



Women's Experience In Using "Complementary Nursing On Infertility"

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ABSTRACT

The development of complementary therapies especially infertility treatment is increasing. A qualitative research was conducted to explore the experience of infertile women undergoing nursing complementary therapy. Eight women participated in this research were selected by purposive sampling method based on the inclusion criteria. Selection of participants was done using snowball sampling. Data were collected through in-depth interviews and field notes. Data analysis was performed using thematic content analysis and stages suggested by Collaizi. The results of this research were: 1) Feeling of sadness was experienced by infertile women 2) Increasing age and the insistence of the family caused anxiety to infertile women, 3) Infertile women chose nursing complementary because they want to get pregnant naturally 4) Various ways and efforts were done by infertile women to get pregnant, 5) Infertile women had appropriate perception toward complementary nursing 6) Family supports were needed to succeed the complementary nursing. In conclusion, complementary nursing was very important to be chosen as one of solution for infertile couples. It is recommended that maternity nurses optimize their roles in giving information and support to infertile women.

Keywords: Infertility, Complementary Nursing, Qualitative research

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INTRODUCTION

Currently infertility has become a serious problem for married couples. One in four couples in developing countries is said to have experienced infertility (Mascarenhas, Flaxman, Boerma, Vanderpoel, & Stevens, 2012). Indonesia itself, as a developing country, still has a high prevalence for infertility cases, which is 10-15% in the reproductive age population (Bennett, Wiweko, Hinting, Adnyana, & Pangestu, 2012).

The impact of this infertility can cause various problems. Demartoto's research in Banjarsari stated that divorce cases occur because of infertility (Demartoto, 2008). Infertility also has psychological implications for women because women are closely related to their nature to

conceive and give birth. The phenomenological study in Yogyakarta on eight women who experienced infertility said that life experiences with infertility are not pleasant, there were pressures arising from oneself hoping of giving birth to children or from the external factors due to demands from parents-in-law, parents and other people (Warsiti, 2006).

Various ways and efforts are carried out by infertile women to get pregnant from seeking the doctor's help to alternative / complementary medication. Non-medical treatment that has been reported in qualitative research is an ethnographic approach study in 32 infertile couples in Canada, namely the use of Complementary and Alternative Medicine (CAM) which consists of lifestyle changes such as diet, exercise; alternative medicine such as acupuncture, herbal medicine; and religious methods such as praying and using amulets (Read et al, 2014).

Research on the success of the use of complementary therapies in dealing with infertility has been widely carried out but there has not been a specific study that examines the experience of women in using complementary nursing in infertility, so more in-depth studies are needed on how women experience complementary nursing in infertility.

METHODS

The method used in this study is phenomenological qualitative research involving eight participants who were determined based on inclusion criteria with purposive sampling method and serial sampling (snowball or chain referral sampling). The inclusion criteria in this study were women with infertility experience, women with experience using complementary nursing in infertility and able to tell about the experiences of undergoing complementary nursing for infertility.

Data collection methods used are in-depth interviews (in-depth interviews) equipped with field notes (field notes), data collection tools are interview guidelines and recording devices. Interviews are conducted directly or indirectly. Data collection takes place from June 8, 2016 to August 08, 2016. The process of data analysis is done by means of thematic content analysis using the stages of Colaizzi.

This research has obtained ethical permission from the ethics committee of the Faculty of Nursing University of Indonesia. In addition, researchers also pay attention to ethical principles in research, namely: the principle of benefits, the principle of respecting human rights (respect human dignity) and the principle of justice (right to justice) (Nursalam, 2008).

RESULTS

The characteristics of infertile women who participated in this study included ages between 29-46 years with undergraduate and post-graduate degree, mostly working women and the length of marriage varied from one year four months to 15 years. The number of participants in this study

were eight women consisting of six participant who have not had children yet and two other participants had already had children before. This study produced six main themes, namely:

First theme: Infertile women experience sad feelings

All participants in this study expressed their feelings as infertile women. Two out of the eight participants said they felt disturbed, four said they felt sad and cried, two said they felt low self-esteem and one person said that she had not function as a woman and three out of eight participants said they were always asked when they would have children. This theme is illustrated by the following participant statement:

"Sad ... he euh (yes) ... it feels like a woman's pride ... not yet ... I haven't functioned as a person ... as a woman, yeah ... "(P4)

Second theme: Increasing age and family pressure causes anxiety for infertile women

All participants in this study experienced anxiety. Six out of eight participants said they experienced anxiety due to increasing age and three out of eight participants said they were anxious because of the pressure from the family to immediately have children. Here are the expressions that support this theme:

"Not even 10 years, I have been very anxious in only 8 months, I have seen a doctor ... treatment, moreover working in medical profession makes me aware of the high risk of pregnancy, right ..." (P5)

Because the ones who are more demanding are in-laws ... my parents themselves are ok, they are really expecting, but there is no ... like ... pressures... " (P8)

Third theme: Infertile women choose complementary nursing because they want to get pregnant naturally

Seven out of the eight participants said the reason for using the complementary nursing was because they wanted to have children immediately and three out of eight participants reasoned it had no side effects. Three out of the eight participants reasoned because it was beneficial, and two out of eight participants opted for it because it was easy to do. Here is the excerpt from one of the participants:

"Yes ... I hope to be pregnant ... if necessary, right, yeah ... let it be good ... what ... the one ... when choosing this complementary therapy ... if hmmm ... I can have normal pregnancy huh ... "(P5)

Fourth theme: Infertile women try various ways and efforts to obtain pregnancy

All participants in this study revealed the ways and efforts they did to obtain pregnancy, namely seven out of eight participants had changed their life styles, all participants had done traditional medication / alternative medicine and five out of the eight participants had had medical treatment. The following excerpt is the expression of one of the participants:

"For example, we are asked to eat certain type of vegetable or avoid eating certain of foods, multiply drinking folate or not to do stressing activities ... I have tried to start taking this type of medicine, drinking coconut water, okay ... I still do it until today, ... I am told to eat vegetables, sprouts okay I do... then to drink folic acid milk, ... Vitamins was given once ... "(P8)

The fifth theme: Infertile women have the right perception about complementary nursing

Various perceptions were generated in this study. Three out of the eight participants said there were no difficulties in undergoing complementary nursing and three out of the eight participants also said that complementary nursing helped by improving physical, psychological and fertile conditions. Here is the expression that supports this theme:

"I don't think so ... it's normal ... hm it's easy to talk ... Yeah ... because I understand, since I work on a medical profession, those who are not will probably be confused of how to calculate their fertile period..." (P4)

Sixth theme: Family support is needed for complementary nursing success.

All participants in this study expressed the support they gained during complementary nursing in infertility, the support came from husbands and family. Three out of eight participants in this study said they received spiritual support and two out of eight participants said they received material support. This theme is illustrated by the following participant's statement:

"My husband supports me, he doesn't complain a lot ... Encouraging each other, like exercising; he is one of the fussy types reminding me of what I want to achieve, supporting and facilitating me as well." (P3)

DISCUSSION

The meaning obtained from the experience of women who experienced infertility from the themes generated was the sadness felt due to the absence of a child in the family, and the anxiety felt due to age and family pressure to immediately have children. Therefore, infertile women will carry out various methods and efforts to obtain pregnancy from medical and traditional treatment.

Complementary nursing is chosen by infertile women on the grounds that this action is not harmful, beneficial and most importantly they want to conceive baby naturally. So, support from various parties, especially families is needed for success in undergoing complementary nursing in this infertility.

The sad feelings experienced by infertile women in this study are in line with the results of research by Tedjawidjaja & Rahardanto (2015) which show that infertile women will go through the period of grief before entering the acceptance stage of infertility, the psychological picture that appears is a feeling of sadness, anxiety and stress. Other research that supports this is a study conducted by

Azghdy, Simbar&Vedadhir (2014) saying that affective emotional reactions to infertility are feelings of fear, anxiety, guilt, loneliness, grief and depression. Other studies in infertile couples in China also state that the absence of a child in a family causes a feeling of imperfection as a woman so she feels embarrassed (Loke, Ling Yu & Hayter, 2011).

The role of nurses is needed to overcome this psychological problem. Counseling can be provided to help overcome the psychological problems of the infertile women. Joy & McCrystal (2015) say that the purpose of counseling is to explore, understand, solve problems effectively and other problems related to infertility.

Besides feeling sad, infertile women also experience anxiety. Anxiety perceived is due to aging, the results of this study are supported by a survey conducted on infertile women which finds that there is a relationship between the duration of infertility and anxiety experienced by infertile women, namely the longer the period of infertility, the more anxiety arises (Ramezanzadeh, 2004).

Family pressure is also one source of anxiety felt by infertile women in the results of this study. This is supported by a study conducted by Warsiti (2006) which states that pressure from the social environment such as demands from mother in-laws, parents and other people is a source of tension for infertile couples, especially women. Tabong and Adongo (2013) say that families blame infertile women because they cannot have offspring and their families especially mothers in law tends to push them to immediately give them grandchildren.

Infertile women choose complementary nursing because they want to get pregnant naturally. This result is supported by a belief in the effectiveness of using complementary therapies that make complementary therapies and an alternative choice for infertile couples in the United States, not only to get a pregnancy, this therapy is also used by healthy couples (Smith et al, 2010). In addition, the use of complementary therapy is widely used by women who have not succeeded in medical treatment and women who experience side effects from medical treatment related to infertility problems (Ayaz &Yaman, 2010).

Various ways and efforts are made by infertile women to obtain pregnancy, one of which is lifestyle changes. The results of this study are supported by Sharma, Biedenharn, Fedor& Agarwal (2013) who say that lifestyle can affect a person's fertility, such as age at marriage, nutrition, weight, physical exercise, psychological stress, environmental conditions and work. The intended lifestyle for example is smoking habits, drug use, consumption of alcohol and caffeine which can have a negative impact on fertility. This result is in line with Dooley (2006) who said that in complementary therapy can be used in fertility programs because it can have a positive effect on fertility by paying attention to lifestyles such as diet, physical exercise, stress management and health education.

In addition to lifestyle changes, infertile women also use traditional or alternative medicine and medical treatment. Examples of the use of traditional medicine or alternative medicine in this

study are the use of herbs, massage, acupuncture and herbal use. This is in line with research conducted by Smith et al (2010) which states that many complementary therapies are carried out by infertile couples who wish to obtain a pregnancy and the most widely used are the use of acupuncture and herbal therapy.

Another study that supports the use of traditional medicine or alternatives in infertility is a study conducted by Read et al (2014) on infertile couples in Canada. This research finds that some of them use alternative medicine in the form of acupuncture and Chinese medicine or herbal medicine. Besides other alternative treatments used are reflection, homeopathy and massage.

The results of the study also state the participants' perceptions about complementary nursing namely in undergoing complementary nursing infertile women do not experience difficulties or obstacles. This study is supported by a study conducted by Read et al (2014) which states that participants' attitudes toward complementary and alternative therapies are optimistic because this treatment is entrusted with no danger and does not harm them compared to medical treatment. Besides they also believe in complementary therapy is effective in dealing with infertility.

Another perception expressed by infertile women is complementary nursing improving psychological conditions, improving physical conditions and regulating fertility. The results of this study are supported by Clark, Will, Moravek & Fisseha (2013) who stated that complementary and alternative therapies that are widely used by infertile patients are psychosocial interventions apart from herbal treatments, acupuncture, acupressure, massage and dietary arrangements.

Another study that supports this result of this research is conducted by Smith et al (2013) stating that infertile couples can improve their physical and psychological condition by carrying out healthy lifestyles such as eating nutritious food, reducing caffeine, alcohol, avoiding excessive exercise, doing recreation, being happy with oneself, not overworking, avoiding stress, relaxing, and thinking positively about the opportunity to get a pregnancy.

Infertile women get family support during complementary nursing. The support obtained is in the form of material and spiritual. Support is needed for the success of complementary nursing, this is in line with the research conducted by Tedjawidjaja & Rahardanto (2015) which states that social support obtained by infertile women is one of the protective factors in the success of the pregnancy program to be able to obtain children. Based on a qualitative study conducted by Jafarzadeh-Kenarsari, Ghahiri, Habibi & Boroujeni (2014), it was said that there were four support needed by infertile couples namely social support, material support, spiritual support and information support related to infertility.

The implication of the results of this study is the need for information provided by health workers and support from nurses is very important for infertile women who are undergoing infertility treatment. The role of nurses in providing support such as emotional support, namely

listening, encouragement, and empathy is needed in providing nursing care for infertile patients, especially infertile women (Omu&Omu, 2010).

CONCLUSIONS

The description of the themes illustrates the specific objectives set out in this study. Infertile women experience feelings of sadness and feel low self-esteem due to their infertility conditions. Anxiety is also felt by infertile women due to increasing age and family pressure to immediately have children.

Various attempts and methods are done by infertile women to get pregnant. To be pregnant naturally is the reason why infertile women choose complementary nursing. Support from the family is needed for success in undergoing complementary nursing. The support provided can be material and spiritual. These findings recommend that health care providers especially maternity nurses optimize their role in providing appropriate information and support for infertile women for success in undergoing complementary nursing in infertility.

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