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# **Emoting Infertility Online: A qualitative analysis of men's forum posts**

## **Abstract**

Relatively little research on infertility focuses exclusively or significantly on men's experiences, particularly in relation to emotional aspects. Evidence that does exist around male infertility suggests that it is a distressing experience for men, due to stigma, threats to masculinity and the perceived need to suppress emotions, and that men and women experience infertility differently. Using thematic analysis, this paper examines the online emoting of men in relation to infertility via forum posts from a men-only infertility discussion board. It was noted that men 'talked' to each other about the emotional burdens of infertility, personal coping strategies and relationships with others. Three major themes were identified following in-depth analysis: 'the emotional rollercoaster'; 'the tyranny of infertility'; and 'infertility paranoia'. This paper then offers insights into how men experience infertility emotionally, negotiate the emotional challenges involved (especially pertaining to diagnosis, treatment outcomes and their intimate relationships), and how they share, (and find value in doing so) with other men with lived experience of infertility.

**Keywords:** Infertility, Men, Emotions, Online forums, Qualitative

## **Introduction**

Male infertility is an area in which there is seen to be a paucity of qualitative research concerning men's views, feelings and experiences (Hanna and Gough, 2015; Barnes, 2015; Culley, Hudson and Lohan, 2013). Infertility is defined as the difficulty in achieving conception, and can be due to female factor (fertility issues arising from the woman), male factor (issues relating to the man's fertility) or a combination of both parties in the couple each experiencing fertility related problems (NICE, 2013). Whilst prevalence is difficult to ascertain, it is suggested that infertility affects 1 in 6 couples within the UK (Oakley, 2011), with an increase in couples seeking treatment for infertility (NICE, 2013), demonstrating the scale and scope of the issue for couples seeking to reproduce. Previous research

suggests that men have been 'left out' of discussions about reproduction (Lohan, 2015; Thorsby and Gill, 2004; Marsiglio et al, 2013; Hinton and Miller, 2013) and when men's views of infertility have been sought, they have often been framed via or complementary to women's perspectives, such as in couple-based interviews (Thorsby and Gill, 2004; Cudmore, 2005; Daniluk, 2001).

As we have discussed elsewhere, the qualitative explorations of men's experiences of infertility have shown that men often feel they need to play the emotional role of being 'the rock' within the couple, and that they feel their emotional needs often have to be repressed as a result (Hanna and Gough, 2015). Men are also portrayed as feeling that their masculinity is constrained by infertility, often through the fertility-virility linkage in which being a 'real' man is linked to sexual performance and the ability to reproduce, (Hanna and Gough, 2015; Barnes, 2015), and that stigma persists around infertility (particularly male factor), thus seeking support from friends and family is often viewed as problematic for men in this context (Hanna and Gough, 2015). Research is now moving towards acceptance that infertility is experienced differently by men and women (Greil et al., 2010) and that we do still need to know more about men's lived experiences in relation to infertility diagnosis and treatment journeys (Culley, Hudson and Lohan, 2013), and particularly around how they emote these experiences. This project aligns with recent work in the field of men's health which examines male vulnerability, emotional expression, help-seeking and mental health (e.g. Ramirez and Badger, 2014; Ridge, Emslie and White, 2011) in that it further demonstrates that men are emotionally expressive, and willing to seek support for emotional aspects within spaces perceived as safe and appropriate to them.

The lack of engagement with men's perspectives in relation to infertility may reflect the notion that accessing men's experiences of sensitive topics is challenging (Walls et al., 2010), and with an issue such as male infertility, it is both a sensitive issue in that it relates to men's intimate and sexual lives (Barnes, 2015) and there is no obvious target sample from which to draw beyond the confines of clinic-based research. Whilst the clinically focused approach is seen to persist for researching

infertility (Griel et al., 2010), it does have limitations, specifically in terms of accessing of men's first-hand accounts about infertility. It also requires 'treatment' for infertility to be underway, thereby excluding those who experience infertility but have not begun assisted reproduction or who have decided against medical intervention for conception. A means by which access can be gained to men who are facing infertility, and for men to frame their emotional experiences themselves, without the constraint of a researcher, research agenda or clinical environment, is through online sites. Such 'naturalistic' conversational settings are becoming an increasingly important and valid means for understanding how men convey personal or sensitive stories, and for gaining insight into how men 'talk' with other men in the context of challenging life circumstances (e.g. AUTHOR 2, 2015). This article then explores how men share their emotions and feelings about infertility with other men in the context of an online discussion forum.

The choice to use what is sometimes referred to as 'netnography' (Kozinets, 2002; Langer and Beckman, 2005; Eriksson and Salzmänn-Erikson, 2012) is seen to be a particularly pertinent research decision in the investigation of sensitive research topics such as male infertility, where stigma persists (Hanna and Gough, 2015). For example, other recent research using online forum data has investigated topics ranging from suicide (Horne and Wiggins, 2009), anorexia (Day and Keys, 2008) and male depression (Gough, 2015), offering valuable insights into how personal and sometimes controversial terrain is traversed. This research considers the interactions within an online forum discussion board specifically for male infertility. Online means for communicating about health and illness is increasingly popular among the general population (White and Dorman, 2001; Suzuki and Calzo, 2004) with forums and social media (such as blogs) being regarded as tools for lay people to seek help and share on a multitude of topics. Evidence of men seeking help for health related issues online is increasing (for example see Flynn and Stana, 2011; AUTHOR 2, 2015), with some studies also exploring how men support and advise each other on issues ranging from weight management (AUTHOR 3, 2012) to coping with testicular cancer (Seymour-Smith, 2013). It is also worth noting

that mental health interventions for men are increasingly adapting to the use of online services (for example see Campaign Against Living Miserably: CALM<sup>1</sup>).

Research utilising online data to explore fatherhood is also emerging, such as Eriksson and Salzmänn-Erikson (2012), and pertinently, Malik and Coulson's (2008) work, which demonstrated the potential of this approach in relation to men and infertility. Malik and Coulson (2008) found that men felt their 'role' in infertility was to support their partners, and that the men often felt neglected from the fertility treatment experience given the female focus of clinical approaches to assisting reproduction. Malik and Coulson (2008) also noted the need for much more research online, particularly exploring how men experience and convey the emotional impact of infertility.

By understanding further how men experience infertility, and the emotional impact that it has on them, recommendations concerning how men who are experiencing infertility can be better supported via both professional healthcare settings and more informal peer or social support settings can be highlighted and developed (Fisher and Hammarberg, 2012). Insight into men's emotional experiences in relation to their reproductive journeys also contributes to knowledge about the contemporary experience of men as fathers, and the emotional investment men may place in becoming fathers, thus this work is significant in further bringing men into the reproductive realm.

## **Methodology**

The central question for this research was 'how do men emote infertility online?' and this question framed the identification of an appropriate forum for the research, the selection of threads for inclusion, as well as the thematic approach to analysis of the data. As noted within the introduction, the use of a 'netnography' approach (Kozinets, 2002; Langer and Beckmann, 2005) was deemed to be important within this research. 'Netnography' is seen as an unobtrusive approach, and one which

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<sup>1</sup> <https://www.thecalmzone.net/> CALM have a range of online offerings to support men's mental health, including webchat and online resources.

allows a 'window into naturally occurring behaviours' (Kozinets, 2003:63). It shares the flexibility and rich insight with the ethnographic approaches it draws from methodologically, which dovetails with the desire for this piece of work to enable in-depth insights into an area which is often overlooked, omitted or inaccessible in our wider social understandings of infertility and reproduction.

#### ***Data collection: The Forum***

In designing this research, initial searches were conducted for appropriate forums featuring men communicating with other men about their infertility experiences. The following key terms were deployed: 'Forums &/ Online discussion board + Male infertility/ men/ infertility'. These terms were carefully chosen to reflect the male aspect of the type of forum we were looking for in a landscape of female dominated online forums and support spaces, and the choice of the word 'infertility' offered a level of specificity around the situation of not yet achieving conception, rather than using more generalised words such as 'parenting' or 'dads'. We limited our results to English-language websites to reflect the cultural context in which we were conducting the research (i.e. within the UK), and this generated a number of hits for UK and US forums. From these searches, one men only discussion forum was identified, which we acknowledged provided a valuable opportunity to explore how men were engaging with other men online around infertility.

The UK-based forum selected for this research is open access, i.e. it can be read without the need to register as a member (although men seeking to post are required to register). The forum is specifically advertised for men, and is an online space in which men can anonymously share their experiences of infertility (both male factor and female factor) and seek help and advice for questions related to infertility from their peers. The forum is hosted within a website which is specifically focused on infertility and men, and is thus designed specifically for those experiencing difficulty in conception.

#### ***Data collection: Inclusion criteria***

The threads for our analysis were drawn from the 'General discussion' section of the forum. This contained the greatest number of posts on the forum, as well as the more personally and socially orientated posts, rather than more medicalised discussions found elsewhere on the forum. The criteria for inclusion was kept broad in relation to emoting infertility, encompassing any references to emotion categories as well as stress and coping, help-seeking, and provision of advice and support. We initially screened the subject heading of the forum threads to include those threads perceived as relevant by virtue of the personal or emotional tags they used. Thread titles which were included were those such as 'Feeling useless'; 'Help'; 'Trying to cope'; 'My story so far'. We would then click through on potential threads, before engaging in a more in depth screening of the thread content which we screened in relation to emotional language, discussions of needing help, emotional support, thus the content was used to create the inclusion criteria. Given the relatively small size of the forum, screening in this depth was achievable. The data from the forum was accessed during July/August of 2015.

### ***Data Collection: The Sample***

In total 13 threads were selected for analysis, totalling 415 posts, and there were 20 unique posters usernames identified across those posts. This number of threads/posts is in line with previous analyses of online forum data (e.g. Stommel and Koole, 2010), and such modest datasets are common across all qualitative methodologies, which prioritise intensive over extensive analyses (Smith, 2004). Again, this desire for intensive analysis further supports the notion that this work is a type of 'netnography' work, rather than other forms of online discussion analysis.

### ***Analytical approach***

Inductive thematic analysis was chosen in order to undertake a detailed scrutiny of the forum posts (Braun and Clark, 2006). As noted above, the thematic analysis was driven by the primary research question of 'how do men emote infertility online?' The forum threads were often based around an

individual man sharing their personal story, and other posters responding with their own accounts, so the data often (but not wholly) appeared in 'story' formats. The transcripts of the threads were initially read and coded for aspects relating to emotion, and the preliminary codes then organised into themes, which were periodically reviewed, refined and reformulated. The first author generated these initial themes which were then examined by the second author and then discussed until the themes, analytic commentary and evidential quotes were agreed.

The final themes were felt to capture important elements of how men on the forum emoted infertility. The forum content was dominated by three 'main' posters, who were regular in their posting and responding across the forum, and this is reflected in our analysis - although extracts from 10 posters do feature across the analysis presented here. Our three major themes presented below have been labelled as follows: 'the emotional rollercoaster', 'the tyranny of infertility' and 'infertility paranoia'.

### ***Ethics***

The ethics of this research follow the now established precedents for this type of work using open source online data (for example Malik and Coulson, 2010; AUTHOR 4, 2012; AUTHOR 2, 2013; AUTHOR 2, 2015; Rodham and Gavin, 2006; Eysenbach and Till, 2001). Whilst the ethical parameters of such work are now becoming formalised within the social sciences some aspects of the ethics of using forums, particularly that participants may view forum discussions as 'private' even when they are technologically 'open', remains an area of debate within social research (Kozinets, 2002; 2015). Eysenbach and Till (2001) suggest using three aspects to judge the 'private' versus 'public' divide around online sources; first whether you have to register to access a site, secondly the number of members, and thirdly how those members perceive the site. The site we explored is open and requires no registration, has members of in excess of 1000, thus is not a small site, and the host website notes how many have accessed the site each month, e.g. 76,000+ accessed the forum in February 2016. These factors therefore demonstrate the public nature of the site, and posters on



the forum selected regularly noted the number of views as opposed to posts across the forum, so a strong sense of posters being aware of their posts being 'viewed' was evident on the forum. Whilst such 'views' may be qualitatively different to researcher views, it does demonstrate the public nature of the forum, which is important for ethical considerations around its use. There is an important point to be noted about 'personal talk' in a 'public' setting online not being private – forum members always have the option of private messaging as well as public posts (Hookway, 2008).

The data utilised within this analysis was therefore freely available within the public domain, and required no login or interaction with participants for access. Learned society guidance<sup>2</sup> were<sup>3</sup> utilised to frame the ethical considerations of this piece of work, and local University ethics approval for the research was obtained prior to its commencement. Similarly to Kaufman and Whitehead (2016), we used the following section from the BPS to frame our practice; "where it is reasonable to argue that there is likely no perception and/or expectation of privacy (or where scientific/social value and/or research validity considerations are deemed to justify undisclosed observation), use of research data without gaining valid consent may be justifiable" (BPS, 2013: 7). Thus, whilst debates around the ethical issues in accessing an open forum for academic research do exist, the issues and benefits of the research were carefully considered, and principles around anonymity were utilised in order to protect those posting on the forum. Therefore the user names of the posters and any other identifying information has been removed and anonymised within the research via a poster numbering system, e.g. FP1 (Forum Poster 1), FP2, etc and the forum itself is not named or identified.

Given that it can be challenging to access the experiences of men around infertility, and the precedence of others using this approach (e.g. Malik and Coulson, 2008; 2010) we felt that using open forum data, without contacting the forum prior or during the research was ethical within the

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<sup>2</sup> Available at: <http://www.britsoc.co.uk/media/27107/StatementofEthicalPractice.pdf>

<sup>3</sup> <http://www.bps.org.uk/system/files/Public%20files/inf206-guidelines-for-internet-mediated-research.pdf>

parameters of 'public' data. The overriding ethical principles of anonymising the forum and participants whose posts we accessed were fully adhered to, and of the significant contribution to understanding men's emotional experiences that this work would offer and how that may help other men in the future remained key in justifying our approach.

## **Analysis**

Our three themes highlight fluctuating emotions, dread and uncertainty associated with infertility, and illustrate how men articulate their experiences within a distinctive online community.

### **The emotional rollercoaster**

The strength and breadth of feelings men on the forum presented in relation to infertility were often framed in their posts in terms of peaks and troughs:

We are going through an emotional rollercoaster at the moment....it just seems to be one thing after another lately (FP5).

The rollercoaster metaphor is one that appears in other online analyses around fatherhood and family formation topics (Asenhed et al., 2014; Ross et al., 2008). This metaphor is thus perhaps seen as a useful means of conveying a person's 'emotional journey' when they are sharing online, and appears to hold social weight in communicating the 'highs and lows' of emotional experiences. For men on this forum, the metaphor appeared to help them encapsulate the emotional upheaval that infertility brought to their lives. For example, a poster tried to describe to a man who is about to start IVF what the 'journey' will be like:

'You are both in for an emotional roller coaster. The best advise [sic] I have had to date when dealing with the emotional aspect of this journey is not to fight it. Your emotions will be what they will be. If things don't work out, there will be anger, sadness, guilt...and in the end, hope. Just accept the emotions for what they are- temporary' (FP6).

Men then emphasised the emotional aspect, using lists to add emphasis ('anger, sadness, guilt'; see Jefferson, 1991), but while the emotional costs are underlined, the forum also offered a supportive environment in which difficult situations were framed constructively in terms of 'hope', with negative emotions construed as 'temporary'. Men then described the experience of infertility as involving a large amount of sometimes rapidly changing emotions, which were juxtaposed via 'highs' and 'lows':

'The last four days especially have been amazing, simply incredible, in their absurd highs and lows' (FP2).

At the 'low' point of the rollercoaster a range of feelings were presented:

'depression and self-loathing' (FP5);

'distressing, depressing and thoroughly glum' (FP2);

'really pretty low now' (FP1);

'felt I needed to crawl up into a ball and die to be honest' (FP2).

Men were therefore describing feelings which correlate to a state of poor mental wellbeing, and the experience of low mood was described in clinical terms, such as depression. The strength of feelings men noted were also conveyed in terms of how men felt both within and about themselves, i.e. self-loathing. The authenticity of such feelings was reinforced with honesty phrases ('to be honest') and extreme case formulations ('thoroughly'; 'really' - see Pomerantz, 1986). The outcome of such feelings were often described in terms of physical manifestations, such as crying:

'I just burst into tears in the middle of the office' (FP10).

That the poster describes an inability to contain the emotions he felt in relation to his infertility experience, particularly within a context where men demonstrating emotions would normally be seen as taboo (i.e. workplace), perhaps highlights the extreme situation of infertility for men. The

strength, unpredictability and impact of the lows men described on the forum is therefore evident and that men are engaging in sharing such lows demonstrates how men are emotionally effected by infertility and thus may need support during diagnoses and medical intervention to assist reproduction.

In contrast, optimism appears from the posts to represent the 'high' point of the emotional rollercoaster, and is used to try and keep the emotional burden tolerable. For example, men then talked about the importance of 'faith and optimism' (FP9) as an important part of the infertility journey. For men who had experienced a positive reproductive outcome, they were keen to stress the importance of remaining optimistic through sharing their own 'success through adversity' narratives:

I can happily say, miracles DO happen (FP1);

Good luck to everyone out there, it's all worth it. It really is :) (FP3).

Such positive, supportive posts were evident across the forum, perhaps highlighting the 'community of practice' (see e.g. Paechter, 2003) which existed for those using the forum. Communities of practice (CoP) can be seen to be 'informal groups of people who regularly share their expertise and experiences. They are self-directed and can be largely autonomous from formal organizational controls' (Welser, Gleave, Fisher and Smith, 2007: 6). The forum under examination can therefore be seen to fit this understanding of a CoP and the supportive element of this community was highly visible within the posts. For example, posters appeared keen to frame such 'miracles' with reference to shared understandings and experiences within the forum community of practice, which perhaps can be seen as a means for validating their posts:

I know only too well what it feels like to be in an infertile couple and I also know only too well that miracles can happen (FP5).

The low points (depression, despair, gloom) and the highs (optimism, hope) were reported as fluctuating. As noted previously, the threads on the forum often took a story based approach (i.e. starting as a narrative of one man's experience), and men would return to 'their' thread to update a new emotional point on 'the rollercoaster':

I've had a shocking week. The worst yet, I'm afraid...I hate infertility and all of the traumas that come with it (physical, mental and emotional) with all my heart...never underestimate the traumas of infertility (FP2).

The posters on the forum framed their emotional experiences on the 'rollercoaster' in strong and emotive language, often constituting it as trauma. The language of struggle was also apparent:

The emotional road travelled...it has been a real struggle. Both of us (as others have written about) have coped differently, but arrived at the same decisions together (eventually) (FP12).

While the sense and scale of the emotional challenge and distress of the infertility 'journey' is foregrounded, virtues of perseverance and tenacity were also emphasised. The complex and contradictory feelings, thoughts and actions which require careful management were frequently conveyed:

I constantly get jealous, angry and upset feelings constantly and I like you bite my tongue when some insensitive git starts rambling about the trauma of pregnancy, the sleepless nights and the sick of there [sic] beautiful baby. But I do lose my temper and I lose it a lot but I hate myself for feeling this way as I believe that I have no right to think that I deserve a baby more than the next person (FP5).

It doesn't get any easier does it? We have just found out today that my partners half sister has just give birth...on the one had I know that she is happy to become an Aunt but is really

jealous as you can imagine. I feel really bad feeling this way and I know [she] does too but it's just so hard to be happy and joyful (FP5).

Posters on the forum therefore demonstrated conflicting emotions: simultaneously jealous and angry towards others, yet guilty and frustrated for these feelings and their perceived inability to control them. Posts such as those above highlight the sensitivity and emotion work displayed on the forum in relation to other couples' fertility and parenting success events. Such emotional work can often be 'invisible' within society, i.e. those dealing with the context of infertility do not outwardly manifest their distress to other new parents, but the forum does appear to offer a setting in which markers of such 'work' are able to be presented (Star and Strauss, 1999).

The emotions pertaining to diagnosis of infertility appear to be one facet of the 'emotional rollercoaster' for men, with the treatment component then producing further, and equally complex, feelings:

They call this IVF thing a rollercoaster ride but...but it's just so hideous, isn't it? Damn this is so up and down you just don't know where you are (FP2).

The 'rollercoaster' metaphor remained a key way for posters to demonstrate to others how disorientating and bewildering they were finding the process of IVF. Despite the impact of the 'rollercoaster' on individual men, they attempted to channel their experience into displaying empathy and supporting others within the community:

I wish all of you who are going through IVF the very best of luck. It has been the biggest rollercoaster of my life and I wouldn't wish this on anyone (FP5).

The outcome of reproductive treatment was shown to generate further emotional conflicts, with failure paradoxically offering some relief:

I mean, it's hellish to have a failed cycle, just so painful, but to find yourself free from it all is bizarrely liberating. It's only temporary, of course, because sooner or later reality kicks in and it's just miserable (FP2).

The forum therefore appears to have provided the men with a space in which sharing the myriad of emotions they have encountered about infertility was possible. The 'rollercoaster' metaphor was used frequently, and appears to neatly encompass the emotional journey that the men reported as experiencing due to infertility and/or medical assistance for conception.

### **The 'tyranny of infertility'**

For men on the forum there was a strong sense of being emotionally controlled by infertility within their lives; infertility was portrayed as an all-consuming and overwhelming force over which they had little or no control. The far reaching nature of the impact on individual's lives was evident:

I'm going through IVF. I've nothing to feel free and light about; I feel trapped and weighed down (FP2).

The language of being 'trapped' and 'weighed down' is extreme, indicating the severity of the emotions that men were describing. The expression of such strong emotions in this way also runs counter to hegemonic notions of masculinity, where men should be seen to be in control, and demonstrate emotional restraint (Connell, 1995; Holmes, 2015). Whilst the language of 'emasculatation' was not overtly used on the forum, men did appear to suggest that aspects of their masculinity had perhaps been compromised by their inability to provide children (and indeed grandchildren) as per the societal expectations of men as virile, and thus fertile. The global impact of infertility on the self and significant relationships was evident:

And it can seem like infertility is a curse that affects more than just your future plans. It's taken my pride, my dignity, my privacy, my time, my self-esteem, my money and changed

my goals and life's plan. It's caused my parents to judge me, my wife to have doubts about me and it's caused me to doubt myself (FP2).

Here, the 'curse' of infertility is emphasised with a litany of impacts. Posters also identified medical assistance for reproduction as a major part of the omnipresent nature of infertility, creating new ways for infertility to rule their feelings and thinking on a daily basis:

This wait is killing me, I am sat at my desk at work waiting for the phone to ring, I am shaking and didn't sleep a wink last night, all I could think about was those petre [sic] dishes and how the little embryos were doing (FP5).

Feelings of powerlessness were therefore evident; the experiential post above shows how vulnerable men felt during key moments in their attempts to conceive. The impact on everyday life is clear, with many men describing being unable to conduct routine activities (such as sleeping) as a result of the uncertainties provoked by infertility and associated treatments:

The problem is coping with the not knowing, nothing being guaranteed [sic] (FP11).

What about freedom from the tyranny of infertility...or is it more important to plough on, never give up in the face of doubt and uncertainty? (FP2).

Posters on the forum therefore appeared to be wrestling with whether to persist with the uncertainty of IVF, or whether to 'concede' and be free from the 'tyranny', demonstrating the emotional battle that was occurring for them. The element of uncertainty created by infertility also appeared to have disrupted men's temporal horizons - the inability to know if life will follow the envisaged plan was therefore described as a source of frustration:

I feel I'm forever going to be stuck whilst my friends progress through from one of life's stages to the next (FP2);

It's so difficult to remain positive when life is so much on hold (FP9).



The quotes above demonstrate the importance of social comparison and normativity for these men. The dominant discourse of parenthood implies straightforward conception, pregnancy and birth when prospective parents feel ready for this 'milestone'. However, for those posting on the forum, failing to achieve those life milestones whilst friends were perceived to have 'raced' ahead proved acutely distressing. One man on the forum reflected with regret on the timing of family planning:

It kind of feels like a kick in the teeth that both myself and my partner waited until we found the right person to start thinking about a family. We only wish that we had found each other a few years earlier or that I would have actually asked her out on a date when we first met instead of biding my time (FP5).

The impact on temporal horizons is clearly profound, affecting past, present and future. This combination of temporal entrapment, and the raft of emotions men align with infertility, means that the 'tyranny of infertility' is narrated as being an isolating experience. As one of the key posters on the forum noted, 'Infertility is a lonely place' (FP5). The men identified that they felt particularly alone with their feelings due to not necessarily having, or being able to access, the same or similar support networks as their intimate partners:

I felt like you, very alone, whereas [she] had her friends. This obviously gave her confidence but had the counter effect on her thinking I did not understand (FP12)

I have been feeling pretty down about the whole thing and really wanted to find somewhere to chat with other people who had been through it all as you do end up feeling like there isn't anyone you can talk to (FP1).

The insular nature of the feelings that infertility has generated for the men is embedded within the 'infertility narrative'. For many of the men on the forum, infertility appears to have become a consuming and defining feature within their lives, and as a result was a major source of emotional distress for them. The forum does, however, appear to offer men the space and support to move out

of isolation, and as posts such as FP12's above show, the forum enabled men to empathise with one another ('I felt like you') and to create solidarity between each other within the community. For men who feel unsupported and marginalised by the experience of infertility, there is a sense that they would continue to grapple with their emotions alone without such forum support. Having a space in which they are able to share the specific emotions that infertility generates for them is viewed as valuable for expressing, navigating and managing the ways in which they felt.

### **Infertility Paranoia**

A number of threads on the forum referred directly and indirectly to the notion of 'infertility paranoia'; 'I'm still feeling these daily bouts of doubt and worry that it can't be going to be ok...but I think that's 'infertility paranoia' or something' (FP1). Such notions of paranoia emphasised the anxiety and dread which permeated everyday life for the men – even moments of success felt tainted. For example, the (imagined) joy of conception is tarnished:

Infertility robs you of so much and here I add another score...it robs you of the joy every couple in the world should have when they get a positive test. How can you *possibly* feel joy after so much consistent disappointment? How can you forget that every bit of good news has come hand in hand with a bit of bad news? You learn that every hope just gets dashed and every light at the end of the tunnel was a dying glimmer that vanishes when you get there (FP2).

I know all too well how impossible it is to ever fully let go of those nagging doubts once you've become so used to the negatives (FP1).

Infertility then is portrayed as being a powerful external force within these men's lives, something which is objectified and viewed as ever threatening. This threat and paranoia also created uncertainty for some posters about whether to share good news with others on the forum itself.

Fear of upsetting others with good news in the context of much distress created a moral challenge for men about the appropriateness of their sharing:

Have been umming and erring about whether to post this or not as I know things are difficult for everyone at the moment. I hope I don't cause anyone any upset by posting this. However, we have had some fantastic news. We found on Wednesday that my wife is pregnant....I hope this news gives everyone a little bit of hope, which is the intention of posting it (FP3).

The way in which the forum poster displays their good news of pregnancy, with a very carefully crafted post, and the long delicately worded preamble, demonstrates not only the caution regarding sharing positive outcomes but the care that posters show towards one another, again reflecting the community ethos at play within the forum.

Beyond revealing good news on the forum, posters also discussed the fear of disclosing news of conception to others in their social networks, with many of the men expressing significant anguish that something could 'go wrong' during pregnancy. After the many set-backs men identified on their journeys to become parents, pregnancy was perceived as another source of anxiety:

We are reluctant to tell anyone. I never thought we would feel like this, I thought we would be ecstatic but we are so far from that at the moment (FP4);

...all the problems seemed to make it so much harder to accept and I have spent the last twelve weeks trying to stop myself from being excited because I have been subconsciously convinced it is all going to go wrong...which is stupid (FP1);

We're into the third trimester in another four weeks...it's gone by so damned quickly. I reckon that that's because where most people celebrate pregnancy almost straight away, we couldn't bring ourselves to truly enjoy it (or even believe with any confidence) until we

were well past twelve weeks...I think we've only really begun to enjoy it....well, in the last few weeks, believe it or not (FP2).

There is therefore a non-normative lack of disclosure about pregnancy being displayed, and posts such as FP1's above show that doubts and vigilance appear to have characterised the conception experience for these men. Relaxing and enjoying the often long awaited pregnancy is not viewed as a possibility until very late into the process., which contrasts with research which reported some men feeling 'elation' from receiving a positive pregnancy test (Draper, 2002). Some posters even reflect on the challenges of an 'infertility pregnancy', comparing it to what they perceive as a 'normal' pregnancy:

We know it's still very early days as we are only at week 6 and know there is a long way to go. I keep saying to her that if this was a normal pregnancy i.e. it happened straight away without the need for treatment then we would not be over thinking things too much but after 5 years you do (FP5).

It therefore appears that the mystique of procreation, and the feeling that it is 'natural' to reproduce and have children, has been stripped away for these men:-

Starting a family I thought would be the most natural thing to do, it is after all what makes the world go round (FP5)

The assistance of conception via medical science has created a sense of an 'artificial' environment for becoming parents, and the emotions associated with the difficulty of gaining a viable embryo appear transferred and translated into concerns about the viability of pregnancy. 'Infertility paranoia' then becomes part of a compromised identity and creates ongoing and complex emotional challenges for men who have experienced infertility:

I think id unknowingly begun to identify myself as 'good bloke, husband, infertile'...it was actually a part of me, like a tumour I didn't want but was burdened with. But now I'm

just..."good bloke, husband, father to be' and it feels great...but...yes I can't forget that I am, have been and always will be an infertile man (FP2).

So, even when posters recognise that the infertility identity is no longer foregrounded, in that it is no longer dictating their parenthood aspirations, it does remain in the background, perhaps challenging their identities, which may continue to create emotional burdens for men.

## **Discussion**

The emotional impact of infertility for men therefore appears, from this analysis, to be significant and is narrated as relentless within the forum examined here. Posters on the forum displayed the emotional experiences of infertility as being characterised as fluctuating (the rollercoaster), pervasive (tyrannical) and uncertain (paranoia). The online setting appeared to therefore provide men with a 'safe space' in which to share their feelings, to reduce their sense of isolation, and to provide empathy and support for others who were experiencing similar emotional struggles within their lives; in effect, the forum effectively operated as a community of practice (Robertson et al., 2014; Welser et al., 2007; Paechter, 2003). It is suggested that men often lack 'emotional spaces' in which they can become work through their feelings (Siedler, 2007) and a forum such as the one explored within this research, may be able to facilitate such emotional space for men experiencing infertility which may account for their ability to express and share their emotions within this online setting.

Our findings chime with previous 'netnography' (Kozinets, 2002), including a study of male infertility which suggested that 'men frequently expressed emotional anguish arising from both the diagnosis of infertility and the experience of treatment' (Malik and Coulson, 2008: 26). Our research therefore contributes to the unpicking of previous assumptions that men are less concerned by infertility than their female partners (Lloyd, 1996), adds men's perspectives to literature which is often female

dominated (Cousineau and Domar, 2007) and furthers our understandings that infertility can be an emotionally distressing experience for men (Hanna and Gough, 2015; Fisher and Hammarberg, 2012; Barnes, 2015). Whilst women are often more readily categorised as 'worriers' than men (Charles and Walters, 2008), the posts explored here showed men who were emotionally vulnerable as a result of their infertility experience. Such vulnerability left some men feeling that it was unsafe to be joyful when conception occurred, and many of the men's accounts demonstrated that it took time for them to begin to believe that they could begin to relax.

The online discussions examined here do not appear to coalesce with the notion of men being alexithymic, i.e. unable to identify or describe their emotions (Fischer and Good, 1997); rather, the emotional discussion of infertility demonstrates men who are able to eloquently articulate (through writing) their distress to other men. In addition, previous suggestions that men adopt a pragmatic attitude in trying to 'fix' problems such as infertility for themselves and their partners are not reflected in our data (Webb and Daniluk, 1999). This analysis therefore shows that men do not conform to normative assumptions of pragmatism in online settings when discussing infertility. Moreover, and building on the work of Malik and Coulson (2008), we highlight the value men appear to derive from emotional sharing within the context of a men only forum, demonstrating how men share, care and support each other online in ways which would not be perceived to be acts of traditional formulations of hegemonic masculinity (Connell, 1995). Our analysis documents the range of emotions connected to distinct events (e.g. diagnosis, conception), the language used to convey such emotions (e.g. 'rollercoaster', 'tyranny', 'paranoia'), and the profound and continuous impact on self, relationships and everyday life that the experience of infertility appears to have on these men.

This analysis extends other previous studies (Webb and Daniluk, 1999; Carmeli and Birenbaum-Carmeli, 1994) by illuminating how men describe their emotional helplessness to one another, free from the constraints of discussing their situation in front of or with their partners, within a

supportive, naturalistic setting. This analysis also shows that the sense of 'tyranny' from infertility appears to pervade the experiences of men regardless of their point in their journey to become parents, even stretching into successful pregnancy and beyond.

The feelings of helplessness explicit on the forum were often tied to normative expectations around parenthood i.e. that parenthood had not been achieved at the desired life stage. This understanding of being 'trapped' by infertility corresponds with findings from research about 'delayed conception':

'Parenthood is frequently assumed as a life course stage that will be achieved when intended, and remains a signifier of adulthood... when conception was delayed it gave the sense of stalling, arousing feelings of lack of control over time...For couples who experienced a delay in conception, time became a dominant feature'. (Shirani and Henwood, 2011: 53)

The shift in temporal horizons, particularly whilst friends and family appeared to accelerate along the path to parenthood, was identified as emotionally very difficult for posters on the forum. In an age characterised by narratives around planning to conceive at the 'right time', particularly in relation to careers, being unable to achieve conception at the desired temporal point was viewed as a 'blot' on the lifecourse horizon (*c.f.* Altucher and Williams, 2003), which can be seen to be a source of distress for couples whose carefully crafted 'plans' are often viewed as being disrupted by nature's non-cooperation (Shirani and Henwood, 2011).

Our analysis also shows that online spaces may therefore provide (some) men with a setting in which they feel able to share, perhaps facilitated by the anonymity of the forum and the ability to write and edit their posts first and thus have a sense of control (which conversational settings do not always allow). Previous exploration of emotions in 'cyberspace' have suggested that,

'...new forms of emotional intimacy, sharing and meaning are beginning to open up as a consequence of these technological developments. The computer network provides opportunities for people to get together with considerable personal intimacy and proximity

without the physical limitations of geography, time zones, or conspicuous social status’  
(Williams, 1998: 124)

However, in light of the paucity of knowledge around men sharing infertility online, further investigation into the value of diverse forum spaces for infertility support for men is required to further understand which features facilitate men’s emotional sharing, how intimacy is created, and the value of online compared to offline support. As well, more research focusing on how couples deal with infertility, separately and together, would be valuable - although the men featured here demonstrate emotional expressiveness, homosocial support and care, we know little of how men co-construct and negotiate infertility with their partners. Previous research into infertility has noted that men frequently assume the ‘sturdy oak’ role within their intimate relationships (Shirani and Henwood, 2011; Malik and Coulson, 2008; Throsby and Gill, 2004; Cousineau and Domar, 2007; Culley et al., 2013) - but the impact of online outlets such as the forum featured here on how men then relate to their partners remains unknown.

More generally, our data offers some support for Anderson’s (2013) notion of ‘inclusive masculinity’, a softening of conventional ideals which allow for greater intimacy between men. However, it must be stressed that such manifestations of emotional expression and communication are tied to specific contexts, particularly spaces deemed ‘safe’ by men, such as online forums (see Robertson et al., 2015). More research is required into the situations and settings where men feel comfortable in articulating personal feelings, such as those pertaining to difficulty in reproduction, and in so doing remaking masculine identities.

There are, however, limitations to this analysis. The sample drew only from one online site, which is from the UK, and as noted previously within this article, many men may not actively participate in the forum, but rather ‘lurk’. This may create a sample which is self-selecting and distinctive; raising the question of whether the men who post on this forum represent the ‘typical’ man experiencing infertility and sharing in relation to infertility. Further analysis of other forums, specifically cross-



comparison of different forums, would enable a greater understanding of the 'typicality' of such sharing behaviour online. Understanding the similarities, or differences, concerning how men and women engage in emotional sharing online would also enhance our understanding of any gendered differences in the emotional sharing of parenthood aspirations. Given also the 'personal story' approach of the emotional sharing that occurred on the forum, further work using narrative analysis approaches such as those adopted by Hardey (2002) may also be of benefit to understanding the in-depth experiences of men in relation to infertility.

This analysis then demonstrates that men do emote infertility online when sharing with other men and that the emotional implications of infertility are profound. If 'Emotions represent a juncture between society and the most personal realms of an individual's experiences' (Freund, 1990: 453), naturalistic online settings then enable us to have a window into the personal elements of men's difficult reproductive experiences. That online settings may work for 'men's talk' around infertility may then have wider implications in terms of provision of support for men, such as greater signposting to communities of practice for men who are experiencing infertility or are seeking medical assistance for reproduction. Wider appreciation within both policy and practice that men may need emotional support in the context of infertility is then perhaps required. In an era of digital health provision, consideration of the offer of further online 'safe spaces' for men to share and discuss infertility with others who have experienced similar issues may enable greater emotional resilience and coping for men who experience the difficult consequences of infertility.

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