



## THE INFERTILITY JOURNEY: A GUIDE FOR COPING

---

*Sharon N. Covington, MSW, LCSW-C*

Infertility is an experience that strikes at the very core of who we are—our sense of self, connection to others, values, roles, goals and dreams. The ability to procreate and regenerate is considered one of the most basic of all human drives, as well as the core need to bear and raise children. This drive propels people on a quest for fertility and family, yet is a journey that few people are trained to take or are prepared for what to expect.

When the ability to reproduce is thwarted, a crisis ensues and impacts all aspects a couple's life: relationships with others, sense of health, continuity of life, self-esteem, spirituality, and on and on. As in any crisis, there is an opportunity for emotional growth or the danger of increased vulnerability to distress. The crisis, also precipitates a multifaceted sense of loss, which is unique to each person and, yet, universal to the nature of infertility. The losses may include both real and symbolic things, from professional opportunities that are put on hold or turned down, to time passing by waiting for the dream-child. Infertile couples often talk of the loss of control over their lives, body, and future. For many people who are use to setting goals in their lives, working on and achieving them, it is this loss of control over what is so basic that is so distressing.

The losses of infertility, in turn, create powerful emotions. Feelings of disbelief, anger, sadness, guilt, blame, anxiety, and depression occur in a somewhat predictable and repetitive occurrence. Couples are often surprised to learn that the bailiwick of feelings they are experiencing is an identifiable process called grief. These feelings can be like an unremitting rollercoaster ride of emotions that go up and down and all around, without an end in sight. The ability to grieve the losses of infertility is challenged due to the chronic nature of the experience. It is also made more difficult because it is a profound loss that is invisible to others and, in fact, feels like a gapping wound or hole that cannot be seen, or often understood, by the fertile world. The consequence is that couples often end up experiencing intense emotions in isolation.

Many people spend much of their life trying *not* to get pregnant so when they are ready to start a family, they usually don't anticipate having a problem. The longer time goes on without a baby, the more difficult the journey becomes. Repeated monthly cycles of hope, anticipation, and then sadness often create a looming sense of despair as couples wonder not *when* but *if* they will ever become parents. Both the dream and the drive can be shattered the longer time goes on.

When the quest of a child turns from the bedroom to the doctor's office new challenges occur. What was previously very private and personal--your sex life and your body--suddenly becomes of intense interest to perfect (though well-intentioned and trained) strangers. You rely on these strangers to guide and assist you with the most important journey of you life. For most people, it is like being transported to a new world or country where you don't know the language; the terrain is unfamiliar; you are exposed to unknown rituals and remedies; it is

costing you dearly for the experience; and you have no guarantee you will ever reach your destination. No wonder infertility is stressful!

And then comes up the question (often by family members or friends), is stress causing you to not get pregnant? So, now you are wondering if you are doing this to yourself and, if you could just relax and control your feelings, would it suddenly happen? The opportunity for guilt and blame is endless. Thus it is important to state that while there is no doubt the experience of infertility is inherently stressful, there is no conclusive evidence that it is caused by stress.

Understanding that infertility is a life crisis with multiple losses and which precipitate a chronic grief reaction that it is inherently stressful, are the beginning steps in knowing how to cope with this experience. The following are other tips I have learned from my years of working with individuals and couples struggling with impaired fertility. Consider these pointers as “tools of the trade” as you work through your infertility.

1. **Approach infertility as a couple problem.** No matter who may be identified as causing the problem, infertility is shared by both of you and is best addressed as a couple.
2. **Become educated on the medical and emotional components of infertility.** There is power in knowledge and becoming educated on all aspects of infertility helps with a sense of powerlessness often expressed by patients. Consider yourself as a part of the treatment team, with a responsibility to be well informed, and not just “the patient”.
3. **Identify and utilize support as individuals and as a couple.** Finding support and opportunities to talk about the experience with others who understand, is one of the most important things you can do to get through infertility. This needs to be as an individual, as well as within your relationship. Sometimes, couples rely on each other as their sole means of emotional support, and quickly become frustrated and depleted. You cannot provide all that is needed emotionally for your partner, let alone yourself. Thus, support groups and organizations, such as Resolve ([www.resolve.org](http://www.resolve.org)) provide a wonderful resource for information and support for both of you.
4. **Find ways to manage stress in your life.** Remember that infertility is inherently stressful and it is important to find ways to deal with it. Learning mind-body techniques, such as mediation, breathing, yoga, and cognitive restructuring, or better yet, joining an infertility mind-body support group can teach you skills and give you friendships that you will have for life. Exercise, eating right, getting enough rest, and planning fun time are all aspects of managing stress as well as putting balance in your life.
5. **Recognize what you do have control over in your life and what you don't.** Part of managing stress is understanding what you have control over and what you don't. You may have control over what job assignments you take on at work, but don't have control over what happens during a treatment cycle. You do have control over the way you manage a cycle (taking shots, being monitored, etc.) but don't have control over how many follicles you produce or even becoming pregnant. Recognizing the difference helps.
6. **Realize that infertility is not experienced in a vacuum.** Other life events are occurring on a daily basis that require your energy and attention, and may add to your stress. Sick relatives, job demands, a promotion, a move, and even world events such as Sept. 11<sup>th</sup>, impact your life and all the things you are feeling. These issues add to your struggles and, as well, have the opportunity to bring you joy. Remember that infertility is just one part of your life and it is important that it not become your whole life.
7. **Periodically reexamine your goals.** When you begin the journey to have a family, it is difficult to anticipate how you will feel or how far you will go in this quest. Feelings change over time and it is useful to occasionally sit down as a couple and reevaluate where you are in the process. Ask questions such as to what other treatments are we

willing to consider; how much longer are we willing to go; and/or are we ready to consider other options? It is interesting to note studies have found that the top reason people stop infertility treatment is not that they run out of money, but that they run out of emotional energy.

8. **Explore family building options while in treatment.** Learning more about alternative means of building a family, such as adoption or donor gametes, helps to empower you. Some people feel that they have to fail at all forms of medical treatment before looking into alternatives, which exacerbates feelings that these are “second best” rather than “second choice” options. Exploring these options does not mean that you are actively pursuing them (undergoing a homestudy, etc.) but rather learning more about ways to build a family. Grieving must be done before any alternative can be fully embraced as your way to a have a child.
9. **Consider counseling as a resource and support.** Many people think of counseling as something you do if you are having big problems. However, the emerging area of infertility counseling provides a forum for decision-making, coping/skills building, information gathering, and emotional healing. Thus, think about it as a resource to help you learn and grown, and the counselor as one of your guides. To find a mental health professional trained in infertility, ask your physician for names, go to Resolve, or to the website of the American Society of Reproductive Medicine to search for counselors in your area ([http://www.asrm.org/Professionals/PG-SIG-Affiliated\\_Soc/MHPG/index.html](http://www.asrm.org/Professionals/PG-SIG-Affiliated_Soc/MHPG/index.html)).

While infertility is a journey that you probably did not intend to go on, it is also, a learning experience that will teach you skills for other unexpected events in your life. And, if you goal at the end is to have a child, I believe you will...it just may not be as you had thought or planned at the beginning of your journey, but nonetheless s/he will be every bit your child in the end.

Copyright: All rights reserved/ By permission only  
Sharon N. Covington, MSW, LCSW-C  
15001 Shady Grove Road, Suite 400  
Rockville, Md. 20850  
301-279-9030  
[sharon.covington@integrated.com](mailto:sharon.covington@integrated.com)