

ORIGINAL ARTICLE

INTERFAMILIAL PROBLEMS AND MARITAL DISSATISFACTION
AMONG FERTILE AND INFERTILE COUPLES

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Background: Infertility is a major reproductive health problem in the life of married couples, especially those living in a family system. According to the World Health Organization, there are currently 50–80 million infertile couples in the world. The present study is aimed to investigate family relations and marital dissatisfaction among infertile and fertile couples. **Method:** This cross-sectional comparative study was conducted from March to October 2015. A sample of 150 couples was taken from twin cities of Islamabad and Rawalpindi. Index of family relations and Index of marital satisfaction were used to measure the study variables. **Results:** Infertile couples had low levels of marital satisfaction as compared to fertile couples. Infertile women had low marital satisfaction when compared with infertile men. The two groups had significant differences with respect to family relations. **Conclusion:** Infertile couples are more likely to reveal higher degree of marital dissatisfaction and confront more intra-familial stressors as compared to fertile couples.

Keywords: Family relations, marital satisfaction, fertile and infertile couples

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INTRODUCTION

One of the main reasons for marriage of a man and a woman is waiting for the birth of a child in their shared life.¹ Infertility is a major issue and one of the bitterest experiences of marital life. Despite the progress in regeneration, auxiliary equipment and techniques which help infertile couples to manage and reduce fertility problems, almost 80 million people in this world are experiencing infertility in their lives.² Different researches showed that fertility rate has increased 50% than before since the initial reports.³ Couples with marital dissatisfaction often experiences unkindness, break-up, and feelings of being alone from their spouse or from family side. They highlight their differences rather than downplaying it. They view these differences as signs of constant, global, and blameable deficits or shortcomings in the partner.⁴

Variety of factors has been linked to marital discord in couples. Marital discord increases with the onset of the child-rearing years, predominantly when the couples are identified as having the problem of infertility.⁵ It is observed that infertility, or incapability to consider, or carry live birth pregnancy after one year of regular sexual relations without the use of contraceptives, disturbs the marital satisfaction in infertile couples.⁶ When a couple realizes that they are unable to have children naturally, it is painful, unexpected, and often a life changing experience for them.⁷ As a result, infertile couples often discover that they have relatively low problem solving ability and limited capability to do teamwork. Through the process of gender role discrimination, female learn that it is essential for them to be capable of having a baby after marriage. Incapability to conceive a child may have

poor impact on a marital relationship, mostly when only one partner is impotent. The partner with an inability to conceive generally feels threatened, and in some of the cases, fertile spouse may blame the other partner. Generally gender differences exist in couples' expectations about having kids; female usually express a greater need for a child.⁸ As far as the treatment options concerned, usually there is the difference of the opinions among the partners as when to proceed or end the treatment. This conflict can also affect the quality of marital relationship. One of the important symptoms of increasing marital discord in infertile couple is males' hostility towards his wife. In such cases a husband may express his disappointment in the marriage and sometimes accuse their wives of ruining their lives.⁹ Most of the couples experience state of hopelessness and helplessness. They feel that they have no control over their lives. And because of this childlessness the foundation of their marriage is threatened. On the whole, a wife would feel that they are not receiving the right kind of emotional support from their partners.¹⁰

Men and women tend to react differently to their diagnosis of infertility.¹¹ Women perceive the situation as a loss and exceedingly distressing. Men usually do not perceive infertility as a devastating event but they only consider it as a bad break. Women facing infertility experience relatively greater loss and marital discord than men. This may be due to the fact that they are attributing the reasons of infertility to either the past behaviours or their own failure¹², or due to societal biases regarding the issue. Women are usually blamed for childlessness in an infertile couple.

The partners who experience almost equal level of stress due to infertility reported higher levels of

marital adjustment as compared to those partners who experience the stress differently.¹³ Female members of those couples in which both partners are infertile report less marital adjustment and more sexual dissatisfaction than their husbands. Women with infertility diagnosis express higher distress and marital discord than their male counterparts.¹⁴

Infertility of men is not declared in practice whereas women are usually inquired about treatment for infertility. Although husbands show no psychosocial reaction towards infertility (regardless of the diagnosis) the infertile wives show higher level of desolation, low self-esteem, and low self-acceptance as compared to those women where the cause of infertility lies within the men. The couples who are diagnosed with male being responsible for infertility report more psychological changes; particularly a discord in marital relationship when comparison is made with those couples in which female partner is infertile.¹⁵

The present study was planned to investigate if there is a significant relationship between marital satisfaction and family stressors. Moreover, the study investigated differences between infertile and fertile couples with respect to marital satisfaction and intra-familial stressors.

METHODOLOGY

The sample of the current study comprised of 150 couples (70 infertile and 80 fertile couples). The age of the sample ranged from 20 to 50 years. In both groups marriage duration was minimum 3 and maximum 10 years. Data was collected from Islamabad and Rawalpindi. Sample was collected using snowball sampling. Eighty-eight couples belonged to joint families whereas 62 were from nuclear family settings.

Data was collected with the help of two scales. The Index of Family Relations (IFR) designed to measure the severity, or level of a problem that family members exhibit (parents and children). It is standardized by Hudson.¹⁶ The IFR comprise of 25 items with cut-off score of 30. The minimum score on the scale is 25 and the maximum score is 125. Reverses scoring have been assigned to items No. 1, 2, 4, 5, 8, 14, 15, 17, 18, 20, 21, and 23. Index of marital satisfaction (IMS)¹⁷ is designed to measure the severity and the level of a problem that a spouse experiences in the marital relationship. It is a likert type scale having 25 items where 1= rarely or none of the time, and 5= most or all time. The reverse scored items 1, 3, 5, 8, 9, 11, 13, 16, 17, 19, 20, 21, and 23 are at first reverse scored and then the scores on all the 25 items are added. Higher scores on scale represent more severe problems while lower scores show less severity or relative absence of problems. The Clinical cut-off score is 30.

Couples were contacted at their homes, work place and were briefed about the objectives of the study.

Subjects were assured of the confidentiality of the given information and they were briefed that the information sought from them would be only used for research purpose. Partners of both couples (fertile and infertile) responded to the questionnaires separately. All information gathered from the participants' scores was statistically analyzed using SPSS-20.

RESULTS

Correlation and *t*-test for independent sample was computed to get sample results of infertile and fertile couples. Index of family relations and index of marital satisfaction among infertile and fertile couples correlated significantly (0.88, $p=0.01$).

Table-1 shows a significant difference in marital satisfaction between fertile and infertile couples. Infertile couples experience less marital satisfaction and more marital discord than fertile couples. There was a significant difference in family stressors between fertile and infertile couples.

Table-1: Means, Standard Deviations, and *t* values for the Scores of Infertile and Fertile Couples on IFR and IMS (n=150)

	Fertile Couples (n=70, Mean±SD)	Infertile Couples (n=80, Mean±SD)	<i>t</i> (df)	<i>p</i>	Cohen's d
IFR	30.52±17.81	22.01±14.85	5.19 (148)	0.01	0.519
IMS	26.75±10.21	20.31±10.87	4.32 (148)	0.01	0.610

DISCUSSION

Infertility has a significant negative impact on the psychological well-being of couples. Changes occur in the couple's relationship due to their fertility status. These may include feeling of being emotionally detached or having a need to withdraw from intimacy and close relationships.¹⁷ In view of the implications of individual's psychological reactions to infertility, it is important to accept that infertility will possibly result in marital discord.¹⁸

In the present study, it was found that infertile couples had significant discord in their marital relations than fertile couples. Such findings also suggest that infertile couples have higher tendency to be harsh with marriages than those of fertile couples. These results are quite consistent with the findings of earlier research regarding the psychosocial effects of infertility, in which it was found that infertile individuals experience greater marital discord, less satisfaction, lower levels of sexual and marital gratification, and low self-esteem, most of the time.¹⁹ They make conscious delay in career issues and existing housing condition, which disturb their marital relationship and may experience marital discord.

In almost all societies a woman's reproductive ability is often closely associated with her status as a female, so that when a woman is unable to reproduce, she may not have the feelings of femininity, but this never happens to male spouse.

Marital dissatisfaction can be viewed as a stressor in the home environment for infertile couples. In the present study the impact of family systems on marital dissatisfaction was found to be significant. The reason for this difference may be attributed to load of responsibilities in a joint family system in addition to a hope from other family members, infertile couples feel undue pressure that may lead to high degree of marital discord. Such findings are better understood if one takes into account in the cultural context of Pakistani familial system. In our systems elderly members present in the family may put pressure on infertile couples which can become additional stressors for such couples. The elder members of the family urge for grandchildren especially in Asian family cultural system.²⁰

The couples with infertility face more intra-familial stressors than the couples with fertility which can have an impact on their internal family relations and marital dissatisfaction. The findings are inline with a previous study²¹ in regard that couples who are infertile would experience disturbed family relations and they may feel fear, ashamed and hesitant to face the society. This may also lead to a sense of sorrow and self-blame.

CONCLUSION

Infertile couples are more likely to experience higher degree of marital dissatisfaction when compared with fertile couples. Women with diagnosis of infertility tend to have high levels of marital discord and less marital satisfaction as compared to men. The partner who is diagnosed with the cause of infertility is likely to have marital discord as compared to other partner with no cause of infertility. The couples with infertility, report more problematic family relationship as compared to fertile couples.

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