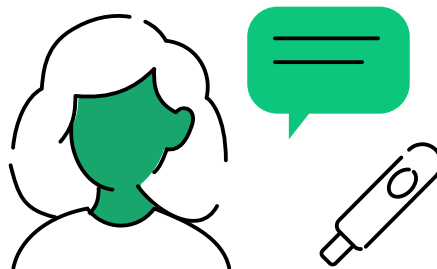


How to set boundaries around your fertility journey

When, how, and with whom to share your fertility journey is a highly personal decision. It's also something we rarely think about until we feel bombarded.

Use these questions as a starting point to define how you'll approach these conversations and who you'll include in your journey.



- Before we get into this...do you want children?

- If yes, how do you want to have children?

- What fears do you have about fertility?
Child-raising?

- What do you NEVER want mentioned in your fertility conversations?

- If the conversation of fertility comes up, how would you handle it? Try playing it out with different types of people: family, close friends, a co-worker

- Who are three people you would like to know about your journey? What makes you feel like you can trust them with this conversation?

- Who are three people you would definitely NOT like to share your journey with? How can you create strong boundaries with these people?

- What's the best possible outcome for conversations around your fertility journey (i.e. I have complete privacy, my family supports me...)

We support your decisions

Fertility can bring up a lot of questions, from "am I ready?" to "what do I do now?" Our Mental Health therapists are here to help you navigate your path to parenthood and support your decision making.

Learn more about Mental Health at
asktia.com/services/mentalhealth



For information on fertility at Tia visit
asktia.com/services/fertility

Fertility mental health tips



BY ROSEMARY MUNOZ
MENTAL HEALTH THERAPIST

Rosemary has over 16 years of experience as a Licensed Mental Health Therapist. She is especially skilled in helping women navigate their path to parenthood. Rosemary sees her role as one of support: providing guidance while helping patients identify strategies for whatever fertility stage they're in.

Here she shares tips for creating clear boundaries to communicate your fertility journey in a way that feels right to you.

1 PROTECT YOUR MENTAL HEALTH

The fertility journey will coincide with trying to figure a lot of things out. **Putting energy into our mental health is important during a transitional time.**

2 ASK FOR SPACE

When asking for space, focus on your feelings as a reason, rather than focusing on what aspects of the other person you need space from.

3 INTENTIONALLY REFLECT ON YOUR WHY

By feeling grounded in your decision and the reasons for it, you will convey confidence when sharing.

4 FOCUS ON THE POSITIVES

When you feel good about your decision, other people will too.

Ex: I can't wait to spend the money I would have spent on diapers on traveling!

Notes:

What did this bring up for you? Use this space to write down open questions or reflect on anything you took away from this exercise.



For information on fertility at Tia visit asktia.com/services/fertility

When your _____ asks if you're trying?

When it comes to setting boundaries, practice helps. Use this chart to match our replies to the person in your life who needs to hear it most.

Who's Asking:

Brunch Friend

Nosy Neighbor

Care Provider

Pregnant Sister

Co-Worker

Mom

How You Can Respond:

Show your cards:

I am feeling overwhelmed and need some time to focus inward, I hope you can respect me.

Make it funny:

I don't know, but I'm starting my list of babysitters now. Can I count you in?

Be honest about where you're at:

We're just starting our fertility journey & would love your advice on the road ahead.

Meet their question with questions:

What made you feel ready to start a family? How long did you try?

Tell them how it makes you feel:

This question makes me feel like I'm not enough and my decisions aren't valued.

Be Direct:

This isn't something we're ready to talk about. If that changes, you'll be the first to know.

Take Five:

Do you mind if I step outside for a second? *Takes four calming breaths to pause and recenter.*



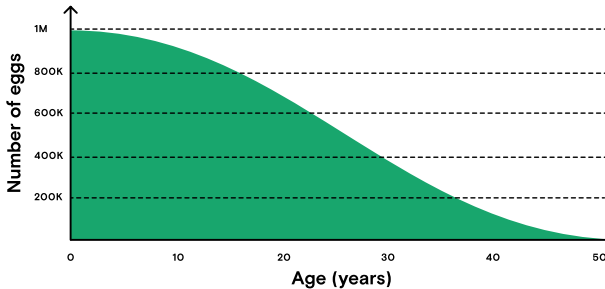
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Define Your Terms

Use our **fertility glossary** to sort through all of the acronyms and intimidating medical terms as you navigate your journey on your terms.

AMH:

Anti-Müllerian hormone (AMH) is one of the **most reliable measures of ovarian reserve** (aka how many eggs you have). Since AMH correlates with the number of eggs available for ovulation, it can help predict the outcomes of egg freezing and IVF. AMH peaks at age 25, and then begins to gradually decline—so checking your AMH can help you stay ahead of the curve.



AFC:

Antral follicle count (AFC), is a measurement of **antral follicles** (also known as **resting follicles**) in the ovaries. Follicles are the structures that contain eggs. A low antral follicle count, may indicate a lower ovarian reserve. The AFC is measured by transvaginal ultrasound.

Endocrine Disruptors:

Endocrine Disruptors are chemicals commonly found in our environment that look like and mimic the actions of our hormones. These chemicals may block the function of estrogen and other sex hormones and contribute to irregular periods, growth of endometrial lining in the womb, premature ovarian insufficiency or pregnancy loss—so it's important to minimize exposure. More research is needed to learn more about the possible harms of endocrine disruptors in our environment. Look out for chemicals such as: **Lead, Phthalates, BPA, Arsenic, Mercury, Dioxin.**

OR:

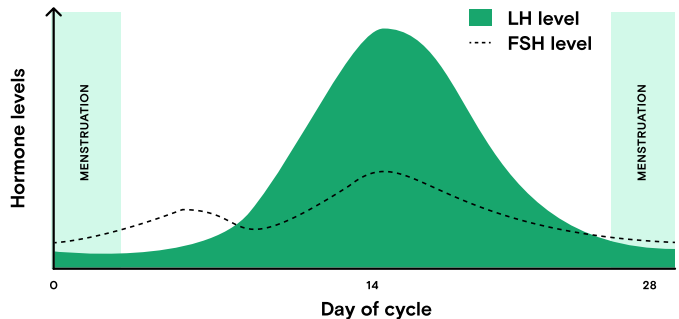
Ovarian reserve (OR) refers to an individual's **fertility potential**, or the **number and quality of eggs in the ovaries**. Ovarian reserve naturally decreases with age. BUT for women considering egg freezing—a woman's ovarian reserve directly affects her chance of success with egg freezing and in vitro fertilization.

HcG:

Human chorionic gonadotropin (HcG) is sometimes called "the pregnancy hormone" because of its important role in **maintaining pregnancy**. Home pregnancy tests as well as blood pregnancy tests both test for the level of HcG. HCG levels quickly rise during the first few weeks of pregnancy—so your HCG levels not only signal pregnancy but are also a way to measure whether a pregnancy is developing correctly.

FSH:

Follicle stimulating hormone (FSH) is responsible for **signaling the development of a number of ovarian follicles** and ultimately maturing a single follicle and egg for ovulation during each monthly cycle.



LH:

Luteinizing Hormone (LH) is the **driving hormone behind ovulation**. A timely surge in LH stimulates the dominant ovarian follicle to release the mature egg, and stimulates the corpus luteum (the remaining components of the ovarian follicle after it releases the egg) to produce progesterone. LH is the hormone tested by over the counter ovulation prediction kits.

Progesterone:

Progesterone is the hormone that dominates the second half of your cycle. **Progesterone helps develop the uterine lining and prepares for a potential pregnancy.** If pregnancy occurs, progesterone continues to rise to support the developing embryo. If pregnancy does not occur, the decrease in progesterone signals the body to shed the uterine lining, resulting in menstruation.

