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## **Psychological Distress, Stress and Anxiety among Women with Infertility**

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### **ABSTRACT**

A woman's life changes after entering into motherhood. It is such an adored, lovely and respected time. Tasks assigned in this phase aren't because of force; they originate from mind, heart and body. It has been noted that infertility concerns affect women all over the world, and that the number of instances is rising. In that situation, psychological variables have a significant impact on the physical and emotional well-being of infertile women. Women who are not able to conceive often report feelings of stress, anxiety and psychological distress. The procedures, medications and social support have also affected the well being of women with infertility, making them more anxious and stressed. A sample of 30 women who were getting treatment for infertility and aged between 25-40 years of age were taken. Standardized tests were used to measure psychological distress, stress and anxiety. Results indicated that there is a positive correlation between psychological distress, stress and anxiety among women with infertility which means variables are directly proportional to each other. Appropriate care needs to be given in the form of social support, especially from spouse and family which will reduce the severity of the symptoms and help from psychologists should be asked by the gynecologists if a female patient of infertility shows any type of signs or symptoms of psychological disorder which needs to be addressed. Awareness also needs to be made among women on how to seek help if any of them have any psychological discomfort.

**Keywords:** Psychological Distress, Stress, Anxiety, Women, Infertility

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### **Introduction**

“Motherhood is wonderful, but it’s also hard work. It’s the logistics more than anything. You discover you have reserves of energy you didn’t know you had.” –Deborah Mailman

A woman's life enters a new phase when entering into motherhood. It involves all the duties in raising the young individual and providing them with necessary care, attention and love. Motherhood also entails providing their child with ongoing support so the child can navigate their way through current difficulties and upcoming obstacles as they mature. Motherhood can also be viewed as understanding their child’s psychology too. Being a mother involves accepting their child’s weaknesses and imperfections. The mothers are the best mentors and light of guidance in this regard, giving the kids the mental fortitude they need to conquer challenges. Being a mother is all about gaining new experiences and knowledge every day. Every mother has her own unique definition of motherhood.

According to UNICEF, in India 67,385 babies are born every day, that is one sixth of the world’s child births. Females encounter a variety of challenges and difficulties that have a varied impact on their physical and mental well being in the process of motherhood. Such as juggling hectic and demanding work schedules, social factors, giving proper time to household chores, getting enough sleep and personal time. One of the biggest challenges faced by women is the issue of infertility. WHO has defined (International Conference on Population and Development, 1994) reproductive health as “Reproductive health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes. Reproductive health implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so.”

A study shows that infertility rate differs significantly within the same Indian region among castes and tribes as well as between different states. According to WHO data, 11.8% of Indian women in the reproductive age range are predicted to have primary infertility (Katole and Saoji, 2019). A research done on Nigerian women (Upkong & Dominic, 2006) found that on all outcome measures of psychopathology, women who were infertile performed significantly worse. The findings of the multiple regression analysis demonstrated that, due to the impacts of age, not having at least one child, and poor spouse support, the socio-demographic characteristics of the women with infertility contributed to the prediction of psychiatric morbidity.

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### **Psychological Distress**

As defined by APA “Psychological distress a set of painful mental and physical symptoms that are associated with normal fluctuations of mood in most people. In some cases, however, psychological distress may indicate the beginning of major depressive disorder, anxiety disorder, schizophrenia,

somatization disorder, or a variety of other clinical conditions. It is thought to be what is assessed by many putative self-report measures of depression and anxiety". Psychological distress is a general term for stress, anxiety, and depression symptoms. High levels of psychological distress can be a sign of common mental illnesses like depression and anxiety disorders and are a sign of poor mental health (Viertiö et al, 2021).

Rarely is psychological distress described as a separate concept; instead, it is frequently discussed in the context of strain, stress, and distress (Ridner, 2004). Poor mental health due to psychological distress may also affect physical well being of an individual. A study shows that infertile women had a significant rate of psychological distress (Cui et al, 2021).

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## Stress

APA describes stress as "the physiological or psychological response to internal or external stressors. Stress involves changes affecting nearly every system of the body, influencing how people feel and behave". Stress has an impact on the body, cognition, and behavior. As implied by WHO "stress can be defined as any type of change that causes physical, emotional or psychological strain. Stress is your body's response to anything that requires attention or action. Everyone experiences stress to some degree. The way you respond to stress, however, make a big difference to your overall well-being."

A multitude of physiological systems, including the autonomic nervous system, the hypothalamic-pituitary-adrenal axis, and the immune system, can be significantly impacted by stressful life experiences (Kemeny, 2003). Acute stress, episodic acute stress, and chronic stress are the three types of stress, according to the American Psychological Association.

Infertility can be intensified by stress, which can also have a negative impact on how well treatments work. Recent research suggests that psychological counseling, particularly mind-body stress reduction, can considerably increase women's chances of getting pregnant (Hajelaa et al, 2016).

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## Anxiety

Anxiety may be defined as "apprehension, tension, or uneasiness that stems from the anticipation of danger, which may be internal or external" (Diagnostic and Statistical Manual of Mental Disorders, 1980). One of the most common mental health issues is anxiety, with 29% of the population reporting having at least one anxiety condition (Kessler et al., 2005). The absence of activity in the nucleus accumbens, which is located in the hippocampus, is typically the cause of anxiety sensations.

According to APA,(2022) "Anxiety is an emotion characterized by feelings of tension, worried thoughts, and physical changes like increased blood pressure". Although they are not the same thing, fear and anxiety are frequently used interchangeably. Recent advances in cognition and emotion theory indicate that anxiety is mostly responsible for negative feelings (Chorpita & Barlow, 1998).

A study shows link of anxiety and women with infertility (Lakatos et al. 2017) as age, social anxiety, sexual anxiety, and the stress of a mother-child bond were all connected with depressive and anxious symptoms in infertile women. Financial stress was also linked to trait anxiety.

### *Purpose*

The purpose is to study psychological distress, stress, and anxiety among women with infertility.

### *Hypothesis*

There will be significant positive correlation in psychological distress, stress, and anxiety among women with infertility.

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## Method

### *Sample*

The sample consisted of 30 women aged 25-40 who had infertility issues and were getting treatment for it. The sample was collected from the local private clinics from Aligarh, Uttar Pradesh, India.

### *Measures*

1. **Kessler Psychological Distress Scale:** As developed by (Kessler et al, 2003). It is a self-report of psychological distress. The scale involves 10 questions about emotional states each with a five-level response scale.
2. **Perceived Stress Scale:** As developed by (Cohen, Kamarck & Mermelstein, 1983). It is a 10-item stress scale and has responses in 5 –points from 'never' to often'.
3. **Hamilton Anxiety Rating Scale:** As developed by (Hamilton, 1959) The scale is used to measure anxiety and its severity. It is a 14 itemed scale where each item is scored by 0 (not present) to 4 (severe).

### Procedure

The scales were administered in clinics after the participants had been made aware of the study's objective. In order to garner their honest responses without any fear or nervousness, the participants were given assurances on the confidentiality of the data. They were given standard psychological assessments.

### Analysis of Data

Results:

**Table 1: N, Mean and Standard Deviation**

	Psychological Distress	Stress	Anxiety
N	30	30	30
Mean	30.6	30.6	30.9
Standard deviation	1.14	1.55	1.57

**Table 2: Correlation of variables**

	Psychological Distress	Stress	Anxiety
Psychological Distress	—		
Stress	0.479	**	—
Anxiety	0.215	0.469 **	—

Note. \*  $p < .05$ , \*\*  $p < .01$ , \*\*\*  $p < .001$

### Discussion:

There is a significant positive correlation between psychological distress and stress ( $r = 0.479$  at  $p > 0.01$ ). There is a positive correlation between stress and anxiety ( $r = 0.469$  at  $p > 0.01$ ). However, there was positive but no significant relationship between anxiety and psychological distress ( $r = 0.215$ ). Hence, hypothesis is accepted.

Hypothesis of the study was to determine positive correlation in psychological distress, stress, and anxiety among women with infertility and were getting treatment for it. According to the values provided in the table, it is shown that there is a positive correlation between psychological distress, stress and anxiety. Thus, it can be concluded that variables are directly proportional to each other.

Yusuf (2016) did a study on 100 women with infertility and found that when compared to women in the control group, women with infertility had a higher prevalence of anxiety, stress and depression. A study done in Kuwait on 120 infertile women stated that occurrence and severity of psychological distress was high and supported referrals of these patients for psychological assessment (Fido, 2004).

### Conclusion:

This research aims to study the correlation between psychological distress, stress and anxiety among women with infertility. It was proved that there is a positive correlation between psychological distress, stress and anxiety. The treatment process of infertility is hectic and social support is important to have while undergoing this process. The detection of psychological issues in infertile women needs special care. Sufficient psychological support, adequate therapy, moderate socioeconomic level, and better spouse support will help in establishing the mental well being of women. Psychotherapies and relaxation techniques can be provided by psychologists to the females showing symptoms of disorders. Awareness of psychological well being and how to seek help is also important to be conducted among women.

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