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Effects of coping patterns and social support on treatment-related distress for women on different stages of the assisted reproductive technology

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INTRODUCTION: The purposes of this study are to generate an appropriate conceptual framework to examine Taiwanese women's patterns of coping with the distress across different stages of the ART cycle and to examine the main and/or buffering effects of social support on women's distress while undergoing the ART cycle.

METHODS:

DESIGN: A prospective longitudinal study design was used.

SETTINGS: Two Assisted Reproductive Technology (ART) clinics in southern Taiwan.

SUBJECTS: Seventy-five infertile Taiwanese women who elected to receive ART treatments.

INSTRUMENTS: The Ways of Coping questionnaire (WCQ), the Personal Resource Questionnaire 85 II (PRQ85 II), and the Infertility-Specific Distress Scale (ISDS) were used to measure the infertility-specific distress, the coping, and the social support.

PROCEDURES: Eligible women enrolled in ART programs at the research settings were contacted three times in the treatment cycle. Three times of data collection are 2-3 days after ART started, 3-4 hours after embryo transferred, and the day of pregnancy test but before the results were given.

RESULTS: Multivariate analysis of covariance (MANCOVA) was applied to examine the time effects of distress on women undergoing ART. Women having no children and receiving previous ART treatments demonstrated a higher level of infertility distress across different stages of the treatment cycle. Multiple regressions were conducted to examine the factors related to women's distress in different stages of the cycle. In time 1, women using problem-focused coping strategies experienced lower levels of infertility distress. The level of infertility distress in the time 1 was associated with that in the time 2. Levels of the social support that women received during the ART cycle was related to women's experience of infertility distress.

CONCLUSIONS: The levels of infertility distress were increased when women passed through the stages of the ART cycle. The levels of social support and using of problem-focused coping strategies may contribute to decreasing women's distress levels when they undergoing the ART cycle.