

Infertile women want more support

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Infertility affects one in six couples and can create significant stress for families. Research conducted at the University of Iowa shows women may not be receiving enough of the right kind of support and suggests ways that loved ones can do more to provide encouragement and assistance.

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Many women coping with infertility count on relatives or close friends for encouragement and assistance. But according to research at the University of Iowa, when it comes to support, women may not be receiving enough—or even the right kind.

"Infertility is a more prevalent issue than people realize. It affects one in six couples, and in almost all cases, [women](#) want more support than they are getting," says Keli Steuber, assistant professor in communication studies at the UI and co-author of the paper, published this week in the print edition of the journal *Communication Monographs*.

The study comes on the heels of National Infertility Awareness Week, a movement started in 1989 by the National Infertility Association to raise awareness about [infertility](#) and to encourage the public to better understand their reproductive health.

Steuber and Andrew High, assistant professor in [communication studies](#) at the UI and the paper's co-author, surveyed more than 300 women across the nation who were coping with infertility.

They found that infertile women want more support of all kinds—ranging from practical aid such as help with household chores, to advice and emotional reassurance like hearing a spouse say, "I love you."

Without this support, women wrestling with infertility may become depressed or be less able to cope with stress, according to the researchers.

The good news is there are easy ways a spouse, relative, or friend can be more supportive, say Steuber and High. Though family and friends have the best of intentions, the study found they tend to dole out too much advice.

The researchers say it's best to keep the advice to a minimum and instead focus on other ways to be supportive. That could be as simple as cooking a meal or connecting your loved one to other women with whom she can share her feelings.

"People are overwhelmed by unsolicited advice from family and friends," says Steuber, who cites mom, female relatives, and other women with children as key perpetrators when it comes to doling out excessive information.

"Parents perceive themselves to be experts in having children, but they may not be well-informed. That puts women in an awkward position," she explains.

As for spouses? High and Steuber found that while women cited their husbands as the strongest source of [emotional support](#), many felt their spouses could provide more.

That's not surprising, say High and Steuber, who note previous research has suggested that men feel uncomfortable talking about infertility issues. That can leave women feeling like some of their emotional needs are not being addressed.

"It's a very real strain on the marriage," says High.

The researchers suggest that husbands become a more active participant in their wives' infertility treatments by attending appointments, advocating for their spouse, and helping them explore alternatives to pregnancy or other treatment options.

"Becoming more involved gives you the opportunity to be more emotionally invested," says High.

And Steuber adds that couples who stick together through the infertility experience often have a stronger marital foundation moving forward. "If you can find effective, supportive ways to communicate with each other, you're better equipped to handle stressors down the road," she explains.

In addition to [close friends](#) and family, the researchers also looked at the support provided by doctors and nurses. "We found those in healthcare often see themselves as sources of information rather than someone who can provide emotional support or suggest a valuable network of contacts," says High.

Though the researchers acknowledge there is no simple solution, they suggest doctors and nurses could help women feel better supported by spending additional face time with their patients, phrasing questions in an empathetic manner, and handing out resources tailored to individual needs.

Provided by University of Iowa

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