Men’s accounts of infertility within their intimate partner relationships: an analysis of online forum discussions

Abstract

Objective: This article aims to provide insights into men’s accounts of infertility in the context of their intimate partnerships. Background: Although we are beginning to understand that men experience the emotions of infertility acutely, little is known about how such emotions impact on men’s intimate partner relationships. Evidence suggests that infertility can impact intimate partner relationships (both positively and negatively) but there is a paucity of research around how men talk about such relationship impacts, and how they share their stories with other men. Men are often viewed as the silent supporting partner within infertility contexts, with women narrated as taking the burden within the relationship. Methodology: The paper draws on data from a general discussion board on an online men-only forum. Inductive thematic analysis was utilised to identify key themes across the men’s online posts. Results: Men’s posts demonstrate that infertility challenges relationships, and that men use the forum examined to offer each other advice on coping with infertility in their relationships. Men highlighted a sense of having less agency than their female partners in relation to infertility and that they were less able to access support for themselves as a result. Conclusion: We argue that infertility can be a challenging and complex time within intimate partner relationships and that men construct this situation with reference to gendered norms and constraints within their online accounts. Consideration of both parties in couples experiencing infertility is important for supporting relationships during any diagnosis and treatment processes for infertility.

Keywords: Male Infertility, Intimate Partner Relationships, Gender, Emotions, Qualitative methods

Introduction

Infertility, defined broadly as the difficulty in achieving conception after one year of unprotected intercourse, can be a distressing and emotionally turbulent experience for both women and men (AUTHORS; Barnes, 2014). It therefore has the potential to negatively impact on the intimate partner relationships of those trying to conceive (Jordan and Revenson, 1999). Some of the previous work around relationships and infertility has produced varied and contradictory findings concerning aspects such as closeness, relationship satisfaction (Coëffin-Driol and Giami, 2003), and impact on sexual relations (Daniluk, 1988). Much of the existing work (both qualitative and quantitative) often
focuses solely on women (de Kok, 2013) or couples (Greil, 1991; Peterson, Pirritano, Christensen and Schmidt, 2008; Martins et al., 2014; Peterson, Pirritano, Christensen, Boivin, Block, and Schmidt, 2009), and suggests that men and women may have different coping strategies (Petersen et al., 2008). It is also proposed that men can experience infertility indirectly through their partners and that partner support can be important for reducing the burden of infertility (Martins, Peterson, Almeida, Mesquita-Guimarães and Costa, 2014). Whilst some of the literature portrays infertility as a crisis, it is important to note that infertile couples do not necessarily have worse relationships than those who are fertile (Greil, 1997).

Whilst previous studies of infertility have examined men’s perspectives (c.f. Webb and Daniluk, 1999; Carmeli and Birenbaum-Carmeli, 1994; Barnes, 2014), it is often suggested that men view their relationship role within the context of infertility as being the ‘study oak’ or ‘supporter’ of their wives or partners (Throsby and Gill, 2004; Malik and Coulson, 2008). But we know little about how men describe the challenges infertility brings to their relationships or any differences in experience that men identify compared to their wives/partners within their joint infertility context. Given the suggestion that ‘Love in conjunction with anxiously high hopes is volatile and can quickly deteriorate into bitter disappointment and cruelty’ (Beck and Beck-Gernsheim, 1995: 139), it appears important to understand relationship dynamics (de Kok, 2013) and aspects that men identify (Martins et al., 2014) when facing difficulty in conceiving so as to potentially understand more about how couples can be best supported when experiencing infertility.

Infertility is viewed as a sensitive topic and thus poses particular challenges for research, perhaps particularly so in relation to the experiences of men, who are often viewed as stigmatised by labels of ‘infertility’ (Barnes, 2014; AUTHORS). Coupled with the wider landscape where men are often overlooked within the maternally-focused research on reproduction (Culley, Hudson and Lohan, 2013; Hinton and Miller, 2013), men’s experiences and voices are often lacking. This paper then seeks to offer an insight into how men share the dimensions and impacts of infertility on their intimate partner relationships by drawing on men-to-men talk from an online infertility forum space.

Methods

The data analysed within this article are drawn from a wider qualitative research project exploring how men share their experiences of infertility online with other men. The data comprised posts from a UK online fertility forum aimed at men, hosted within a broader not-for-profit community-driven fertility information website. The posts were gathered from the ‘General Discussion’ section of the forum, which was the most frequently used section. 415 posts in total were examined incorporating posts by 20 different forum contributors; this sample size is similar to other qualitative research of
this type (c.f. Stommel and Koole, 2010). The sampled threads were initially screened on title and then for quality and depth in relation to personal experiences. The intimate partner relationship context explored within this paper relates to heterosexual couplings and speaks only of the experiences of those on the particular forum we examined.

The data were analysed using inductive thematic analysis following the six steps detailed by Braun and Clarke (2006), with posts being read and coded independently by the authors before discussion to finesse agreed themes. The research received ethical approval from the relevant university ethics committee prior to commencement, and follows the now established ethical parameters for such online research (c.f. British Psychological Society, 2013). The forum is open; not password protected; and receives a high amount of traffic, with forum contributors displaying an awareness of the forum’s visibility online. Contributor usernames and any identifying information have been anonymised within this article, with participant numbers deployed to differentiate between posters.

The forum was contacted after the research was conducted and before publication to make them aware of the research. Whilst the use of online spaces for researching sensitive topics is growing, as we have discussed elsewhere (AUTHORS), online forums may not be representative of all men experiencing infertility and this can be regarded as a limitation of online research.

Findings

Within the forum posts men frequently discussed infertility with reference to their relationships and our analysis generated two core themes on this topic. The themes relate to the broad relationship challenges that men identify as a result of infertility diagnosis and/or treatment and how men perceive infertility as gendered in relation to their wives or partners.

Weathering the storm: Relationship challenges in the context of infertility

The experience of infertility was construed by men on the forum as challenging for their intimate partner relationships, producing turbulence:

> At the moment it is so hard to stay focused on everyday life, [my partner] is a mess, she is so angry and upset and all I want to do is protect her and give her what she wants, I’m sure things will get easier but I don’t know what to do for the best sometimes (FP5: Forum Poster 5)

Men often noted how they felt ‘helpless’ in relation to their partners when attempting to deal with the feelings that infertility was creating for them. Some of their helplessness was attributed to the medical intrusion into their partner’s bodies:
My wife has started the first lot of injections, and just about to start stimulation. She feels so
tired and has mood swings, which generally lead to me feeling incompetent in some form
(FP9)

The process of attempting to conceive was routinely viewed as being stressful for men due to the
financial burden, but another major source of stress related to the side effects of treatment
(specifically hormones) for women:

We have tried [number] IUI’s now and 1 IVF all failed :-( I want us to stop the merry go round
and try adoption but wife dead set against it. Part of it has to do with the money...but mostly
it has to do with not being able to help my wife deal with the extra hormones (FP18)

Thus for men, even though they were often not dealing with the embodied experience of medical
assistance for reproduction, this process created emotional issues within their relationships.

In response to the notion that infertility was a complex and evolving experience (which was
frequently characterised by the notion of being a ‘rollercoaster’: where [AUTHORS]), many men on
the forum discussed the need for good communication with their partners. Open communication
was regarded by men as an approach for keeping their relationships intact and for engendering
further support within their partnerships. However, this was sometimes viewed as being difficult in
and of itself:

Communicating with our spouses can be one of the most difficult things. People deal with
the issue of infertility very differently and it is and always will be a bit of a minefield... I hope
some of this helps- there are never ‘right answers’. You need to make the effort to find out
how you can communicate with your partner and work everything thought with a lot of
patience and love (FP6)

Thus the threat that infertility posed within intimate relationships was perceived as requiring greater
patience and support than under ‘normal’ circumstances; being ‘loving’ to one another was perhaps
viewed as an antidote to the challenge of infertility:

The best advice I can give to you is to be there for each other, you will both experience a lot
of different emotions but you must try and stay strong and support each other. Remind
yourself why you are doing this and it will hopefully make sense (FP5)

Men then noted that infertility could become a vortex which colonised their relationships, and that
there was a need to remember that their coupling went beyond attempting to become parents:
I guess the fundamental thing to remember as you go through the process is- you got together with your partner to be with her. Not because you are or would be parents. Love each other no matter what the outcome (FP9)

The ultimate threat to relationships, and the cautionary tale highlighted on the forum, was relationship breakdown prompted by the often arduous process of assisted reproduction. Men urged each other to be mindful of sharing and togetherness to help ensure that relationships weathered the storm of infertility:

We’ve heard too many stories of couples who’ve split up before or even after an IVF pregnancy (that to me is like spending ten years building your perfect house to just demolish it after you’ve moved in. Nuts.) to take what we have for granted. We’re stronger, more sharing, more together than ever, we’re just…sadder… as well (FP2) [original emphasis and italics]

The forum then offered a space for the men to share with others and to give and receive advice about how best to manage the difficulties infertility appeared to bring to their relationships.

Is it different for men? Gendered dynamics of infertility within relationships

Men also pointed to differences within their relationships based on gendered bodies, norms and practices. Below we cover two key aspects of this theme, concerning the biological capital women possess in the context of in/fertility and, relatedly, their perceived ‘natural’ desire for children. We utilise the concept of biological capital as suggested by Kriznik and Kelly (2016), referring to the biological resources people are born with as virtue of genetics or sex (akin to Bourdieu’s concept of social capital) which may afford them privileges in relation to health or treatment. In this usage we are mindful that biology itself is socially mediated, as others have discussed in relation to reproduction (c.f. Franklin, 2001). We are not using this concept uncritically in relation to women’s bodies within reproduction, but rather to reflect how men were presenting their partners as possessing more kudos or insight in relation to the infertility experience, and how that impacted on their relationships.

Women’s perceived biological capital in relation to infertility

Men positioned women as being the power holders within the context of infertility, creating something of an imbalance. Women, by virtue of their sex, were often construed by men on the forum as ‘insiders’ due to being holders of biological capital when it came to infertility (c.f Kriznik and Kelly, 2016):
Results day tomorrow. This sounds terrible but I think we’ve both almost accepted it hasn’t worked this time. I feel that way mainly because my wife seems dead certain it hasn’t worked. I’m obviously try to say the right things to not give up yet, but have been feeling especially in the last couple of days that if anyone would know, it would be her! (FP3)

Men took the lead from their partners around the (imagined) success or failure of fertility treatment, constructing women as experts able to interpret both embodied and medical events almost intuitively. Women’s biological closeness to the infertility experience was thus viewed as central and requiring support and care - more so than men who were more biologically ‘removed’:

I have come to realize men just don’t seem to spend the time seeking support or information as our wives do. I think it is easier for us to detach from the whole thing. After all, it isn’t our bodies that go through the process (FP9)

Despite the supportive non-patriarchal approaches which men displayed about their partners on the forum, the inequity that men sometimes felt within their relationships as a result of women’s greater perceived insight within the infertility journey was also visible. Such inequality was often linked to the notion that because women had to ‘go through’ infertility in a more visible, embodied way than men, this was seen as enabling women to generate support:

My feelings are that it’s all about the ladies primarily, but not entirely, because they bear the physical brunt in most cases...My point is that the need for support (be in through forums, friends, family or partners) for a girl is so much greater than the needs of a bloke. So it stands to reason that everyone, including the bloke (and, dare I say it: the woman too?), will prioritise the feelings of the woman. They express more need and so they are prioritised (FP2)

Biology was therefore constructed as the key to unlocking support for infertility:

I know that there is an argument that we are a couple and there is some real truth in that, i.e. we go through it together, but I can’t help sometimes feeling that is really all about the female, and there are some things that I cannot get my head around, and there must be things that I think and feel that they cannot quite grasps as well......its mainly about the strength of the need and how I face possible disappointment as well (FP12[Ellipsis posters own])

The above quotes hint at the gendered complexity and tensions which may pertain within intimate partner relationships around infertility, undermining wider social constructions of reproductive masculinity which assume men to be unaffected by infertility and related difficulties (Daniels, 2006).
While men were often keen to stress that their wives or partners experienced ‘more’ in terms of medical interventions, the quotes do demonstrate that ‘men have feelings too’. As we have noted elsewhere, men presented with distress and need for support on the forum (AUTHORS), although wider gendered discourses around masculinity and stigma routinely shape such accounts, creating a complex and potentially fraught situation within relationships.

**The ‘need’ for a child in the infertility context**

Men on the forum often discussed the ‘need’ for a child within their relationships, and again this was often depicted along gendered lines:

> I am sure that women, and definitely my partner have a far greater need for a child than I do. It’s almost like she needs something/someone tangible to love and make sense of her life, although I think that would be really nice, it’s not the be all and end all for me (FP12)

Some men suggested there was an innate need for women to bear children, and that this could be regarded as a source of difference within couples when conception was delayed; one partner’s ‘need’ was something that had to be reconciled within relationships. Men often noted that even if they did want children they wanted that experience even *more* for their wives/partners:

> I want a child desperately, but especially for my wife, who is the sweetest, kindest person you could ever want to meet (I know I’m biased though 😊 ). She deserves everything she wants in life (FP3)

The portrayal of childbearing as an innate or biological necessity for women was discussed by some of the men on the forum around the ‘end points’ of assisted reproductive experiences. Thus when medical intervention had failed to lead to conception, women’s biological ‘need’ for a child was sometimes positioned as a consideration in relation to decision making about future attempts to become parents. If ‘the child becomes all they think and care about- but does not arrive’ (Beck and Beck-Gernsheim, 1995: 126), then alternative strategies for parenting were considered, but such ‘alternatives’ were perceived as less palatable if they overrode biological desires:

> I know my wife is not keen [on adoption] because she has a desire to carry her own child- this is a very strong urge for most women (FP6)

Genetic distance was positioned as more problematic for women than men and factored in joint decision making:

> We have now been placed on the egg donation waiting list. I want this if it’s the only option for us to have the child we so want but it brings up so many issues. I love my Mrs so much
and I know what having a child of her own means to her, I just hope that if this is what we eventually end up doing that she copes with it, I know the child will be mine and she will carry it and give birth to it but genetically it will be someone else’s (FP5).

Such gendered biological needs for children were therefore seen to be issues for ‘working through’ within relationships, with gendered differences and possible tensions within relationships noted.

**Discussion**

The analysis here demonstrates that infertility can be a challenging and complex time within intimate partner relationships. Men experience these difficulties in terms of feelings of helplessness and a desire for their relationships to remain strong in the face of adversity, but also in terms of a reported ‘biological bias’ privileging women’s bodies experiences. The latter point serves to reinforce the concept of reproductive masculinity (Daniels, 2006) i.e. traditional gendered norms and roles in reproduction where men are peripheral. Men may therefore lack agency within their relationships and can perceive imbalances in ‘biological capital’ (Kriznik and Kelly, 2016); indeed, men on the forum often implicated their lack of direct embodied experience in the process of reproductive treatments for infertility as contributing to ‘stormy contexts’ within relationships. As reproduction and childbearing are socially constructed as ‘natural’ within heterosexual intimate relationships, strain can result when the desired child does not arrive (Beck and Beck-Gernsheim, 1995). Men used the forum to counsel one another around the need to maintain good communication in order to ‘manage’ infertility within their relationships and to seek support from other men around the various challenges that infertility created in their relationships. The advice offered on the forum showed how men were engaging with emotional topics, undermining stereotypes of men as ‘stoic’ (Throsby and Gill, 2004; Shirani and Henwood, 2011) or unconcerned in the face of infertility.

The relevance of these findings relate practically around how best men within couples can be supported in the context of infertility. Previous research has suggested that women experience infertility more ‘directly’ than men (Greil, 1991) and this assumption appears to persist within our data, which can be problematic for men both within the dynamic of their relationship and in clinical and social responses. Awareness of any tendency for clinical or support services to be women-focused should be foregrounded, ensuring that gender sensitive approaches are considered (Cousineau and Domar, 2007). In doing so this would ensure that both men and women—individually and together—can be supported as a couple through the challenges of infertility diagnosis, treatment, and outcomes. Previous work has suggested adopting a relational counselling
model for women experiencing infertility (Gibson and Myers, 2000); consideration of how similar approaches could be used for men or couple counselling may therefore be useful.

Theoretically, the paper further contributes to growing evidence that men are viewed as secondary within reproduction, and that reproductive masculinity (Daniels, 2006) has itself been historically perpetuated based on such perceptions, in part due to lack of evidence of men’s own experiences within the reproductive realm. Men on the forum, however, demonstrated that they were highly affected by their experiences of infertility and specifically the implications of infertility for their intimate and loving relationships. This paper then contributes evidence for the possibility of a more complex and ‘humane’ conceptualisation of reproductive masculinity, showing that men are vulnerable within the context of infertility and that they see reproduction as something they want to play an equal role in, even if the current societal constructions of reproduction work against this. Here we echo Inhorn’s (2012) notion of ‘emergent masculinities’, with men seeking to ‘do’ reproductive masculinity in more gender equal, intimate and emotionally engaged ways and in doing so push against prevailing hegemonic norms.

Although men-only forums can then be a useful space for some men to share their feelings and discuss the challenges infertility may present for their relationships, not all men use or access forums, so wider consideration around how best to support men within couples experiencing infertility both on and offline are required. The findings within this paper relate specifically to the context of the forum examined which can be seen as a limitation of this method and study. The data therefore offer a way into an underexplored topic, but the research is unable to make wider claims around men’s experiences on other forums, or about men who experience infertility but do not utilise online forums as a means for support. Examination of further men only sites or comparing men’s accounts with how women discuss relationship aspects online would be a useful addition to understandings of infertility and relationships.

Further research around the relationship aspects of infertility is therefore needed. This is particularly required from the perspective of men (or within one-to-one interviews with both parties of couples, rather than couple interviews), and wider observational data around men’s experiences of relational aspects within clinical settings are also needed. Such evidence would enable the development of research-informed best practice around supporting couples through the complexities that infertility can entail for their relationships. Infertility therefore has the potential to test relationship strength and harmony at a time when individuals perhaps most need relationship security and mutual support. Understanding more about how men and women can support themselves, each other, and
their relationship therefore remains of importance within a holistic understanding and approach to the issue of infertility.
References


