

# A Study to Assess the Level of Anxiety among Women who are Attending Selected Hospitals in Guwahati

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**Abstract:** ***Background and Objectives:** Anxiety is a feeling of worry, nervousness, or unease about something with an uncertain outcome. Infertile women are exposed more frequently to anxiety risk than are infertile men and thereby adversely affecting the quality of their lives. Yet, this problem is often disregarded. Infertility is often associated with a chronic state of stress which may manifest itself in anxiety-related symptoms. The prevalence of psychological symptoms like anxiety and the level of anxiety are significantly higher in infertile women. Infertility can be distressing and many women experience bouts of nervousness and feels worry. Anxiety can be experienced by women who were receiving treatment for infertility or who has come for treatment related to infertility. The objective of the study was to assess the level of anxiety among infertile women and to investigate the background factors of anxiety-related symptoms in women struggling with infertility. **Methods:** A descriptive research design was adopted for the study. 100 infertile women were selected using purposive sampling technique from OPD, IVF clinics of Pratiksha Hospital and Dispur Polyclinic Hospital, Guwahati, Assam. Structured questionnaire was used to assess the level of anxiety among infertile women. Data was analyzed by using software package named SPSS 20 Version. **Results:** The findings of the study revealed that majority 95(95%) of the participants have mild anxiety, 5(5%) of the participants have severe anxiety and 0(0%) of the participants have no anxiety. The association between levels of anxiety among infertility women with selected demographic variables which were tested by using chi-square test. Result showed that religion and type of family of infertility women was found significant association at  $p < 0.05$  level with level of anxiety. Other demographic variables such as age, place of residence, educational status, occupation, monthly family income, previous history of anxiety and previous history of depression were statistically non-significant with level of anxiety among infertility women. **Conclusion:** The present study revealed that majority of infertile women has mild anxiety. This study concluded that women should be made aware of infertility and the level of anxiety related to infertility. Health education should be provided to infertile women.*

**Keywords:** Infertility, anxiety, level of anxiety

## 1. Introduction

Anxiety is a feeling of worry, nervousness, or unease about something with an uncertain outcome. Anxiety is an emotion characterized by feelings of tension, worried thoughts and physical changes like increased blood pressure. People with anxiety disorders usually have recurring intrusive thoughts or concerns. They may avoid certain situations out of worry. They may also have physical symptoms such as sweating, trembling, dizziness or a rapid heartbeat.

Signs and symptoms of anxiety are:

- Feeling restless, wound-up, on-edge.
- Being easily fatigued.
- Having difficulty concentrating; mind going blank.
- Being irritable.
- Having muscle tension.
- Difficulty controlling feelings of worry.
- Having sleep problems, such as difficulty falling or staying asleep, restlessness, or unsatisfying sleep.

Infertility is often associated with a chronic state of stress which may manifest itself in anxiety-related symptoms. The aim of our study is to assess the psychological state of women with fertility problems, and to investigate the background factors of anxiety-related symptoms in women struggling with infertility.

According to the Indian Society of Assisted Reproduction,

infertility currently affects about 10 to 14 percent of the Indian population, with higher rates in urban where one out of six couples is impacted. Nearly 27.5 million couples actively trying to conceive suffer from infertility. Approximately, **8% of** currently married women suffered from infertility in India and most of them were secondary infertile (5.8%). Within India, women's infertility rate was the highest in west Bengal (13.9 percent) and the lowest in Meghalaya (2.5 percent).

Recently it has been reasoned that fertility treatment in itself may have negative psychological effects, possibly reducing its efficacy. However, most of what is known about infertility psychology is based on IVF patients; few studies have examined infertile women not receiving treatment.

The psychological response to assisted reproduction is mediated by both protective and risk factors. Models of these relationships are typically circular: they consider the complex interactions between biological, psychological and social processes. Support from the social environment, especially from the partner, can be associated with decreased distress in infertile women. Conversely, infertility itself can also affect the quality of relationships. As a disorder of a couple as a functional unit, the inability to conceive (especially in the presence of inadequate communication) frequently leads to a lack of sexual satisfaction or even a relationship crisis. Other aspects of the social environment, e.g., social pressure (a perceived expectation of motherhood)

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can also worsen the psychological consequences of infertility. The results concerning the stress-relieving effect of family support mainly come from studies viewing it as a global construct, without differentiating between various types of kinship, e.g. the quality of the infertile woman's relationship to her mother.

Infertility is associated with a variety of other psychosocial and biological factors which may also affect its occurrence and severity. One of these factors is the age of the female which does not only influence the time between planning a pregnancy and successful conception, but also the healthy development and normal birth of the child. Therefore, because of the increasing tendency to delay childbirth in Europe, advanced age can become a prominent psychosocial stress factor for infertile women.

Socioeconomic status may also affect fertility distress, but research results in this area are inconclusive. A probability-based study supported the consistent finding that general distress levels are lower with higher socioeconomic status, but found that fertility-specific distress is only related to age and no other demographic variable. Work-related stressors, such as concern about finances or missing work, may also have an impact on psychological well-being, as well as reproductive outcome.

## 2. Literature Survey

The term anxiety is a feeling of worry, nervousness, or unease about something with an uncertain outcome

According to the Indian Society of Assisted Reproduction, infertility currently affects about 10 to 14 percent of the Indian population, with higher rates in urban where one out of six couples is impacted. Nearly 27.5 million couples actively trying to conceive suffer from infertility. Approximately, 8% of currently married women suffered from infertility in India and most of them were secondary infertile (5.8%). Within India, women's infertility rate was the highest in west Bengal (13.9 percent) and the lowest in Meghalaya (2.5 percent)

Infertility can be distressing, and many people experience bouts of stress, sadness, or feelings of hopelessness. Some people with infertility become depressed. Research from 2015 found a high prevalence of anxiety disorder in people who were receiving treatment for infertility. In a nutshell, infertility can cause stress. Research has shown that women with infertility have the same levels of anxiety and depression, as do women with cancer, heart disease and HIV. Many societies do not understand that infertility is a disease, so couples get blamed for their condition

Overall, 82 percent of women suffering from primary infertility went for treatment and 65 percent of them went for allopathic treatment. Among those women suffering from secondary infertility, 75 percent went for treatment and among them 64 percent went for allopathic treatment

## 3. Methods / Approach

The methodology is the general research strategy that outlines the way in which research is to undertaken and among other things identifies the methods to be used in it. It indicates the general pattern for organizing the procedure, for gathering valid and reliable data for problem under investigation. It is the systematic, theoretical analysis of the methods applied to a field of study to solve the research problem

Kothari (2004) defines research methodology as-a method to analytically explain the research problem. It may be described as a science of analysis how research is done systematically

This chapter deals with the research methodology adopted to assess the level of anxiety and depression among infertile women attending at Pratiksha Hospital and Dispur Polyclinic Hospital, Guwahati, Assam. The chapter includes research approach, research design, schematic design, variables, setting, population, sample size, sampling technique, sample selection criteria, development and description of tool, content validity, reliability, pilot study, data collection procedure, ethical consideration and plan for data analysis.

### Research Approach

According to Treece E.W. and Treece T.T. (1986), the approach to research is the umbrella that covers the basic procedure for conducting research. Research approach is a broad plan to explore a phenomenon under study. Research approach involves the description of the plan to investigate the phenomenon under study in a structure (quantitative), unstructured (qualitative) or combination of two method (quantitative- qualitative integral approach)

Quantitative research approach was adopted by the researcher to assess the level of anxiety among infertile women attending at Pratiksha Hospital and Dispur Polyclinic Hospital, Guwahati, Assam.

## 4. Results/ Discussion

### Major findings of the study

#### Socio demographic profile of the subject

- Majority 38(38%) of infertile women were in 31-35 years.
- Majority 72(72%) of infertile women were from Hindu religion.
- Majority 53(53%) of infertile women resides in urban area.
- Majority 75(75%) of infertile women were graduate.
- Majority 66(66%) of infertile women were from nuclear family.
- Majority 58(58%) of infertile women were unemployed.
- Majority 52(52%) of infertile women have monthly family income of Rs. 23674-47347.
- Majority 51(51%) of infertile women were from upper middle class.

- Majority 100(100%) of infertile women have no previous history of anxiety.

### Frequency and percentage distribution of level of anxiety among infertile women

Data depicts the frequency and percentage distribution of level of anxiety among infertile women. Result revealed that majority (95%) of subjects had mild anxiety and only (5%) had moderate anxiety with obtained score range between 16(2-18) with median was 6 and with an average mean anxiety score was 7.68 and SD=4.976.

### Association between level of anxiety among infertile women with selected demographic variables

The association between level of anxiety among infertile women with selected demographic variables which was tested by using chi-square test. Result showed that religion and type of family of infertile women was found significant association at  $p < 0.05$  level with level of anxiety. Other demographic variables such as age, place of residence, educational status, occupation, monthly family income, previous history of anxiety and previous history of depression were statistically non-significant with level of anxiety among infertile women

### Discussion as per the objectives of the study

#### Objective 1: To assess the level of anxiety among infertile women who are attending selected hospitals

The present study assessed the level of anxiety among infertile women who are attending Pratiksha Hospital and Dispur Polyclinic Hospital. Result showed that among 100 participants, 95(95%) of the participants have mild anxiety. The findings of the present study is supported by a similar study which was conducted by a similar study which was conducted by Kalpana Singh, (2019) on assessment of anxiety and stress among Indian couples in a tertiary health care center in Bihar revealed that among 96 cases which suffer from primary infertility, 55.41% suffer from anxiety and among 26 cases which suffer from secondary infertility, 66.29% suffer from anxiety.

A study conducted by Dr. Homaidan Turkish-Homaidan (2019) on anxiety among women with primary infertility attending an infertility clinic in Riyadh, kingdom of Saudia Arabia: Rate, Severity and contributing factors show (53.8%) of the infertile women and 35 (37.2%) of the fertile women had anxiety. Infertile women were found to be more severely anxious ( $p = 0.014$ ). Among the infertile women, those who had pressure from family members for not getting pregnant were more anxious than those with no such pressure ( $P = 0.001$ ).

A study conducted by Shoboo Rahmati, (2019) on Survey frequency of the anxiety levels of infertile women in western Iran. The study revealed that among 200 infertile women, 53.5%, 32%, 11%, and 3.5% suffered from severe, moderate, mild and no anxiety, respectively. Women who had a lower than diploma education level and primary infertility suffered from higher anxiety levels.

#### Objective 2: To find out the association between level of anxiety with demographic variables

The present study shows the association between level of anxiety among infertile women with selected demographic variables which was tested by using chi-square test. Result showed that religion and type of family of infertile women was found significant association at  $p < 0.05$  level with level of anxiety. Other demographic variables such as age, place of residence, educational status, occupation, monthly family income, previous history of anxiety and previous history of depression were statistically not significant with level of anxiety among infertile women. So, research hypothesis is accepted.

A study was conducted by Eniko Lakatos, on anxiety among infertile women: a cross-sectional survey from Hungary. The study revealed that statistically there is a association between level of anxiety with demographic variables. Infertile women were younger ( $p = .001$ ) but had significantly worse psychological well-being ( $p < .0001$ ) than fertile subjects. Anxiety in infertile women was associated with age, social concern, sexual concern and maternal relationship stress, trait anxiety was also associated with financial stress

### 5. Conclusion

In general, infertility is defined as not being able to get pregnant (conceive) after one year (or longer) of unprotected sex. Because fertility in women is known to decline steadily with age, some providers evaluate and treat women aged 35 years or older after 6 months of unprotected sex. Infertility can be distressing, and many people experience bouts of anxiety, sadness, or feelings of hopelessness. The present study revealed that majority of infertile women has mild anxiety. This study concluded that infertile women should be made aware on infertility and the level of anxiety associated with infertility.

### 6. Limitations

- 1) A similar study can be conducted on large population for the generalization of the findings.
- 2) A follow up study can be done for a longer period of time for more reliability and effectiveness of the self-management program on diet, exercise, medications and lifestyle modifications.
- 3) A similar study can be conducted to take measures to prevent or reduce the level of anxiety among infertile women.
- 4) The study was conducted only in OPD setting.
- 5) Small sample size has restricted the generalizations of the findings.

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