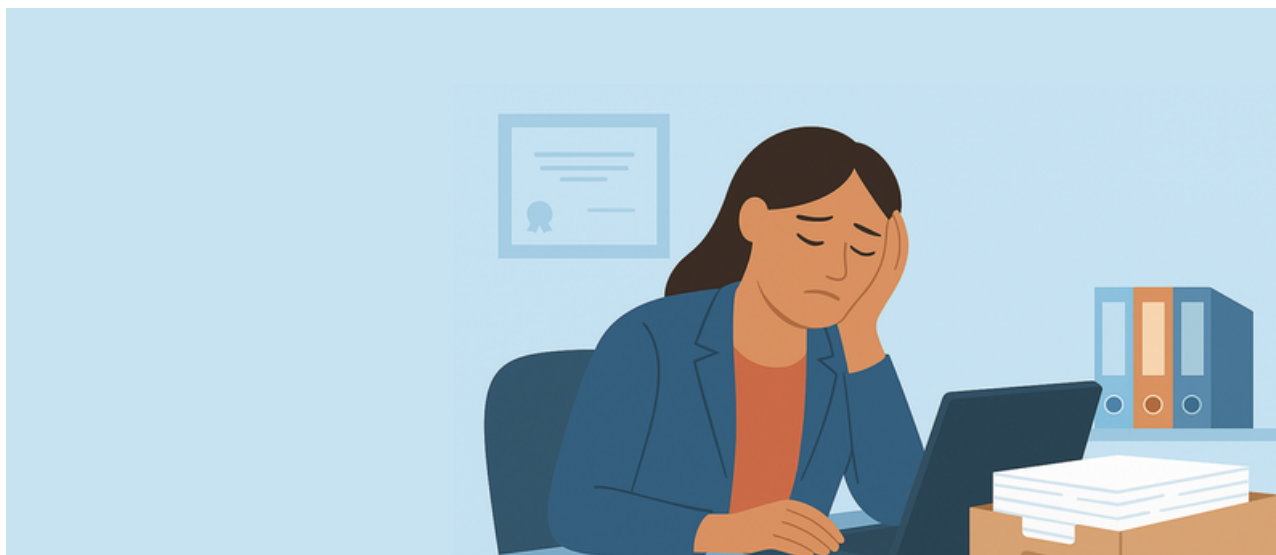
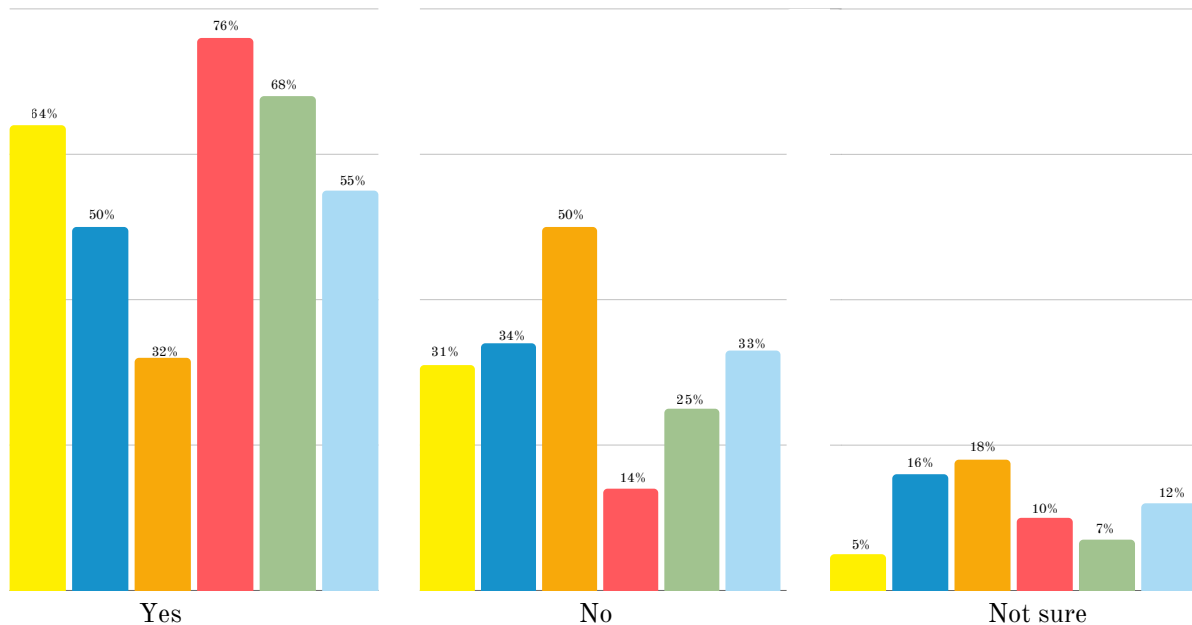
A (perception of a) decrease in performance, logically leads to questions around how fertility treatment affects career progression. Whether through interrupted career trajectories, missed promotions, stigma in the workplace or organisational culture, and changes to long-term professional identity after a period of mental and physical stress, it is clear that women are feeling an effect on their career growth. The standout figures on this graph are the high Polish and UK scores (76% and 68%) and the lower Japanese score (32%, with 18% not knowing or not sure). Across the board, the results show that women believe that having fertility treatment does take a toll on their careers.

"Brak możliwości odbywania podróży służbowych, które stanowią podstawową część mojej pracy, co prowadzi do zmniejszenia wynagrodzenia i braku możliwości rozwoju zawodowego."

"No possibility of business trips, which are a fundamental part of my work, resulting in reduced pay and a lack of development opportunities." - Polish employee

Do you feel that going through fertility treatment has impacted your career in some way?

Australia France Japan Poland UK International



There are many reasons why fertility treatment can stall career progression. The table below shows how respondents believe their treatment has affected their careers, with limited promotion opportunities and staying in the same role longer than usual emerging as the two key factors behind careers being put on hold.

	Australia	France	Japan	Poland	UK	International
Limited my promotion opportunities	21.04%	23.06%	40.54%	26.56%	24.68%	25.19%
I feel I have been treated differently as a result	17.40%	14.71%	21.17%	15.63%	11.46%	14.37%
I have stayed in a role longer than I otherwise would have	17.92%	23.62%	10.81%	28.13%	35.95%	27.16%
Reduced hours	13.77%	12.45%	3.15%	2.60%	8.04%	9.27%
Taken a step down	11.69%	4.95%	3.60%	9.38%	6.28%	6.72%
Reduced pay	6.23%	5.52%	5.86%	8.85%	4.90%	5.64%
Left my job	3.90%	14.00%	9.91%	8.85%	7.02%	8.85%
Had a positive impact on my career	8.05%	1.70%	4.95%	0.00%	1.66%	2.78%

Concern about negative career impact is a reason employees don't disclose fertility treatment at work. French (19%) and Polish (20%) employees expressed this concern most strongly, whilst Japanese employees scored lowest—potentially reflecting Japan's cultural norm of lifetime employment, where career mobility is comparatively limited.

"Au retour d'un arrêt maladie, j'ai été convoquée par ma manager pour m'informer d'une réorganisation et de ma « mise au placard » que j'ai contesté mais la RH était alignée à ma manager."

"Upon returning from sick leave, I was called in by my manager, who informed me of a reorganisation and of my being 'sidelined', which I contested, but HR was aligned with my manager." - French employee



The Financial Impact

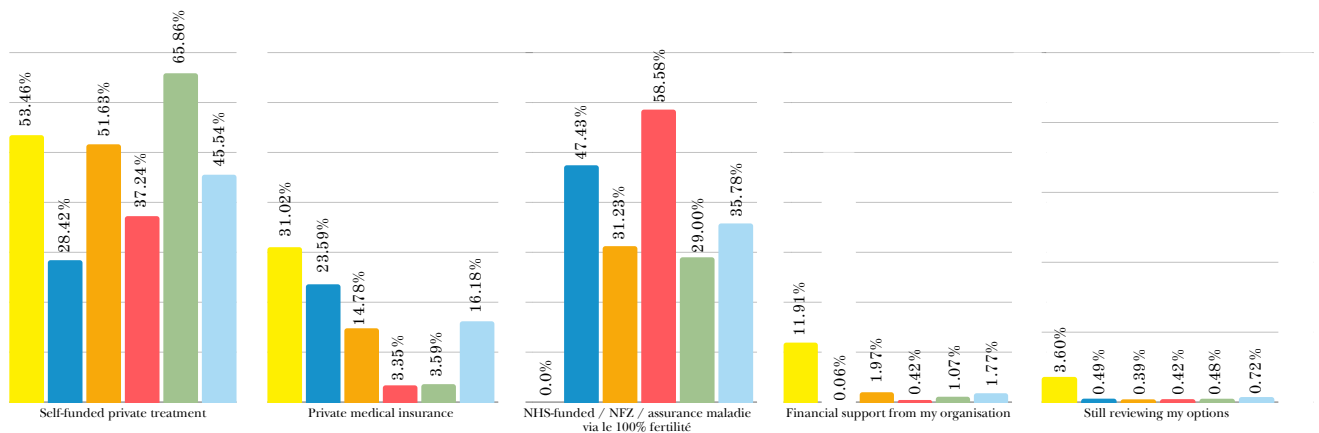
The Financial Landscape of Fertility Treatment

The financial implications of fertility treatment are significant, and preliminary thinking around funding is an unavoidable first-stage consideration for individuals and couples who want to advance their fertility journey. The financial feasibility of undergoing months, if not years, of medical appointments and procedures is a primary source of additional stress, not least because of the layers of complexity involved. Costs for fertility treatment are multifaceted: direct treatment and medication expenses, indirect costs such as travel and time off work, systemic costs related to navigating healthcare bureaucracies, and social costs including the emotional toll of financial strain. These complexities are further compounded by the fact that the financial burden varies across the five countries examined in this research, reflecting fundamentally different approaches to healthcare funding and fertility care provision.

At one end of the spectrum, Poland now offers one of the most comprehensive state-funded IVF programs globally, covering up to six treatment cycles including donor procedures, though patients still face significant out-of-pocket costs for diagnostics and preliminary treatments.¹⁴ France provides substantial coverage through its social security system, reimbursing most medical expenses for up to six inseminations and four IVF cycles.^{14–15} Japan's national health insurance covers 70% of most treatments but imposes age and frequency restrictions that can leave patients facing substantial out-of-pocket expenses.^{16,17} Australia's mixed model of Medicare and private insurance creates an implicit expectation of private coverage through tax incentives, with upfront payments and partial reimbursements the norm.¹⁸ The United Kingdom presents perhaps the starkest picture: despite operating a fully tax-funded healthcare system that is free at the point of use, only 27% of IVF cycles were NHS-funded in 2022, with the remaining 73% requiring private payment¹⁹, a proportion closely reflected in our survey where 66% of UK respondents self-funded their treatment, often driven by prohibitively long NHS waiting times.

Please indicate how you are funding your treatment:

■ Australia
 ■ France
 ■ Japan
 ■ Poland
 ■ UK
 ■ International



These divergent funding landscapes create vastly different financial realities for employees undergoing fertility treatment. While generous state provision might suggest minimal financial impact in some countries, the reality is more nuanced: coverage gaps, waiting times, treatment restrictions, upfront payment requirements, and the need for supplementary diagnostics and medications mean that even in countries with robust public funding, employees often face substantial financial burdens. Understanding these national contexts, and recognising that funding availability does not necessarily equate to accessibility or affordability, is essential for interpreting our survey findings on how fertility treatment affects employees financially and, ultimately, how these costs ripple through to workplace productivity and employer obligations.

Beyond the direct costs of treatment itself, employees face a cascade of indirect financial impacts that compound the burden. Time off work for appointments and procedures, travel costs (including for those who seek treatment overseas) and the expenses of complementary alternative therapies all add up. Perhaps less tangible but equally costly is the decrease in productivity due to stress, emotional fatigue, and physical side effects, which can affect both performance and career progression. For some, this manifests in stunted salary growth and reduced earnings potential.

"Mon salaire est gelé depuis 3 ans (0 augmentation) et mes primes ont été sucrées malgré l'atteinte des objectifs."

"My salary has been frozen for 3 years (no increase), and my bonuses have been cut despite meeting my targets." - French employee

The systemic and social costs of fertility treatment reveal deeper inequalities that transcend national funding models. Gaps in healthcare or insurance coverage create barriers to access, particularly for people from lower socioeconomic backgrounds who may be entirely priced out of treatment. Even for those who can access care, the financial impact reverberates through major life decisions, depleting savings, accumulating debt, and forcing impossible choices between family-building and financial stability.

"We're on our 8th IVF round, having moved to donor eggs after 5 cycles—which in itself was heartbreaking. We've had 3 miscarriages. All treatment has been self-funded. I'm in a senior role at work, with significant pressure, and it's difficult to balance work and staying stress-free but I can't afford to reduce my hours or salary as we're already getting into debt paying for the treatment." - UK employee

This testimony underscores a cruel paradox: the very stress that may undermine treatment success becomes unavoidable when the need to fund that treatment drives employees to maintain demanding work schedules they can neither afford to keep nor afford to leave.



Survey Findings: The Financial Reality for Employees

Across all five markets, 77% of respondents stated that fertility treatment has had or is having a financial impact on their lives, underscoring the universal nature of this burden, regardless of national healthcare models.

The intensity of that impact, however, varies significantly by country. Polish respondents reported the highest figure at 95%, followed closely by Australia at 85%. Poland's result is striking given its comprehensive government-funded IVF program, but likely reflects the timing of the 2024 policy enhancement as many respondents may have begun treatment under the previous, less generous system. In the UK, 53% reported significant financial impact, reflecting the "postcode lottery" where funding varies dramatically by location, with 73% of all cycles now privately funded.¹⁹ France presented a different picture with a lower figure of 27% reporting a significant financial impact, reflecting its more comprehensive social security reimbursement structure.

When asked what support their workplace offers, stark differences emerged in the provision of financial support towards treatment. Poland stood out with 31% of respondents reporting their employer provided financial assistance, followed by Japan (24%) and Australia (20%). However, the UK fell significantly behind with only 6% of respondents' organisations providing direct financial support towards treatment.

The Workplace Dimension

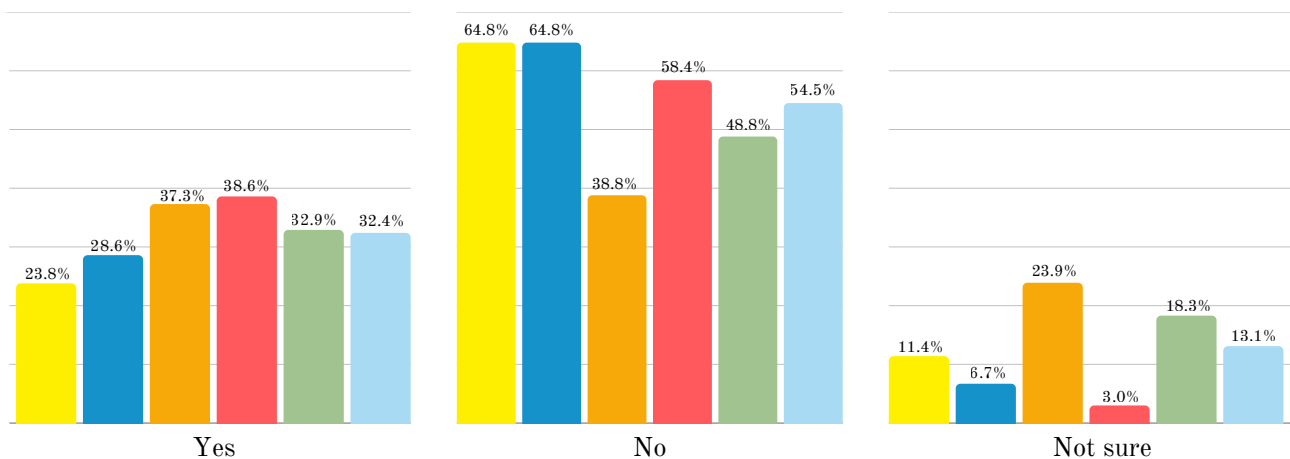
The financial pressure of paying for fertility treatment directly correlates with employees' ability to contribute to the jobs funding that treatment. Physical and mental side effects frequently affect productivity, creating a vicious cycle: employees struggle to maintain health for treatment success while meeting workplace expectations and managing anxiety about paid time off. The survey reveals the scale: 79% took time off work for treatment, and 36% felt employer pressure to be at work during treatment. In Japan, 41% believed their fertility journey limited promotion opportunities, and 36% of UK respondents said they stayed in their roles longer than they usually would, both of which reduced their ability to increase income precisely when needed most.

The Employer Blind Spot

The disconnect between employee experience and employer awareness is stark. Across all markets, 55% of employers do not recognise the financial implications of fertility treatment on their workforce. Only 24% of Australian employers recognise and support employees' financial impact, while even the highest-scoring country, Poland, reached just 39%. This gap between employee need and employer understanding represents a critical opportunity for business leaders to reassess how fertility treatment affects both their workforce and their organisation's bottom line.

Does your organisation recognise the financial impact of fertility treatment and take steps to ensure employees feel supported?

■ Australia
 ■ France
 ■ Japan
 ■ Poland
 ■ UK
 ■ International



Disclosure and Culture Considerations

Whilst 78% of employees informed someone at work about their fertility treatment, the pattern of who they told reveals important insights about workplace dynamics and potential awareness gaps. The majority of survey respondents across all five countries shared details with their line managers (67%), with the UK reporting the highest rate at 80%. This places line managers at the frontline of fertility support, making their awareness, training, and ability to respond sensitively absolutely crucial. Yet many line managers may lack the guidance and confidence to handle these conversations appropriately, highlighting the urgent need for organisations to invest in manager training on how to support employees through fertility treatment.

A notable 24% of respondents confided only in colleagues or team members, which may account for the relatively high overall disclosure rate whilst keeping fertility treatment invisible to formal HR systems and support structures. Significantly, only 6% of global respondents informed HR or rewards/benefits teams, with Australia recording the highest rate at just 12%. Poland showed a distinct pattern, with half of respondents (50%) choosing to share their fertility journey with colleagues or team members, 46% with managers and only 1% with HR. This low rate of HR disclosure suggests that organisations may not be fully aware of the prevalence and impact of fertility treatment within their workforce, potentially missing opportunities to provide structured support and track the true extent of the issue.

The Barrier of Fear

Even among those who disclosed, significant fears existed. In France and the UK (where this question was asked), 61% of respondents had fears about telling their employer about their fertility treatment. France presents a particular paradox: despite 85% disclosing their fertility journey at work, almost two thirds were afraid to do so. Those who chose not to disclose cited concerns about career impact, feeling uncomfortable, or viewing fertility as too personal to discuss at work. This highlights that even where disclosure rates appear high, the work environment doesn't necessarily feel psychologically safe for open discussion.

The decision to withhold information or to limit who knows is influenced by workplace culture, national context, and personal values. Among the 57% of employees who took sick leave, 16% did so specifically to conceal their treatment or avoid explaining the real reason, suggesting that some employees are actively hiding their fertility journey from their employers.

Cultural Variations in Disclosure

Disclosure rates reveal marked cultural differences: 86% of UK employees disclosed their treatment compared with only 57% of Japanese employees. These variations reflect deeper cultural contexts that shape how comfortable employees feel discussing fertility at work.

In Australia and the UK, whilst there are no major cultural barriers to discussing fertility in the workplace, a pervasive silence around infertility persists, much like with baby loss. Strong stigma and fear of discrimination remain prevalent, making employees less likely to speak up and request support or flexibility. Insensitive comments from managers or colleagues can compound this reluctance.

Japanese culture maintains a strong expectation that personal matters remain private. Discussing fertility treatment is considered embarrassing and awkward, with concerns it may create workplace difficulties. When asked why they didn't disclose, 34% of Japanese respondents cited it as a personal matter unrelated to work. Japanese patient groups shared that, whilst disclosure rates are gradually increasing compared with their research five years ago,^{20,21} negative reactions to perceived preferential treatment for couples undergoing fertility treatment may contribute to continued low disclosure rates, with some arguing that workplace accommodations or special support can marginalise single individuals or childless couples.

In Poland, discussing infertility and assisted reproductive treatment remains difficult. Patient advocacy organisation Nasz Bocian notes that this is influenced by a strongly rooted traditional family model and the Catholic Church, which continues to hold significant cultural and social influence, openly opposing assisted reproductive technologies and shaping the public narrative around them. A fifth of Polish respondents cited fears about negative impact on career prospects as a reason for non-disclosure. Fear of judgement, misunderstanding, or stigma significantly affects willingness to disclose, both socially and at work.

Career concerns also featured prominently in France, with nearly a fifth saying they were worried about the negative impact on their career prospects. Australia also showed relatively high concern about fertility being viewed as a personal matter unrelated to work (27%).

"I started a new job just before starting my first round of fertility treatment. The thought of telling my new boss, organisation about fertility treatment, as well as considering how to manage time off, short notice appointments and continuing to prove myself in a new role and continue to lead my team etc. whilst in a senior management position, has added significant stress and had a negative impact on my mental wellbeing during this process. This is all despite my new organisation being very supportive."
UK Employee

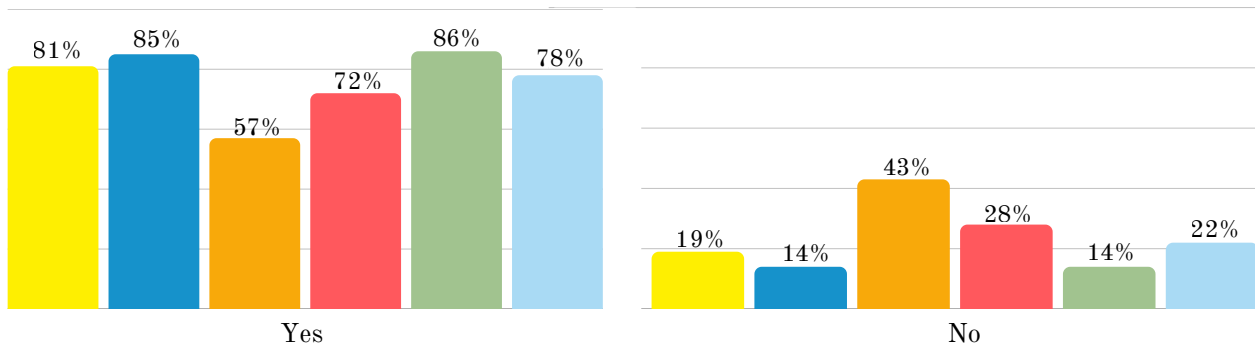
Creating Supportive Environments

These cultural nuances underscore the importance of organisations creating explicitly supportive environments that acknowledge and address these barriers, rather than assuming a one-size-fits-all approach to fertility support. The reasons why people didn't disclose or feared disclosure highlight an urgent need for workplaces to create environments where employees feel safe and comfortable discussing fertility treatment. This is particularly important given the perception gap identified earlier: whilst over 96% of respondents across all five nations agreed that undergoing fertility treatment is a significant life event, only 27% of employees believe their employers recognise this.

The low rate of HR disclosure combined with high rates of disclosure to line managers and colleagues suggests that current workplace cultures may inadvertently keep fertility treatment hidden from those best positioned to provide formal support, whilst placing significant responsibility on line managers who may be ill-equipped to respond.

Have you informed anyone at work that you are undergoing or have undergone fertility treatment?

■ Australia ■ France ■ Japan ■ Poland ■ UK ■ International



What are the reasons for not informing anyone at work?

	Australia	France	Japan	Poland	UK	International
It's a personal matter, not work-related	22.92%	17.40%	33.94%	15.98%	13.56%	22.03%
I didn't feel comfortable doing so	28.46%	20.65%	20.33%	15.98%	22.67%	21.24%
I didn't think my organisation would support me	13.08%	10.90%	15.06%	7.69%	13.56%	12.79%
I didn't think my manager would support me	7.69%	9.74%	9.62%	10.06%	9.72%	9.58%
I was worried about how my manager would perceive me	6.92%	12.99%	7.99%	16.57%	14.17%	11.66%
I was concerned about a negative impact on my career prospects	13.08%	19.26%	5.26%	20.12%	17.41%	14.03%
A lack of legal protections and rights for time off	3.85%	9.05%	7.80%	13.61%	8.91%	8.68%

Manager Understanding and Training

As the primary point of contact for employees discussing fertility treatment, managers play a fundamental role in creating supportive work environments. As explored in the Disclosure section, the research reveals that 67% of employees who disclosed their fertility treatment chose to inform their line manager, which was the highest of any group within organisations. In contrast, only 6% informed HR or rewards/benefits teams. This places line managers at the frontline of fertility support, often making them the most informed individuals about an employee's fertility journey.

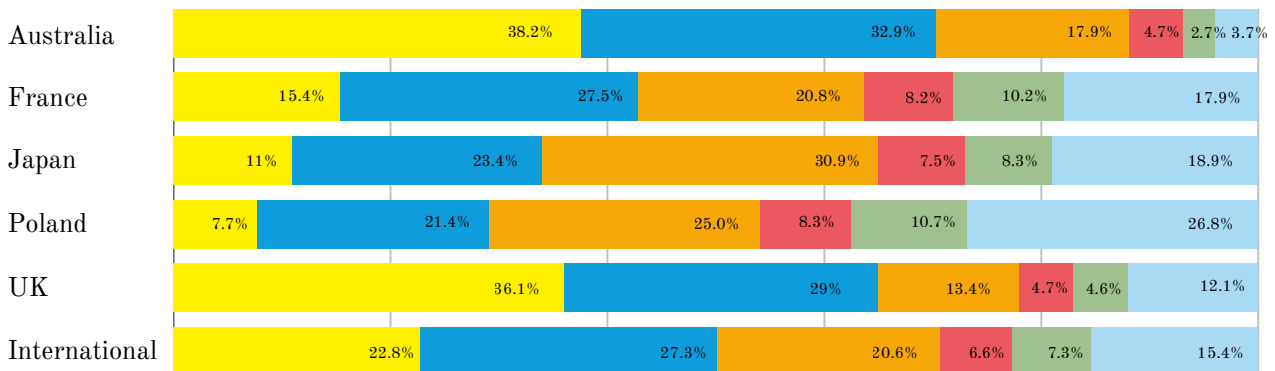
However, a significant disconnect exists between employer intentions and employee experience. Whilst 75% of employers said they recognise fertility treatment as an important life event requiring support, only 27% of employees feel their employers genuinely acknowledge this, and only 40% feel their managers understand the significance of their fertility journey. Of those who had not disclosed, 10% cited a belief that their manager would not support them, whilst 12% were concerned about negative perceptions.

「流産という喪失体験を含めて、サポートが必要だと感じます。」

"I felt that I needed support, including for the loss of miscarriage". - Japanese employee

How supportive has your direct line manager been?

■ Very supportive
 ■ Supportive
 ■ Neither supportive nor not supportive
 ■ Not supportive
■ Not supportive at all
 ■ Not told them



"Questioned as to why I accessed the leave and asked to provide medical certificates to line management. The process is supposed to be confidential and just through HR." - Australian employee

The Training Gap

Despite managers being the primary recipients of fertility disclosures, only 19% of employers provide training to managers on how to support colleagues undergoing fertility treatment, with just 6% of employees aware of their managers having received such training. This represents a critical oversight. Without proper training, managers often lack understanding of how physically, emotionally, and logistically demanding fertility treatment can be, including numerous medical appointments, hormonal medications with side effects, procedures requiring recovery time, and the emotional toll of uncertainty.

Managers hold considerable discretionary power over day-to-day working arrangements and maintain the closest relationships with employees. The support an employee receives can therefore be heavily dependent on their individual manager's understanding, empathy, and knowledge. Yet this research demonstrates that the majority of managers are being asked to navigate these sensitive conversations without adequate preparation. Dr Krystal Wilkinson's research found that line managers supporting employees through fertility treatment reported stress, upset, feelings of powerlessness, and uncertainty over how long reasonable adjustments could be provided.²² Employees are making themselves vulnerable by sharing deeply personal information, and how managers respond can either build trust and enable support or reinforce fears and drive employees to hide their struggles.

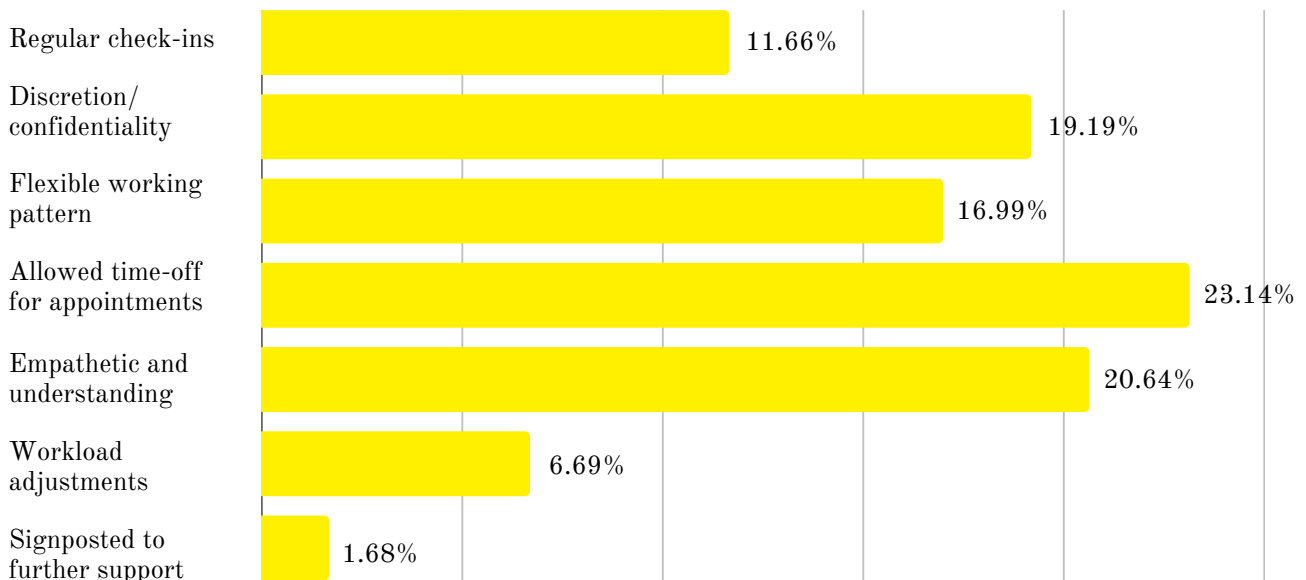
Organisations must invest in equipping managers with the knowledge, skills, and confidence to handle these conversations sensitively and effectively. This includes understanding the physical and emotional demands of treatment, knowing what workplace adjustments may be helpful, maintaining appropriate confidentiality, and being aware of available support resources. Wilkinson's research also found that HR professionals often proved unable to provide necessary guidance to managers on fertility issues, highlighting a systemic support gap. Without investment in manager capability, the disconnect between employer intentions and employee experiences will persist, regardless of policy development.²²

"At the time there was no real guidance so my manager had to use his judgement. They were supportive but I was left feeling they had done me a favour instead of me knowing it was what I was allowed. This added a layer of stress I did not need, rushing back from emotional appointments etc." - UK Employee

Manager Support in Practice

The quality of support from line managers varies considerably across countries. In the UK and Australia, managers are generally considered supportive, whereas Japanese respondents reported much lower satisfaction levels (34%), likely reflecting cultural norms around privacy that may make employees less inclined to approach their managers for support.

The chart below illustrates the specific ways in which managers have provided support internationally, including flexible working arrangements, demonstrating empathy, adjusting workloads, and allowing time off for appointments.



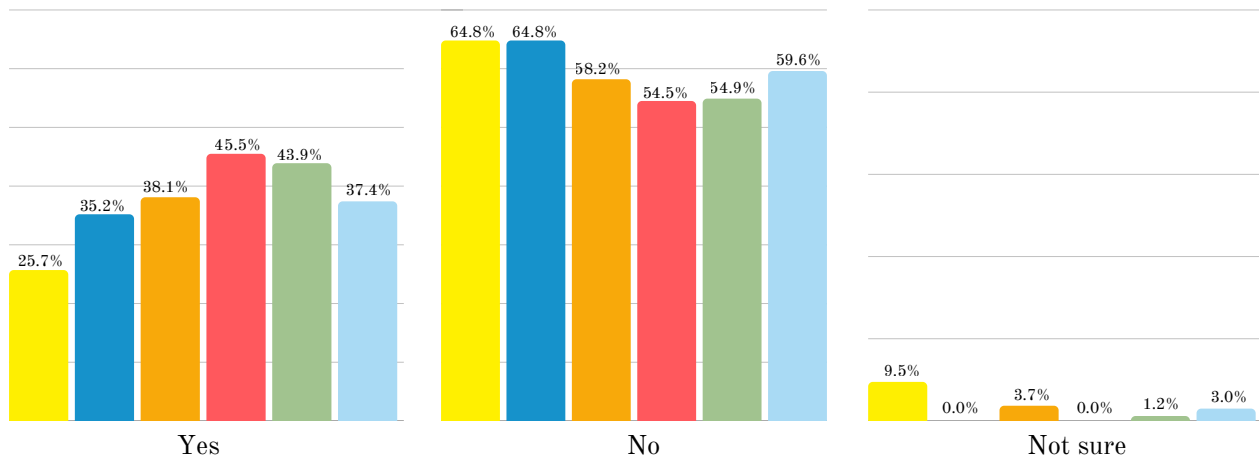
Workplace Support: Policy and Recognition

For fertility patients worldwide, time off work is inevitable. Fertility treatment requires multiple appointments, often at short notice, for monitoring, procedures, and follow-ups. When combined with the mental impact experienced by 94% of respondents and physical challenges faced by 67%, the need for workplace flexibility, clear entitlements, and comprehensive policy support becomes critical.

The research reveals that 79% took time off work during their fertility treatment, with considerable variation in how much time was needed. Japan's lower figure of 70% may reflect the country's approach to leave management, where sick leave must be organised through HR departments and most cases are handled through paid annual leave rather than formalised special leave for infertility treatment.

Does your organisation have a standalone fertility policy or guidelines?

■ Australia
 ■ France
 ■ Japan
 ■ Poland
 ■ UK
 ■ International



The Policy Landscape

Employers can take the lead in creating an inclusive workplace environment by developing comprehensive, preferably standalone, workplace policies that cover fertility treatment. However, the research reveals significant gaps in this area. When asked about dedicated fertility policies, only a minority of organisations have them in place:

- Poland: 46%
- France: 35%
- Australia: 26%

Where standalone policies don't exist, some organisations incorporate fertility support within other policies. Japan reports the highest integration at 89%, whilst UK organisations report less than 50%. Notably, high levels of 'don't know / not sure' responses emerge, particularly in Poland and the UK, suggesting uncertainty even among employers about what support exists.

The disconnect becomes more pronounced from the employee perspective: 67% of all employees surveyed stated that their organisations do not offer support for employees undergoing treatment, and 82% reported that their workplace offers no practical facilities. Around 62% of employees in all countries except Australia stated they are not aware of a dedicated policy, with France showing particularly low awareness—only 9% said there is a specific policy, whilst 25% don't know.

"Si on ne demande pas, on ne nous informe pas. Il n'y a pas de communication a ce sujet."

"If we don't ask, we aren't informed. There's no communication about it." - French employee

Time Off Entitlements

Despite the clear need for time off, only 31% of employers provide clear entitlements for fertility treatment appointments, with significant variation across countries:

- Australia: 52%
- France: 30%
- Japan: 22%
- Poland: 8%
- UK: 35%

Where entitlements do exist, 44% of employers place limits on the amount of time off available (Japan was excluded from this question). In Poland, 81% of respondents report that their employer has established no clear guidelines for taking time off for medical appointments related to fertility treatment, leaving employees to navigate this entirely on their own.

From the employer perspective, provision of designated time off for fertility treatment varies considerably across countries. In the UK, 51% of employers say they provide designated time off for fertility treatment appointments, whilst in France only 11% report doing so, and in Poland just 12%. Across all countries, provisions for partners' time off are considerably lower. Where dedicated leave is not available, the vast majority of employees lack structured support, with some relying on more general benefits such as flexible working hours, a pattern that appears consistent across all markets.

Employee responses largely reflect these employer reports, with more than half of French respondents stating they have no entitlement to paid leave for fertility treatment. However, France presents a particular challenge: despite legal provisions for time off to attend fertility appointments, awareness and implementation remain low among employers, with only 11% reporting they provide designated time off. Almost 60% of French respondents say their legal rights regarding leave are not sufficiently explained, and a majority either do not take the leave or do so with difficulty. This suggests a disconnect not between employer and employee perception, but between legislation and workplace practice.

In the UK, a different type of perception gap emerges: despite 51% of employers reporting designated time off provision, 27% of employees report insufficient paid leave entitlement. Across all markets, employees cited additional reasons for policies not meeting their needs, including no guidance on how leave would be recorded and no leave or support available for partners.

Flexible Working

The unpredictable and complex nature of fertility treatment scheduling would be considerably eased by flexible working arrangements. Yet across all nations, only 58% of employees were able to work flexible hours and locations, and 53% were allowed to work from home.

The absence of flexibility has real consequences: almost a fifth of respondents with no flexibility to attend appointments took sick leave, rising to 29% among Japanese respondents. Australian employees found that where flexible working or work-from-home arrangements were unavailable, managing treatment proved particularly challenging, though navigation around flexible working generally appears easier in Australia. However, the post-COVID shift back to office-based work, a pattern also seen in the UK, may pose a risk of reduced flexibility for employees in future.

In France, 49% of respondents said they could not work flexibly, and still higher in Poland at 56%, compounding the issue of poorly communicated leave entitlements. The challenge is particularly acute for employees in roles where taking time off is extremely difficult, such as nurses and teachers. 51% of French respondents and 59% of UK respondents work in the public sector, covering nursing, healthcare, and education - sectors where flexibility is often limited by the nature of the work.

「40代での不妊治療は、仕事の責任も重くなり両立は大変でした。」

"Infertility treatment in my 40s came with increased work responsibilities, making it difficult to balance both." - Japanese employee

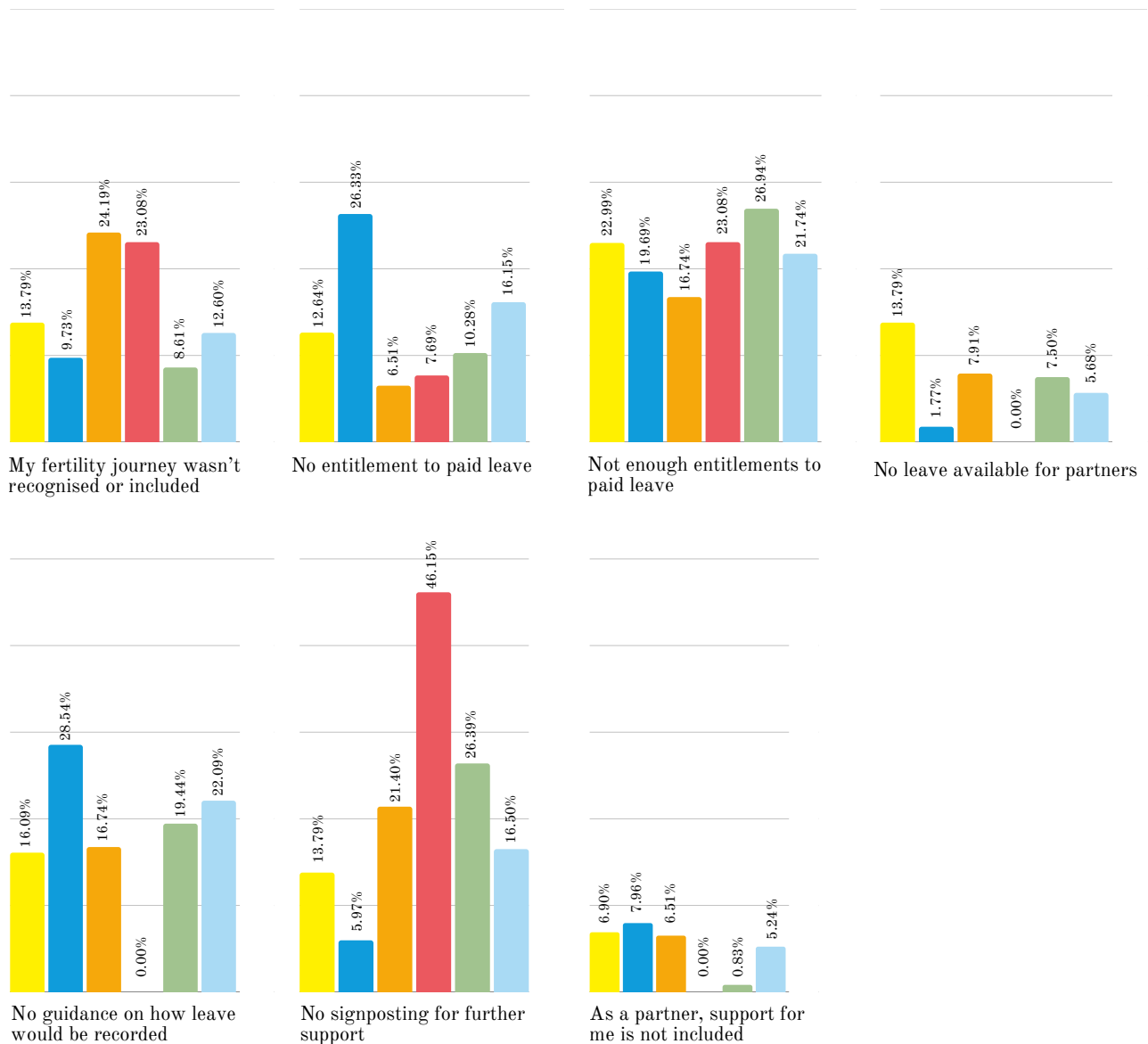
The Awareness and Communication Gap

Despite 74% of employers stating that they had made employees aware of fertility policy or guidance in the past year, employee awareness tells a different story. Only 62% of employees know where to find their workplace fertility policy. Furthermore, 78% of respondents across all markets said they have not accessed the support offered, raising questions about whether awareness and communication are being significantly underestimated.

Where policies do exist, with 37% reporting a standalone policy (only 24% of employees are aware of one) and 70% incorporating fertility guidance within other policies, their effectiveness varies dramatically. Whilst 82% of Australian respondents said policies met their needs, in France only 25% agreed that the policy or guidance was adequate, with 46% unsure.

In what way did the fertility policy/guidance not meet your needs?

■ Australia
 ■ France
 ■ Japan
 ■ Poland
 ■ UK
 ■ International



Talent Attraction, Engagement, and Retention

As stated in the introduction, the World Health Organisation reports that one in six people globally are impacted by infertility,² supporting employees through fertility treatment is no longer a niche concern but a mainstream workforce issue. The survey findings reveal that fertility support is increasingly recognised as critical to employee engagement, retention and attraction.

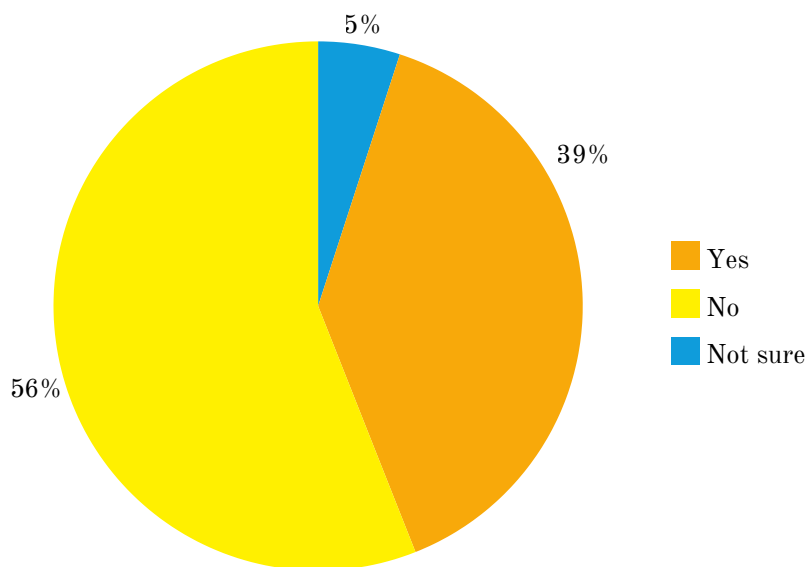
Fertility support encompasses a range of measures including comprehensive workplace policies, entitlements to time off for medical appointments, manager training and understanding, general workplace awareness, access to mental wellbeing support through existing benefits programmes, and culturally appropriate initiatives such as peer support networks and story sharing.

From a business perspective, demonstrating empathy, flexibility, and the provision of clear fertility support signals a progressive and people-centred culture that can directly impact an organisation's ability to attract, engage and retain talent.

The Cost of Inadequate Support

The business risks of failing to provide adequate fertility support are substantial. Across all five markets, 39% of respondents said they have left or considered leaving their employer whilst completing fertility treatment and 2% have left. The reasons behind this decision vary, but commonly include the impact on mental health (34%), lack of flexibility to accommodate treatment schedules (20%), and insufficient employer support (15%). In Australia, for example, those who decided to leave cited a lack of emotional and/or financial support, or limited flexibility as primary factors.

Have you left or considered leaving a job whilst undergoing fertility treatment?

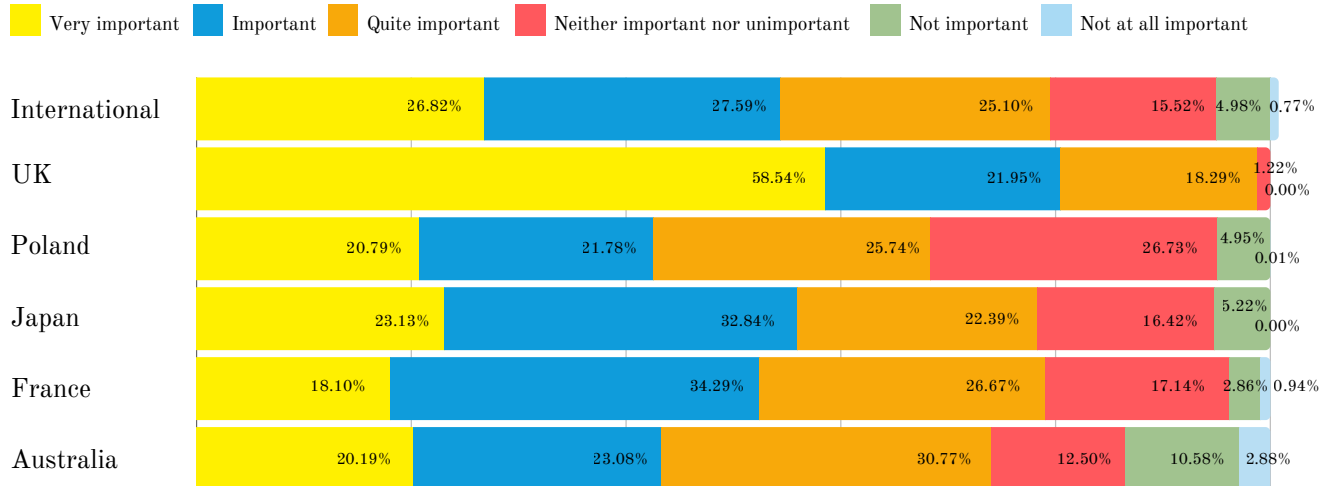


This represents a critical business risk that employers must acknowledge. The financial costs of recruitment are considerable, including advertising, interviewing, and onboarding expenses. Beyond direct costs, there is the short-term productivity loss as new recruits are trained, the potential disruption to team dynamics, and the long-term impact of losing experienced, skilled employees who possess valuable institutional knowledge and established relationships with colleagues and clients.

The Business Case for Fertility Support

Conversely, organisations that provide comprehensive fertility support stand to gain significant advantages in talent management. The research demonstrates strong employer recognition of these benefits, as highlighted by the figures in the table in relation to retention, engagement, and attraction.

How important do you think fertility support is for talent retention?



Employer view of the importance of fertility support in employee retention, engagement and attraction:

	Retention	Engagement	Attraction
Australia	74%	74%	89%
France	79%	77%	88%
Japan	78%	81%	77%
Poland	68%	86%	87%
UK	99%	95%	95%

It is worth noting that cultural context influences these perceptions. Japanese employers and employees (48%) rate fertility support lower as a factor in talent attraction, likely reflecting a workplace culture of strong organisational loyalty and less frequent job mobility. In an employment market traditionally characterised by lifetime employment, employers may view fertility benefits as less essential for competing for talent compared with employers in markets with higher job mobility.

Employee Perspectives

Insights from employees validate the business case. In Australia, 33% of employees felt more engaged with their organisation after receiving a positive response when sharing their fertility journey. Overall 73% of employees report being attracted to companies that offer fertility support, a figure which is as high as 93% in Poland and 90% in the UK. These figures demonstrate that fertility support not only prevents attrition but actively builds engagement and functions as a competitive advantage in recruitment.

Recommendations

Building Comprehensive Fertility Support

In reviewing this new research, the evidence is clear: fertility support is not merely a compassionate response to employee needs but a strategic business imperative. Organisations that fail to provide adequate support risk losing valuable talent, incurring significant recruitment and training costs, and damaging their employer brand. Conversely, those that invest in comprehensive fertility support benefit from improved retention rates, higher employee engagement, enhanced ability to attract top talent, and a reputation as an employer of choice.

In an increasingly competitive labour market, where skilled employees have greater choice and expectations of employer support have risen, fertility support represents both a risk to manage and an opportunity to gain competitive advantage. Employers who recognise this reality and act accordingly will be better positioned to build loyal, engaged workforces whilst attracting the talent necessary for long-term success. The business case is compelling: supporting employees through fertility treatment is not only the right thing to do but also makes sound commercial sense.

Universal Challenges, Culturally Sensitive Solutions

Whilst fertility treatment remains universally stigmatised, the extent and nature of this stigma varies significantly across cultures. Each nation faces distinct challenges shaped by cultural norms, religious influences, workplace traditions, and attitudes towards privacy. However, despite these differences, the research reveals striking similarities in the impact felt by employees and the gaps in employer support across all five countries. Whether in Japan, where personal matters are expected to remain private, or in Poland, where religious perspectives create additional barriers, or in Australia, France, and the UK, where silence and fear of discrimination prevail, employees worldwide are struggling to balance fertility treatment with their careers, often without adequate workplace support.

This highlights the value of organisations adopting culturally sensitive approaches that acknowledge local contexts whilst addressing the universal fundamentals of fertility support. Rather than a one-size-fits-all approach, organisations can create explicitly supportive environments that recognise and address cultural barriers specific to their workforce whilst ensuring core support mechanisms are in place.

Addressing Key Gaps

This research has identified several areas where organisations can make meaningful improvements:

1. Establish Comprehensive Policies with Flexible Support

The findings reveal an opportunity to strengthen structured support frameworks. With only a minority of organisations having dedicated fertility policies, and employee awareness remaining low, developing clear written policies that specifically address fertility treatment can provide a strong foundation. Having guidance in writing is likely to be the first place an employee will look for recognition and support, providing organisations with a valuable opportunity to signal that this life event is recognised and valued.

Organisations can benefit from working with patient-centred organisations that specialise in fertility support to help shape policies, communication strategies, and sensitive support frameworks that genuinely meet employee needs. These partnerships can ensure policies are grounded in the lived experience of fertility patients and reflect best practices.

Comprehensive policies could encompass both formal provisions and practical flexibility measures, including:

- Formal recognition of fertility treatment as a significant life event, giving employees explicit permission to share their situation
- Clear entitlements for time off for the unpredictable nature of appointments and recovery needs
- Flexible hours, locations, and work-from-home arrangements to accommodate short-notice appointments
- Support considerations for partners undergoing treatment
- Practical workplace facilities such as private spaces for administering injections
- Access to counselling and mental health support
- Clear confidentiality protections
- Sector-appropriate solutions for roles with limited flexibility, such as healthcare and education
- Equitable access to flexibility across all levels and roles

Almost a fifth of respondents took sick leave because there was no flexibility to attend appointments, indicating that lack of flexibility can push employees towards sub-optimal solutions. Currently, many employees are navigating treatment without formal support structures, relying instead on ad-hoc managerial discretion that can create inconsistency.

2. Invest in Manager Training and Capability

Line managers are the primary recipients of fertility disclosures within organisations, yet the majority lack formal training on how to support colleagues undergoing treatment. Given the central role managers play, organisations should prioritise comprehensive manager training as a fundamental component of any fertility policy. This training should equip managers with:

- Practical knowledge about the physical and emotional demands of fertility treatment
- Guidance on facilitating sensitive conversations and responding supportively
- Clarity on confidentiality requirements and boundaries
- Awareness of available support resources and workplace adjustments
- Understanding of their discretionary power over working arrangements

Manager training should emphasise that supporting employees is not about "doing them a favour" but recognising their entitlements. Regular refresher training, accessible resources for managers to reference when needed, and clear escalation pathways to HR or specialist support can help bridge the current gap between employer intentions and employee experiences.

3. Bridge the Communication and Awareness Gap

Despite many employers believing they have communicated their policies effectively, employee awareness tells a different story. This gap can be addressed through:

- Proactive, regular communication about fertility support and entitlements through multiple channels
- Clear signposting to where policies can be found and how to access support
- Demystifying entitlements, particularly in contexts like France where legal provisions exist but remain underutilised
- Making fertility support visible in broader wellbeing and inclusion communications

For those who did disclose their treatment, 67% felt their organisation responded positively, highlighting the tangible benefit of creating an open culture. Improving awareness helps ensure employees can access the support available to them.

4. Enable Disclosure Through Psychological Safety

With a substantial proportion of employees experiencing physical and mental wellbeing impacts in silence, creating environments where disclosure feels safe represents an important opportunity. Without disclosure, employers may not be able to identify or address the impact of treatment, leaving employees to manage the challenges on their own.

Organisations can consider:

- Creating peer support networks or employee resource groups that offer safe spaces for connection
- Demonstrating through visible leadership commitment that fertility treatment will not negatively impact career prospects
- Challenging stigma proactively through inclusive language and normalisation of fertility discussions

Given the cultural variations in comfort with disclosure, organisations can be particularly thoughtful about creating multiple pathways for employees to seek support that respect cultural norms whilst still enabling access to necessary resources.

5. Support Mental and Physical Wellbeing

With 94% of respondents experiencing mental health impact and 67% facing physical challenges, wellbeing support represents a valuable component of any fertility programme. Employers could consider:

- Providing access to professional counselling and mental health support
- Recognising that the physical impacts of treatment may require time off and adjustments
- Acknowledging that perceived performance impacts are often driven by employees' heightened self-awareness during a stressful time

6. Address Financial Considerations

The financial burden of fertility treatment creates significant stress for employees. Whilst not all organisations can provide direct financial support, there are several ways to help:

- Providing clear information about available benefits and coverage
- Considering how health insurance or benefits packages might be enhanced to include fertility treatment
- Exploring partnerships with fertility providers for discounted services for employees
- Offering financial planning resources to help employees navigate treatment costs

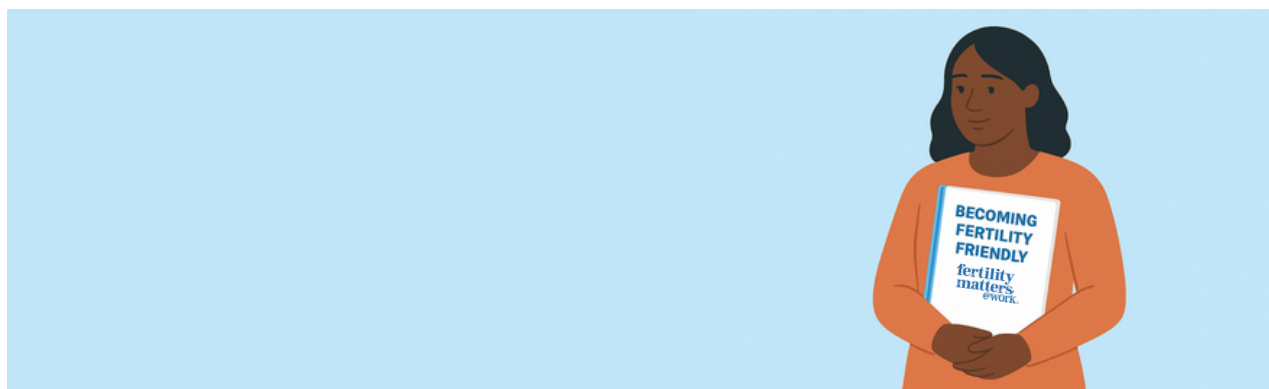


The Path Forward

Encouragingly, the research shows that practice is starting to change, with signs employers recognise the importance of fertility support on employee engagement and talent attraction. More are planning to implement standalone fertility guidance, and many either already include fertility and family-building challenges as part of their workforce engagement and wellbeing strategy or plan to do so. This represents a clear opportunity for organisations to strengthen support, improve internal communication about policies, reduce attrition, and differentiate themselves in an increasingly competitive talent landscape.

The organisations that will thrive are those that move beyond ad-hoc responses to create comprehensive, well-communicated, and consistently applied fertility support frameworks. By addressing the universal fundamentals of clear policies, manager capability, effective communication, psychological safety, wellbeing support, and financial consideration, whilst remaining sensitive to cultural contexts, employers can bridge the gap between their intentions and employees' lived experiences.

Supporting employees through fertility treatment is an investment in employee loyalty, talent retention, and competitive advantage. The question is not whether organisations can afford to provide this support but whether they can afford not to.



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Acknowledgements



Fertility Matters at Work (FMAW) is a UK-based non-profit social enterprise founded in 2020 by three women who experienced firsthand the challenges of navigating fertility issues while working. We partner with UK and global organisations to build fertility-friendly workplaces through our comprehensive Fertility Friendly Employer accreditation programme.

Our approach encompasses policy development and guidance, awareness campaigns, line manager training, peer support networks, employee education, e-learning modules, and practical resources, all designed to foster supportive practices and cultures around fertility.

Beyond direct employer engagement, we drive systemic change through research that has been cited in UK Parliament and thought leadership across media platforms and industry events, positioning us as leading voices in workplace fertility support.

For more information visit fertilitymattersatwork.com or contact info@fertilitymattersatwork.com



Ferring Pharmaceuticals is a privately owned, specialty biopharmaceutical group committed to building families and helping people live better lives. We are leaders in reproductive medicine with a strong heritage in gastroenterology and urology, and are at the forefront of innovation in uro-oncology gene therapy. Ferring was founded in 1950 and employs more than 7,000 people worldwide. The company is headquartered in Saint-Prex, Switzerland, and has operating subsidiaries in more than 50 countries which market its medicines in over 100 countries.

Learn more at www.ferring.com



This Can Happen supports companies globally to understand, educate, and measure mental wellbeing in their workplace. We are trusted partners in mental wellbeing of global organisations, empowering them to prioritize mental wellbeing and create supportive environments for their employees. For more information visit thiscanhappenglobal.com or hello@thiscanhappenglobal.com.

We curate and run bespoke insight programs to support clients understand topics that are less well understood and research; topics to date have included this fertility research as well as grief in the workplace.

Patient groups



NPO Fine was established in 2004 to support people who experience infertility in the past, present, or future, with 2700 members. Its mission is to create an environment where those undergoing infertility treatment can receive accurate information and make informed decisions about their care. Fine also aims to ensure that individuals do not feel isolated and can maintain a healthy mental state.

President - Yasue Nosohara

Contact - finekouhou@j-fine.jp



NPO Forecia was established in 2017 and focuses on supporting the balance between infertility treatment and work. It collaborates with companies, municipalities, and schools to create a system that addresses reproductive issues across society as a whole.

President - Koki Sato

Contact - info@forecia-jp.com



Pink Elephants provides the latest resources, information, and peer support for anyone impacted by early pregnancy loss. Using evidence, empathy, and connection, our digital-first approach offers a single source of specialist support, whenever and wherever it's needed—for anyone who has directly experienced it, for family and friends, corporate partners, or healthcare professionals seeking proven ways to help.

Website - <https://www.pinkelephants.org.au/>



Collectif BAMP, founded in 2013, is a mission-driven French non-profit bringing together patients, ex-patients, and individuals affected by infertility or pursuing medically assisted reproduction (MAR). Recognized as being of public interest and accredited by the Ministry of Health since 2022, Collectif BAMP advocates for the rights, support, and representation of those undergoing MAR. We are deeply committed to raising awareness of the impact of fertility treatment on professional life and supporting companies to better integrate these issues into their HR policies.

Website - <https://www.bamp.fr/>



The “Our Stork” Association (Stowarzyszenie “Nasz Bocian”) has been active since 2002 as the voice of Polish patients struggling with infertility. We support people on their path to parenthood by providing reliable information about treatment and adoption, as well as offering psychological support.

We carry out educational and advocacy activities in cooperation with experts, institutions, and local governments. As a member of Fertility Europe, we work to ensure equal access to treatment and to combat discrimination against people facing infertility across Europe.

We stand for safe, ethical, and effective fertility care for everyone—patients, donors, and children born thanks to treatment.

Website - <https://nasz-bocian.pl/>



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