

HOW COUNSELLING CAN HELP WITH FERTILITY PROBLEMS

Trying to start a family is a traumatic experience when it results in failure month after month, especially when friends, family and work mates all appear to fall pregnant at the drop of a hat. For those of you who are feeling quite overwhelmed with the disappointment of not having a family, you may find a consultation with our counsellor helpful

Counselling can also be useful for individuals and couples as support after diagnosis, to explore treatment options, and as support during and after treatment. It gives space for individuals and/or couples to express feelings, explore issues or gain new perspectives in a safe and confidential manner.

We also recommend counselling for all patients using our cryopreservation service, whether for medical or social reasons, to discuss all the implications.

Sessions can be arranged for you at times to suit and will usually last about an hour.

INFERTILITY COUNSELLING

Our Counsellor at Andrology Solutions is familiar with all the different issues and aspects that can arise for men and couples experiencing difficulties in starting a family. Fertility counselling provides a safe place where individuals or couples can explore some or all of their most difficult feelings from the initial stages, through any investigations and during and after any treatment they may have. We can provide you with counselling for as long as it is needed. Some of the instances where counselling can be particularly helpful are:

- stress
- relationship and psychosexual difficulties
- unexplained infertility
- sperm donation
- during fertility treatment

RELATIONSHIP AND PSYCHOSEXUAL DIFFICULTIES

Relationships can sometimes become strained due to the stresses arising from infertility and the treatments. There may also be problems between the couple sexually. Some feel that the act of sex becomes too clinical, or sex becomes too emotionally difficult because it reminds one or both of what they are not able to do naturally. In men this can often result in problems maintaining an erection and ejaculating. A counsellor can help the couple to work through problems in the relationship. However, if there are physical psychosexual difficulties, it may be necessary for us to refer you to a psychosexual therapist

COUNSELLING AND STRESS

One word that reappears time and again in the field of infertility is “stress”. Many men find they are stressed due to considerable pressure at work. Others find their personal relationships may be cause for concern, particularly after not conceiving month after month. There may be cultural or social pressures, or stress brought on going through fertility treatment, or treatment failing. There has been much debate on how much stress affects conception and how much the inability to conceive creates stress. Counselling can help individuals or couples to find out what will help them to reduce their stress. Infertility is very often a subject that many find hard to talk about to family and friends, and sometimes just having the space in which to talk will often help to reduce stress levels. Some Counsellors may also be trained in relaxation techniques and will give clients exercises to do at home.

COUNSELLING AND MALE INFERTILITY

It can be quite devastating finding out that you have very poor semen parameters, or worse still, that you have no sperm in your semen. Furthermore, some patients may be offered surgery to determine whether they produce sperm in their testes, if there are none in the ejaculate, only to find that they are completely sterile. The inadequacies, responsibility and guilt that you feel may make it difficult for you to come to terms with and that is where counselling may help.

COUNSELLING AND SURGERY

In some cases, patients who require vasectomy reversals may find that they remain sterile, or that their fertility is minimal following the reversal. If you are anxious about impending surgery, such as vasectomy, vasectomy reversal or surgery for cancer, counselling may be very useful.

You may choose to store your gametes as an insurance policy prior to surgery, and again, counselling can help support you with this as well

COUNSELLING AND UNEXPLAINED INFERTILITY

There are so many reasons why couples have difficulty in conceiving; some may be medical and some may be psychological. Unexplained infertility is often the hardest for couples to accept. Many say it would be easier if there is a known reason, as they would then either be able to try to do something about it or be able to come to terms with it more easily. There may be many psychological blocks inhibiting conception, including ambivalence, fear of recreating parenting, fear of a baby affecting the couple's relationship, or fear of pregnancy or childbirth.

COUNSELLING DURING FERTILITY TREATMENT

Counselling can provide support at all stages of fertility treatment. When assisted conception techniques are recommended, there are often feelings of inadequacy. The counsellor can help the couple develop strategies for preparing for, and dealing with, the experience and outcome of treatment. There may be financial worries due to the cost of private treatment. Patients may also have anxiety about the effects, both short and long term, of the drugs on their own health and that of any baby born. Women experience heightened physical and emotional symptoms due to the drugs, and men complain of feeling redundant during medical procedures. Often, couples feel the hardest time is the two weeks waiting to see if a pregnancy has occurred. They alternate from feeling positive to negative. If the treatment has failed, there may be feelings of loss, failure, anger and depression. Couples will need to decide whether to try again, unless they have been advised that no further treatment can be offered. In this case, the skills of an experienced counsellor may help the couple begin to adjust to a childless future, or pursue other alternatives, such as adoption.

COUNSELLING FOR SPERM DONATION

Counselling is now compulsory according to HFEA Guidelines for men providing sperm for donation and anyone going through sperm donor treatment to make sure all the implications have been thought about, not only for the welfare of any unborn child or children, but for all parties concerned.

Donors

It is essential for sperm donors to have counselling to explore their motivation and to discuss the social and emotional implications of donation for the donor, partner (future or current) and the wider family. It is important both for the welfare of the potential child and the donor, that the donor's attitude towards identifying information and any possible future contact with any resultant child be explored, especially now that any resulting child will have access to identifying information at aged 18 years (or 16 years if they marry).

Recipients

This enables the recipients to explore their feelings about the loss of fertility in one or both partners and address the issues of parenting a child to whom either only one, or neither, will be genetically related. Careful consideration must be given to the needs of the potential child and the individual's or couple's own feelings about confidentiality, anonymity and openness. For instance, will the child be told about his or her origins? Will other members of family or friends know? If counselling is provided in a safe and non-judgmental environment, the choices can be freely explored and decisions will be well informed. There may be feelings of ambivalence and anxiety regarding the donor or donors, as well as grief regarding the loss of fertility. Counselling can enable exploration of the social and emotional consequences of donation in both the short and long term for the individual, couple and wider family network. It is important that recipients are also informed of and understand their legal status.

ISSUES FOR THE COUPLE

The main issues that couples can focus on in counselling are:

- family and community support (bookmark)
- communication and listening (bookmark)
- “jumping off the bandwagon” (bookmark)
- happy outcome (bookmark)

Family and Community Support

It is important to discuss the support that the couple has—family can be very supportive; however, if there is parental pressure to have grandchildren, help in that direction may not be sought. Sometimes, especially in the case of male infertility, parents may harbour guilt and blame, wishing they had been able to help their son earlier. Thus, parents can often enter into the conspiracy of silence that many couples face.

Friends may be supportive; however, it is usually the female’s friends that are more sensitive. The best source of support is the couple themselves. Each has to support the other. Because there is often a strong conspiracy of silence, especially in male infertility, the couple’s greatest resource is each other. This is important when goal-setting in counselling. The relationship often benefits from the shared sorrow, and this is one of the common positive statements couples make. Most women are suited to the support role, but whether men are is another matter.

Religious support is also important, particularly as some religions have very strong guidelines and views on fertility treatment.

Communication and Listening

The most important factor in counselling couples is enabling them to communicate and listen to each other to enable them to cope as a unit. It is important to acknowledge the differences between men and women. So often, the difficulties arise from the differences in expectations, especially expectations of feelings. It is important that each partner can learn to acknowledge the other's emotions and respect them without feeling that they should be feeling the same. Because of men's conditioning, they often feel they have to do something and consequently feel helpless if they can't. Sometimes, all women need is to be listened to, perhaps held and allowed to cry—and that is doing something, but it is up to women to tell the men

this. On the other hand, some men are afraid of their own emotions being resurrected by their partner's emotions, and this must be acknowledged and explored.

“Jumping off the bandwagon”

In cases of couples having had several treatments without result, the time may come to explore the issues of acceptance and “jumping off the bandwagon”. With the new possibilities that technology keeps producing, couples continue to hope and desire without the containment of time boundaries, and this can be damaging. Being challenged over the issue of acceptance of childlessness is a worthwhile exercise—it may be the first time the couple has heard each other's feelings about this difficult step.

This can then be a time to grieve for the fantasy child or children, explore their ideas of a ritual that would enable them to mark, mourn and let go of their fantasy (much like a funeral does for a real person). The idea of moving on is a difficult one for most couples, and how difficult depends on the image each has had of themselves—if they have always had the image of being a mother or father, this will seem nearly impossible. If, however, their image of themselves as a parent came late (usually once they met their partner) or is ambivalent, this task will be easier. They may have a career that is fulfilling, or may be able to see different ways of being a “parent”, such as nieces or nephews, fostering or adoption, or different ways of living, such as charity work. Counselling can help the couple to find their own sources.

Happy Outcome

If the outcome of fertility treatment is a happy one resulting in a live birth or births, counselling can help facilitate the transition to life with a child. The couple may have unrealistic expectations of themselves as parents since they have waited so long for their child or children. There may be a multiple birth that will bring other stresses or problems. If the birth is a result of donor embryos or gametes, it is possible that a child could be the source of unexpected or unwelcome feelings for the infertile parent.