

Personal and Interpersonal Dimensions of Childlessness in Three Different Ecological Settings

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INTRODUCTION

Parenthood is a fundamental human need and within a specified period if the person does not become a parent, it leads to personal and interpersonal problems. It holds true for both men and women and though due to ignorance most of the time woman, rather than man is blamed (Krik, 1963). Many infertile individuals report feeling defective physically and sexually they say infertility makes them "hollow" (females) or as if they were shooting blanks (males) (Kraft, 1980; Siebald and Tayno, 1982). Infertility appears to most profoundly affect the individuals sense of femininity or masculinity and confidence in themselves as sexual beings and when the cause of infertility is being assigned to one of the partners, the designated person feels guilty and experience doubt about affection. Many of the infertile couples labeled themselves as "failures" even though without being aware of any form of outside rejection or disapproval (Miall, 1985). Although they desire to be supportive to each other, partners in infertile couples often express negative affect and disapproval due to their shared stress (Abbey, Andrew and Harnam 1991). When both partners are in crisis it becomes difficult for them to understand each other. Different coping style may lead to misunderstandings, resentment and dissatisfaction. As Mahalstedt (1985) stated that "Because both the man and woman are hurting, tired and under great pressure they feel depleted of physical and emotional energy, they may become less able to fulfill each other."

Infertility may impose a strain on any marriage. When a basic human need such as parenthood is frustrated it is a blow to one's self-image and there is apt to be resentment on the part of husband or wife for the absence of children (Sherwin, 1969). It is severe threat to husband's masculinity to be told that his sperms are deficient, it is equally damaging for a wife to learn that her fertility is poor (Kaufman, 1946). To the extent that having children is seen as fulfillment of both their marriage and purpose

on earth, infertility puts into questions the meaning and purpose of both their marriage and very existence (Menning, 1975).

METHODOLOGY

The present research study is an attempt to explore the personal and interpersonal dimensions of childlessness. Sample for the present study was drawn from three different ecological settings of Jammu (Urban, Rural and Tribal). 150 childless couples (50 from each ecological setting) were selected. Snowball-sampling technique was used for sample selection. The potential subjects were contacted through people like the relatives, friends, and neighbors of the researcher. These people who knew about childless couples helped in identifying the sample. References of childless couples were also obtained from the government hospitals and infertility clinics. Magico-spiritual healers from religious places were also contacted for identification of the sample. Gujjars who sell milk in shops and houses were contacted to identify the sample.

In order to get detailed information about the personal and interpersonal dimensions interview guide and informal observation was used.

OBJECTIVE

The main objective of the research was to study and compare the personal and interpersonal dimensions of childlessness in three different ecological settings.

RESULTS

Importance of Having Children

It is an instinctive desire of every species to become parents and to rear the offspring till maturity. Parenthood as a stage of life is characterized by the need to look after, to take care and give, materially and in terms of affection. It has an expression of creativity and has both biological and psychological roots. This study examined the reasons why child bearing

and rearing was considered important as these reasons would reflect the needs and desires of couples to have children.

All the respondents (both males and females) in all the three settings considered child bearing to be the most important aspect of marriage. In the present sample, all the female respondents revealed an urge to become mothers and no woman voluntarily wanted to remain childless. Majority of responses obtained in all the three settings cited socio-emotional reasons for having children. According to them, parents have a responsibility towards their lineage and they have to bring forth the children to overcome their debt towards their ancestors. Children were considered important for perpetuation of lineage and they were also seen as important for fulfillment of emotional needs of parents. According to some of the respondents giving birth to a child imparts a feeling of completeness, emotional satisfaction and achievement. It also prevent parents from social and emotional harassment.

One of the respondent stated that:

"Only after becoming a mother you know about the meaning of motherhood. It arouses the feeling of affection and love ("Mamta") in a woman".

Another respondent stated that:

"Only after becoming parents, you get social recognition or approval of the society. Otherwise you have to face a number of psycho-social repercussions because of childlessness."

Children were also considered important for strong marital relations, as children help in strengthening the marital ties, otherwise there will be the chances of conflicts, insecurity of separation, remarriage or divorce. This belief was strongly found in rural and tribal settings. One of the respondents summed up for others:

"Presence of child assures security in your martial relations and it lessens the fear of separation or remarriage."

Children were also considered important for economic reasons especially in case of rural and tribal settings.

Immediate Reaction to The Diagnosis of Infertility

Out of the couples who were having primary infertility, 71% went in for medical examination while 29% never went for medical diagnosis. Out of those who went for medical diagnosis 58%

were found infertile (18 males and 39 females). Immediate reaction about the diagnosis of infertility in such respondents was studied and it was found that almost all the respondents reported going through stage of Denial. For them it was difficult to accept that this could happen to them.

One of the respondents stated that:

"when I came to know about my infertility I was so shocked that I didn't have any energy and could not get out of the bed for couple of days"

Some reported that they did not feel like eating or talking to any body and suffered in silence. They denied the fact and had the feeling that *"This could not happen to us. The doctors must have been mistaken"*.

25% of the infertile female respondents found it difficult to reveal about medical confirmation to their husbands and in -laws, as they were afraid of serious consequences. This was most commonly seen in case of rural and tribal settings. Male respondents also had the feeling of depression and shock when they heard about the inability of their wives to produce the baby. 12% of husbands reported becoming angry and shouting over their wives. In other cases, where males were diagnosed infertile they could not believe it and got very much disappointed. One of the male respondents stated that *"I could not accept the fact because we always dreamed about a child and it was a shock for me to know that I could not produce one"*.

Male respondents found it difficult to talk about their infertility with their wives and family members because of the feeling of inadequacy and shame. Some of urban respondents could not reveal their infertility to their wives and took some time to prepare their wives for this fact because they knew that this will upset them. In 4 cases in rural, 3 in urban and 2 in tribal setting, wives advised their husbands to keep it a secret in order to protect their husbands from embarrassment because the husbands were diagnosed infertile. In case of secondary infertility and pregnancy wastage, where the respondents were expecting normal and healthy delivery, their dreams were repeatedly shattered when they experienced miscarriages, stillbirths and neonatal deaths as the outcome of pregnancy. In this sample 26 respondents experienced miscarriages, it was an unexpected event for those young couples who had been anticipating

a normal pregnancy and a joyous birth. It was most distressing event for those who were facing repeated abortions. They consistently denied the happening. For respondents who faced premature and neonatal deaths, it was highly tragic, especially for those who faced more than five premature deaths.

Approach Towards Problem of Childlessness

The respondent's approach towards the problem of childlessness was inferred for their responses and categorized into three types- positive, negative and neutral. Overall, females were found to be more negative and neutral in their approach as compared to males in all the three setting. The striking emotional feelings reported by different respondents were depression, anxiety, irritability, helplessness, anger and jealousy. The emotional responses to infertility were more intense in those cases where women were diagnosed responsible and where husbands and in-laws were not supportive.

One of the female respondent stated that :

"Because of childlessness, I feel cut off, left out and feel that no body cares for me. I feel socially isolated and emotionally disturbed because of the negative attitude of society".

Feeling of guilt was found in those cases where organic problem was stated as a cause of childlessness. Depression was most commonly seen in case of female respondents. One of the male respondent where infertility was unexplained stated that:

"My wife has given me the ultimatum that if she will not get pregnant by the end of year she will commit suicide as she wants a baby badly".

Although the emotional responses related to infertility were more frequently visible overtly in case of female respondents but some of the

male respondents (20% in case of urban, 44% in case of rural, and 50% in case of tribal setting) also reported undergoing extreme stress (refer Table 1). However, they did not show it to others because they felt males were not expected to show it off. One of the male respondents in urban setting started growing his beard and declared that he will cut it only when his wife will conceive. This made his wife and family members depressed.

Many of the female respondents who were having unexplained infertility or who still had hope, experienced fluctuations of emotions especially during menstrual cycle. Mood swings and general low feeling was found when the monthly cycle arrived as usual. Some cried for the whole day, others used to lock and isolate themselves in the room, some didn't like to eat or to talk to any body. Respondents who were diagnosed infertile and those who had faith in God, waited every month for some miracle to happen.

Respondents were also asked to tell about their reactions on getting news about pregnancy of some relatives, friends or neighbours. Negative emotional responses were reported by a majority of respondents (10% of male and 16% of females in Urban, 14% of male and 52% of females in Rural, 20% of males and 16% of females in tribal). More females as compared to male respondents showed negative responses on hearing this kind of news. They reported feeling of annoyance, jealousy, misfortune, failure come into their mind. Some of the respondents stated that:

"It seems that world is full of pregnant ladies. I feel so jealous about the women who successfully conceive especially when they do not want the baby. At that time I become so jealous and curse my luck"

Table 1: Approach towards problem of childlessness.

Approach	Urban				Rural				Tribal				Total			
	Male		Female		Male		Female		Male		Female		Male		Female	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Positive	22	[44]	18	[36]	10	[20]	8	[16]	10	[20]	5	[10]	42	[28]	31	[21]
Negative	10	[20]	13	[26]	22	[44]	32	[64]	25	[50]	34	[68]	57	[38]	79	[52]
Neutral	18	[36]	19	[38]	18	[36]	10	[20]	15	[30]	11	[22]	51	[34]	40	[27]
Total	50	[100]	50	[100]	50	[100]	50	[100]	50	[100]	50	[100]	150	[100]	150	[100]

Calculated value of $\chi^2=33.4$, Tabulated value of $\chi^2 = 9.49$, df = 4. Therefore, difference is significant at .05 level.

Since the calculated value of χ^2 is much greater than its tabulated value, it may therefore be inferred that there is a statistically significant difference between the three groups in terms of approach towards problem of infertility

Another respondent reported:

“when I see that my friends or my husband’s friends of the same age group go through the experience of pregnancy and satisfaction of parenthood, I feel incomplete and depressed”.

Another respondent stated that :

“I avoid congratulating or meeting the friends or relatives who are pregnant or become parents, It does not mean that I am not happy or I am jealous but I am afraid that I might start crying.”

However some of the respondents also had positive feelings towards pregnancy of others and they consider them as lucky because they are complete and they will not face the psycho-social repercussions of childlessness. They felt happy about pregnancy of others.

INTERPERSONAL RELATIONS

a) *Change in The Individual Temperament as Perceived by the Spouse:* Change in the personality of respondents after diagnosis of the problem of childlessness as perceived by the spouse was studied and it was found that negative change in the nature of the husbands was observed by 20% [refer Table 2] of female respondents in urban, 52% in rural and 60% in tribal setting.

During the early years of marriage they reported that their husbands were more loving, cooperative and understanding but as the problem was diagnosed, they observed a change in the relationship. It was reported by female respondents that their husbands had become quarrelsome, frustrated over small matters, increased alcohol intake and used to stay out of home for a comparatively increased duration. In some cases they avoided their wife’s company.

One of the urban respondents who had a self-

choice marriage shared her experiences with the researcher. She stated that:

“we had a very strong love affair but my parents didn’t agree and they fixed my marriage some where else, at that time he tried to commit suicide by consuming poison and was saved by the doctors with a great difficulty. But still my parents didn’t agree and I was forced to marry someone else. I was also in love with him so I could not adjust at my in-laws. He still kept on meeting me. One day my husband came to know about the fact and he divorced me. After one year of divorce I got married to him. During the early years of married life he was very nice to me. Then I had two premature foetal deaths and I could not conceive but he wanted a baby badly. So a tremendous change is seen in his nature. He consumes excessive alcohol and even physically abuses me so badly that his family members come to my rescue”.

Out of these respondents 10 %of females in urban, 10% in rural and 25% in tribal setting stated that infertility had imposed serious strain on their marital relations. There was a threat of separation, remarriage or divorce. This was observed more in rural and tribal setting. One female respondent summed up for other respondents.

“I am very much under threat of separation, insecurity, stress, and afraid that my husband will leave me or marry again because I am not able to produce a child for him”.

Other respondents of rural and tribal setting also reported inter-personal conflicts, which involved blaming, abusing, taunting, disregarding and physical abuse. On the other hand 12% of male respondents in urban, 12% in rural and 10% in tribal setting, reported negative change in the nature of their wives. According

Table 2 : Change in individual temperament as perceived by the spouse

Change	Urban				Rural				Tribal				Total			
	Male		Female		Male		Female		Male		Female		Male		Female	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Positive	26	[52]	30	[60]	10	[20]	13	[26]	7	[14]	7	[14]	43	[29]	50	[33]
Negative	6	[12]	10	[20]	6	[12]	26	[52]	5	[10]	30	[60]	17	[11]	66	[44]
Neutral	18	[36]	10	[20]	34	[68]	11	[22]	38	[76]	13	[26]	90	[60]	34	[23]
Total	50	[100]	50	[100]	50	[100]	50	[100]	50	[100]	50	[100]	150	[100]	150	[100]

Calculated value of $\chi^2=53.2$, Tabulated value of $\chi^2=9.49$, df = 4. Therefore, Difference is significant at .05 level. It is evident from table., that the calculated value of χ^2 is much more than its table value. It may thus be inferred that change in individual temperament as perceived by spouse differed significantly across three settings.

to them, they had become impatient, showed increased irritability and had become more short tempered.

Changes in Interpersonal Relationship: Due to change in the nature of the spouse, change in the domain of interpersonal relationship was observed by respondents especially in case of rural and tribal settings. Positive inter-personal relations were reported by 60% couples in urban, 26% in rural and 14% in tribal setting (refer table 3). Their relations didn't suffer because of infertility but had become more strong. There was no friction due to childlessness. Instead their inability to produce a child brought them closer to each other. They had become more caring, affectionate and more understanding had developed between them. There was no threat of strained martial relations.

One of the female respondent whose husband was sympathetic, stated that:-

"Sometimes I feel very sad about my husband, I keep telling him to remarry as it is all my fault but he never agrees".

On the other hand 20% of respondents in urban, 52% in rural and 60% in tribal setting reported negative interpersonal relations. In some of the cases the respondents were having strained interpersonal relations before the diagnosis and majority of rural and tribal respondents stated that their interpersonal relations turned strained after the diagnosis of the problem of childlessness.

CONCLUDING COMMENTS

It is evident from the responses that children were considered important by respondents of all the three settings for socio-emotional reasons i.e. they are important for survival of lineage and they also fulfill the emotional needs of the parents. They were also considered important for strengthening the marital ties. This belief was

stronger in rural and tribal setting. Arrival of the child was considered as an essential and basic aim of marriage; otherwise couples have to face the psycho-social repercussions of childlessness in personal, interpersonal and social sphere. Striking emotional feelings reported by respondents were depression, anxiety, irritability, helplessness, anger, guilt, grief, tragedy, isolation, mental instability etc. Respondents also reported negative emotional responses when they saw or heard about pregnancy of their friends, neighbour or relatives. Positive emotional responses were also reported by only few of the respondents.

The study revealed that childlessness has an effect on individual personality as change in the temperament of the spouse after diagnosis of the problem or delay in childbirth was observed by respondents. This change was observed with passage of time and it was more in negative direction especially in case of rural and tribal setting. These results are consistent with the study conducted by Koul (1996) according to which females were ignored by their husbands if they were not able to conceive 2 or 3 years after marriage. It was found that gender plays an important role as where females were diagnosed infertile or where they were not able to produce live birth, they observed negative change in the temperament of their husbands. However in cases where males were diagnosed infertile, the wives did not report any major change in the husband's nature. Deodar (1995) reported that majority of females in his study noticed a change in their behaviour and personality because of childlessness. They reported becoming more angry and more frustrated.

Change in the domain of interpersonal relationship was observed by respondents especially in case of rural and tribal settings. The relationship between husband and wife was

Table 3: Shift in interpersonal relations

Shift in Relation- ship	Urban				Rural				Tribal				Total			
	Before Problem		After Problem		Before Problem		After Problem		Before Problem		After Problem		Before Problem		After Problem	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Positive	25	[50]	30	[60]	33	[66]	13	[26]	20	[40]	7	[14]	50	[33]	78	[52]
Negative	10	[20]	10	[20]	5	[10]	26	[52]	12	[24]	30	[60]	27	[44]	66	[18]
Neutral	15	[30]	10	[20]	12	[24]	11	[22]	18	[36]	13	[26]	54	[23]	45	[30]
Total	50	[100]	50	[100]	50	[100]	50	[100]	50	[100]	50	[100]	150	[100]	150	[100]

found to be altered as a result of childlessness. Overall shift towards negative interpersonal relations was observed by respondents especially in case of rural and tribal settings. However, more shift towards positive interpersonal relations was observed by respondents in urban setting. The results of the study are similar to the study conducted by Frank (1994) that if the stress due to infertility problem is greater, the conflict in interpersonal relations of the infertile couples also increase. Similar studies have been reported in Bell (1981) and Hireesh et.al. (1989) that infertility was found to be associated with marital discord. Infertile individuals experienced dissatisfaction with themselves and their marriage. So it can be concluded that childless couples faced repercussions at personal and interpersonal level especially in case of rural and tribal setting.

KEYWORDS Personal. Interpersonal. Rural. Urban. Tribal

ABSTRACT The present research is an attempt to study the personal and interpersonal dimensions of childlessness in three different ecological settings (Urban, Rural and Tribal) of Jammu (J&K). The sample of the study consisted of 50 childless couples each from three ecological settings, total 150 couples formed the core group for the study. Snowball sampling technique was used for sample selection. The tools used for the study were, Interview guide and Informal observation. Results of the study reveal that children were considered important by respondents of all the three settings for socio-emotional reasons i.e. they are important for survival of lineage and they also fulfill the emotional needs of the parents. Striking emotional feelings reported by respondents were depression, anxiety, irritability, helplessness, anger, guilt, grief, tragedy, isolation, mental instability etc. Most of the female respondents especially in case of rural and tribal settings reported a change in the attitude of their husbands after diagnosis of problem of infertility. The change was more in negative direction. Some of the respondents

of rural and tribal setting even had threat of separation, remarriage or divorce.

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