

AN EXAMINATION OF ATTITUDES AND  
PERCEPTIONS EXPRESSED BY THE  
INDIVIDUAL EXPERIENCING  
INFERTILITY

By

PATRICIA N. STERLING

//

Bachelor of Arts in Education  
University of Kentucky  
Lexington, Kentucky  
1971

Master of Education  
Central State University  
Edmond, Oklahoma  
1981

Master of Education  
Central State University  
Edmond, Oklahoma  
1984

Submitted to the Faculty of the Graduate College  
of the Oklahoma State University  
in partial fulfillment of the requirements  
for the Degree of  
DOCTOR OF PHILOSOPHY  
December, 1988

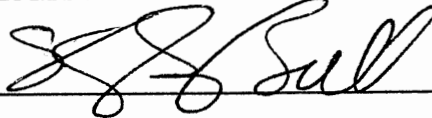
AN EXAMINATION OF ATTITUDES AND  
PERCEPTIONS EXPRESSED BY THE  
INDIVIDUAL EXPERIENCING  
INFERTILITY

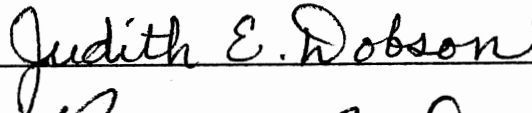
Thesis Approved:

  
Thesis Adviser









  
Dean of the Graduate College

## ACKNOWLEDGEMENTS

I have appreciated the guidance of my committee members throughout my graduate studies at Oklahoma State University. Special thanks goes to Dr. Al Carlozzi who served as chairman of my doctoral committee. Dr. Carlozzi's influence as both a challenging teacher and encouraging supervisor is recognized and deeply appreciated. I would also thank Dr. Kay Bull for his interest in this project and for his assistance with statistical interpretation. Appreciation is also extended to Dr. Judith Dobson, Dr. Joe Pearl, and Dr. Vicki Green who served as members of my doctoral committee.

Several friends have supported this endeavor over the past years. My gratitude and affection are extended to Bob Gardenhire and Pat and Wayne Meeks for the acceptance and love they have unselfishly offered. The friendship of Darcie Harris has meant a great deal throughout the years of graduate school. The understanding offered by Clark Nye along with his words of encouragement have been crucial to completion of this project. I am particularly thankful for this friendship and for the opportunity to know such a strong, yet caring man.

I have recognized the importance of family members through the course of graduate school. My sister, Carole Mailfald, her husband, Bill, and my niece, Allyson, have freely given their affection and encouragement. I am truly thankful for my parents, Frances and Grady Nation. They have very obviously shared the belief that I could succeed as both student and professional and have continued to offer much needed affirmation. It has only been through their unselfish love and support that completion of this degree has become a present reality.

## TABLE OF CONTENTS

Chapter	Page
I. INTRODUCTION . . . . .	1
Statement of the Problem . . . . .	2
Significance of the Study . . . . .	3
Definition of Terms . . . . .	4
Research Questions . . . . .	5
Limitations . . . . .	6
Organization of the Study . . . . .	6
II. REVIEW OF RELATED RESEARCH . . . . .	8
Introduction . . . . .	8
An Overview of Infertility Etiology and Treatment Status . . . . .	8
Parenthood as a Life Goal . . . . .	10
Reactions to Infertility . . . . .	14
Intervention in the Infertility Crisis . . . . .	23
Summary and Implications . . . . .	25
III. METHODS . . . . .	28
Introduction . . . . .	28
Subject Selection . . . . .	28
Instrumentation . . . . .	33
Infertility Reactions Questionnaire . . . . .	33
Reliability . . . . .	36
Content Validity . . . . .	40
Research Design . . . . .	41
Procedure . . . . .	41
Data Analysis . . . . .	42
Summary . . . . .	42
IV. RESULTS . . . . .	45
Introduction . . . . .	45
Research Question 1 . . . . .	46
Reliability . . . . .	46
Validity . . . . .	49
Research Question 2 . . . . .	52
Research Question 3 . . . . .	57
Research Question 4 . . . . .	64
Summary . . . . .	67



Chapter	Page
V. SUMMARY, CONCLUSIONS AND RECOMMENDATIONS . . .	70
Summary . . . . .	70
Conclusions . . . . .	79
Recommendations . . . . .	86
REFERENCES . . . . .	90
APPENDIXES . . . . .	95
APPENDIX A - AN OVERVIEW OF INFERTILITY ETIOLOGY AND TREATMENT STATUS: MEDICAL PROBLEMS RELATING TO FEMALE INFERTILITY, MEDICAL PROBLEMS RELATING TO MALE INFERTILITY, AND ALTERNATIVES TO NATURAL PARENTING . . . . .	96
APPENDIX B - INSTRUMENTS USED IN PILOT STUDY: FEMALE INFERTILITY QUESTIONNAIRE AND MALE INFERTILITY QUESTIONNAIRE . . . . .	102
APPENDIX C - DOCUMENTS INCLUDED IN FINAL RESEARCH PACKET: LETTER TO PARTICIPANTS, INFORMED CONSENT, DEMOGRAPHIC INFORMATION FORM, INFERTILITY REACTIONS QUESTIONNAIRE, BECK DEPRESSION INVENTORY, ROSENBERG SELF ESTEEM SCALE, ADULT NOWICKI-STRICKLAND INTERNAL-EXTERNAL LOCUS OF CONTROL SCALE . . . . .	121
APPENDIX D - TABLES OF MEANS AND STANDARD DEVIATIONS, SOURCE TABLES, AND POST HOC RESULTS FOR RESEARCH QUESTION 2 . . . . .	144
APPENDIX E - TABLES OF MEANS AND STANDARD DEVIATIONS, SOURCE TABLES, AND POST HOC RESULTS FOR RESEARCH QUESTION 3 . . . . .	156
APPENDIX F - TABLES OF MEANS AND STANDARD DEVIATIONS, SOURCE TABLES, AND POST HOC RESULTS FOR RESEARCH QUESTION 4 . . . . .	211

## LIST OF TABLES

Table	Page
1. Ethnic Origin and Age of the Sample . . . . .	29
2. Education, Average Family Income, and Present Occupational Status of the Sample . . . . .	30
3. Marital History and Years in Present Marital Relationship . . . . .	31
4. Religious Practices and Beliefs of Sample . . . . .	32
5. Duration of Infertility, Origin of Infertility, and Present Treatment Status . . . . .	34
6. Format of Instruments Used in Pilot Study . . . . .	37
7. Preliminary Reliability Coefficients and Results of Item Analysis . . . . .	39
8. Reliability Coefficients, Results of Item Analysis, and Format of Instrument Used in Final Data Analysis . . . . .	50
9. Correlations Between the Infertility Reactions Questionnaire and Instruments Previously Used in Infertility Research . . . . .	51
10. Summary of Grand Means and Standard Deviations . . . . .	53
11. Tests of Significance - Attitudes Regarding Parenthood . . . . .	54
12. Tests of Significance - Emotional and Behavioral Reactions Since Recognizing Infertility . . . . .	59
13. Tests of Significance - Current Emotional and Behavioral Reactions to Infertility . . . . .	60
14. Tests of Significance - Therapeutic Intervention with the Infertile Population . . . . .	66

## CHAPTER I

### INTRODUCTION

Individuals generally enter their childbearing years believing that no task will be accomplished as easily as having a baby and that reproduction of the species is what nature expects of all its creatures (Clark et al., 1982). Consequently, many couples, before and during the early years of marriage, frequently think in terms of prevention of pregnancy, assuming that they can easily conceive and have children if and when they so desire (Menning, 1982). However, approximately 10% to 15% of the population of childbearing age experience infertility; that is, they define themselves as unable to achieve pregnancy without contraception or as unable to carry a pregnancy to a live birth after one year of regular sexual relations (Leader, Taylor & Daniluk, 1984; Menning, 1982). Menning (1977) further delineates between primary infertility in which conception has never occurred and secondary infertility in which the patient has had at least one successful previous pregnancy. It is estimated that one in five to six American couples, or between 3 and 4 million couples, are infertile at some time (Clark et al., 1982; Menning, 1982; Ubell, 1984). Menning (1982) estimates an even greater rate of infertility, predicting that more than 10 million Americans may be unable to achieve or carry out pregnancy at some time. In 40% to 50% of these cases, infertility is attributed to the female, while in another 30% to 40% the difficulty is attributed to the male (Clark et al., 1982; Mazor, 1979). Twenty percent have a problem which either affects both members of the couple, or is of unknown origin (Menning, 1982).

Medical research and innovative treatments for infertility are making it possible for specialists in the field to successfully intervene in 50% to 70% of the cases seen (Clark et al., 1982; Griffin, 1983). Conversely, Menning (1982) estimates that approximately 5 million Americans will never be able to conceive and/or carry a pregnancy to a live birth.

Infertility rates appear on the rise as doctors are presently treating more cases of such than ever before (Clark et al., 1982). This increasingly large number of infertility cases is attributed, in part, to the fact that today's couples often delay marriage and parenthood until their 30s and 40s despite evidence that the ability to have children "unquestionably . . . declines with age" (Clark et al., 1982, p. 105). In a recent French study (Schwartz & Mayaux, 1982), researchers found a significantly decreasing rate of female fertility with age, 73% among women under age 25 to 53% among those over age 35. Findings of this study were seen as accurate by other researchers (DeCherney & Berkowitz, 1982; Hendershot, Mosher & Pratt, 1982) who agree that females postponing the birth of a first child are increasingly at risk of infertility and that such knowledge should provoke career women to reconsider delaying conception. Additionally, a rising incidence of venereal disease which damages reproductive organs, prolonged use of certain birth control methods such as the pill or an intrauterine device, and increased exposure to environmental toxins and/or drugs are felt to be potential contributors to infertility (Clark et al., 1982; Menning, 1982).

#### Statement of the Problem

The infertile couple has been described as a member of an invisible, often neglected, population which has neither an identified medical or mental illness, but whose infertile condition exacts a heavy toll on physical and psychological well being as well as on quality of life (Menning, 1982). The purpose of the present research was to focus upon this neglected population and examine the

perceptions of individuals identified as infertile. Specifically, attitudes regarding the goal of parenthood, emotional and behavioral reactions to infertility, and preferences regarding therapy which may prove beneficial in dealing with this situation were explored.

#### Significance of the Study

Menning (1982) describes infertility as a "... complex life crisis which evokes many feelings" (p. 156). Individuals are often faced with a situation which feels unsolvable in light of their present coping strategies (Menning, 1977). As a result, many infertile individuals pass through a painful series of psychological states, believing that time to overcome their failure to become a parent may soon run out (Clark et al., 1982). The feelings and responses commonly shared by members of the infertile population can be conceptualized similarly to the grief reactions identified by Kubler-Ross (1969), and described by Menning (1982). Initially, individuals may be surprised upon learning of their infertility, often after years of using some form of birth control. The situation may then be denied as pregnancy is anticipated and planned. Conversely, individuals may refuse to openly admit their desire to conceive and/or parent. Anger may frequently be projected towards others who appear to conceive with ease, or towards friends and family members who may display little understanding. As a result, isolation may follow as individuals remove themselves from much needed support systems in an effort to avoid recognition and discussion of painful feelings associated with their situation. Individuals may attempt to reconstruct past histories, hoping to achieve forgiveness for some previous thought or act by experiencing feelings of guilt. Feelings of grief may be experienced by the infertile population as their loss is finally realized. Resolution may be experienced as one comes to accept and deal with infertility in a realistic and healthy manner.

In response to the growing recognition of problems experienced by infertile individuals, there has been the formation of support groups such as those sponsored by the organization Resolve (Menning, 1980). These groups allow individuals dealing with infertility an opportunity to share fears and frustrations with those experiencing similar life situations (Decker & Loebel, 1978). In addition, "crisis intervention counseling" (Menning, 1982, p. 156) may allow infertile individuals the opportunity to explore their feelings and reactions with a counselor. Individual psychotherapy may be indicated when previously mentioned feelings are not dealt with appropriately, or when one's infertility has not been resolved after an extended period of time (Menning, 1982).

In spite of the large number of individuals experiencing infertility and the growing recognition of the mental health needs of many infertile individuals, empirical research in the area is still in the preliminary stages of inquiry. As a step towards establishing an empirically based psychological treatment program for individuals experiencing infertility, this study provides a means of exploring the perceptions and attitudes of this population.

#### Definition of Terms

Infertility is defined as an inability to achieve pregnancy without contraception or an inability to carry pregnancy to a live birth after one year of regular sexual relations.

Duration of infertility refers to the length of time a couple has been infertile. For the purpose of this study, duration of infertility was categorized as being between one and two years, between two and five years, or greater than five years.

Origin of infertility refers to the cause, if any, which has resulted in the couple's inability to conceive. The wife or husband alone may be experiencing

medical problems, both husband and wife may be experiencing medical problems, or the cause of infertility may be unknown.

Present treatment status refers to the couple's involvement, or lack of involvement, in procedures to achieve pregnancy and/or to become parents. The couple may/may not be receiving medical treatment for infertility. Further, they may/may not be actively pursuing artificial insemination by donor, surrogate mothering, adoption, or any procedure requiring the participation of a third party.

Preferences for therapy refers to the modalities of therapy recognized as potentially effective in dealing with the psychological concerns of infertility. This includes individual, couple, or group sessions led by trained mental health professionals or peer support groups led by other infertile individuals or couples.

#### Research Questions

Four research questions were developed for this study. The first question deals with design of instrumentation while the remaining three questions deal with the infertile individual's perceptions regarding the goal of parenthood, emotional and behavioral reactions to infertility, and preferences for therapy.

1. Can a reliable and valid questionnaire be designed which examines the perceptions of the individual identified as infertile?

2. What attitudes regarding parenthood as a life goal are expressed by infertile individuals? How do these vary on the basis of gender, age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity?

3. What emotional and behavioral reactions to knowledge of infertility are expressed by infertile individuals? How do these vary on the basis of gender, age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity?

4. What preferences for therapy are expressed by infertile individuals?

How do these vary on the basis of gender, age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity?

#### Limitations

1. Couples participating in this study appear jointly committed and highly motivated in their pursuit of parenthood. This fact is supported by their attempts to adopt, commitment to infertility medical treatment, participation in support groups, and volunteer involvement in the present research. Further, this sample is largely comprised of Caucasian, middle to upper class individuals who appear somewhat conservative in religious attitudes and practices. Caution should consequently be exercised in generalizing research results and conclusions from this somewhat atypical sample to the population of infertile individuals as a whole.

2. The questionnaire designed by the researcher for use in this study is in the preliminary stages of development. Limited reliability and validity data are available. Further revisions and additional evidence of the instrument's measurement qualities are needed for utilization of the Infertility Reactions Questionnaire in future studies.

3. The design level of this research was descriptive and quasi-experimental. Cause and effect explanations cannot be provided by the available data.

#### Organization of the Study

The statement of the problem, significance of the study, definition of terms, research questions, and limitations are presented in Chapter I. A review of the literature pertinent to this study is contained in Chapter II. The design and methodology, including a discussion of subjects, instrumentation, research design, procedure, and data analysis are examined in Chapter III. Chapter IV contains the



results of the study. The summary, conclusions, and recommendations of the study are presented in Chapter V.

## CHAPTER II

### REVIEW OF RELATED RESEARCH

#### Introduction

This review of literature is divided into four sections. The etiology of infertility and present treatment status will be explored in a brief overview. Attitudes regarding the life goal of parenthood and ease with which this task is to be accomplished will then be examined. Emotional and behavioral reactions to infertility will follow. Lastly, the need and feasibility of therapeutic intervention with the infertile population will be explored.

#### An Overview of Infertility Etiology and Treatment Status

Beliefs as to the etiology of infertility have changed significantly as knowledge regarding the subject has increased. As recently as the 1950s, physicians were attributing 30% to 40% of all infertility to psychological causes (Mazor, 1979). This previously accepted belief that failure to conceive was due to individual, generally female, psychopathology has in recent years been rejected in favor of the assumption that psychological factors associated with infertility are the result, not the cause, of the situation (McGuire, 1975; Seibel & Taymor, 1982). Presently, less than 5% of infertility cases are thought to be the result of emotional factors (Seibel & Taymor, 1982). In 80% of infertility cases, medical diagnosis can be made, 40% to 50% attributed solely to the female and 30% to 40% attributed solely to the male (Clark et al., 1982; Mazor, 1979). Approximately 20% of infertility cases result from combined medical problems in both male and female or are of unknown origin (Menning, 1982; Ubell, 1984).

Medical problems resulting in female infertility and the treatments for such are explained in numerous publications (Berghorn, 1986; Clark et al., 1982; Friedman, 1982; Larkin, 1985; Mazor, 1979; Ubell, 1984). These include anovulation, endometriosis, fallopian tube blockage, and cervical abnormalities. Medical intervention by means of chemotherapy and/or microsurgery has proven successful in treating female infertility. Further explanation of the etiology and treatment of female infertility may be found in Appendix A.

Medical problems resulting in male infertility and treatments for such are explained by Clark et al. (1982), Larkin (1985), Ubell (1984), and Friedman (1981). Varicocele, faulty semen, obstruction in the vas deferens, and autoimmunity are among the causes of male infertility. As with female infertility, chemotherapy and microsurgery are present treatments of choice. Further examination of the etiology and treatment of male infertility is offered in Appendix A.

Several alternatives to natural parenting may be considered when the medical procedures previously mentioned prove unsuccessful in cases of infertility. Included are artificial insemination by husband or donor, surrogate pregnancy, in vitro fertilization, or adoption. Procedural descriptions and discussions as to ethical and legal ramifications resulting from involvement in these procedures are cited in the writings of numerous authors (Beck, 1976; Clark et al., 1982; Friedman, 1981; Johnston et al., 1981; Keerdoja & Hager, 1982; Mazor, 1979; Menning, 1977, 1980, 1982; Porter & Christopher, 1984; Quindlen, 1987; Ubell, 1984; Waltzer, 1982; Zimmerman, 1982). Additional information as to the above mentioned procedures may be found in Appendix A.

In summary, it is believed that physiological causes of infertility are attributable to both males and females. Additionally, many cases are undiagnosable, or result from a combination of male and female medical problems. Treatment approaches are as varied as etiologies with recent medical

advancements offering potential cures to many. For the infertile couple, however, years of energy and considerable sums of money may be expended in an effort to conceive a child. For many, resignation to the situation becomes an eventual financial and emotional necessity.

### Parenthood as a Life Goal

Numerous authors including Burgwyn (1981), Kraft et al. (1980), Faux (1984), and Menning (1977) consistently refer to the state of parenthood in their writings. None, however, attempt to conceptualize such in definable terms. The Oxford English Dictionary (1970) defines parenthood as "the state or position of a parent" (p. 475), parent so defined as "a person who has begotten or borne a child; a father or mother" (p. 474). Accordingly, one must be fertile in order to parent, able to conceive and give birth if female or capable of impregnation if male (Menning, 1977). Even though achievement of a high birth rate is no longer essential, the belief that each person's destiny includes marriage and subsequent reproduction is held by many (Menning, 1977), such the result of religious, psychological, and societal teachings.

Menning (1977), in stressing the influence of religion in shaping our attitudes regarding the goal of parenthood, relates that ancient tribes put forth an enormous effort to produce large numbers of children in order to replace those who died in battle; Male children were most prized while female infants were valued only for their ability to reproduce. Many of these early societies based their attitudes on Biblical teachings of the Old Testament such as God's command to Noah and his sons to "Be fruitful and multiply, and fill the earth" (Genesis 9:1). Men were encouraged to choose mates who were fertile:

So Jacob went in to Rachel also, and indeed he loved Rachel more than Leah . . . Now the Lord saw that Leah was unloved and He opened her womb, but Rachel was barren. And Leah conceived and bore a son and named him Reuben, for she said, 'Because the Lord has seen my affliction; surely now my husband will love me.' . . . Now when Rachel

saw that she bore Jacob no children, she became jealous of her sister; and she said to Jacob, 'Give me children, or else I shall die.' Then Jacob's anger burned against Rachel, and he said, 'Am I in the place of God, who has withheld from you the fruit of the womb?' And she said, 'Here is my maid Bilhah, go in to her, that she may bear on my knees, that through her I too may have children.' So she gave him her maid Bilhah as a wife, and Jacob went to her (Genesis 29:31 - Genesis 30:4).

Religious recordings such as this, relates Menning (1977), stressed an obvious connection between fertility and worthiness whereas infertility was a punishment realized by those who lost favor with God. Burgwyn (1982) points out that these teachings still significantly affect followers of Catholicism and Judaism whereas some Protestant faiths appear more moderate in their beliefs. However, even New Testament writings lend support to these ancient teachings as the Christian leader Paul writes:

And it was not Adam who was deceived, but the woman being quite deceived, fell into transgression. But woman shall be preserved through the bearing of children if they continue in faith and love and sanctity with self restraint (I Timothy 2:14-15).

Menning (1977) contends that religious influence over fertility and therefore infertility has been great both past and present, accounting for many of the attitudes held by and towards the childless couple.

The field of psychology also has greatly influenced attitudes regarding parenthood. Hall and Lindzey (1978) interpret the writings of Freud. These authors explain that children between the ages of three and five become erotically attached to their opposite sex parent. During this phallic stage, young boys view the father as a sexual competitor for the mother's attention. Fear of punishment by the father, in the form of castration, however, motivates the male child to break ties with his mother and focus on modeling the father's behavior. Freud theorized that young girls are similarly attached to the father during the phallic state of development. The female child realizes significant disappointment when she discovers that she does not possess a penis. This event

results in the young female's feelings of inferiority to men. According to Freudian theory, she is able to experience only limited resolution of these feelings with conception and eventual birth of a child, hopefully a male. Erickson (1963), in discussing human personality development, describes the Generativity Stage in which the individual's primary concern is establishment and guidance of the next generation, potentially through the parent-child relationship. It is acknowledged that the concept of generativity encompasses not only parenthood but productivity and creativity as well and that individuals may well resolve this concern through involvement in other endeavors. Burgwyn (1981), however, in interpreting Erickson, sees this theory as implying that all options except for natural parenthood are "second best" (p. 3). Regardless, Erickson contends that failure to pass successfully through this stage results in feelings of stagnation and personal impoverishment. Whereas Freud and Erickson approach the issue of parenthood somewhat differently, both stress the innate desire to accomplish such (Faux, 1984).

Faux (1984) stresses the importance of societal teachings and expectations in determining the desire to parent. It is this force, Faux contends, which so greatly influences one's decision to procreate. Our Western culture, continues Faux, has encouraged men to seek gratification through their work while offering recognition to women who are mothers, the mandate being that childbearing is the female's primary responsibility in life. A quote from Olshansky (1987) illustrates this point:

I think we've all grown up with the idea that pregnancy is what a woman does, it's the most natural thing, and we have a whole 2,000 years of literature and culture that have always pointed in that direction. So there has been this tradition, and it's very hard at times to redefine oneself as a woman (p. 58).

Menning (1975) further contends that societal conditioning has resulted in a perception of infertile women as unfulfilled and men who cannot father children

as less virile. Infertile couples feel a stigma attached to them as a result of their childlessness, perceiving their worth to society as less than couples who become parents (Mahlstedt, 1985).

Payne (1978) interviewed 30 married couples on their views regarding marriage, parenting, and family life. Of the sample population, 18 couples had children while 12 did not. Twenty of the couples had been treated for infertility. Underlying the accounts of all respondents was the belief that marriage and subsequent parenthood was simply an ordinary and natural adult role. Of the couples treated for infertility, 12 expressed feeling different from peers who were parents and acknowledged desiring conformity through childbearing while only 1 untreated respondent mentioned such. The majority of medically treated respondents further expressed a strong desire for family continuity through childbearing while untreated couples rarely mentioned a need for such. Payne suggests that potential infertility makes one more keenly aware of the desire to carry on the family line. Ory (1978) questioned 27 voluntary childless couples and 54 voluntary parent couples to determine factors affecting the desire to parent or not to parent. The majority of respondents, 95.7% of parents and 94.5% of nonparents, felt that cultural attitudes reinforce the desirability of having children, two to three offspring perceived as ideal. Furthermore, more than two-thirds of the respondents reported feeling pressured to conform to such societal expectations, having perceived the dominant attitude towards childlessness as negative. A majority of respondents from both groups reported internalizing the desire to parent as children, very few acknowledging a preference for childlessness during their early years.

Parental desire appears to be influenced by cited religious, psychological, and societal teachings. The state of parenthood is generally viewed as a normal

and expected outcome of adulthood which offers the individual a sense of worthiness, accomplishment, positive recognition, and life fulfillment.

### Reactions to Infertility

Infertility is perceived as more than an anxiety producing, stressful situation (Mazor, 1979; Menning, 1977, 1980; Shapiro, 1982). These authors refer to one's recognition of infertility as a life crisis. The research of Caplan (1964) is often cited in writings on life crises (Korchin, 1976; Menning, 1977; Moos & Tsu, 1976). Caplan describes a crisis situation as one which the individual is inept to solve with established coping mechanisms. Psychological disequilibrium thus results and the individual attempts to work out the situation in a novel way. When the crisis subsides, one realizes a return to psychological equilibrium. Every crisis, states Caplan, offers an opportunity for psychological growth or deterioration. This outcome is based on an interplay of interpersonal characteristics, success or failure in dealing with previous life experiences, and environmental factors including the response and support of significant others. If one cannot solve the crisis with existing and/or newly acquired skills, major psychological disorganization with potentially drastic results may occur.

Emotions displayed during the infertility crisis are similar to those identified by Kubler-Ross (1969) in her work with terminally ill patients. Menning (1977, 1980, 1982) contends that one's recognition of infertility evokes a predictable response set. She identifies the common feelings and reactions to infertility as surprise, denial, isolation, anger, guilt, and depression/grief. Menning emphasizes the necessity of appropriately recognizing and dealing with each of these emotions in order that eventual resolution of the infertility crisis may be realized.

Initially, awareness of infertility evokes feelings of surprise (Menning, 1977, 1980, 1982). Couples have generally been acclimated to society's dictum that



fertility is a condition to be guarded against until children are desired and have likely depended on contraceptives for a number of years in order to avoid pregnancy. Menning notes that those involved are subsequently ill prepared to readily accept this situation. Believing pregnancy to be a personal choice, the awareness that such may no longer be an option produces a "rude shock" (Kraft et al., 1980, p. 621). Menning (1980, 1982) further contends that those most keenly affected by infertility during this initial phase appear highly achievement oriented and believe themselves capable of overcoming any obstacle if enough effort is exerted.

In an effort to defend against the excessive emotional discomfort evoked by infertility, the individual may employ denial as a coping mechanism (Shapiro, 1982). This author points out that infertility is perceived by those involved as a very real threat to life dreams, self esteem, and sexual image. Menning (1977, 1980, 1982) acknowledges that denial allows the mind and body to adjust to possibly overwhelming stimuli at their own pace. Most obviously expressed if initial tests reveal an absolute and untreatable problem, denial is seen as dangerous only when it becomes a long term or permanent coping mechanism (Menning, 1982). She points out that individuals who maintain that they do not want a family or refuse to label themselves as infertile after years of not conceiving are likely defending themselves inappropriately.

The anger precipitated by the infertility crisis may be directed towards oneself for not performing as expected or towards the situation in general and those involved (Menning, 1977, 1980, 1982). Because the situation appears too diffuse to attack, and because anger directed towards self is often overwhelmingly painful, individuals may project antagonistic feelings towards authority figures in charge of treatment procedures, or towards significant others who appear not to understand (Mazor, 1979; Menning, 1977, 1980). As the

infertility treatment proceeds, individuals may feel an increasing loss of control over the situation, resulting in feelings of helplessness which accentuate the anger (Griffin, 1983; Menning, 1977, 1980, 1982; Shapiro, 1982). Feelings that were once rational evolve into irrational expressions, possibly projected towards abortion advocates, parents who mistreat their children, or people who appear to "breed like rabbits" (Menning, 1980, 1982). A quote from Mahlstedt (1985) may exemplify this situation:

I am experiencing feelings that are very foreign to me. I find myself hating the pregnant women I see at school, in the grocery store, and even in church. I have never had such intense negative feelings towards others, and I despise myself for having them (p. 339).

Mahlstedt points out that anger can significantly affect the marital relationship as communication declines and resentment builds. Couples who once were able to handle problems adequately may now be unable to do so.

Feelings of isolation may be experienced by infertile individuals as they often perceive of themselves as alone in their attempts to achieve pregnancy (Menning, 1977, 1980, 1982). There appear to be constant reminders of the ease with which pregnancy is usually achieved:

I remember going to the market one night and being assaulted by the fertile world. At the bubble-gum machines, a mother was helping her toddler put a penny in the slot. A bit further down the aisle I was passed by a woman balancing a quart of milk and four containers of yogurt on her protruding belly. At the bakery one woman shouted across the buns to a young man, 'Was it a boy or a girl?' It is an unwritten law that what you want most seems to elude you but not anyone else. The gnawing desire to become pregnant is accentuated by every young or expectant mother you see. And take my word for it - they are everywhere . . . (Menning, 1977, p. 107).

Perceived by many as a very personal issue, infertile individuals may begin avoiding social gatherings with close friends and family members in which their situation is likely to become a topic of conversation, protecting themselves from those who ask questions and freely give unfounded, unrequested advice (Davis,

1987; Menning, 1977, 1980, 1982). The feelings of isolation are well expressed in this quote from an infertile woman (Mahlstedt, 1985):

I feel like I don't belong, like a second-class citizen with no place to go. Without a child, I don't belong in the group with kids who play in the park. Without a child, my husband and I don't fit in with our friends who do (p. 338).

Menning (1977, 1980, 1982) points out that one of the most obvious consequences of social isolation is the loss of support needed by individuals and couples for eventual crisis resolution.

Isolation within the marital relationship is likely if those involved appear insensitive to each other's unique perceptions and needs in reference to this situation and feel unable to communicate successfully with one another (Menning, 1980). Mahlstedt (1985) acknowledges that different perceptions of the situation may be expressed by male and female, the husband seemingly not as intense in his desire to have children as his wife, and/or perhaps having been socially conditioned to internalize his feelings to a large degree. An infertile woman expresses her sense of isolation within the marriage in the following quote:

The husband I always thought would be there to stand by me turned away. After all, he's not a woman. He's not the one the doctor is examining under a microscope. His life hasn't really changed. Even if I did have kids his routine would be basically the same. Because he's not the one going through all the tests he can't be faulted for not understanding when I dissolve each time my period comes. I blame myself for not being able to make him understand my pain. And then I feel angry. What can't he understand? (Menning, 1977, p. 106)

If not dealt with properly, isolation within the marital relationship may result in a radical change in the couple's life style such as new employment, relocation (Menning, 1977), and/or potential divorce (Kraft et al., 1980).

Individuals frequently experience feelings of guilt in response to the infertility crisis (Menning, 1977, 1980, 1982). In an attempt to logically explain the current situation, this author contends that infertile persons often review life histories in search of a guilty deed such as premarital sex, use of birth control, a

previous abortion, incidence of venereal disease, an extramarital affair, masturbation, homosexual thoughts or acts, or even sexual pleasure itself. Once the guilty act is thought to be discovered, the person may go to great lengths to achieve atonement and forgiveness, bargaining magically with God or Fate in an effort to achieve pregnancy (Mazor, 1979; Menning, 1977). This behavior apparently has no relationship to the educational level or sophistication of those involved (Menning, 1980, 1982).

I bargained constantly with Fate: a year of my life, ten years, my right arm, anything, in exchange for a pregnancy. It seemed to me there was no amount of pain I wouldn't undergo gladly in exchange for a body that could make a baby (Menning, 1977, p. 108).

Feelings of unworthiness precipitated by undue guilt may generalize to other sectors of one's life including employment, friendships, and marital relationships (Menning, 1977, 1980). Such may provoke further marital discord and even encouragement by the infertile person that his/her spouse seek out a partner with whom conception is possible (Shapiro, 1982).

The depression which generally ensues as a result of infertility is described by Menning (1977) as a legitimate state of sadness and despair which is seen as a natural part of moving to accept the loss that has occurred. When infertility is marked with finality, depression gives way to a rather strange and puzzling form of grief in which potential, not actual, losses must be dealt with (Menning, 1977, 1980, 1982).

Death. Death of alot of things. It is the end of the Bowes family and the Bowes family name. It dies with us because of me. My husband is the last of the male children in his family. Death before . . . before we even knew our child, because he never existed. The hardest part of this kind of death is that it is the death of a dream. There are no solid memories, no pictures, no things to remember. You can't remember your child's blond hair, or brown eyes, or his favorite toys or the way he laughed, or the way it felt to be pregnant with him. He never existed (Menning, 1980, p. 317).

Mahlstedt (1985) contends that numerous losses are realized during the infertility crisis. These are: (a) loss of relationships with friends and family; (b) loss of acceptable body image as the medical treatment proceeds; (c) loss of status in the eyes of society; (d) loss of self esteem and self confidence as the simple task of conception/impregnation proves impossible; (e) loss of control over daily lives as events are scheduled around medical procedures; (f) loss of security as careers are put on hold and financial burdens become excessive; (g) loss of fantasies associated with parenthood, including mourning over the child that never was. Mahlstedt contends that all of these losses result in feelings of depression and despair.

Studies exploring the emotional impact of infertility have examined similar dynamics which are thought to result in depression. In a study designed to assess levels of depression, locus of control, and perceived marital interaction, Weltzien (1984) studied 85 infertile couples. Independent variables for this research were gender and time-in-treatment. Instruments included the Beck Depression Inventory, the Adult Norwicki-Strickland Internal-External Scale, and the Dyadic Adjustment Scale. Only one significant difference was found, females indicating more depression than males. Feuer (1983) examined the psychological impact of infertility on males. Dependent variables for this study were depression, quality of the marital relationship, self esteem, masculinity, locus of control, and social isolation. Independent variables were diagnosis and treatment status. Sample members were diagnosed as either oligospermic (low sperm count) males or azoospermic (no live sperm) males and were either attempting or not attempting to conceive. Instruments used were the Spanier Dyadic Adjustment Inventory, the Rosenberg Self Esteem Scale, and the Beck Depression Inventory. Oligospermic males consistently demonstrated the greatest impact of the infertility with significant differences on measures of marital relationship quality, locus of

control, self esteem, and social isolation. Feuer contends that it is the uncertainty and lack of finality characteristic of this diagnosis which make the emotional impact greater for these individuals.

Successful resolution of the infertility crisis is described by Menning (1977) as a return of the individual's basic faith and optimism and a desire to turn energy previously channeled in dealing with this situation into new endeavors. Accomplishment of this task, contends McGuire (1975), remains an impossibility when treatment procedures go on for years. Infertile individuals sometimes have to decide that they have endured enough cycles of hope and despair (Menning, 1977).

There has to be a point where you don't want the uncertainty and the self-torment. There has to be a time to put it behind us (Clark et al., 1982, p. 102).

Resolution is further possible, stresses Menning (1977, 1980, 1982), only after those involved have defined and worked through the difficult feelings previously mentioned. Whereas this author acknowledges that such negative emotions may never be laid away forever, they do become less overwhelming with time, allowing the infertile individuals to get on with their lives. Subsequently, alternative life styles such as adoption or child free living may be considered (Shapiro, 1982).

The impact of infertility on the sexual relationship and sexual pleasure is viewed separately from other reactions (Menning, 1977). Once pleasurable and spontaneous sexual relations may become dissatisfying as exemplified in a quote from Olshansky (1987):

Our sexual life hasn't recovered yet. When I finally failed the last time with Pergonal, I was so depressed that I didn't want to have anything to do with sex at all, and he was so depressed that he had been through all of this for nothing that he didn't want to have anything to do with sex. Sex was a pain. Pleasure? Are you kidding me? I'd rather go take a shot of Pergonal rather than have sex, which was so rife with emotion . . . I don't know when there is ever going to

be a time in our lives when we can be relaxed enough to get back into sex as a pleasure. It became a focus of all of our rage and anxiety and fears (p. 60).

Keye (1984) has identified three problem areas which affect the sexual relationship of the infertile couple: (a) the need for scheduled sex; (b) the psychological impact of the infertility diagnosis; and (c) the physical changes which may result from the infertility problem itself.

Involvement in infertility treatment requires the couple to have intercourse at very specific times each month, frequently preceding or following medical procedures and tests (Menning, 1977; Debrovner & Shubin-Stein, 1975). Sexual problems experienced by the infertile couple have been attributed to this situation of sex on demand as opposed to sex by desire (Debrovner & Shubin-Stein, 1975; Elstein, 1975; Gray, 1980; Keye, 1984; Walker, 1978). The specific problems reported by these researchers include male impotence, inhibition of female orgasm, and decreased sexual desire by both partners. These authors note an increased frequency in sexual problems during the female's midcycle.

Drake and Grunert (1979) evaluated 51 couples to determine the frequency of sexual dysfunction. Initial postcoital testing identified 11 couples, 20% of the sample, with questionable results. A second test the following month was thus scheduled. Of these 11 couples, 1 failed to keep the next month's appointment, 4 had normal test results, and 6 had negative results. Of these 6 couples, 5 gave histories of acute midcycle sexual dysfunction in the male partner including impotence and ejaculatory failure. Further reports by these 5 couples indicated no sexual dysfunction prior to the infertility diagnosis and acknowledgment that midcycle or fertile periods of the month posed the greatest threat to their having normal sexual relations.

Berger (1980) interviewed 16 couples in which the male partner had been diagnosed as infertile. Of this sample, 11 males reported periods of impotence

lasting from one to four months, the onset identified within one week of the infertility diagnosis. No females reported incidence of sexual dysfunction. However, 6 did acknowledge increased feelings of anger directed towards their husbands following his diagnosis and 10 reported dreams which commonly incorporated themes concerning the husband's inability to impregnate.

Individuals diagnosed as infertile may begin viewing themselves as sexually unattractive and undesirable, these perceptions leading to decreased sexual desire and a decreased ability to enjoy and respond sexually (Elstein, 1975). A sense of defectiveness as a result of impaired fertility may spread to the person's overall self worth and body image, possibly generalizing to almost every area of life (Keye, 1984; Mazor, 1979). In an attempt to restore feelings of sexual adequacy and self worth, some partners may respond by having extramarital affairs or by becoming promiscuous (Keye, 1984; Mazor, 1979; Walker, 1978).

Lastly, Keye (1984) notes the physical changes which result from the infertility problem itself. He specifies the pain experienced by some females with endometriosis during intercourse and acknowledges that vaginismus and a subsequent decrease in the frequency of coitus may result.

In summary, the individual is characterized as displaying intense emotions in response to the knowledge of infertility. Expressed feelings of surprise, denial, anger, isolation, guilt, and grief are accompanied by certain behavioral reactions to the situation. The infertile individual experiences not only internal conflict but changing relationships with friends and family members. Couples may experience different perceptions of the infertility experience and may realize a negative impact on their marital relationship. Sexual pleasure and spontaneity may decline. Eventual resolution of the infertility crisis may be realized to the degree the individual is able to address and successfully cope with the emotional discomfort precipitated by this unexpected life event. The person's ability to put



fertility in its proper perspective and view the future with increased optimism is indicative of successful resolution of the infertility crisis.

#### Intervention in the Infertility Crisis

Resolution of any life crisis is largely determined by the kind of help the persons involved receive during the time of trouble (Cadden, 1964).

Acknowledging that the essential work of mourning be done by those directly involved, Cadden stresses the necessity of outside support in order that the individual/s may ultimately surmount the crisis and emerge from such in a healthy fashion. Caplan (1981) points out the vulnerability of individuals involved in crisis situations, perceiving the role of significant others as supportive, nurturing, and educational.

Menning (1977) stresses the essential roles of professionals such as physicians, nurses, and adoption workers in helping individuals resolve the infertility crisis. Recognizing the validity of complaints often directed at medical personnel specializing in infertility, Menning (1980) offers the following suggestions: (a) Infertility should be treated as a problem of the couple with both partners included in procedural planning from the beginning; (b) The plan of investigation and treatment should be offered as a recommendation, not a mandate, and flexibility as to sequence and pace of procedures should be encouraged; (c) Members of the infertility team should be trained to offer emotional support and education in conjunction with the medical treatment; (d) Referrals should be made by physicians when attempted treatments prove unsuccessful; (e) Medical staff should be accessible to patients by phone when concerns arise; (f) Physicians should be aware of counseling alternatives available to the infertile couple.

Likewise, adoption workers are often criticized for their way of handling the couple in crisis (Menning, 1977). Menning encourages adoption agencies to refer

all initial inquiries on adoption to an informed counselor who can offer information and emotional support. Adoption workers, says Renne (1977), should be well aware of reactions to infertility and should stress to clients the normalcy and necessity of grief in crisis resolution.

Those involved in the infertility crisis may express a need for additional support apart from that offered by family and friends. Successful intervention by means of individual and/or couple counseling is reported by mental health professionals who specialize in dealing with this population (Berger, 1977; Bresnick, 1981; Mudd, 1980; Rutledge, 1979; Shapiro, 1982). These authors encourage counselors to provide necessary information and to allow for expression of feelings during therapy sessions. Sexual problems resulting from knowledge of infertility are generally dealt with through educational and behavioral techniques (Berger, 1977; Keye, 1984; Walker, 1978).

Bresnick and Taymor (1979) evaluated the effectiveness of counseling with the infertile population. Short term treatment, 5 or less sessions, was offered to 46 individuals or couples and long term treatment, 6 or more sessions, was offered to 16 individuals or couples. Symptoms of guilt, anger, frustration, and isolation were measured prior to and following treatment. Improvement was noted in 78% to 100% of female subjects after long term treatment and between 35% to 65% after short term treatment. Males showed a lesser degree of improvement in regard to these symptoms ranging from 33% to 67% following long term counseling and from 35% to 65% following short term counseling. Furthermore, 37% to 100% of female subjects reported improvement in the areas of communication with spouse, sexual adjustment, career attitudes, and attitudes toward failure of fertility following long term treatment. Little change was noted in these areas following short term treatment, however. Acknowledging that this study lacks experimental sophistication, these researchers advocate the

use of long term couple or individual counseling in dealing with the infertility crisis.

Lukse (1985) examined the effect of group counseling in reducing the frequency of grief reactions experienced by infertile couples. The study sample consisted of 14 couples and 1 individual female. Group members responded to a questionnaire designed by the researcher prior to and upon completion of six sessions. The questionnaire measured frequency of grief, self concept, and marital/sexual satisfaction. Results of the study indicate a significant difference in the frequency of grief reported by infertile couples before attending counseling sessions and after attending counseling sessions. Also, self concept improved to a significant degree through the counseling process.

Resolution of the infertility crisis may also be realized through involvement in peer support groups whose members are infertile (Christianson, 1986; Decker & Loebel, 1978; Mahlstedt, 1985; Menning, 1975, 1976, 1977, 1980, 1982; Unruh & McGrath, 1985). Such groups are said to help members increase coping abilities to deal with stressful situations, provide members interpersonal insight and subsequent understanding of effective behaviors, and allow for sharing of information by members in a safe, nonjudgmental environment (Rosenberg, 1984).

Resolution of the infertility crisis may be realized by those involved if adequate emotional support is forthcoming. In some cases, such may be provided by friends and family members. Other situations may require outside intervention by medical and/or mental health professionals. Resolution will subsequently allow for a return to psychological homeostasis and possibly, a higher level of functioning realized by the identified individual and couple.

#### Summary and Implications

Infertility is perceived as a life crisis by many who go through the experience. Perceptions held by most couples entering marriage include the

necessity of eventual parenthood and the ease with which accomplishment of this task will be realized. Such perceptions are based upon a combination of religious, psychological, and societal teachings. However, more couples than ever before are experiencing conception difficulties. Attempts to deal with infertility result in expressions of surprise, denial, isolation, anger, guilt, and depression/grief. Resolution of this crisis necessitates that the individual and couple recognize and deal with these strong emotions in an effort to make realistic plans for the future. For some infertile individuals and couples, this state may be realized with support offered by family or friends. For others, therapeutic intervention or peer support group involvement may be necessary.

This review of literature forms the conceptual framework upon which the instrument designed for use in this study, the Infertility Reactions Questionnaire, was constructed. As presented, writings on infertility generally focus on attitudes regarding the goal of parenthood, emotional and behavior reactions to infertility, and therapeutic intervention with the infertile population. These dimensions of the infertility experience were examined in the major sections of the Infertility Reactions Questionnaire. Likewise, subject matter emphasized in these writings formed the basis for construction of the 25 subscales of the instrument. Test items were constructed by the researcher based on implications and observations of professionals working in the area of infertility and on remarks made by individuals experiencing infertility, these included within this literature review. Further information as to instrument design is offered in the following chapter.

Additionally, this review of literature presents findings of previous research in the area of infertility. Feuer (1983) and Weltzien (1984) incorporated several commercially available instruments in their studies including the Beck Depression Inventory, the Rosenberg Self-Esteem Scale, and the Adult Nowicki-Strickland Internal-External Locus of Control Scale. Consequently, it was decided that

these instruments would be administered to participants in the current research as a means of establishing the validity of the Infertility Reactions Questionnaire. Of interest would be both the strength and pattern of correlations between particular subscales of the Infertility Reactions Questionnaire and the commercially available instruments. These findings and conclusions are presented in Chapters IV and V.

## CHAPTER III

### METHODS

#### Introduction

This chapter describes the methods and procedures implemented in the present research. The chapter sections include presentations of the subject selection, instrumentation, research design, procedures, and analysis of the data.

#### Subject Selection

The research sample for this study was drawn from a population of married couples experiencing primary infertility who were in contact with cooperating medical facilities treating cases of infertility, support groups for infertile couples, or private adoption agencies located in three large western cities. The sample was composed of volunteer couples who were contacted through a request for subjects made by a representative of each cooperating agency.

Of the 144 couples who expressed an interest in participating in this study, 74 couples (51%) returned completed research packets. Of this sample, 22 couples were involved in infertility treatment at one of the five medical facilities participating in this study. Twenty couples were active in one of the three infertility support groups who agreed to participate in this study. The remaining 32 couples were actively pursuing adoption through one of the five private adoption agencies participating in this study.

Demographic data describing the sample was acquired from information obtained using the Demographic Information Form (Appendix C). The sample for this study was almost exclusively Caucasian (98.6%). While the age range of this sample was from early to middle adulthood, participants most frequently fell

within the 25-to-34 year age bracket. Data related to ethnic origin and age of the research sample are summarized in Table 1.

Table 1

Ethnic Origin and Age of the Sample

Characteristics	Total Sample N = 148		Males N = 74		Females N = 74	
<u>Ethnic Origin</u>						
Caucasian	146	98.6%	73	98.6%	73	98.6%
Eurasian	1	.7%	1	1.4%	--	--
Hispanic	1	.7%	--	--	1	1.4%
<u>Age</u>						
< 25 years	6	4.1%	3	4.1%	3	4.1%
25-29 years	42	28.4%	17	23.0%	25	33.8%
30-34 years	64	43.2%	34	45.9%	30	40.5%
35-39 years	28	18.9%	14	18.9%	14	18.9%
> 39 years	8	5.4%	6	8.1%	2	2.7%

Subjects appeared generally well educated with 28.4% of the total sample completing undergraduate coursework and an additional 29% of participants pursuing a graduate or professional degree. Present incomes generally placed participants in middle to upper middle class socioeconomic brackets with 71.6% of the total sample reporting an average family income between \$26,000 and \$75,000. The majority of participants were employed outside of the home. A variety of professions was represented within the sample including business, homemaking, medical, vocational/trade, engineering, education, mental health,

and government/law. Table 2 shows the frequency distributions for education, average family income, and present occupational status.

Table 2

Education, Average Family Income, and Present

Occupational Status of the Sample

Characteristics	Total Sample		Males		Females	
<u>Level of Education</u>						
High School Degree	21	14.2%	9	12.2%	12	16.2%
Some College	42	28.4%	18	24.3%	24	32.4%
Bachelors Degree	42	28.4%	23	31.1%	19	25.7%
Graduate or Professional Training	43	29.0%	24	32.4%	19	25.7%
Individual Totals	148	100%	74	100%	74	100%
<u>Average Family Income</u>						
\$0-\$25,000	13	17.6%				
\$26,000-\$50,000	36	48.6%				
\$51,000-75,000	17	23.0%				
\$76,000-\$100,000	5	6.7%				
\$100,000+	3	4.1%				
Couple Totals	74	100%				
<u>Occupational Status</u>						
Business	57	38.5%	30	40.5%	27	36.5%
Homemaker	18	12.2%	--	--	18	24.2%
Medical	14	9.5%	4	5.4%	10	13.5%
Vocational/Trade	12	8.1%	12	16.2%	--	--
Engineering	11	7.4%	10	13.5%	1	1.4%
Mental Health	5	3.4%	1	1.4%	4	5.4%
Government/Law	3	2.0%	2	2.7%	1	1.4%
Education	8	5.4%	2	2.7%	6	8.1%
Miscellaneous	20	13.5%	13	17.6%	7	9.5%
Individual Totals	148	100%	74	100%	74	100%



Characteristically, the present marriage was the first for research participants. Of the total sample, only eight males and six females had been married previously. The majority of couples had been married to their present spouse for less than 10 years (approximately 80% of participants). Data as to marital history and years in the present marital relationship are reported in Table 3.

Table 3

Marital History and Years in Present Marital Relationship

Characteristics	Total Sample		Males		Females	
<u>Marital History</u>						
Not Previously Married	134	90.5%	66	89.2%	68	91.9%
Married Once Before	11	7.5%	5	6.7%	6	8.1%
Married Twice Before	3	2.0%	3	4.1%	--	--
Individual Totals	148	100%	74	100%	74	100%
<u>Years in Present Marital Relationship</u>						
< 5 years	13	17.6%				
5-9 years	46	62.1%				
10-14 years	11	14.9%				
15-19	4	5.4%				
Couple Totals	74	100%				

Sample members most often identified with Protestant religions (46.6%). A number of participants (34.5%) identified their religious preference as "Other". Although not specified, it is assumed that many participants who aligned with this designation were members of the Mormon faith as a considerable portion of the research sample was drawn from an area strongly influenced by this religious body. It should also be noted that no participants acknowledged Judaism as their religious preference. Frequent church attendance was reported by participants with slightly over 66% of the total sample attending church once to several times per week. The majority of subjects denied a literal interpretation of the Bible. Data pertaining to religious practices and beliefs are summarized in Table 4.

Table 4  
Religious Practices and Beliefs of Sample

Characteristics	Total Sample N = 148		Males N = 74		Females N = 74	
<u>Religious Preference</u>						
Catholic	13	8.8%	7	9.5%	6	8.1%
Protestant	69	46.6%	31	41.9%	38	51.4%
Other	51	34.5%	27	36.4%	24	32.4%
None	15	10.1%	9	12.2%	6	8.1%
<u>Church Attendance</u>						
Never	13	8.8%	7	9.5%	6	8.1%
About one time a year	14	9.5%	8	10.8%	6	8.1%
Several times a year	23	15.5%	13	17.6%	10	13.5%
Once a week	60	40.5%	26	35.1%	34	46.0%
Several times a week	38	25.7%	20	27.0%	18	24.3%
<u>Literal Interpretation of the Bible</u>						
No	101	68.2%	50	67.6%	51	68.9%
Yes	47	31.8%	24	32.4%	23	31.1%

Sixty couples, 81.1% of the sample, had used birth control in order to avoid pregnancy. Birth control was used an average of 3.3 years by this portion of the sample. Most couples had been aware of their infertility for some time with 48.7% of the sample reporting knowledge of infertility for two to five years and 37.8% of the sample reporting knowledge of infertility for more than five years. The greatest number of couples, 36.5%, identified female medical problems as the cause of their infertility. Medical problems experienced by males alone resulted in infertility for 18.9% of the sample. For 27% of the couples, medical problems experienced by both husband and wife resulted in infertility. The cause of infertility was unknown for 17.6% of the couples participating in this study. The majority of couples, 55.4%, were not involved in medical treatment for their infertility at the time of this study. Of this percentage, 41.9% were actively pursuing adoption or conception via a procedure requiring the participation of a third party while 13.5% were not. Fewer couples, 44.6% of the sample, were involved in medical treatment for their infertility at the time of this study. Of this percentage, 25.7% also were pursuing adoption or were involved in medical procedures requiring participation of a third party while 18.9% were not. Demographic data pertaining to duration of infertility, origin of infertility, and present treatment status are summarized in Table 5.

#### Instrumentation

The instruments used in this study consisted of a demographic information form and the Infertility Reactions Questionnaire. This section describes the procedures used to develop the Infertility Reactions Questionnaire and documentation of preliminary reliability and validity properties.

#### Infertility Reactions Questionnaire

Development of the Infertility Reactions Questionnaire was initiated during graduate coursework at a major midwestern university. Instrument design began

Table 5

Duration of Infertility, Origin of Infertility,  
and Present Treatment Status

Characteristics	Total Sample N = 74 couples	
<u>Duration of Infertility</u>		
> 1 but < 2 years	10	13.5%
Between 2 and 5 years	36	48.7%
> 5 years	28	37.8%
<u>Origin of Infertility</u>		
Female Only Medical Problems	27	36.5%
Male Only Medical Problems	14	18.9%
Female and Male Medical Problems	20	27.0%
Origin of Infertility Unknown	13	17.6%
<u>Present Treatment Status</u>		
Medical Treatment plus Alternative Parenting Procedure <sup>a</sup>	19	25.7%
Medical Treatment Only	14	18.9%
Alternative Parenting Procedure Only	31	41.9%
No Medical Treatment, No Alternative Parenting Procedure	10	13.5%

<sup>a</sup> Medical treatment refers to the couple's involvement in any medical procedure which would allow for conception between husband and wife, i.e., microsurgery, chemotherapy, in vitro, etc. Alternative parenting refers to the couple's pursuit of adoption, artificial insemination by donor, surrogate mothering, etc. which would require participation by a third party.

with a review of relevant research in the area of infertility. Based on this review, it was determined that four dimensions of the infertility experience should be assessed, these forming the major sections of the questionnaire. Section 1 was designed to measure attitudes regarding parenthood. This section included 17 items divided into these subscales: religion, sociology, and psychology. Section 2 was designed to measure emotional and behavioral reactions experienced since recognizing infertility. The 48 items included in this section were divided into eight subscales: surprise, denial, anger, isolation, guilt, depression/grief, resolution, and sexual dysfunction. Section 3 was designed to measure modes of therapy thought to be effective in dealing with the infertile population. Seven items were included in this section, each forming a separate subscale. Section 4 was designed to assess current emotional and behavioral reactions to infertility. The 8 items included in this section were paragraphs incorporating statements from Section 2 reworded in the present tense. The subscales for this section remained the same as those in Section 2.

Three preliminary forms of the Infertility Reactions Questionnaire were developed: a Female Infertility Questionnaire, a Male Infertility Questionnaire, and a Couple Infertility Questionnaire. Eighty test items were included on each form. Items were identical across instruments apart from gender and pronoun usage. A Likert-like scale was designed for use on the questionnaire. Statements were to be classified from one to six, one being "strongly disagree" and six being "strongly agree."

The three forms of the questionnaire were circulated to five graduate faculty members for review. Based on their recommendations, the Couple Infertility Questionnaire was eliminated for use in this study due to duplication of responses. It was also recommended that the format of sections measuring previous and current reactions to infertility be the same. Subsequently, the

paragraph format of Section 4 was eliminated and replaced with individual statements. The subscales included in this section remained the same. Revisions of some statements also were necessary in order that each test item would contribute to only one subscale on the questionnaire.

The remaining forms of the instrument, the Female Infertility Questionnaire and the Male Infertility Questionnaire, were then sent to five professionals dealing in various capacities with the infertile population. A urologist who works with infertility problems in males, two registered nurses who deal primarily with patients undergoing in vitro fertilization, a representative from the national headquarters of Resolve, and a psychologist working in the area of infertility were members of this panel of experts. These professionals were asked to review the questionnaires and respond with recommendations for instrument revision. Each individual did so and revisions of test items were made accordingly.

Having followed these procedures, a pilot study using the preliminary forms of the Infertility Reactions Questionnaire was planned. A sample of 15 couples experiencing primary infertility was administered preliminary forms of the instrument. These couples were then readministered the instrument after two weeks. Table 6 offers data summarizing the content of questionnaires used in the pilot study. These preliminary questionnaires are found in Appendix B.

### Reliability

Preliminary reliability data for the Infertility Reactions Questionnaire is reported in terms of test-retest, internal consistency, and split half coefficients. Data was obtained from the pilot study. Test-retest reliability coefficients were determined for each subscale of the questionnaire. Within Section 1, Attitudes Regarding Parenthood, reliability coefficients ranged from .72 for the Psychology subscale to .88 for both Religion and Sociology subscales. Reliability coefficients for subscales within Section 2, Emotional and Behavioral Reactions Since

Table 6

Format of Instruments Used in Pilot Study

Dimension	Subscales	Number of Items Included	Items Included
<u>Section 1</u>			
Attitudes Regarding Parenthood	Religion	6	2,5,7,10,13,16
	Psychology	6	1,6,11,12,15,18
	Sociology	6	3,4,8,9,14,17
<u>Section 2</u>			
Emotional/Behavioral Reactions Since Recognizing Infertility	Surprise	6	21,40,43,48,58,66
	Denial	6	22,34,37,46,55,63
	Anger	6	19,25,27,32,35,53
	Isolation	6	31,33,42,45,57,60
	Guilt	6	20,30,47,56,62,65
	Depression/Grief	6	29,36,41,50,61,64
	Resolution	6	23,26,38,44,52,59
	Sexual Dysfunction	6	24,28,39,49,51,54
<u>Section 3</u>			
Current Emotional/ Behavioral Reactions to Infertility	Surprise	6	67,73,79,90,93,102
	Denial	6	70,75,78,87,92,111
	Anger	6	69,72,81,97,109,110
	Isolation	6	77,80,89,99,103,107
	Guilt	6	71,86,88,105,106,108
	Depression/Grief	6	68,83,94,95,101,104
	Resolution	6	74,82,84,85,112,113
	Sexual Dysfunction	6	76,91,96,98,100,114
<u>Section 4</u>			
Therapeutic Inter- vention with the Infertile Population	Individual Counseling	1	115
	Couple Counseling	1	116
	Male Only/Female Only		
	Group Counseling	1	117
	Group Counseling for Males and Females	1	118
	Group Counseling for Couples	1	119
	Peer Support Group	1	120
	Most Likely Counseling Option	1	121

Recognizing Infertility, ranged from .83 for the Denial subscale to .94 for the Surprise subscale. Pearson correlations between subscale scores within Section 3, Current Emotional and Behavioral Reactions to Infertility, ranged from .72 for the Denial subscale to .93 for both Isolation and Guilt subscales. Within Section 4, Therapeutic Intervention with the Infertile Population, correlations ranged from .49 for the item identifying group counseling for both males and females to .69 for the item identifying individual counseling as treatment options. Pearson correlations for each subscale are presented in Table 7.

The reliability of each subscale within Sections 1, 2, and 3 in terms of its internal consistency was determined by coefficient alpha. Reliability coefficients for subscales within Section 1, Attitudes Regarding Parenthood, ranged from .35 for the Psychology subscale to .69 for the Sociology subscale. Within Section 2, Emotional and Behavioral Reactions Since Recognizing Infertility, reliability coefficients ranged from .58 for the Denial subscale to .90 for the Guilt subscale. Alpha reliabilities within Section 3, Current Emotional and Behavioral Reactions to Infertility, ranged from .64 for the Denial subscale to .92 for the Resolution subscale. Alpha reliabilities for Section 4 could not be determined as only one item was included in each subscale. These preliminary alpha reliabilities for each subscale are presented in Table 7.

As shown in Table 6, the maximum number of items within any subscale was six. Consequently, coefficient alpha reliabilities may have been negatively affected. Projected reliability coefficients based on expansion of each subscale was thus determined. The Spearman-Brown Prophecy Formula was applied and results are as follows. Within Section 1, Attitudes Regarding Parenthood, coefficient reliabilities ranged from .83 for the Psychology subscale to .94 for both Religion and Sociology subscales. Reliability coefficients for Section 2, Emotional and Behavioral Reactions Since Recognizing Infertility, ranged from



Table 7

Preliminary Reliability Coefficients andResults of Item Analysis

Subscale	Test-Retest Reliability Coefficients	Alpha Reliability Coefficients	Spearman- Brown Reliability Coefficients	Nondiscrim- inatory Items as Indicated by Item Analysis
<u>Section 1-Attitudes Regarding Parenthood</u>				
Religion	.88	.64	.94	7,10
Psychology	.72	.35	.83	11,12
Sociology	.88	.69	.94	3,8
<u>Section 2-Emotional/Behavioral Reactions Since Recognizing Infertility</u>				
Surprise	.94	.84	.97	66
Denial	.83	.58	.91	37,46
Anger	.84	.74	.91	--
Isolation	.88	.79	.94	--
Guilt	.89	.90	.94	--
Depression/Grief	.92	.89	.96	--
Resolution	.85	.77	.92	--
Sexual Dysfunction	.92	.86	.96	49
<u>Section 3-Current Emotional/ Behavioral Reactions to Infertility</u>				
Surprise	.84	.91	.91	--
Denial	.72	.64	.84	70,111
Anger	.88	.71	.94	69,109
Isolation	.93	.76	.97	80
Guilt	.93	.91	.96	--
Depression/Grief	.87	.83	.93	--
Resolution	.85	.92	.92	--
Sexual Dysfunction	.89	.88	.94	--
<u>Section 4-Therapeutic Intervention with the Infertile Population</u>				
Individual Counseling	.69	--	.81	--
Couple Counseling	.58	--	.73	--
Male Only/Female Only				
Group Counseling	.66	--	.80	--
Group Counseling for Males and Females	.49	--	.65	--
Group Counseling for Couples	.54	--	.70	--
Peer Support Group	.50	--	.67	--

.91 for both Denial and Anger subscales to .97 for the Surprise subscale. Spearman-Brown results for Section 3, Current Emotional and Behavioral Reactions to Infertility, ranged from .84 for the Denial subscale to .97 for the Isolation subscale. Within Section 4, Therapeutic Intervention with the Infertile Population, reliability coefficients ranged from .65 for the item identifying group counseling for both males and females to .81 for the item identifying individual counseling as treatment options. Spearman-Brown reliability coefficients are presented in Table 7.

A preliminary item analysis for each subscale within Sections 1, 2, and 3 was performed to determine which items discriminated in the same way the overall subscale was intended to discriminate. Items showing a correlation of less than .30 were considered to have questionable discriminatory power. Table 7 summarizes the results of this item analysis. No items were eliminated from the questionnaire following analysis of the preliminary data due to the relatively small number of individuals participating in the pilot study. It was decided that an additional item analysis would be performed on final research data and nondiscriminatory items would be eliminated prior to final statistical analysis.

#### Content Validity

Development of the Infertility Reactions Questionnaire was an attempt to design an instrument measuring various dimensions of the infertility experience. Such an instrument could provide useful information to medical personnel, adoption workers, and mental health professionals dealing with the infertile population. Subsequently, the individuals chosen to comment on the content of the preliminary forms of the Infertility Reactions Questionnaire were believed to be representative of professionals who may use the instrument at a later date. Specifics as to the members of this panel of experts and procedures for measurement of content validity have been mentioned previously. Prior to the

pilot study, suggestions by these professionals as to the content of the preliminary instruments was the single measure of validity. Attempts were made to incorporate all suggestions made by these five panel members in an effort to design a valid and clinically relevant instrument for eventual use with the infertile population.

Reliability and validity data collected during the final research will be presented in the following chapter. The preliminary instrumentation data presented in this section resulted in minor revisions to some questionnaire items. Further, the two forms of the questionnaire used in the pilot were incorporated into one form, the Infertility Reactions Questionnaire.

### Research Design

The present research is descriptive and quasi-experimental. These designs allow for the systematic examination of characteristics common to the infertile population and an accurate, detailed description of such. Collected data provides a clearer understanding of the impact and process of dealing with infertility as seen through the eyes of individuals experiencing such. Research findings provide information to answer hypothetical questions which may well lay the groundwork for future studies in which population variables are carefully identified and controlled.

### Procedure

Contact as to participation in this research was initially made with a representative of each of the cooperating agencies or support groups. These representatives were provided brief narratives describing the nature of the research and return postcards. Representatives were instructed to provide a narrative to each individual meeting subject selection criteria. Individuals expressing an interest in research participation were instructed to contact the researcher by return of the before mentioned postcard. Volunteer couples were

mailed research packets which included a cover letter, an informed consent, a demographic information form, and an Infertility Reactions Questionnaire. For purposes of validity, participants were also administered the Beck Depression Inventory, the Rosenberg Self-Esteem Scale, and the Adult Nowicki-Strickland Internal-External Locus of Control Scale. Appendix C includes all documents mailed to participants of the final research. Individuals who did not return packets within one month were contacted via a follow-up postcard requesting their participation.

### Data Analysis

Data analysis for the present research was accomplished by means of independent t-tests and analysis of variance. These statistical methods offer not only an examination of means and standard deviations sought in descriptive research but preliminary tests of significance as well. Isaac and Michael (1983) discuss the assumptions underlying these statistical techniques. Assumptions underlying both t-tests and analysis of variance include normalcy of distribution and homogeneity of variance. Assumptions underlying analysis of variance also state that contributions to variance in the total sample must be additive and observations within sets must be mutually independent. The 25 subscales of the Infertility Reactions Questionnaire, which have been specified previously, were the dependent measures of this research. Independent measures were gender, age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity. Due to the large number of tests of significance used to analyze the research data, an alpha level of .01 was established. This conservative level of significance was established in order to minimize the risk of making a Type I error during data analysis.

### Summary

Subject selection, instrumentation, research design, procedures, and analysis

of the data were detailed in Chapter III. A total of 148 infertile individuals (74 couples) voluntarily participated in this study. Couples were involved with one of the several medical facilities, adoption agencies, or peer support groups which offered to participate in this research. A large majority of participants were Caucasian. They were generally well-educated, were in the 25 to 34 year age bracket, were employed outside of the home, were from middle to upper middle class socioeconomic brackets, and aligned with Protestant religions. Most often, female medical problems were identified as the cause of the couple's infertility. Most participating couples were not involved in medical treatment for infertility but were seeking alternative methods of parenting at the time this research was conducted.

Procedures followed during development of the Infertility Reactions Questionnaire were outlined in this section. Preliminary reliability data was presented based on a pilot study involving 30 infertile individuals. Test-retest, internal consistency, and split-half reliability coefficients were reported along with results of a preliminary item analysis. Content validity results were also summarized.

This study was descriptive and quasi-experimental in nature. These designs were selected due to the preliminary nature of this research and the number of comparisons being made.

Procedures followed through collection of data were outlined in this chapter. Volunteers were contacted via a participating agency representative as to their willingness to take part in this study. Contact between the researcher and participants was limited to initial written correspondence and a follow-up postcard to remind couples to return packets if they had not yet done so.

Data was analyzed by means of independent t-tests and analysis of variance with a significance level of .01 established. This conservative alpha level was

selected in an effort to minimize the possibility of making a Type I error during data analysis.

## CHAPTER IV

### RESULTS

#### Introduction

The results of this study are presented in this chapter. The present research entailed design of an instrument which accurately measures the attitudes and perceptions of individuals experiencing primary infertility. Initial forms of this instrument were revised following feedback from graduate faculty at a major midwestern university, comments from professionals in the field of infertility, and results of a pilot study. The final instrument, the Infertility Reactions Questionnaire, was administered to 74 couples (148 individuals) in contact with cooperating medical facilities treating infertility, adoption agencies, or peer support groups. Responses to this questionnaire and to instruments previously used in infertility investigations provided data to answer four research questions.

Additional reliability and validity data pertaining to the Infertility Reactions Questionnaire are provided in this chapter. The preliminary nature of this study called for examination of means and standard deviations for each of the subscales of the Infertility Reactions Questionnaire when compared on the basis of gender, age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity. Independent t-tests and analysis of variance tests were run in an effort to provide this information. Due to the number of tests of significance, a conservative alpha level of .01 was chosen in an effort to avoid Type I error. The specific comparisons made as they relate to each research question are summarized in table form. Asterisks (\*) indicate which comparisons resulted in significant differences. These significant differences are reported in

narrative form in this chapter. Results of all tests of significance, tables of means and standard deviations, and results of Tukey post-hoc tests are then presented in Appendixes D, E, and F.

#### Research Question 1

The first research question for this study was as follows:

Can a reliable and valid questionnaire be designed which examines the perceptions of the individual identified as infertile?

The procedures followed during initial design and development of the Infertility Reactions Questionnaire have been reported previously. Preliminary reliability data and content validity based on a pilot study resulted in revisions to the instrument prior to use with the total research sample. The reliability and validity measures conducted on responses of the total sample include an additional item analysis, measures of internal consistency, and correlations with instruments previously used in infertility research.

#### Reliability

Reliability in terms of internal consistency for each subscale within Sections 1, 2, and 3 of the Infertility Reactions Questionnaire was determined by coefficient alpha. Initial reliability coefficients obtained were based on inclusion of all test items. Reliability coefficients for subscales within Section 1, Attitudes Regarding Parenthood, ranged from .60 for the Psychology subscale to .67 for the Sociology subscale. Alpha reliability coefficients for Section 2, Emotional and Behavioral Reactions Since Recognizing Infertility, ranged from .60 for the Denial subscale to .89 for the Sexual Dysfunction subscale. Within Section 3, Current Emotional and Behavioral Reactions to Infertility, reliability coefficients ranged from .63 for the Denial subscale to .90 for the Sexual Dysfunction subscale. Alpha reliabilities for Section 4 could not be determined as only one item was included in each subscale.



An item analysis was conducted to determine which items within each subscale discriminated in the same way the overall subscale was intended to discriminate. Items showing a correlation of less than .30 were considered to be nondiscriminatory and were eliminated prior to final statistical analysis.

Within Section 1, Attitudes Regarding Parenthood, the three subscales were Religion, Psychology, and Sociology. Each subscale originally included six items. Within the Religion subscale, item correlations ranged from .28 to .47. Five of the six items showed correlations above .30. Item 2 (A man chooses his spouse believing that she will bear him a child) proved to be nondiscriminatory and was deleted prior to final data analysis. Within the Psychology subscale, item correlations ranged from .20 to .39. Two of the six original items proved to be nondiscriminatory. Item 11 (Infertility increases a female's feelings of inferiority in interactions with men) and Item 15 (My life is as interesting and fulfilling now as it would be if I had a child) were found to be nondiscriminatory and were subsequently deleted prior to analysis of data. Within the Sociology subscale, five items showed a correlation of more than .30. Item 3 (Females gain more gratification from mothering while males gain more gratification from careers) showed a correlation of less than .30 and was deleted prior to final data analysis.

Section 2, Emotional and Behavioral Reactions Since Recognizing Infertility, included eight subscales. Item correlations within the Surprise subscale ranged from .58 to .76 resulting in the inclusion of the six original items in final data analysis. Within the Denial subscale, item correlations ranged from .13 to .54. Four of the six original items showed correlations above .30. Item 37 (I have been hesitant to describe myself/my spouse as infertile to others) and Item 63 (I have not hesitated to seek out medical advice and/or treatment in reference to our infertility) were found to be nondiscriminatory and were subsequently deleted prior to analysis of data. All items within the remaining six subscales, Anger,

Guilt, Isolation, Depression/Grief, Resolution, and Sexual Dysfunction, correlated above the .30 level. Item correlations within the Anger subscale ranged from .32 to .68, within the Guilt subscale from .52 to .81, within the Isolation subscale from .41 to .66, within the Depression/Grief subscale from .50 to .76, within the Resolution subscale from .42 to .76, and within the Sexual Dysfunction subscale from .56 to .86. These subscales remained intact, each including six items when final data analysis was done.

Section 3, Current Emotional and Behavioral Reactions to Infertility, included eight subscales. Similar to results reported for Section 2, all item correlations for seven of these subscales were greater than .30. Correlations within the Surprise subscale ranged from .61 to .86, within the Anger subscale from .31 to .60, within the Guilt subscale from .49 to .82, within the Isolation subscale from .42 to .74, within the Depression/Grief subscale from .49 to .78, within the Resolution subscale from .44 to .84, and within the Sexual Dysfunction subscale from .37 to .77. Each of these subscales included the original six items at the time of final data analysis. Within the Denial subscale, item correlations ranged from  $-.003$  to .55. Item 70 (I do not hesitate seeking out medical advice and/or treatment in reference to our infertility) was shown to be nondiscriminatory and was subsequently deleted prior to final data analysis.

With the deletion of nondiscriminatory items, reliability coefficients for affected subscales changed. Revised alpha reliabilities for subscales within Section 1, Attitudes Regarding Parenthood, ranged from .60 for the Religion subscale to .70 for the Sociology subscale. Reliability coefficients for Section 2, Emotional and Behavioral Reactions Since Recognizing Infertility, ranged from .70 for the Denial subscale to .89 for the Sexual Dysfunction subscale. Within Section 3, Current Emotional and Behavioral Reactions to Infertility, reliability coefficients ranged from .70 for the Denial subscale to .90 for the Sexual

Dysfunction subscale. Reliability coefficients, results of the item analysis, and the format of the Infertility Reactions Questionnaire upon which final analysis of data was based are summarized in Table 8.

### Validity

Following deletion of nondiscriminatory items, comparisons were made between subscales within Sections 2 and 3 of the Infertility Reactions Questionnaire and the Beck Depression Inventory, the Rosenberg Self-Esteem Scale, and the Adult Nowicki-Strickland Internal-External Locus of Control Scale. These comparisons were made as a means of supporting the validity of particular subscales within the Infertility Reactions Questionnaire. Rationale for selection of these instruments was presented in Chapter II.

Within Section 2, Emotional and Behavioral Reactions Since Recognizing Infertility, correlations with the Beck ranged from  $-.47$  for the Resolution subscale to  $+.51$  for the Depression subscale. Correlations with the Rosenberg ranged from  $-.46$  for the Guilt, Isolation, and Depression subscales to  $+.42$  for the Resolution subscale. Comparisons with the Nowicki-Strickland resulted in correlations ranging from  $-.07$  for the Resolution subscale to  $+.31$  for the Guilt subscale.

Within Section 3, Current Emotional and Behavioral Reactions to Infertility, correlations with the Beck ranged from  $-.53$  for the Resolution subscale to  $+.59$  for the Depression subscale. Comparisons with the Rosenberg resulted in correlations ranging from  $-.48$  for the Depression subscale to  $+.40$  for the Resolution subscale. Correlations with the Nowicki-Strickland ranged from  $-.15$  for the Resolution subscale to  $+.35$  for the Anger subscale. Table 9 summarizes these correlational results.

Table 8

Reliability Coefficients, Results of Item Analysis, and  
Format of Instrument Used in Final Data Analysis

Subscale	Alpha Reliability Coefficients All Items	Nondiscrim- inatory Items as Indicated by Item Analysis	Revised Alpha Reliability Coefficients	Number of Items Included in Final Data Analysis	Items Included in Final Data Analysis
<u>Section 1-Attitudes Regarding Parenthood</u>					
Religion	.62	2	.60	5	5,7,10,13,16
Psychology	.60	11,15	.65	4	1,6,12,18
Sociology	.67	3	.70	5	4,8,9,14,17
<u>Section 2-Emotional/Behavioral Reactions Since Recognizing Infertility</u>					
Surprise	.87	--	--	6	21,40,43,48,58,66
Denial	.60	37,63	.70	4	22,34,46,55
Anger	.75	--	--	6	19,25,27,32,35,53
Isolation	.84	--	--	6	31,33,42,45,57,60
Guilt	.77	--	--	6	20,30,47,56,62,65
Depression/Grief	.87	--	--	6	29,36,41,50,61,64
Resolution	.84	--	--	6	23,26,38,44,52,59
Sexual Dysfunction	.89	--	--	6	24,28,39,49,51,54
<u>Section 3-Current Emotional/Behavioral Reactions to Infertility</u>					
Surprise	.89	--	--	6	67,73,79,90,93,102
Denial	.63	70	.70	5	75,78,87,92,111
Anger	.77	--	--	6	69,72,81,97,109,110
Isolation	.85	--	--	6	77,80,89,99,103,107
Guilt	.82	--	--	6	71,86,88,105,106,108
Depression/Grief	.88	--	--	6	68,83,94,95,101,104
Resolution	.89	--	--	6	74,82,84,85,112,113
Sexual Dysfunction	.90	--	--	6	76,91,96,98,100,114
<u>Section 4-Therapeutic Intervention with the Infertile Population</u>					
Individual Counseling	--	--	--	1	115
Couple Counseling	--	--	--	1	116
Male Only/Female Only Group Counseling	--	--	--	1	117
Group Counseling for Males and Females	--	--	--	1	118
Group Counseling for Couples	--	--	--	1	119
Peer Support Group	--	--	--	1	120
Most Likely Counseling Option	--	--	--	1	121

Table 9

Correlations Between the Infertility Reactions Questionnaire  
and Instruments Previously Used in Infertility Research

Subscale	Beck Depression Inventory	Rosenberg Self-Esteem Scale	Nowicki- Strickland Locus of Control Scale
<u>Section 2-Emotional/Behavioral</u> <u>Reactions Since Recognizing</u> <u>Infertility</u>			
Surprise	+.20	-.10	+.11
Denial	+.25	-.32	+.21
Anger	+.48	-.45	+.24
Isolation	+.48	-.46	+.24
Guilt	+.41	-.46	+.31
Depression/Grief	+.51	-.46	+.20
Resolution	-.47	+.42	-.07
Sexual Dysfunction	+.43	-.39	+.14
<u>Section 3-Current Emotional/</u> <u>Behavioral Reactions to Infertility</u>			
Surprise	+.22	-.15	+.18
Denial	+.27	-.27	+.23
Anger	+.56	-.47	+.35
Isolation	+.51	-.43	+.24
Guilt	+.43	-.41	+.30
Depression/Grief	+.59	-.48	+.28
Resolution	-.53	+.40	-.15
Sexual Dysfunction	+.45	-.40	+.19

## Research Question 2

The second research question for this study was as follows:

What attitudes regarding parenthood as a life goal are expressed by infertile individuals? How do these vary on the basis of gender, age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity?

Participants in this research identified psychological teachings as most influential in determining their attitudes regarding parenthood. Out of a possible 24 points on the Psychology subscale, mean scores for both females (18.27) and males (18.15) fell within the "agree" range. With 30 points possible on the Sociology subscale, mean scores fell within the "somewhat agree" range for both females (20.39) and males (19.54). Participants identified religious teachings as least influential in determining attitudes regarding parenthood. Out of a possible 30 points on the Religion subscale, mean scores for females (15.95) and males (14.91) fell within the "somewhat disagree" range. These results are summarized in Table 10.

Table 11 summarizes the comparisons made in response to Research Question 2. Commentary as to tests of significance follows with emphasis on comparisons proving significant at the .01 level.

A total of three independent t-tests and 36 one-way ANOVAs were used to analyze the data pertaining to Research Question 2. The independent measure for each t-test was gender (1=male, 2=female). Independent measures for each ANOVA remained constant and were as follows: age (1=< 25 years, 2=25-29 years, 3=30-34 years, 4=35-39 years, 5=> 39 years); duration of infertility (1=> 1 but < 2 years, 2=Between 2 and 5 years, 3=> 5 years); origin of infertility (1=female only medical problems, 2=male only medical problems, 3=female and male medical problems, 4=cause of infertility unknown); present treatment status

Table 10

Summary of Grand Means and Standard Deviations

Subscale	Maximum Score Possible	Females		Males	
		Grand Mean	Standard Deviation	Grand Mean	Standard Deviation
<u>Section 1 - Attitudes Regarding Parenthood</u>					
Religion	30.00	15.95	4.51	14.91	4.57
Psychology	24.00	18.27	2.93	18.15	2.72
Sociology	30.00	20.39	4.76	19.54	3.80
<u>Section 2 - Emotional/Behavioral Reactions Since Recognizing Infertility</u>					
Surprise	36.00	25.38	6.57	21.43	6.76
Denial	24.00	15.11	3.95	12.84	4.01
Anger	36.00	23.30	5.85	17.38	5.70
Isolation	36.00	21.42	6.50	16.53	5.41
Guilt	36.00	17.97	6.95	13.59	5.99
Depression/Grief	36.00	25.84	6.63	19.11	6.20
Resolution	36.00	25.93	6.53	27.28	4.73
Sexual Dysfunction	36.00	17.89	7.33	16.45	7.42
<u>Section 3 - Current Emotional/Behavioral Behavioral Reactions to Infertility</u>					
Surprise	36.00	18.00	7.26	17.36	6.54
Denial	30.00	16.03	5.31	14.84	4.92
Anger	36.00	19.22	6.30	15.62	4.57
Isolation	36.00	17.80	7.08	14.78	5.24
Guilt	36.00	13.69	6.28	12.22	5.43
Depression/Grief	36.00	21.42	7.83	17.39	5.85
Resolution	36.00	27.45	6.39	28.99	4.93
Sexual Dysfunction	36.00	14.09	7.23	14.58	6.50
<u>Section 4 - Therapeutic Intervention with the Infertile Population</u>					
Individual					
Counseling	6.00	3.78	1.61	3.09	1.36
Couple Counseling	6.00	4.09	1.49	3.72	1.38
Same Sex Group					
Counseling	6.00	3.82	1.46	3.20	1.38
Mixed Sex Group					
Counseling	6.00	3.81	1.52	3.53	1.39
Couple Group					
Counseling	6.00	4.19	1.42	3.80	1.40
Peer Support Group	6.00	4.47	1.24	4.03	1.36

Table 11

Tests of Significance - Attitudes Regarding Parenthood

Comparison Groups (IV)	Subscales Measuring Attitudes Regarding Parenthood (DV)		
	Religion	Psychology	Sociology
Gender			
<u>Females</u>			
Age			
Duration of Infertility			
Origin of Infertility			
Present Treatment Status			
Religion	*		
Religiosity	*		
<u>Males</u>			
Age			
Duration of Infertility			
Origin of Infertility			
Present Treatment Status			
Religion	*		
Religiosity	*		

\*p &lt; .01

(1=in medical treatment and involvement in procedure requiring a third party,  
 2=in medical treatment but no involvement in procedure requiring a third party,  
 3=no medical treatment but involvement in procedure requiring a third party,  
 4=no medical treatment and no involvement in procedure requiring a third party);  
 religion (1=Catholic, 2=Protestant, 3=Jewish, 4=Other, 5=None); and religiosity  
 (1=no religious service attendance, 2=one time per year religious service  
 attendance, 3=several times per year religious service attendance, 4=one time per



week religious service attendance, 5=several times per week religious service attendance). Dependent measures included subscales of Section 1 of the Infertility Reactions Questionnaire which examined attitudes regarding parenthood. Included were measures of religious, psychological, and sociological perspectives on the issue.

An examination of ANOVA results presented in Appendix D, Table D-32 indicates that religion does affect female attitudes regarding parenthood when viewed from a religious perspective ( $F=9.33$ ,  $df=3,70$ ,  $p < .01$ ). An examination of the means provided in Appendix D, Table D-31 indicates that females acknowledging a religious preference are significantly influenced by religious teachings when dealing with the issue of parenthood. Tukey post hoc comparison tests indicate that females aligning themselves with any particular religious body (Groups 1, 2, 4) are significantly more affected by religious teachings when expressing attitudes regarding parenthood than are those expressing no religious preference (Group 5). Appendix D, Table D-33 presents results of Tukey comparison tests.

An examination of ANOVA results presented in Appendix D, Table D-39 indicates that religiosity also affects female attitudes regarding parenthood when viewed from a religious perspective ( $F=7.13$ ,  $df=4,69$ ,  $p < .01$ ). An examination of the means provided in Appendix D, Table D-38 indicates that females reporting frequent attendance at religious services are significantly influenced by religious teachings when expressing their attitudes on parenthood. Tukey post hoc comparison tests indicate that females attending religious services several times per year (Group 3), once per week (Group 4), or several times per week (Group 5) are significantly more influenced by religious teachings on parenthood than are those who report no religious service attendance (Group 1). Results of Tukey comparison tests are presented in Appendix D, Table D-40.

As shown in Appendix D, Table D-70, males also appear significantly affected by their religious alignment when expressing religious attitudes regarding parenthood ( $F=8.00$ ,  $df=3,70$ ,  $p < .01$ ). An examination of the means provided in Appendix D, Table D-69 indicates that males aligning themselves with a religious body are significantly influenced by religious teachings when dealing with the issue of parenthood. Tukey post hoc comparison tests indicate that males aligning themselves with Protestant religions (Group 2) and Other religions (Group 4) are significantly more impacted by religious teachings when compared with those professing no religious alignment (Group 5). Tukey post hoc results are summarized in Appendix D, Table D-71.

An examination of ANOVA results presented in Appendix D, Table D-77 indicates that religiosity also influences male attitudes regarding parenthood when viewed from a religious perspective ( $F=7.97$ ,  $df=4,69$ ,  $p < .01$ ). An examination of means provided in Appendix D, Table D-76 indicates that males attending religious services frequently are significantly influenced by religious teachings when expressing attitudes regarding parenthood. Tukey post hoc comparisons indicate that males attending religious services weekly (Group 4) and those attending services more than once per week (Group 5) are significantly more impacted by religious attitudes regarding parenthood than are males attending no religious services (Group 1). Further, males attending religious services several times per week (Group 5) report being significantly impacted by religious teachings on parenthood when compared to those attending services one time per year (Group 2). Post hoc results are presented in Appendix D, Table D-78.

Remaining t-tests and ANOVAs performed in response to Research Question 2 offered nonsignificant results. Source tables presenting these findings along with tables of means and standard deviations are included in Appendix D, Tables D-1 through D-82.

### Research Question 3

The third research question for this study was as follows:

What emotional and behavioral reactions to knowledge of infertility are expressed by infertile individuals? How do these vary on the basis of gender, age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity?

Research Question 3 encompasses two dimensions of the infertility experience: emotional and behavioral reactions since recognizing infertility and current emotional and behavioral reactions to infertility. Both male and female participants in this research identified resolution as the reaction most commonly experienced since recognition of infertility. Out of a possible 36 points on the Resolution subscale, the mean score for males (27.28) fell within the "agree" range while the mean score for females (25.93) fell within the "somewhat agree" range. Male scores were consistently lower than female scores on remaining subscales measuring emotional and behavioral reactions since recognition of infertility. The mean score on the Surprise subscale (21.43) fell within the "somewhat agree" range with mean scores on subscales measuring depression/grief (19.11), anger (17.38), isolation (16.53), sexual dysfunction (16.45), and denial (12.84) falling within the "somewhat disagree" range. The mean score on the Guilt subscale (13.59) fell within the "disagree" range. Female subscale scores falling within the "somewhat agree" range included those measuring depression/grief (25.84), surprise (25.38), anger (23.30), isolation (21.42), and denial (15.11). Female subscale scores falling within the "somewhat disagree" range included those measuring guilt (17.97) and sexual dysfunction (17.89). A summary of these findings is presented in Table 10.

As with reactions since recognition of infertility, male and female research participants selected resolution as the infertility reaction most commonly

experienced at the present time. Mean scores on the Resolution subscale for both males (28.99) and females (27.45) fell within the "agree" range. Male scores on remaining subscales measuring current reactions to infertility were consistently lower than female scores. Male subscale scores falling within the "somewhat disagree" range included those measuring depression/grief (17.39), surprise (17.36), anger (15.62), denial (14.84), isolation (14.78), and sexual dysfunction (14.58). The male mean score on the Guilt subscale (12.22) fell within the "disagree" range. The female mean on the Depression/Grief subscale (21.42) fell within the "somewhat agree" range with mean scores on subscales measuring anger (19.22), surprise (18.00), isolation (17.80), denial (16.03), and sexual dysfunction (14.09), falling within the "somewhat disagree" range. The female mean score on the Guilt subscale (13.69) fell within the "disagree" range. This data is summarized in Table 10.

Table 12 summarizes the comparisons which examined individual reactions since recognizing infertility while Table 13 summarizes the comparisons which examine current reactions to infertility. Following each table are narrative descriptions of comparisons proving significant at the .01 level.

A total of eight independent t-tests and 112 one-way ANOVAs were used to examine each of these dimensions of the infertility experience. The independent measure for each t-test was gender (1=male, 2=female). Independent measures for each ANOVA remained constant and included: age (1= < 25 years, 2=25-29 years, 3=30-34 years, 4=35-39 years, 5= > 39 years); duration of infertility (1= > 1 but < 2 years, 2=Between 2 and 5 years, 3= > 5 years); origin of infertility (1=female only medical problems, 2=male only medical problems, 3=female and male medical problems, 4=cause of infertility unknown); present treatment status (1=in medical treatment and involvement in procedure requiring a third party, 2=in medical treatment but no involvement in procedure requiring a third party,

Table 12

Tests of Significance - Emotional and BehavioralReactions Since Recognizing Infertility

Comparison Groups (IV)	Subscales Measuring Emotional and Behavioral Reactions Since Recognizing Infertility (DV)							
	Surprise	Denial	Anger	Isolation	Guilt	Depression/ Grief	Resolution	Sexual Dysfunction
Gender	*	*	*	*	*	*		
<u>Females</u>								
Age							*	
Duration of Infertility								
Origin of Infertility								*
Present Treatment Status								
Religion								
Religiosity								
<u>Males</u>								
Age								
Duration of Infertility								
Origin of Infertility								
Present Treatment Status								
Religion								
Religiosity								

\*p &lt; .01

Table 13

Tests of Significance - Current Emotional and  
Behavioral Reactions to Infertility

Comparison Groups (IV)	Subscales Measuring Current Emotional and Behavioral Reactions to Infertility (DV)							
	Surprise	Denial	Anger	Isolation	Guilt	Depression/ Grief	Resolution	Sexual Dysfunction
Gender			*	*		*		
<u>Females</u>								
Age								
Duration of Infertility								
Origin of Infertility								
Present Treatment Status						*	*	
Religion								
Religiosity								
<u>Males</u>								
Age								
Duration of Infertility								
Origin of Infertility								
Present Treatment Status								
Religion								
Religiosity								

\*p < .01

3=no medical treatment but involvement in procedure requiring a third party, 4=no medical treatment and no involvement in procedure requiring a third party); religion (1=Catholic, 2=Protestant, 3=Jewish, 4=Other, 5=None); and religiosity (1=no religious service attendance, 2=one time per year religious service attendance, 3=several times per year religious service attendance, 4=one time per week religious service attendance, 5=several times per week religious service attendance). The dependent measures examining emotional and behavioral reactions since recognizing infertility included the eight subscales of Section 2 of the Infertility Reactions Questionnaire. Included were measures of surprise, denial, anger, isolation, guilt, depression/grief, resolution, and sexual dysfunction. The dependent measures examining current emotional and behavioral reactions to infertility included the subscales of Section 3 of the Infertility Reactions Questionnaire and also included measures of surprise, denial, anger, isolation, guilt, depression/grief, resolution, and sexual dysfunction.

An examination of the t-test results presented in Appendix E, Tables E-2 through E-16 indicates that gender differences impact emotional and behavioral reactions since recognizing infertility. Significant differences are indicated on measures of surprise ( $t=4.26$ ,  $df=73$ ,  $p < .01$ ), denial ( $t=4.04$ ,  $df=73$ ,  $p < .01$ ), anger ( $t=8.42$ ,  $df=73$ ,  $p < .01$ ), isolation ( $t=6.93$ ,  $df=73$ ,  $p < .01$ ), guilt ( $t=4.74$ ,  $df=73$ ,  $p < .01$ ), and depression/grief ( $t=9.46$ ,  $df=73$ ,  $p < .01$ ). An examination of the means provided in Appendix E, Tables E-1 through E-15 indicates that females report stronger reactions since recognizing infertility on each of the dependent measures before mentioned.

An examination of ANOVA results presented in Appendix E, Table E-30 indicates that age affects the female's resolution of the infertility issue ( $F=3.64$ ,  $df=4,69$ ,  $p < .01$ ). An examination of the means provided in Appendix E, Table E-29 indicates that older females express less resolution than do members

of younger age groups. Tukey post hoc comparison tests indicate that females over 39 years of age (Group 5) have experienced significantly less resolution as to infertility than have females ranging in age from 25 to 29 (Group 2) and those ranging in age from 35 to 39 (Group 4). These post hoc results are presented in Appendix E, Table E-31.

An examination of ANOVA results presented in Appendix E, Table E-65 indicates that origin of infertility affects the female's sexual behavior as she deals with the infertility issue ( $F=4.87$ ,  $df=3,70$ ,  $p < .01$ ). An examination of the means provided in Appendix E, Table E-64 indicates that females who are infertile due to combined male and female medical diagnosis have realized more sexual problems since recognizing their infertility than other females. Examination of these results further indicates that females experiencing infertility due to male medical problems are least affected sexually as they deal with the infertility issue. Tukey post hoc comparison tests indicate that females whose infertility is the result of combined medical problems (Group 3) and those whose infertility is of unknown origin (Group 4) report significantly greater sexual dysfunction when compared to females whose infertility is a result of male medical problems (Group 2). Appendix E, Table E-66 presents the results of Tukey comparison tests.

Remaining t-tests and ANOVAs performed to examine emotional and behavioral reactions since recognizing infertility offered nonsignificant results. Source tables presenting these findings along with tables of means and standard deviations are included in Appendix E, Tables E-1 through E-210.

An examination of t-test results presented in Appendix E, Tables E-212 through E-226 indicates that gender differences impact current emotional and behavioral reactions to infertility. Significant differences are indicated on measures of anger ( $t=5.29$ ,  $df=73$ ,  $p < .01$ ), isolation ( $t=3.81$ ,  $df=73$ ,  $p < .01$ ), and



depression/grief ( $t=5.86$ ,  $df=73$ ,  $p < .01$ ). An examination of the means provided in Appendix E, Tables E-211 through E-225 indicates that females report stronger current reactions to infertility on each of the dependent measures previously mentioned.

An examination of ANOVA results presented in Appendix E, Table E-286 indicates that present treatment status impact the female's feelings of depression/grief when dealing with her infertility ( $F=3.76$ ,  $df=3,70$ ,  $p < .01$ ). An examination of the means provided in Appendix E, Table E-285 indicates that females in medical treatment for their infertility while involved in a procedure requiring the participation of a third party (Group 1) acknowledge feeling most depressed when compared to other females experiencing infertility. Females who are involved solely in a procedure requiring participation by a third party (Group 3) are less depressed than other infertile females. Tukey post hoc comparison tests indicate a significant difference between these two groups. Tukey results are presented in Appendix E, Table E-287.

ANOVA results presented in Appendix E, Table E-289 indicate that present treatment status also affects the female's ability to resolve the infertility issue ( $F=4.12$ ,  $df=3,70$ ,  $p < .01$ ). An examination of group means provided in Appendix E, Table E-288 indicates that females involved solely in a procedure requiring participation of a third party (Group 3) are better able to resolve the issue than are other females experiencing infertility. Females involved in medical treatment for infertility and a procedure requiring participation by a third party (Group 1) appear least likely to resolve the infertility issue. Tukey post hoc comparison tests indicate a significant difference between these two groups. These post hoc results are presented in Appendix E, Table E-290.

Remaining t-tests and ANOVAs which examined current emotional and behavioral reactions to infertility offered nonsignificant results. Source tables

presenting these findings along with tables of means and standard deviations are included in Appendix E, Tables E-211 through E-420.

#### Research Question 4

The fourth research question for this study was as follows:

What preferences for therapy are expressed by infertile individuals?

How do these vary on the basis of gender, age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity?

Of the total sample, 50 individuals (40.5%) indicated that a peer support group would be of greatest benefit while dealing with infertility. An additional 37 individuals (25%) selected couple counseling as their most likely option for therapy while the same number (25%) indicated that they would want to be involved in group counseling for couples. Only seven individuals (4.7%) identified individual counseling as their choice for working through the infertility crisis. Group counseling was selected rarely by this sample as a means of addressing the infertility issue with only five individuals (3.4%) selecting group intervention including both males and females and only two individuals (1.4%) selecting group intervention limited to members of their own sex.

A comparison of means in response to questions measuring therapeutic intervention is presented in Table 10. As indicated, all participants agree that peer support group involvement would be the most likely form of therapeutic intervention to deal with the infertility issue with the male mean score being 4.03 and the female mean score being 4.47. Male mean scores for subscales measuring couple group counseling (3.80), couple counseling (3.72), and mixed sex group counseling (3.53) each fell within the "somewhat agree" range. Male mean scores for subscale measuring same sex group counseling (3.20) and individual counseling (3.09) fell within the "somewhat disagree" range. Each female mean score on subscales measuring therapeutic intervention fell within the "somewhat agree"

range and included couple group counseling (4.19), couple counseling (4.09), same sex group counseling (3.82), mixed sex group counseling (3.81), and individual counseling (3.78).

Table 14 summarizes the comparisons made in response to Research Question 4. Commentary as to tests of significance follows with emphasis on comparisons proving significant at the .01 level.

A total of six independent t-tests and 72 one-way ANOVAs were used to analyze the data pertaining to Research Question 4. The independent measure for each t-test was gender (1=male, 2=female). Independent measures for each ANOVA remained constant and were as follows: age (1= < 25 years, 2=25-29 years, 3=30-34 years, 4=35-39 years, 5=> 39 years); duration of infertility (1=> 1 but < 2 years, 2=Between 2 and 5 years, 3=> 5 years); origin of infertility (1=female only medical problems, 2=male only medical problems, 3=female and male medical problems, 4=cause of infertility unknown); present treatment status (1=in medical treatment and involvement in procedure requiring a third party, 2=in medical treatment but no involvement in procedure requiring a third party, 3=no medical treatment but involvement in procedure requiring a third party, 4=no medical treatment and no involvement in procedure requiring a third party); religion (1=Catholic, 2=Protestant, 3=Jewish, 4=Other, 5=None); and religiosity (1=no religious service attendance, 2=one time per year religious service attendance, 3=several times per year religious service attendance, 4=one time per week religious service attendance, 5=several times per week religious service attendance). Dependent measures included subscales of Section 4 of the Infertility Reactions Questionnaire which examined options for therapeutic intervention with the infertile population. Included were individual counseling, couple counseling, same sex group counseling, mixed sex group counseling, couple group counseling, and peer support group.

Table 14

Tests of Significance - Therapeutic Intervention  
with the Infertile Population

Comparison Groups (IV)	Subscales Measuring Therapeutic Intervention with the Infertile Population (DV)					
	Individual Counseling	Couple Counseling	Same Sex Group Counseling	Mixed Sex Group Counseling	Couple Group Counseling	Peer Support Group
Gender	*		*			
<u>Females</u>						
Age	*					
Duration of Infertility						
Origin of Infertility						
Present Treatment Status						
Religion						
Religiosity						
<u>Males</u>						
Age						
Duration of Infertility						
Origin of Infertility						
Present Treatment Status						
Religion						
Religiosity						

\*p < .01

An examination of t-test results presented in Appendix F, Tables F-2 through F-12 indicates that gender differences influence choice of counseling for the individual dealing with infertility. Significant differences are indicated for individual counseling ( $t=3.78$ ,  $df=73$ ,  $p < .01$ ) and for same sex group counseling ( $t=3.22$ ,  $df=73$ ,  $p < .01$ ). An examination of means provided in Appendix F, Tables F-1 through F-11 indicates that females show a significant preference for these counseling modalities when compared to males.

An examination of ANOVA results presented in Appendix F, Table F-14 indicates that age impacts the female's consideration of individual counseling as a means of dealing with infertility ( $F=3.60$ ,  $df=4,69$ ,  $p < .01$ ). An examination of means provided in Appendix F, Table F-13 indicates that women over 39 years of age are most likely to choose individual counseling as a mode of therapy while those 35 to 39 years of age are least likely to do so. However, Tukey post hoc tests did not indicate significant differences when groups were compared with each other.

Remaining t-tests and ANOVAs which were used to analyze potential options for counseling with the infertile population offered nonsignificant results. Source tables presenting these findings along with tables of means and standard deviations are included in Appendix F, Tables F-1 through F-156.

### Summary

Chapter IV reported the findings of this study as they related to each of four research questions. Research Question 1 dealt with the design and refinement of the Infertility Reactions Questionnaire. Additional reliability and validity measures were reported along with findings of an item analysis. These findings resulted in deletion of some questionnaire items prior to final analysis of the data.

Research Question 2 dealt with the infertile individual's attitudes regarding parenthood. Overall, psychological teachings were identified by research

participants as most influential in determining attitudes regarding parenthood. Data analysis indicated that alignment with a religious body and frequency of attendance at religious services significantly impacted both female and male attitudes on parenting when viewed from a religious perspective.

Research Question 3 dealt with the emotional and behavioral reactions experienced by the infertile individual. Reactions since recognizing infertility were first examined. A comparison of grand means indicated that resolution was the reaction most commonly experienced by both males and females since recognition of infertility. Male scores were consistently lower than were female scores on all subscales measuring reactions since recognition of infertility other than the subscale measuring resolution on which males scored higher. Gender comparisons indicated significant differences on dependent measures of surprise, denial, anger, isolation, guilt, and depression/grief since recognition of infertility. Females consistently acknowledged a more intense reaction than did males. Further, age appeared to significantly impact the female's resolution of infertility since recognition of the problem and origin of infertility appeared to affect her sexual pleasure and behavior.

Current emotional and behavioral reactions to infertility were also examined. A comparison of grand means indicated that resolution was the current reaction most frequently acknowledged by both male and female research participants. As was obvious on scores measuring reactions since recognition of infertility, males scored lower on all subscales measuring current reactions to infertility other than that measuring resolution on which males scored higher. Gender comparisons indicated significant differences on the dependent measures of anger, isolation, and depression/grief. Females, once again, acknowledged experiencing these reactions more intensely than males. Additional female

comparisons indicated that present treatment status significantly impacted both feelings of depression/grief and one's ability to resolve the infertility issue.

Research Question 4 dealt with therapeutic intervention for the infertile population. Both male and female participants selected peer support group involvement as the means by which they would hope to deal with their infertility. Gender comparisons indicated significant differences when considering individual counseling and group counseling including members of the same sex. Females were more likely than males to consider these counseling modalities as a means to deal with the infertility issue. Further, age appeared to impact the female's consideration of individual counseling as a potential therapeutic strategy.

## CHAPTER V

### SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

#### Summary

The purpose of this research was to examine the perceptions of individuals experiencing infertility. Empirical research in this area remains in the preliminary stages of inquiry. The present investigation sought to examine the experience of the infertile individual in an effort to move toward establishment of an empirically based psychological treatment program for this population. Specifically, this investigation focused on the individual's attitudes regarding the goal of parenthood, emotional and behavioral reactions to infertility, and preferences for therapy to deal with the situation. The 74 married couples (148 individuals) voluntarily participating in this research were identified as infertile, defined as an inability to achieve pregnancy without contraception or an inability to carry pregnancy to a live birth after one year of regular sexual relations (Leader, Taylor & Daniluk, 1984; Menning, 1982). These couples were in contact with cooperating medical facilities treating cases of infertility, support groups for infertile couples, or private adoption agencies.

Four research questions were developed for this study. The first research question dealt with design of instrumentation:

Can a reliable and valid questionnaire be designed which examines the perceptions of the individual identified as infertile?

A review of relevant literature in the area of infertility made obvious the need for a questionnaire designed to examine the infertility experience. The Infertility Reactions Questionnaire is a 121 item instrument which explores the



perceptions and attitudes of the infertile individual from four dimensions. Section 1 examines attitudes regarding parenthood from religious, psychological, and sociological perspectives. Section 2 explores behavioral and emotional reactions since recognizing infertility and includes subscales measuring surprise, denial, anger, isolation, guilt, depression/grief, resolution, and sexual dysfunction. Section 3 measures current emotional and behavioral reactions to infertility and includes the same eight subscales found in Section 2. Section 4 examines preferences for therapy and includes mention of individual, couple, and group counseling alternatives. In total, there are 25 intuitively derived subscales included in the Infertility Reactions Questionnaire with each providing a separate score.

The reliability of the Infertility Reactions Questionnaire is supported by an item analysis and measures of internal consistency. Based on item analysis results, seven test items were identified as nondiscriminatory and were deleted prior to final data analysis. Alpha reliability coefficients based on final research data were then computed for Sections 1, 2, and 3 of the questionnaire. These alpha reliabilities ranged from .60 for the Religion subscale to .90 for the Sexual Dysfunction subscale within Section 3. Reliability coefficients for Sections 2 and 3 remained consistently higher than did those for the subscales of Section 1, generally falling in the upper .70s and .80s.

Content validity of the Infertility Reactions Questionnaire was determined during preliminary design. The original forms of the questionnaire were sent to five professionals working in the area of infertility. The comments of this panel of experts were incorporated in the questionnaire prior to use in the pilot study.

As an additional validity measure, comparisons were made between the Infertility Reactions Questionnaire and instruments previously used in infertility research. Scores on subscales of Sections 2 and 3 of the Infertility Reactions

Questionnaire were compared to scores obtained on the Beck Depression Inventory, the Rosenberg Self-Esteem Scale, and the Adult Nowicki-Strickland Internal-External Locus of Control Scale.

Correlations with the Beck generally moved in a positive direction. Correlations between this instrument and scores on the Resolution subscales of both Sections 2 and 3 of the Infertility Reactions Questionnaire moved in a negative direction, however. Correlations between Section 2 subscales and the Beck ranged from  $-.47$  (Resolution) to  $+.51$  (Depression/Grief). Correlations between Section 3 subscales and the Beck ranged from  $-.53$  (Resolution) to  $+.59$  (Depression/Grief).

Correlations with the Rosenberg generally moved in a negative direction. Correlations between this instrument and scores on the Resolution subscales of both Sections 2 and 3 of the Infertility Reactions Questionnaire moved in a positive direction, however. Correlations between the Rosenberg and Section 2 subscales ranged from  $-.46$  for the Isolation, Guilt, and Depression/Grief subscales to  $+.42$  for the Resolution subscale. Section 3 correlations ranged from  $-.48$  for the Depression/Grief subscale to  $+.40$  for the Resolution subscale.

Comparisons with the Nowicki-Strickland offered positive correlations on all subscales other than those obtained when comparisons were made between this instrument and the Resolution subscales of both Sections 2 and 3. Correlations for Section 2 ranged from  $-.07$  for the Resolution subscale to  $+.31$  for the Guilt subscale. Section 3 correlations ranged from  $-.15$  for the Resolution subscale to  $+.35$  for the Anger subscale.

The second research question dealt with the goal of parenthood:

What attitudes regarding parenthood as a life goal are expressed by infertile individuals? How do these vary on the basis of gender, age,

duration of infertility, origin of infertility, present treatment status, religion, and religiosity?

Both males and females participating in this study identified psychological teachings as most influential in determining their attitudes regarding parenthood. Sociological teachings were seen as impacting parental attitudes to a lesser degree by both males and females. Religious teachings were identified by most members of the research sample as least important in determining their attitudes regarding parenthood.

A total of three independent t-tests and 36 one-way ANOVAs were used to analyze the data pertaining to Research Question 2. The independent measure for each t-test was gender. The independent measures for each ANOVA were age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity. The dependent measures for each test of significance were scores on the subscales of Section 1 of the Infertility Reactions Questionnaire. Included were measures of religious, psychological, and sociological perspectives on parenthood. Of the 39 tests of significance, a total of four ANOVAs proved statistically significant at the .01 level. Data analysis indicated that alignment with a religious body and frequency of attendance at religious services significantly impacted both female and male attitudes on parenting when viewed from a religious perspective. Males and females who identified with an organized religion scored significantly higher on the Religion subscale of the Infertility Reactions Questionnaire when compared to those who reported no religious affiliation. Further, frequent church attendance by both males and females resulted in significantly higher scores on the Religion subscale of the Infertility Reactions Questionnaire. Remaining comparisons regarding the Religion subscale proved nonsignificant as did all comparisons regarding subscales measuring psychological and sociological perspectives on parenthood.

The third research question dealt with the impact of infertility on the individual:

What emotional and behavioral reactions to knowledge of infertility are expressed by infertile individuals? How do these vary on the basis of gender, age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity?

Two dimensions of the infertility experience were examined by Research Question 3. Emotional and behavioral reactions since recognizing infertility were first examined. Of the eight subscales measuring reactions since recognition of infertility, both male and female participants scored highest on the Resolution subscale. As a group, males scored higher on this subscale than did females but not to a significant degree. The mean score for males fell within the "agree" range while the female mean score fell within the "somewhat agree" range. Female mean scores were higher than were male mean scores on the remaining seven subscales measuring this dimension of the infertility experience. Female means falling within the "somewhat agree" range included scores on subscales measuring depression/grief, surprise, anger, isolation, and denial. Female subscale scores falling within the "somewhat disagree" range included those measuring guilt and sexual dysfunction. Conversely, the mean score for males on only one remaining subscale, that measuring surprise, fell into the "somewhat agree" range. Male mean scores on the subscales measuring depression/grief, anger, isolation, sexual dysfunction, and denial fell within the "somewhat disagree" range while the mean score on the Guilt subscale fell within the "disagree" range.

A total of eight independent t-tests and 112 one-way ANOVAs were used to analyze the data pertaining to reactions since recognizing infertility. The independent measure for each t-test was gender. The independent measures for

each ANOVA were age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity. The dependent measures for each test of significance were scores on the subscales of Section 2 of the Infertility Reactions Questionnaire. Included were subscales measuring surprise, denial, anger, isolation, guilt, depression/grief, resolution, and sexual dysfunction. Of the 120 tests of significance, a total of eight proved statistically significant at the .01 level.

Data analysis indicated that gender differences impacted emotional and behavioral reactions since recognition of infertility. Out of the eight subscales designed to measure this dimension of the infertility experience, females reported significantly higher scores than did males on subscales measuring surprise, denial, anger, isolation, guilt, and depression/grief. Remaining gender comparisons on subscales measuring resolution and sexual dysfunction proved nonsignificant.

Age appeared to significantly impact the female's resolution of infertility since recognition of the problem. Older females expressed less resolution than did younger members of the research sample.

Origin of infertility appeared to have a significant impact on the female's sexual pleasure and behavior while dealing with infertility. Females diagnosed as infertile due to combined male and female medical problems acknowledged the highest incidence of sexual dysfunction when compared to other females while a diagnosis of infertility due to male medical problems alone resulted in the least incidence of sexual dysfunction.

The remaining comparisons made between female subgroups offered nonsignificant results. All comparisons made between male subgroups in response to this dimension of Research Question 3 proved nonsignificant.

Current emotional and behavioral reactions to infertility were next examined. Of the eight subscales designed to measure current reactions to

infertility, both males and females scored highest on the Resolution subscale. As reported previously, this was also the case when reactions since recognition of infertility were examined. Scores for both groups on this subscale increased with the mean score for males remaining in the "agree" range and the mean score for females moving from the "somewhat agree" range into the "agree" range. Male and female mean scores on each of the remaining subscales measuring current reactions to infertility decreased when compared to scores obtained on subscales measuring reactions since recognition of infertility. Females continued to score higher than did males on each of these subscales, however. Whereas mean scores for females generally fell into the "somewhat agree" range on subscales measuring reactions since recognition of infertility, only the mean score on the Depression/Grief subscale remained in this range when examining current reactions to infertility. Mean scores for females on subscales measuring anger, surprise, isolation, and denial moved from the "somewhat agree" range into the "somewhat disagree" range. The female mean score on the Sexual Dysfunction subscale remained in the "somewhat disagree" range while the mean score on the Guilt subscale moved from the "somewhat disagree" range into the "disagree" range. Male mean scores on subscales measuring current reactions to infertility also decreased with that obtained on the Surprise subscale moving from the "somewhat agree" range into the "somewhat disagree" range and those measuring depression/grief, anger, denial, isolation, and sexual dysfunction remaining in the "somewhat disagree" range. The mean score for males on the Guilt subscale remained in the "disagree" range.

A total of eight independent t-tests and 112 one-way ANOVAs were used to analyze the data pertaining to this dimension of the infertility experience. The independent measure for each t-test was gender. The independent measures for each ANOVA were age, duration of infertility, origin of infertility, present

treatment status, religion, and religiosity. The dependent measures for each test of significance were scores on the subscales of Section 3 of the Infertility Reactions Questionnaire. Included were subscales measuring surprise, denial, anger, isolation, guilt, depression/grief, resolution, and sexual dysfunction were included. Of the 120 tests of significance, a total of five proved statistically significant at the .01 level.

Analysis of the data indicated that gender differences impacted current emotional and behavioral reactions to infertility. Females scored significantly higher than did males on subscales measuring anger, isolation, and depression/grief. However, significant differences on subscales measuring denial, surprise, and guilt were not indicated as had been the case when comparisons were made between males and females as to their reactions since recognition of infertility. Gender comparisons once again indicated no significant differences on subscales measuring resolution and sexual dysfunction.

Present treatment status appeared to significantly impact the female in terms of depression/grief while experiencing infertility. Females in medical treatment for infertility while involved in a procedure requiring the participation of a third party reported the highest levels of depression when compared to other females experiencing infertility. Females who were involved solely in a procedure requiring the participation of a third party reported less depression than did other females dealing with infertility.

Present treatment status further appeared to impact the female's ability to resolve the infertility issue. Females involved in medical treatment for infertility and a procedure requiring participation by a third party appeared least likely to resolve the infertility issue while those involved solely in a procedure requiring participation by a third party were most likely to resolve the issue.

The remaining comparisons made between female subgroups in response to this dimension of Research Question 3 offered nonsignificant findings. Further, all comparisons made between male subgroups proved nonsignificant.

The fourth research question dealt with counseling options for the infertile individual:

What preferences for therapy are expressed by infertile individuals?

How do these vary on the basis of gender, age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity?

The largest percentage of respondents chose a peer support group as the counseling option they would select to deal with infertility. Overall, both males and females selected peer support group involvement as the counseling modality of choice. Couple counseling and group counseling for couples were also selected by a substantial number of research participants as a means of coping with the situation. Both male and female research participants selected these counseling options as their second and third choices respectively. Individual counseling and group counseling for individuals were rarely selected by respondents as therapeutic options to deal with infertility. Males were even less inclined than were females to consider these as potential counseling options to deal with the infertility issue.

A total of six independent t-tests and 72 one-way ANOVAs were used to analyze the data pertaining to Research Question 4. The independent measure for each t-test was gender. The independent measures for each ANOVA were age, duration of infertility, origin of infertility, present treatment status, religion, and religiosity. The dependent measures for each t-test and ANOVA were scores on the subscales of Section 4 of the Infertility Reactions Questionnaire. Included were measures for individual counseling, couple counseling, same sex group counseling, mixed sex group counseling, couple group counseling, and peer support



group. Of the 78 tests of significance, three proved statistically significant at the .01 level.

Data analysis indicated that gender differences impacted the choice for counseling of the individual experiencing infertility. Females scored significantly higher than did males on subscales measuring individual counseling and same sex group counseling. Remaining t-tests used to analyze data pertaining to Research Question 4 proved nonsignificant.

ANOVA results indicated that age impacted the female's choice of counseling to deal with infertility. Females over 39 appeared more likely to select individual counseling as the therapeutic intervention of choice when compared to infertile females in younger age brackets.

The remaining comparisons made between female subgroups in response to Research Question 4 proved nonsignificant. All comparisons made between male subgroups offered nonsignificant findings.

#### Conclusions

Based on the findings of this preliminary study into the experience of infertility, the following conclusions were drawn:

1. As a means of providing an empirically based psychological treatment program for those experiencing infertility, an instrument measuring the perceptions and attitudes of the infertile individual is needed. The Infertility Reactions Questionnaire, although preliminary in scope and design, has been presented as such an instrument.

The reliability of the Infertility Reactions Questionnaire was developed as part of the results of this study. The stability of the instrument was determined on pilot study results. Sections 1, 2, and 3 of the questionnaire, those measuring attitudes on parenthood and emotional and behavioral reactions to the situation, appeared stable over a two week time period. Section 4, which measured

counseling options for the infertile individual, appeared less stable over time, this likely because each subscale within this portion of the questionnaire included only one item. Revisions were made to the instrument following the pilot study. Test-retest coefficients have not been determined on the final format of the Infertility Reactions Questionnaire. Consequently, the stability of the test remains open to inquiry and should be substantiated prior to the instrument's use in future studies.

The internal consistency reliability of each subscale within Sections 1, 2, and 3 of the Infertility Reactions Questionnaire was determined by Cronbach's alpha. Two item analyses were conducted resulting in deletion of seven questionnaire items prior to the final data analysis. With deletion of these items, alpha reliabilities for each subscale were sufficiently large to indicate an acceptable degree of internal consistency for these measures. Overall, subscales within Section 1 were less reliable than were subscales within Sections 2 and 3. Items were deleted from each of the three subscales within Section 1. Further, the Denial subscales within both Sections 2 and 3 were weaker in terms of internal consistency reliability when compared to other subscales, requiring the deletion of nondiscriminatory items from both.

Split half reliability coefficients on each subscale of the Infertility Reactions Questionnaire were obtained on pilot study data. These reliability coefficients were well within the acceptable range. These results would indicate improved reliability for subscales should the number of items within each be increased. As a means of further supporting the instrument's reliability, split half coefficients should be determined on the revised format of the Infertility Reactions Questionnaire prior to future use.

Validity measures of the Infertility Reactions Questionnaire should be considered preliminary in nature. Content validity was established during initial

stages of instrument design by selected members of the professional community dealing with the infertile population. Comments offered by these five panel members were incorporated into the forms of the questionnaire used in both the pilot study and this final research. No additional face validity measures have been obtained.

Actual construct validity of the Infertility Reactions Questionnaire could not be established as other instruments shown to accurately measure the experiences of the infertile individual were unavailable at the time of this study. The Beck Depression Inventory, the Rosenberg Self-Esteem Scale, and the Adult Nowicki-Strickland Internal-External Locus of Control Scale were designed for use with more heterogeneous populations than was the Infertility Reactions Questionnaire. Subsequently, correlations high enough to indicate construct validity for subscales of the Infertility Reactions Questionnaire would not be expected. Subscale correlations were generally consistent, however, and offer support for the instrument's validity. All subscales within Sections 2 and 3 of the Infertility Reactions Questionnaire, other than the Resolution subscales, correlated positively with the Beck. This would indicate that as one's score on the Beck increases, he/she may experience a stronger reaction to the infertility experience. Feelings of sadness, anger, isolation, and guilt may increase and decreased sexual pleasure may be experienced. Likewise, an increased score on the Beck may indicate decreased feelings of resolution surrounding the infertility experience. Comparisons with the Nowicki-Strickland offered similar results; All subscales, other than those measuring resolution, moved in a positive direction. This would indicate that as one identifies his/her locus of control as more external, he/she may tend to respond more strongly to reactions commonly associated with the infertility experience and may be somewhat less capable of resolving the issue. Comparisons with the Rosenberg, conversely, offered

negative correlations on all subscales other than those measuring resolution. Lower self esteem, as measured by the Rosenberg, may indicate increased negative reactions to infertility and less ability to resolve the issue. Conversely, improved self esteem may indicate an increased ability to handle the infertility experience and to eventually resolve the issue.

Additional revision of the Infertility Reactions Questionnaire is necessary prior to the instrument's use in future research. Each subscale within Section 1 and the Denial subscales within both Sections 2 and 3 are of particular concern as these proved weakest in terms of internal consistency. Remaining subscales, particularly those measuring emotional and behavioral reactions to infertility, appear stronger in terms of reliability and validity. With additional refinement, the instrument may prove to be a diagnostic tool useful in dealing with the infertile population.

2. These findings support the contention of Menning (1977) that the desire to parent is influenced by religious, psychological, and sociological teachings. Overall, participants acknowledged the influence of psychological and sociological teachings in determining their attitudes on parenthood. They particularly emphasized a belief that parenthood is an innate, even instinctual desire while contending that role modeling and cultural expectations were slightly less influential. Religious teachings, although identified by the overall sample as least influential in determining the desire to parent, are obviously of importance to two subgroups of research participants. For this particular sample of infertile individuals, alignment with a religious body and frequent church attendance predicted espousal of traditional religious teachings on the importance of achieving parenthood. These beliefs may be held at a very deep level by individuals and may prove difficult, if not impossible, to restructure. This may subsequently impact commitment to infertility treatment or participation in

procedures not supported by more conservative religious bodies. Infertile individuals espousing a rigid religious belief system may find themselves in a paradoxical situation: alignment with a church body emphasizing the importance of becoming a parent while discouraging participation in modern medical procedures which may provide the means for goal achievement. Such may ultimately impact the infertile individual's ability to resolve this crisis and move on with his or her life.

3. Results of this study indicate that females respond more intensely to the infertility experience than do males. These findings support the observations of professionals working with the infertile population, particularly those of Menning (1977) and Mahlstedt (1985). The fact that female research participants scored higher than did male participants on all subscales designed to measure reactions to infertility other than on the Resolution subscales would further support this conclusion. Female scores were significantly higher on six of the eight subscales measuring reactions since recognition of infertility and on three of the eight subscales measuring current reactions to infertility. Significant differences were noted on subscales measuring surprise, denial, anger, isolation, guilt, and depression since recognition of infertility but only on subscales measuring current feelings of anger, isolation, and depression. It appears, subsequently, that this particular group of research participants views their current infertility experience with less diversity than may have been the case since recognition of the problem.

Current reactions to infertility appeared generally less intense than previous reactions for both males and females. Mean scores for both groups on subscales measuring the current response to infertility were generally lower when compared to scores obtained on subscales measuring reactions since recognition of infertility. Both males and females, however, scored higher on the Resolution

subscale measuring current reactions than on the Resolution subscale measuring reactions since recognition of infertility. It appears that with less intense emotions, one may be able to experience greater resolution of the infertility experience.

As previously mentioned, participants in this study identified resolution as the reaction most commonly experienced during the infertility crisis. This rather surprising finding may be the result of the homogeneous nature of this research sample, many of whom were involved in peer support groups or were actively pursuing adoption. It may be, however, that infertile individuals actually do experience periods of resolution interspersed with negative feelings commonly associated with the infertility experience.

4. Age significantly impacted the female's ability to resolve the infertility issue. This finding may be a product, however, of uneven numbers within cells. Women in the research sample over 39 years of age reported significantly less resolution than younger women experiencing infertility. This may be because these women are facing the finality of their infertility: medical treatments, if attempted, have likely proven ineffective, prognosis as to successful intervention for infertility over the age of 39 is poor, and adoption options are more limited. Further, these women, more so than younger research participants, grew up with a model of females pursuing the roles of wife and mother beyond all other goals. It may be that younger women have observed more diverse female role models in recent years and, subsequently, are truly able to put their infertility in its proper perspective and go on with their lives.

5. Origin of infertility significantly impacted the infertile female's sexual pleasure and performance. Combined male and female medical problems resulted in the greatest degree of sexual dysfunction among females in this research sample. When both partners are diagnosed with medical problems,

treatment may be overwhelmingly invasive and stressful. Neither partner may be able to maintain needed objectivity and a sense of hopefulness. Instead, all spontaneity may be lost from the sexual relationship as both partners see the most personal area of their relationship scrutinized on a daily basis.

6. Present treatment status significantly impacted participating females in two response areas: depression/grief and resolution. Females involved in medical treatment for infertility plus involvement in a procedure requiring participation by a third party reported significantly more depression and significantly less resolution than other females in the research sample. Conversely, females involved only in a procedure requiring participation by a third party reported significantly less depression and significantly more resolution than did other females participating in this study. Involvement in both medical treatment and a procedure such as adoption may indicate undecidedness and potential difficulty committing oneself totally to either option. Participation in either medical treatment or an alternative parenting procedure requires a great amount of mental and emotional energy. To be involved in both procedures simultaneously may be overwhelmingly stressful and intrusive, leaving one with a sense of lost control. The feelings of depression reported by females in this study may subsequently result. One may further find it difficult to acknowledge resolution of infertility as long as involvement in medical procedures offers the possibility of pregnancy; movement through the necessary grief process is made impossible. Conversely, females involved in a third party procedure only may feel a greater sense of control in their lives. The decision to no longer pursue medical treatment for infertility is likely a difficult one initially. However, with this decision may well return a sense of hope and optimism for the future.

7. Participants in this study acknowledged a willingness to participate in counseling to deal with the infertility issue. Peer support groups were identified

by both males and females as the therapeutic intervention of choice. It further appears that spouse involvement in therapy is desired as couple counseling and couple group counseling were selected by males and females as potential means of dealing with their infertility. Females acknowledged a willingness to participate in individual or same sex group counseling significantly more often than did males. Within the female sample, age was the only significant predictor variable with older females indicating more willingness to participate in individual therapy than younger females.

8. It is likely that comparisons made for this study were impacted by previously mentioned sampling bias and the 49% sample loss. Greater variance in response patterns may be indicated should a more diverse sample of individuals be studied. Consequently, all conclusions drawn from this research should be considered preliminary and generalizable only to the population sample.

#### Recommendations

Recommendations generating from this research will be directed in two areas. Suggestions to the professional community, including medical personnel, mental health specialists, and those involved in the adoption process will first be addressed. Recommendations as to future research in the area of infertility will then be offered.

For the professional community, several recommendations would seem appropriate.

1. Medical professionals should be knowledgeable of the emotional and behavioral reactions experienced by the infertile individual and should be aware that, for many, the situation is a major life event. If necessary, specialized education in the area is encouraged.

2. Medical professionals should be trained to recognize the need for appropriate therapeutic intervention. Medical staff members should encourage



involvement in a local peer support group or should recommend a therapist knowledgeable in the area of infertility to clients in need of counseling.

3. Both husband and wife should be involved in the infertility treatment program. The infertility crisis should be viewed as one affecting both patient and spouse. Results of this study have indicated that males and females differ in their perceptions of the infertility experience. The involvement by both husband and wife in infertility treatment may help eliminate misperceptions and potential estrangement within the marital relationship.

4. Mental health professionals, primarily those dealing with marital and family issues, are encouraged to educate themselves as to the dynamics of the infertility crisis. An awareness of the feelings and reactions commonly associated with infertility is crucial. Therapists may generally approach the infertility issue from the vantage point of a grief reaction, recognizing the need for the client to acknowledge and share the feelings commonly associated with loss. However, mental health professionals should be sensitive to cues from the client whose infertility is dealt with at a deeper level and whose resolution of the issue may require longer term intervention. Referrals should be made to support groups such as Resolve when appropriate. Further, inclusion of the spouse in counseling is strongly encouraged.

5. Adoption workers should be educated as to the dynamics of infertility. Those involved in the adoption process should be sensitive to the fact that couples pursuing alternative parenting may well be dealing with their infertility at the same time. Whereas many couples seeking adoption may have come to terms with their inability to conceive, others may be harboring unresolved feelings. These couples may hesitate sharing openly with the adoption worker for fear it will affect their acceptance as adoptive parents. The husband and wife seeking adoption should be encouraged to address unresolved issues surrounding infertility

in an effort to avoid projection of feelings onto each other or onto the new child entering their home. Workers should be aware of counselors dealing with infertility or support groups such as Resolve and should make referrals when necessary. The adoption worker who understands the dynamics of infertility may well provide additional support to couples who have already spent much time, energy, and money in pursuit of a child. The worker who voices understanding of the infertile couple's sense of urgency and emotional vulnerability would be much appreciated as the pursuit of adoption is frequently a lengthy and frustrating endeavor.

6. All professionals involved with the infertile population may eventually draw upon a diagnostic tool such as the Infertility Reactions Questionnaire. Medical professionals are encouraged to use such an instrument in evaluating the emotional state of both patient and spouse before automatically recommending infertility treatment which, in itself, is taxing and stress provoking. Mental health professionals may well find the Infertility Reactions Questionnaire to be a useful evaluative tool prior to beginning therapy and/or as a measure of progress during the course of counseling. The adoption worker may also find the questionnaire useful in determining the readiness of couples dealing with infertility to bring a new child into their homes.

The following are implications for further research in the area of infertility:

1. Design of instruments which examine perceptions and attitudes of individuals experiencing infertility is recommended. The Infertility Reactions Questionnaire, although still in the preliminary stages of development, may eventually provide professionals a means to evaluate and assess the needs of the individual dealing with infertility. Further refinement of the instrument is needed. Specifically, additional reliability and validity data should be collected. This would include further stability measures, additional measures of internal

consistency, and, potentially, subscale revisions in the form of deletion and/or addition of certain items. Additionally, content validity should be determined in a more formal manner with a panel of judges responding to a written rating form. Determination of construct validity for subscales of the Infertility Reactions Questionnaire will be possible as additional instruments which examine the experience of infertility are made available.

2. Future research should incorporate not only standardized questionnaires but, due to the sensitive nature of the infertility issue, may well rely on in depth interviews of individuals and couples. Studies should move toward experimental, more sophisticated research designs. Longitudinal studies conducted over the course of infertility treatment and eventual resolution would be of great benefit. Such studies should include pre and post testing following various medical treatments, counseling interventions, etc. More diverse, larger research samples in future studies may allow for greater variance as subgroup comparisons are made.

3. Professionals dealing with the infertile population should encourage research in the area. Their interest in future research and encouragement for clients and patients to participate in credible studies will eventually result in the establishment of infertility treatment programs which address the emotional and psychological needs of the individual coping with this major life crisis.

## References

- Beck, W., Jr. (1976). A critical look at the ethical and technical aspects of artificial insemination. Fertility and Sterility, 27, 1-8.
- Berger, D. M. (1977). The role of the psychiatrist in a reproductive biology clinic. Fertility and Sterility, 28, 141-145.
- Berger, D. M. (1980). Couples' reactions to male infertility and donor insemination. American Journal of Psychiatry, 137, 1047-1049.
- Berghorn, J. (1986). Infertility: No longer a problem without solutions. Baptist Medical Center Health Signs, 15, 5-10.
- Bresnick, E. R. (1981). A holistic approach to the treatment of the crisis of infertility. Journal of Marital and Family Therapy, 7, 171.
- Bresnick, E., & Taymor, M. L. (1979). The role of counseling in infertility. Fertility and Sterility, 32, 154-156.
- Burgwyn, D. (1981). Marriage without children. New York: Harper and Row.
- Cadden, V. (1964). Crisis in the family. In G. Caplan, Principles of preventive psychiatry (pp. 288-296). New York: Basic Books.
- Caplan, G. (1964). Principles of preventive psychiatry. New York: Basic Books.
- Caplan, G. (1981). Mastery of stress: Psychosocial aspects. American Journal of Psychiatry, 138, 419.
- Christianson, C. (1986). Support groups for infertile patients. Journal of Obstetrics Gynecologic, and Neonatal Nursing, 15, 293-296.
- Clark, M., Witherspoon, D., Abramson, P., Shapiro, D., Gary, S., & Zabarsky, M. (1982, December). Infertility: New cures, new hopes. Newsweek, 100, pp. 102-110.
- Davis, D. C. (1987). A conceptual framework for infertility. Journal of Obstetrics, Gynecologic and Neonatal Nursing, 16, 30-35.

- Debrovner, C. H., & Shubin-Stein, R. (1975). Sexual problems in the infertile couple. Medical Aspects of Human Sexuality, 9, 140-152.
- DeCherney, A. H., & Berkowitz, G. S. (1982). Female fecundity as a function of age. The New England Journal of Medicine, 307, 424.
- Decker, A., & Loebel, S. (1978). Why can't we have a baby? New York: the Dial Press.
- Drake, T. S., & Grunet, G. M. (1979). Cyclic pattern of sexual dysfunction in the infertility investigation. Fertility and Sterility, 32, 542-545.
- Elstein, M. (1975). Effect of infertility on psychosexual function. British Medical Journal, 3, 296-299.
- Erickson, E. H. (1963). Childhood and society (2nd ed.). New York: W. W. Norton and Company.
- Faux, M. (1984). Childless by choice. Garden City: Anchor Press/Doubleday.
- Feuer, G. (1983). The psychological impact of infertility on the lives of men. Dissertation Abstracts International, 44, 706-707A.
- Friedman, B. M. (1981). Infertility workup. American Journal of Nursing, 81, 2040-2046.
- Gray, M. J. (1980). Sexual problems in infertility. The Female Patient, 5, 21-24.
- Griffin, M. E. (1983). Resolving infertility: An emotional crisis. AORN Journal, 38, 597-601.
- Hall, C. S., & Lindzey, G. (1978). Theories of personality (3rd ed.). New York: John Wiley.
- Hendershot, G. E., Mosher, W. D., & Pratt, W. F. (1982). Infertility and age: An unresolved issue. Family Planning Perspectives, 14, 287-288.
- Isaac, S. & Michael, W. B. (1983). Handbook in Research and Evaluation (2nd ed.). San Diego: Edits.

- Johnston, I., Lopata, A., Speirs, A., Hoult, I., Kellow, G., & Duplessis, Y. (1981).  
In vitro fertilization: The challenge of the eighties. Fertility and Sterility,  
36, 600-706.
- Keerdoja, E., & Hager, M. (1982, December). Test-tube triumphs. Newsweek,  
100, p. 110.
- Keye, W. R. (1984). Psychosexual responses to infertility. Clinical Obstetrics and  
Gynecology, 27, 760-766.
- Korchin, S. J. (1976). Modern clinical psychology. New York: Basic Books.
- Kraft, A. D., Palombo, J., Mitchell, D., Dean, D., Meyers, S., & Schmidt, A. W.  
(1980). The psychological dimensions of infertility. American Journal of  
Orthopsychiatry, 50, 618-628.
- Kubler-Ross, E. (1969). On death and dying. New York: MacMillan.
- Larkin, M. (1985). Why can't I have a baby? Health Magazine, 17, 52-60.
- Leader, A., Taylor, P. J., & Daniluk, J. (1984). Infertility: Clinical and  
psychological aspects. Psychiatric Annals, 14, 461-467.
- Lukse, M. P. (1985). The effect of group counseling on the frequency of grief  
reported by infertile couples. Journal of Obstetrics, Gynecologic and  
Neonatal Nursing, 14, 67-70.
- Mahlstedt, P. P. (1985). The psychological component of infertility. Fertility and  
Sterility, 43, 335-346.
- Mazor, M. D. (1979, May). Barren couples. Psychology Today, 12, 101-112.
- McGuire, L. S. (1975). Psychologic management of infertile women.  
Postgraduate Medicine, 57, 173-176.
- Menning, B. E. (1975). The infertile couple: A plea for advocacy. Child Welfare,  
54, 454-460.
- Menning, B. E. (1976). Resolve: A support group for infertile couples. American  
Journal of Nursing, 76, 258-259.

- Menning, B. E. (1977). Infertility: A guide for the childless couples. Englewood Cliffs, New Jersey: Prentice-Hall.
- Menning, B. E. (1980). The emotional needs of infertile couples. Fertility and Sterility, 34, 313-319.
- Menning, B. E. (1982). The psychological impact of infertility. Nursing Clinics of North America, 17, 155-163.
- Moos, R. H., & Tsu, V. D. (1976). Human competence and coping. In R. H. Moos (Ed.), Human adaption: Coping with life crisis (pp. 3-16). Lexington, Massachusetts: D. D. Heath and Company.
- Mudd, E. H. (1980) Couple as a unit: Sexual, social and behavioral considerations to reproductive barriers. Journal of Marital and Family Therapy, 6, 23-28.
- New American Standard Bible. (1973). New York: A. J. Holman.
- Olshansky, E. F. (1987). Identity of self as infertile: An example of theory generating research. Advances in Nursing Science, 9, 54-63.
- Ory, M. G. (1978). The decision to parent or not: Normative and structural components. Journal of Marriage and the Family, 40, 531-539.
- Oxford English Dictionary. (1970). London: Oxford University Press.
- Payne, J. (1978). Talking about children: An examination of accounts about reproduction and family life. Journal of Biosocial Science, 10, 367-374.
- Porter, N. L., & Christopher, F. S. (1984). Infertility: Towards an awareness of a need among family life practitioners. Family Relations, 33, 309-315.
- Quindlen, A. (1987). Baby craving. Life, 10, 23-26.
- Renne, D. (1977). "There's always adoption:" Infertility problem. Child Welfare, 56, 465-470.
- Rosenberg, P. (1984). Support groups: A special therapeutic entity. Small Group Behavior, 15, 173-186.

- Rutledge, A. L. (1979). Psychomarital evaluation and treatment of the infertile couple. Clinical Obstetrics and Gynecology, 22, 255-256.
- Schwartz, D., & Mayaux, M. J. (1982). Female fecundity as a function of age. The New England Journal of Medicine, 307, 404.
- Seibel, M. M., & Taymor, M. L. (1982). Emotional aspects of infertility. Fertility and Sterility, 37, 137-145.
- Shapiro, C. H. (1982). The impact of infertility on the marital relationship. Social Casework Journal of Contemporary Social Work, 63, 387-393.
- Ubell, E. (1984, May). Encouraging news for childless couples. Parade, pp. 11-13.
- Unruh, A. M. & McGrath, P. J. (1985). The psychology of female infertility: Toward a new perspective. Health Care for Women International, 6, 369-381.
- Walker, H. E. (1978). Sexual problems and infertility. Psychosomatics, 19, 477-484.
- Waltzer, H. (1982). Psychological and legal aspects of artificial insemination (A.I.D.): An overview. American Journal of Psychotherapy, 36, 91-102.
- Weltzien, J. (1984). A study of the psychological factors associated with infertility: Depression, locus of control, quality of marital interaction. Dissertation Abstracts International, 44, 2910B.
- Zimmerman, S. L. (1982). Alternatives in human reproduction for involuntary childless couples. Family Relations, 31, 233-241.



## APPENDIXES

APPENDIX A  
AN OVERVIEW OF INFERTILITY ETIOLOGY AND  
TREATMENT STATUS: MEDICAL PROBLEMS  
RELATING TO FEMALE INFERTILITY,  
MEDICAL PROBLEMS RELATING TO  
MALE INFERTILITY, AND  
ALTERNATIVES TO  
NATURAL PARENTING

MEDICAL PROBLEMS RELATING TO  
FEMALE INFERTILITY

<u>Diagnosis</u>	<u>Definition</u>	<u>Cause</u>	<u>Treatment</u>
Anovulation	Failure to produce egg	Hormone imbalance due to malnutrition, certain medications, emotional stress, infections, and/or chronic illness	Oral administration of Clomid and/or injections of Pergonal  Fertility pump
Endometriosis	Growth of uterine tissue outside of uterus potentially affecting ovaries and/or fallopian tubes	Stimulated by ovarian hormones	Oral administration of Danocrin  Microsurgery
Fallopian Tube Blockage	Blockage of fallopian tubes resulting in inability for egg and sperm to unite	Endometriosis  Adhesions or scarring due to infection  Previous surgery  Insertion of intrauterine device to prevent pregnancy	Microsurgery
Cervical Abnormalities	Cervical mucus may be too thick and subsequently impenetrable by sperm or may be too acidic and destroys sperm on contact  Female may be allergic to her partner's sperm	Infection  Immune system produces antibodies which kill the sperm on contact	Hormone therapy  Use of condoms during intercourse for several months or oral administration of Medrol

MEDICAL PROBLEMS RELATING TO  
MALE INFERTILITY

<u>Diagnosis</u>	<u>Definition</u>	<u>Cause</u>	<u>Treatment</u>
Varicocele	Varicose veins in scrotum interferes with sperm production by raising the temperature	Vein in scrotum swells due to backwards flow of blood	Microsurgery
Faulty Semen	Includes low sperm count, poor motility or immature development	Hormone imbalance	Drug therapy may stimulate testosterone production in cases of imbalance
		Venereal disease	
		Heat around scrotum	
		Excessive drug or alcohol use	
Vas Deferens Obstruction	Obstruction prohibits transmission of sperm from testes to penis	Exposure to toxic chemicals	Microsurgery
		Mumps during puberty	
		Venereal disease	
Autoimmunity	Male becomes allergic to his own sperm	Infection	Oral administration of Medrol
		Previous surgery	
		Immune system produces antibodies which attack male sperm	

## ALTERNATIVES TO NATURAL PARENTING

Alternative	Procedure	When Indicated	Legal/Ethical Ramifications and Further Considerations
Artificial Insemination by Husband	Ejaculate of husband obtained by masturbation is placed in and around the cervix of impregnable female	When husband has low sperm count or movement but adequate sperm quality and wife appears impreg- nable	Certain religions regard masturbation as sinful and contend that sexual inter- course is a prerequisite for procreation
Artificial Insemination by Donor	Ejaculate of an anonymous donor is placed in and around the cervix of impregnable female	When husband's sperm count cannot be made viable for use in insemination pro- cedure but wife appears impregnable	<p>May be opposed by the husband who views this procedure as one in which his own genetic contribu- tion is lost</p> <p>Certain religions view pregnancy by this method as adulterous and the child subsequently conceived as illegitimate</p> <p>May be an issue in divorce and support proceedings as husband may claim no financial responsibility for the child conceived via this method</p> <p>Couples should consider whether mode of concep- tion will be revealed to family, offspring, etc.</p>

Alternative	Procedure	When Indicated	Legal/Ethical Ramifications and Further Considerations
Surrogate Pregnancy	Female is hired to serve as a surrogate mother, agreeing to artificial insemination by the male member of infertile couple	Husband's sperm is viable for use in insemination procedure but wife is not impregnable	Cost prohibitive to many couples  In addition to the legal/ethical issues mentioned in reference to artificial insemination, the surrogate mother may choose to abort or keep the child herself resulting in lengthy and presently controversial court proceedings
In Vitro Fertilization	Wife's egg(s) is/are removed via laparoscopy from the ovary and united with the husband's sperm in a laboratory dish. If fertilization occurs, the resulting embryo(s) is/are returned to the wife's uterus where implanatation may occur.	When the wife is experiencing some abnormality or blockage of the fallopian tubes but husband's sperm is viable	Cost prohibitive to many couples  Concern that embryo(s) may be destroyed if genetic abnormalities are discovered and/or multiple fertilizations occur

Alternative	Procedure	When Indicated	Legal/Ethical Ramifications and Further Considerations
Adoption	Infertile couple contracts with agency or attorney to adopt child conceived and carried to term by another couple	When before mentioned procedures prove ineffective as a means of achieving pregnancy	<p>Cost prohibitive to many couples</p> <p>The number of couples seeking to adopt far exceeds the number of available infants</p> <p>Three to 5 year waiting period before the adoption process may prove successful</p>

**APPENDIX B**  
**INSTRUMENTS USED IN PILOT STUDY: FEMALE**  
**INFERTILITY QUESTIONNAIRE AND MALE**  
**INFERTILITY QUESTIONNAIRE**



Agency \_\_\_\_\_

ID # \_\_\_\_\_

## FEMALE INFERTILITY QUESTIONNAIRE

Throughout this questionnaire, infertility is defined as an inability to achieve pregnancy without contraception or an inability to carry pregnancy to a live birth after one year of regular sexual relations. Please respond to statements without discussing answers with your husband and/or other parties.

The statements which follow explore attitudes regarding parenthood. Please respond to each in terms of your own beliefs regarding the goal of parenthood. For each statement, decide which of the possible responses, listed below, best applies to you. Circle the appropriate response number which follows each statement. Only one number should be circled for each statement.

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
1. The desire to parent arises naturally as one matures.				1 2 3 4 5 6	
2. A man chooses his spouse believing that she will bear him a child.				1 2 3 4 5 6	
3. Females gain more gratification from mothering while males gain more gratification from careers.				1 2 3 4 5 6	
4. Much of a woman's self-worth comes from being able to conceive.				1 2 3 4 5 6	
5. Religious teachings influence one's desire to parent.				1 2 3 4 5 6	
6. Most individuals have an innate desire to parent.				1 2 3 4 5 6	
7. Infertility may be God's punishment for some previous deed or act committed by myself/my spouse.				1 2 3 4 5 6	
8. Our culture reinforces the desire to have children.				1 2 3 4 5 6	
9. Our society offers more recognition to women who are mothers than women who are not.				1 2 3 4 5 6	
10. One's ability to conceive/impregnate relates to belief in a supreme being and attempts made to live accordingly.				1 2 3 4 5 6	
11. Infertility increases a female's feelings of inferiority in interactions with men.				1 2 3 4 5 6	
12. Instinct influences very little one's desire to parent.				1 2 3 4 5 6	
13. God plays no role in determining one's fertility.				1 2 3 4 5 6	
14. Society expects one to become a parent.				1 2 3 4 5 6	
15. My life is as interesting and fulfilling now as it would be if I had a child.				1 2 3 4 5 6	
16. A master plan over which we have little control determines one's fertility/infertility.				1 2 3 4 5 6	
17. Much of a man's self-worth comes from his ability to impregnate.				1 2 3 4 5 6	
18. I believe in a maternal instinct.				1 2 3 4 5 6	

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
33. Our infertility has not affected my being with friends who are pregnant, friends whose wives are pregnant, and/or those who have recently had a baby.				1 2 3 4 5 6	
34. At times I have dealt with our inability to conceive by trying to push it out of my mind.				1 2 3 4 5 6	
35. I have experienced little or no anger towards myself or others since realizing that we are infertile.				1 2 3 4 5 6	
36. Infertility has, for me, meant the death of hopes, dreams, and plans for this period in my life.				1 2 3 4 5 6	
37. I have been hesitant to describe ourselves as infertile to others.				1 2 3 4 5 6	
38. As time has passed, I have been able to face a future without children with increased optimism.				1 2 3 4 5 6	
39. Since we began putting forth so much effort to achieve pregnancy, sexual relations with my husband have seemed less appealing.				1 2 3 4 5 6	
40. At first, I could not believe that we were infertile.				1 2 3 4 5 6	
41. I have hoped to conceive many months, only to have felt despair when my menstrual cycle began.				1 2 3 4 5 6	
42. I have felt isolated from my husband who often has seemed not to understand my feelings regarding our infertility.				1 2 3 4 5 6	
43. Believing pregnancy to be a personal choice, I was shocked upon learning of our infertility.				1 2 3 4 5 6	
44. I have come to terms with our infertility and view the future from a more positive perspective.				1 2 3 4 5 6	
45. Since realizing our infertility, I have sometimes avoided social events which would mean my being around new parents and/or young children.				1 2 3 4 5 6	
46. Even though months and years have passed without conception, admitting infertility to myself has been difficult.				1 2 3 4 5 6	
47. I have not felt guilty when thinking about our infertility.				1 2 3 4 5 6	
48. The knowledge of our infertility has been unbelievable.				1 2 3 4 5 6	
49. I have had fewer orgasms since we began "scheduling" sexual relations.				1 2 3 4 5 6	

The statements which follow explore the reactions and feelings commonly realized by infertile individuals. Please respond to each item in terms of your reactions and feelings since recognizing your/your spouse's infertility. Thus, you may likely need to recall events from the past several years. For each statement, decide which of the possible responses, listed at the top of each page, best applies to you. Circle the appropriate response number which follows each statement. Only one number should be circled.

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
19. Since recognizing our infertility, I have often been angry at my husband because he did not seem to understand my feelings and reactions in response to such.				1 2 3 4 5 6	
20. I have often felt guilty when recalling past behaviors and have wondered if I could do something as a means of atonement in order to achieve pregnancy.				1 2 3 4 5 6	
21. After avoiding pregnancy for a number of years, I was shocked when I realized we could not conceive.				1 2 3 4 5 6	
22. In order to deal with the fact of our infertility, I have sometimes acted as though it did not bother me.				1 2 3 4 5 6	
23. I have been able to rechannel my energy which once was spent on dealing with our infertility into more positive directions.				1 2 3 4 5 6	
24. Spontaneous sexual relations between my husband and me have been replaced by sex on schedule, especially during my mid cycle.				1 2 3 4 5 6	
25. I have been angry that infertility medical personnel have treated me impersonally.				1 2 3 4 5 6	
26. As time has passed, my pain over our infertility has become less overwhelming and I have learned to deal with it more effectively.				1 2 3 4 5 6	
27. I have been aggravated at friends and family members who do not seem to understand our infertility.				1 2 3 4 5 6	
28. I have come to see sexual relations as less of a pleasure since recognizing our infertility.				1 2 3 4 5 6	
29. Few people have understood the sense of loss which I have felt in response to our infertility.				1 2 3 4 5 6	
30. I have wondered if our infertility is a punishment for some past mistake.				1 2 3 4 5 6	
31. I have felt so alone sometimes, so unsupported, in my attempts to deal with our infertility.				1 2 3 4 5 6	
32. At times, our infertility has made me feel angry at myself for failing to perform as other women.				1 2 3 4 5 6	

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
50. My grief concerning our infertility has seemed especially hard to deal with because the loss is so intangible.				1 2 3 4 5 6	
51. Sexual relations have remained equally enjoyable since learning of our infertility.				1 2 3 4 5 6	
52. Even though I still want children, I have successfully put our infertility in its proper place and have taken steps to go on with my life.				1 2 3 4 5 6	
53. My anger over our infertility has never been directed toward women/ couples who seem to conceive with ease.				1 2 3 4 5 6	
54. I have viewed myself as less adequate sexually since learning of our infertility.				1 2 3 4 5 6	
55. Since learning of our infertility, I have sometimes tried to convince myself, and others, that I do not want children.				1 2 3 4 5 6	
56. Since realizing our infertility, I have found myself bargaining with God or Fate in hopes of conceiving.				1 2 3 4 5 6	
57. I often have felt as if I am the only one around experiencing infertility.				1 2 3 4 5 6	
58. Since I had grown up believing that pregnancy should be guarded against, I was amazed when I learned of our infertility.				1 2 3 4 5 6	
59. I have acknowledged that it is time to put the pain surrounding our infertility behind us and consider other life styles such as adoption or child free living.				1 2 3 4 5 6	
60. I sometimes have avoided friends and family members who know of our infertility because I do not want to discuss the issue or hear their advice.				1 2 3 4 5 6	
61. Our infertility has made me feel that many of life's dreams are lost.				1 2 3 4 5 6	
62. I have considered that I/my husband did something wrong years ago and our infertility is punishment for such.				1 2 3 4 5 6	
63. I have not hesitated to seek out medical advice and/or treatment in reference to our infertility.				1 2 3 4 5 6	
64. At times our infertility has made me feel hopeless and out of control of my life.				1 2 3 4 5 6	
65. I have not considered the possibility that our infertility is punishment for past thoughts or acts.				1 2 3 4 5 6	
66. Our infertility came as no surprise to me.				1 2 3 4 5 6	

The statements which follow explore reactions and feelings commonly realized by infertile individuals. Previously you were asked to respond to each of these statements by reviewing the years since recognizing your/your spouse's infertility. You are now asked to respond to each of these statements in terms of your present reactions and feelings regarding your/your spouse's infertility. For each statement, decide which of the possible responses, listed at the top of each page, best applies to you currently. Circle the appropriate response number which follows each statement. Only one number should be circled.

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
67. I cannot believe that we are infertile.				1 2 3 4 5 6	
68. Many months I hope to conceive, only to feel despair when my menstrual cycle begins.				1 2 3 4 5 6	
69. I feel angry that I am treated impersonally by infertility medical personnel.				1 2 3 4 5 6	
70. I do not hesitate seeking out medical advice and/or treatment in reference to our infertility.				1 2 3 4 5 6	
71. I do not feel guilty when thinking about our infertility.				1 2 3 4 5 6	
72. I never direct my anger over our infertility towards women/couples who seem to conceive with ease.				1 2 3 4 5 6	
73. Our infertility is not surprising to me.				1 2 3 4 5 6	
74. I am putting the pain surrounding our infertility behind me and considering other life styles such as adoption or child free living.				1 2 3 4 5 6	
75. Even though months and years have passed without conception, admitting infertility to myself is difficult.				1 2 3 4 5 6	
76. Scheduled sex, especially during my mid cycle, has replaced spontaneous sexual relations between my husband and myself.				1 2 3 4 5 6	
77. I sometimes avoid friends and family members who know of our infertility because I do not want to discuss the issue or hear their advice.				1 2 3 4 5 6	
78. At times, I deal with our inability to conceive by trying to push it out of my mind.				1 2 3 4 5 6	
79. After avoiding pregnancy for a number of years, I am truly shocked that we cannot conceive.				1 2 3 4 5 6	
80. I feel isolated from my husband who often seems not to understand my feelings regarding our infertility.				1 2 3 4 5 6	

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
81. I experience little or no anger towards myself or others due to our infertility.				1 2 3 4 5 6	
82. My pain over our infertility is less overwhelming and I am learning to deal with it more effectively.				1 2 3 4 5 6	
83. At times our infertility makes me feel hopeless and out of control of my life.				1 2 3 4 5 6	
84. I have come to terms with our infertility and view the future from a more positive perspective.				1 2 3 4 5 6	
85. I am rechanneling my energy which once was spent on dealing with our infertility into more positive directions.				1 2 3 4 5 6	
86. I consider it possible that I/my husband did something wrong years ago and our infertility is punishment for such.				1 2 3 4 5 6	
87. In order to deal with the fact of our infertility, I sometimes act as though it does not bother me.				1 2 3 4 5 6	
88. I wonder if our infertility is punishment for some past mistake.				1 2 3 4 5 6	
89. I often feel as if I am the only one around experiencing infertility.				1 2 3 4 5 6	
90. The knowledge of our infertility remains unbelievable.				1 2 3 4 5 6	
91. I now view myself as less adequate sexually than before knowing of our infertility.				1 2 3 4 5 6	
92. I sometimes try to convince myself, and others, that I do not want children.				1 2 3 4 5 6	
93. Believing pregnancy to be a personal choice, I am shocked that we are infertile.				1 2 3 4 5 6	
94. Few people understand the sense of loss which I feel in response to our infertility.				1 2 3 4 5 6	
95. For me, infertility means the death of hopes, dreams, and plans for this period of my life.				1 2 3 4 5 6	
96. Sexual relations remain as enjoyable now as they were before knowing of our infertility.				1 2 3 4 5 6	
97. I often feel aggravated when friends and family members do not seem to understand our infertility.				1 2 3 4 5 6	
98. I see sexual relations as less of a pleasure now than they were before realizing our infertility.				1 2 3 4 5 6	

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
99. I feel so alone sometimes, so unsupported, in my attempts to deal with our infertility.				1 2 3 4 5 6	
100. I have fewer orgasms now that sexual relations are "scheduled."				1 2 3 4 5 6	
101. Our infertility makes me feel that many of life's dreams are lost.				1 2 3 4 5 6	
102. Since I grew up believing that pregnancy should be guarded against, I am still amazed when I think of our infertility.				1 2 3 4 5 6	
103. I sometimes avoid social events which mean my being around new parents and/or young children.				1 2 3 4 5 6	
104. My grief concerning our infertility is especially hard to deal with because the loss is so intangible.				1 2 3 4 5 6	
105. I often feel guilty when recalling past behaviors and wonder if I can do something as a means of atonement in order to achieve pregnancy.				1 2 3 4 5 6	
106. I do not consider the possibility that our infertility is punishment for past thoughts or acts.				1 2 3 4 5 6	
107. Our infertility does not affect my being with friends who are pregnant, friends whose wives are pregnant, and/or those who have recently had a baby.				1 2 3 4 5 6	
108. I find myself bargaining with God or Fate in hopes of conceiving.				1 2 3 4 5 6	
109. I am often angry at my husband because he does not seem to understand my feelings and reactions in response to our infertility.				1 2 3 4 5 6	
110. At times, our infertility makes me feel angry at myself for failing to perform as other women.				1 2 3 4 5 6	
111. I hesitate to describe ourselves as infertile to others.				1 2 3 4 5 6	
112. Even though I still want children, I have put our infertility in its proper place and I am taking steps to go on with my life.				1 2 3 4 5 6	
113. I now can face a future without children with increased optimism.				1 2 3 4 5 6	
114. Sexual relations with my husband are less appealing since we began putting so much effort into achieving pregnancy.				1 2 3 4 5 6	



The following statements explore attitudes regarding counseling and/or outside support as one deals with infertility. Please respond to each in terms of how your needs would best met as you deal with your infertility. For each statement decide which of the possible responses, listed below, best applies to you. Circle the appropriate response number which follows each statement. Only one number should be circled for each statement.

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
115.	I would consider individual counseling with a mental health professional to work through my feelings and reactions to infertility.			1	2 3 4 5 6
116.	I would consider couple counseling with my husband, led by a mental health professional, in order to discuss our concerns regarding infertility.			1	2 3 4 5 6
117.	I would consider group counseling with other women, led by a mental health professional, to work through my feelings and reactions to infertility.			1	2 3 4 5 6
118.	My thoughts and feelings regarding infertility could be explored in a group of both men and women which was led by a mental health professional.			1	2 3 4 5 6
119.	I would consider group counseling for infertile couples in which husbands and wives shared thoughts and feelings concerning infertility with a mental health professional and with each other.			1	2 3 4 5 6
120.	A peer support group for both individuals and couples which was led by people who have experienced infertility would be considered as a means of exploring common feelings and concerns.			1	2 3 4 5 6
121.	Of the six options for counseling to deal with infertility, which <u>one</u> would you <u>most likely</u> be involved in? Indicate such by placing an X beside your choice.				
_____	Individual counseling led by a mental health professional				
_____	Couple counseling with my husband and led by a mental health professional				
_____	Group counseling with women only and led by a mental health professional				
_____	Group counseling for women and men and led by a mental health professional				
_____	Group counseling for couples and led by a mental health professional				
_____	Involvement in a peer support group led by other infertile individuals and/or couples				

Agency \_\_\_\_\_

ID # \_\_\_\_\_

## MALE INFERTILITY QUESTIONNAIRE

Throughout this questionnaire, infertility is defined as an inability to achieve pregnancy without contraception or an inability to carry pregnancy to a live birth after one year of regular sexual relations. Please respond to statements without discussing answers with your wife and/or other parties.

The statements which follow explore attitudes regarding parenthood. Please respond to each in terms of your own beliefs regarding the goal of parenthood. For each statement, decide which of the possible responses, listed below, best applies to you. Circle the appropriate response number which follows each statement. Only one number should be circled for each statement.

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
1. The desire to parent arises naturally as one matures.				1 2 3 4 5 6	
2. A man chooses his spouse believing that she will bear him a child.				1 2 3 4 5 6	
3. Females gain more gratification from mothering while males gain more gratification from careers.				1 2 3 4 5 6	
4. Much of a woman's self-worth comes from being able to conceive.				1 2 3 4 5 6	
5. Religious teachings influence one's desire to parent.				1 2 3 4 5 6	
6. Most individuals have an innate desire to parent.				1 2 3 4 5 6	
7. Infertility may be God's punishment for some previous deed or act committed by myself/my spouse.				1 2 3 4 5 6	
8. Our culture reinforces the desire to have children.				1 2 3 4 5 6	
9. Our society offers more recognition to women who are mothers than women who are not.				1 2 3 4 5 6	
10. One's ability to conceive/impregnate relates to belief in a supreme being and attempts made to live accordingly.				1 2 3 4 5 6	
11. Infertility increases a female's feelings of inferiority in interactions with men.				1 2 3 4 5 6	
12. Instinct influences very little one's desire to parent.				1 2 3 4 5 6	
13. God plays no role in determining one's fertility.				1 2 3 4 5 6	
14. Society expects one to become a parent.				1 2 3 4 5 6	
15. My life is as interesting and fulfilling now as it would be if I had a child.				1 2 3 4 5 6	
16. A master plan over which we have little control determines one's fertility/infertility.				1 2 3 4 5 6	
17. Much of a man's self-worth comes from his ability to impregnate.				1 2 3 4 5 6	
18. I believe in a maternal instinct.				1 2 3 4 5 6	

The statements which follow explore the reactions and feelings commonly realized by infertile individuals. Please respond to each item in terms of your reactions and feelings since recognizing your/your spouse's infertility. Thus, you may likely need to recall events from the past several years. For each statement, decide which of the possible responses, listed at the top of each page, best applies to you. Circle the appropriate response number which follows each statement. Only one number should be circled.

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
19. Since recognizing our infertility, I have often been angry at my wife because she did not seem to understand my feelings and reactions in response to such.				1 2 3 4 5 6	
20. I have often felt guilty when recalling past behaviors and have wondered if I could do something as a means of atonement in order for my wife to achieve pregnancy.				1 2 3 4 5 6	
21. After avoiding pregnancy for a number of years, I was shocked when I realized we could not conceive.				1 2 3 4 5 6	
22. In order to deal with the fact of our infertility, I have sometimes acted as though it did not bother me.				1 2 3 4 5 6	
23. I have been able to rechannel my energy which once was spent on dealing with our infertility into more positive directions.				1 2 3 4 5 6	
24. Spontaneous sexual relations between my wife and me have been replaced by sex on schedule, especially during my wife's mid cycle.				1 2 3 4 5 6	
25. I have been angry that infertility medical personnel have treated me impersonally.				1 2 3 4 5 6	
26. As time has passed, my pain over our infertility has become less overwhelming and I have learned to deal with it more effectively.				1 2 3 4 5 6	
27. I have been aggravated at friends and family members who do not seem to understand our infertility.				1 2 3 4 5 6	
28. I have come to see sexual relations as less of a pleasure since recognizing our infertility.				1 2 3 4 5 6	
29. Few people have understood the sense of loss which I have felt in response to our infertility.				1 2 3 4 5 6	
30. I have wondered if our infertility is a punishment for some past mistake.				1 2 3 4 5 6	
31. I have felt so alone sometimes, so unsupported, in my attempts to deal with our infertility.				1 2 3 4 5 6	
32. At times, our infertility has made me feel angry at myself for failing to perform as other men.				1 2 3 4 5 6	

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
33. Our infertility has not affected my being with friends who are pregnant, friends whose wives are pregnant, and/or those who have recently had a baby.				1 2 3 4 5 6	
34. At times I have dealt with our inability to conceive by trying to push it out of my mind.				1 2 3 4 5 6	
35. I have experienced little or no anger towards myself or others since realizing that we are infertile.				1 2 3 4 5 6	
36. Infertility has, for me, meant the death of hopes, dreams, and plans for this period of my life.				1 2 3 4 5 6	
37. I have been hesitant to describe ourselves as infertile to others.				1 2 3 4 5 6	
38. As time has passed, I have been able to face a future without children with increased optimism.				1 2 3 4 5 6	
39. Since we began putting forth so much effort to achieve pregnancy, sexual relations with my wife have seemed less appealing.				1 2 3 4 5 6	
40. At first, I could not believe we were infertile.				1 2 3 4 5 6	
41. I have hoped for my wife to conceive many months, only to have felt despair when her menstrual cycle began.				1 2 3 4 5 6	
42. I have felt isolated from my wife who often has seemed not to understand my feelings regarding our infertility.				1 2 3 4 5 6	
43. Believing pregnancy to be a personal choice, I was shocked upon learning of our infertility.				1 2 3 4 5 6	
44. I have come to terms with our infertility and view the future from a more positive perspective.				1 2 3 4 5 6	
45. Since realizing our infertility, I have sometimes avoided social events which would mean my being around new parents and/or young children.				1 2 3 4 5 6	
46. Even though months and years have passed without conception, admitting infertility to myself has been difficult.				1 2 3 4 5 6	
47. I have not felt guilty when thinking about our infertility.				1 2 3 4 5 6	
48. The knowledge of our infertility has been unbelievable.				1 2 3 4 5 6	
49. I have been impotent more frequently since we began "scheduling" sexual relations.				1 2 3 4 5 6	

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
50. My grief concerning our infertility has seemed especially hard to deal with because the loss is so intangible.				1 2 3 4 5 6	
51. Sexual relations have remained equally enjoyable since learning of our infertility.				1 2 3 4 5 6	
52. Even though I still want children, I have put our infertility in its proper place and have taken steps to go on with my life.				1 2 3 4 5 6	
53. My anger over our infertility has never been directed toward women/ couples who seem to conceive with ease.				1 2 3 4 5 6	
54. I have viewed myself as less adequate sexually since learning of our infertility.				1 2 3 4 5 6	
55. Since learning of our infertility, I have sometimes tried to convince myself, and others, that I do not want children.				1 2 3 4 5 6	
56. Since realizing our infertility, I have found myself bargaining with God or Fate in hopes that my wife will conceive.				1 2 3 4 5 6	
57. I often have felt as if I am the only one around experiencing infertility.				1 2 3 4 5 6	
58. Since I had grown up believing that pregnancy should be guarded against, I was amazed when I learned of our infertility.				1 2 3 4 5 6	
59. I have acknowledged that it is time to put the pain surrounding our infertility behind us and consider other life styles such as adoption or child free living.				1 2 3 4 5 6	
60. I sometimes have avoided friends and family members who know of our infertility because I do not want to discuss the issue or hear their advice.				1 2 3 4 5 6	
61. Our infertility has made me feel that many of life's dreams are lost.				1 2 3 4 5 6	
62. I have considered that I/my wife did something wrong years ago and our infertility is punishment for such.				1 2 3 4 5 6	
63. I have not hesitated to seek out medical advice and/or treatment in reference to our infertility.				1 2 3 4 5 6	
64. At times our infertility has made me feel hopeless and out of control of my life.				1 2 3 4 5 6	
65. I have not considered the possibility that our infertility is punishment for past thoughts or acts.				1 2 3 4 5 6	
66. Our infertility came as no surprise to me.				1 2 3 4 5 6	

The statements which follow explore reactions and feelings commonly realized by infertile individuals. Previously you were asked to respond to each of these statements by reviewing the years since recognizing your/your spouse's infertility. You are now asked to respond to each of these statements in terms of your present reactions and feelings regarding your/your spouse's infertility. For each statement, decide which of the possible responses, listed at the top of each page, best applies to you currently. Circle the appropriate response number which follows each statement. Only one number should be circled.

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
67. I cannot believe that we are infertile.				1 2 3 4 5 6	
68. Many months I hope for my wife to conceive, only to feel despair when her menstrual cycle begins.				1 2 3 4 5 6	
69. I am angry that I am treated impersonally by infertility medical personnel.				1 2 3 4 5 6	
70. I do not hesitate seeking out medical advice and/or treatment in reference to our infertility.				1 2 3 4 5 6	
71. I do not feel guilty when thinking about our infertility.				1 2 3 4 5 6	
72. I never direct my anger over our infertility towards women/couples who seem to conceive with ease.				1 2 3 4 5 6	
73. Our infertility is not surprising to me.				1 2 3 4 5 6	
74. I am putting the pain surrounding our infertility behind me and considering other life styles such as adoption or child free living.				1 2 3 4 5 6	
75. Even though months and years have passed without conception, admitting infertility to myself is difficult.				1 2 3 4 5 6	
76. Scheduled sex, especially during my wife's mid cycle, has replaced spontaneous sexual relations between my wife and myself.				1 2 3 4 5 6	
77. I sometimes avoid friends and family members who know of our infertility because I do not want to discuss the issue or hear their advice.				1 2 3 4 5 6	
78. At times, I deal with our inability to conceive by trying to push it out of my mind.				1 2 3 4 5 6	
79. After avoiding pregnancy for a number of years, I am truly shocked that we cannot conceive.				1 2 3 4 5 6	
80. I feel isolated from my wife who often seems not to understand my feelings regarding our infertility.				1 2 3 4 5 6	

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
81. I experience little or no anger towards myself or others due to our infertility.				1 2 3 4 5 6	
82. My pain over our infertility is less overwhelming and I am learning to deal with it more effectively.				1 2 3 4 5 6	
83. At times our infertility makes me feel hopeless and out of control of my life.				1 2 3 4 5 6	
84. I have come to terms with our infertility and view the future from a more positive perspective.				1 2 3 4 5 6	
85. I am rechanneling my energy which once was spent on dealing with our infertility into more positive directions.				1 2 3 4 5 6	
86. I consider it possible that I/my wife did something wrong years ago and our infertility is punishment for such.				1 2 3 4 5 6	
87. In order to deal with the fact of our infertility, I sometimes act as though it does not bother me.				1 2 3 4 5 6	
88. I wonder if our infertility is punishment for some past mistake.				1 2 3 4 5 6	
89. I often feel as if I am the only one around experiencing infertility.				1 2 3 4 5 6	
90. The knowledge of our infertility remains unbelievable.				1 2 3 4 5 6	
91. I now view myself as less adequate sexually than before knowing of our infertility.				1 2 3 4 5 6	
92. I sometimes try to convince myself, and others, that I do not want children.				1 2 3 4 5 6	
93. Believing pregnancy to be a personal choice, I am shocked that we are infertile.				1 2 3 4 5 6	
94. Few people understand the sense of loss which I feel in response to our infertility.				1 2 3 4 5 6	
95. For me, infertility means the death of hopes, dreams, and plans for this period of my life.				1 2 3 4 5 6	
96. Sexual relations remain as enjoyable now as they were before knowing of our infertility.				1 2 3 4 5 6	
97. I often feel aggravated when friends and family members do not seem to understand our infertility.				1 2 3 4 5 6	
98. I see sexual relations as less of a pleasure now than they were before realizing our infertility.				1 2 3 4 5 6	



Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
99.	I feel so alone sometimes, so unsupported, in my attempts to deal with our infertility.				1 2 3 4 5 6
100.	I am impotent more frequently now that sexual relations are "scheduled."				1 2 3 4 5 6
101.	Our infertility makes me feel that many of life's dreams are lost.				1 2 3 4 5 6
102.	Since I grew up believing that pregnancy should be guarded against, I am still amazed when I think of our infertility.				1 2 3 4 5 6
103.	I sometimes avoid social events which mean my being around new parents and/or young children.				1 2 3 4 5 6
104.	My grief concerning our infertility is especially hard to deal with because the loss is so intangible.				1 2 3 4 5 6
105.	I often feel guilty when recalling past behaviors and wonder if I can do something as a means of atonement in order for my wife to achieve pregnancy.				1 2 3 4 5 6
106.	I do not consider the possibility that our infertility is punishment for past thoughts or acts.				1 2 3 4 5 6
107.	Our infertility does not affect my being with friends who are pregnant, friends whose wives are pregnant, and/or those who have recently had a baby.				1 2 3 4 5 6
108.	I find myself bargaining with God or Fate in hopes of my wife conceiving.				1 2 3 4 5 6
109.	I am often angry at my wife because she does not seem to understand my feelings and reactions in response to our infertility.				1 2 3 4 5 6
110.	At times, our infertility makes me feel angry at myself for failing to perform as other men.				1 2 3 4 5 6
111.	I hesitate to describe ourselves as infertile to others.				1 2 3 4 5 6
112.	Even though I still want children, I have put our infertility in its proper place and I am taking steps to go on with my life.				1 2 3 4 5 6
113.	I now can face a future without children with increased optimism.				1 2 3 4 5 6
114.	Sexual relations with my wife are less appealing since we began putting so much effort into achieving pregnancy.				1 2 3 4 5 6

The following statements explore attitudes regarding counseling and/or outside support as one deals with infertility. Please respond to each in terms of how your needs would best met as you deal with your infertility. For each statement decide which of the possible responses, listed below, best applies to you. Circle the appropriate response number which follows each statement. Only one number should be circled for each statement.

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
115. I would consider individual counseling with a mental health professional to work through my feelings and reactions to infertility.				1 2 3 4 5 6	
116. I would consider couple counseling with my wife, led by a mental health professional, in order to discuss our concerns regarding infertility.				1 2 3 4 5 6	
117. I would consider group counseling with other men, led by a mental health professional, to work through my feelings and reactions to infertility.				1 2 3 4 5 6	
118. My thoughts and feelings regarding infertility could be explored in a group of both men and women which was led by a mental health professional.				1 2 3 4 5 6	
119. I would consider group counseling for infertile couples in which husbands and wives shared thoughts and feelings concerning infertility with a mental health professional and with each other.				1 2 3 4 5 6	
120. A peer support group for both individuals and couples which was led by people who have experienced infertility would be considered as a means of exploring common feelings and concerns.				1 2 3 4 5 6	
121. Of the six options for counseling to deal with infertility, which <u>one</u> would you <u>most likely</u> be involved in? Indicate such by placing an X beside your choice.					
<input type="checkbox"/> Individual counseling led by a mental health professional					
<input type="checkbox"/> Couple counseling with my husband and led by a mental health professional					
<input type="checkbox"/> Group counseling with women only and led by a mental health professional					
<input type="checkbox"/> Group counseling for women and men and led by a mental health professional					
<input type="checkbox"/> Group counseling for couples and led by a mental health professional					
<input type="checkbox"/> Involvement in a peer support group led by other infertile individuals and/or couples					

## APPENDIX C

### DOCUMENTS INCLUDED IN FINAL RESEARCH PACKET:

LETTER TO PARTICIPANTS, INFORMED CONSENT,

DEMOGRAPHIC INFORMATION FORM,

INFERTILITY REACTIONS QUESTIONNAIRE,

BECK DEPRESSION INVENTORY,

ROSENBERG SELF ESTEEM SCALE,

ADULT NOWICKI-STRICKLAND

INTERNAL-EXTERNAL LOCUS

OF CONTROL SCALE

## LETTER TO PARTICIPANTS

Dear Infertility Research Participant:

Recently, you responded to a request made by \_\_\_\_\_ to participate in a research project on infertility.

Enclosed, you will find research packets for both you and your spouse. Each packet includes the following:

- Informed Consent Form
- Demographic Information Form
- Infertility Reactions Questionnaire
- Beck Depression Inventory, Rosenberg Self Esteem Scale, Nowicki-Strickland Locus of Control Scale

You are asked to read each document carefully and respond accordingly. Completion of the entire packet should take approximately one hour of each individual's time. Upon completion of packets by both you and your spouse, all documents should be returned as soon as possible in the enclosed, postage paid envelope.

I sincerely appreciate your willingness to participate in this research. As some of you may be aware, my husband and I are also infertile. Dealing with this issue for a number of years has increased my awareness of this topic's sensitive nature. Your assistance in this project will provide additional information in the field of infertility and may ultimately offer couples the support needed to deal with the problem in a healthy and constructive manner.

Sincerely,

Patricia Sterling

## INFORMED CONSENT FORM

AGREEMENT TO PARTICIPATE IN A STUDY OF INFERTILITY AS PART OF A  
DOCTORAL DISSERTATION FOR OKLAHOMA STATE UNIVERSITY.

In order to protect your confidentiality and to provide a record of your willingness to participate in this research project, the following statement must be read and your signature provided. Both you and your spouse must sign a consent statement in order for information provided to be used in this research.

"I, \_\_\_\_\_ (please print your name), agree to participate in the above identified research being conducted by Patricia Sterling. I understand that I will be asked to complete a questionnaire which addresses one's reactions to infertility, three additional instruments, and a demographics form. I understand that my participation in this research is entirely voluntary, that I will be protected in regard to confidentiality of all information provided, and that my name will not be used in any manner without my express written permission. I further understand that I may receive information regarding the results of this study if I so desire."

---

Signature

---

Date

If you desire a summary of this study, please indicate below.

Yes, I would appreciate your sending me results of this research upon completion. Send information to the name and address below:

---

---

---

---

Male/Female

Agency \_\_\_\_\_

ID # \_\_\_\_\_

## DEMOGRAPHIC INFORMATION

Infertility is defined as an inability to achieve pregnancy without contraception or an inability to carry pregnancy to a live birth after one year of regular sexual relations. In response to questions offering several statements to choose from, circle the letter which corresponds with the one most accurate answer.

Age \_\_\_\_\_

Sex \_\_\_\_\_

Ethnic Origin \_\_\_\_\_

Educational Background (Circle last year completed)

Junior and Senior High SchoolCollegeGraduate or Professional

7 8 9 10 11 12

13 14 15 16

17 18 19 20

Occupation \_\_\_\_\_

Average Family Income

- A. \$0-\$25,000
- B. \$26,000-\$50,000
- C. \$51,000-\$75,000
- D. \$76,000-\$100,000
- E. \$100,000+

Years married to present spouse \_\_\_\_\_

Previous Marriages

- A. Not previously married
- B. Married once before
- C. Married twice before
- D. Married more than twice before

Did you use birth control before attempting to achieve pregnancy?

- A. Yes
- B. No

If yes, for how long? \_\_\_\_\_

Infertility is defined as an inability to achieve pregnancy without contraception or an inability to carry pregnancy to a live birth after one year of regular sexual relations. How long have you and your spouse known about your infertility?

- A. More than 1 but less than 2 years
- B. Between 2 and 5 years
- C. More than 5 years

What is the origin of your infertility?

- A. Female only experiencing medical problems
- B. Male only experiencing medical problems
- C. Both male and female experiencing medical problems
- D. Cause of infertility unknown

Are you or your spouse presently in a medical treatment program for infertility?

- A. Yes
- B. No

Are you actively pursuing conception via artificial insemination by donor, surrogate mothering, adoption, or any procedure requiring the participation of a third party?

- A. Yes
- B. No

What is your religious preference?

- A. Catholic
- B. Protestant
- C. Jewish
- D. Other \_\_\_\_\_
- E. None

Do you believe that everything the Bible says is to be taken exactly as it reads?

- A. Yes
- B. No

How often do you attend a church, synagogue, or religious service?

- A. Never
- B. About one time a year
- C. Several times a year
- D. Once a week
- E. Several times a week



Male/Female

Agency \_\_\_\_\_

ID # \_\_\_\_\_

## INFERTILITY REACTIONS QUESTIONNAIRE

Throughout this questionnaire, infertility is defined as an inability to achieve pregnancy without contraception or an inability to carry pregnancy to a live birth after one year of regular sexual relations. Instructions differ for each section of this questionnaire. Please read each set of instructions carefully and respond to statements without discussing answers with your spouse and/or other parties.

The statements which follow explore attitudes regarding parenthood. Please respond to each in terms of your own beliefs regarding the goal of parenthood. For each statement, decide which of the possible responses, listed below, best applies to you. Circle the appropriate response number which follows each statement. Only one number should be circled for each statement.

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
1. The desire to parent arises naturally as one matures.				1 2 3 4 5 6	
2. A man chooses his spouse believing that she will bear him a child.				1 2 3 4 5 6	
3. Females gain more gratification from mothering while males gain more gratification from careers.				1 2 3 4 5 6	
4. Much of a woman's self-worth comes from being able to conceive.				1 2 3 4 5 6	
5. Religious teachings influence one's desire to parent.				1 2 3 4 5 6	
6. Most individuals have an innate desire to parent.				1 2 3 4 5 6	
7. Infertility may be God's punishment for some previous deed or act committed by myself/my spouse.				1 2 3 4 5 6	
8. Our culture reinforces the desire to have children.				1 2 3 4 5 6	
9. Our society offers more recognition to women who are mothers than women who are not.				1 2 3 4 5 6	
10. One's ability to conceive/impregnate relates to belief in a supreme being and attempts made to live accordingly.				1 2 3 4 5 6	
11. Infertility increases a female's feelings of inferiority in interactions with men.				1 2 3 4 5 6	
12. Instinct influences very little one's desire to parent.				1 2 3 4 5 6	
13. God plays no role in determining one's fertility.				1 2 3 4 5 6	
14. Society expects one to become a parent.				1 2 3 4 5 6	
15. My life is as interesting and fulfilling now as it would be if I had a child.				1 2 3 4 5 6	
16. A master plan over which we have little control determines one's fertility/infertility.				1 2 3 4 5 6	
17. Much of a man's self-worth comes from his ability to impregnate.				1 2 3 4 5 6	
18. I believe in a maternal instinct.				1 2 3 4 5 6	

The statements which follow explore the reactions and feelings commonly realized by infertile individuals. Please respond to each item in terms of your reactions and feelings since recognizing your/spouse's infertility. Thus, you may likely need to recall events from the past several years. For each statement, decide which of the possible responses, listed at the top of each page, best applies to you. Circle the appropriate response number which follows each statement. Only one number should be circled.

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
19. Since recognizing our infertility, I have often been angry at my spouse because he/she did not seem to understand my feelings and reactions in response to such.				1 2 3 4 5 6	
20. I have often felt guilty when recalling past behaviors and have wondered if I could do something as a means of atonement in order for us to achieve pregnancy.				1 2 3 4 5 6	
21. After avoiding pregnancy for a number of years, I was shocked when I realized we could not conceive.				1 2 3 4 5 6	
22. In order to deal with the fact of our infertility, I have sometimes acted as though it did not bother me.				1 2 3 4 5 6	
23. I have been able to rechannel my energy which once was spent on dealing with our infertility into more positive directions.				1 2 3 4 5 6	
24. Spontaneous sexual relations with my spouse have been replaced by sex on schedule, especially during my(my wife's) mid cycle.				1 2 3 4 5 6	
25. I have been angry that infertility medical personnel have treated me impersonally.				1 2 3 4 5 6	
26. As time has passed, my pain over our infertility has become less overwhelming and I have learned to deal with it more effectively.				1 2 3 4 5 6	
27. I have been aggravated at friends and family members who do not seem to understand our infertility.				1 2 3 4 5 6	
28. I have come to see sexual relations as less of a pleasure since recognizing our infertility.				1 2 3 4 5 6	
29. Few people have understood the sense of loss which I have felt in response to our infertility.				1 2 3 4 5 6	
30. I have wondered if our infertility is a punishment for some past mistake.				1 2 3 4 5 6	
31. I have felt so alone sometimes, so unsupported, in my attempts to deal with our infertility.				1 2 3 4 5 6	
32. At times, our infertility has made me feel angry at myself for failing to perform as other women(men).				1 2 3 4 5 6	

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
33. Our infertility has not affected my being with friends who are pregnant, friends whose wives are pregnant, and/or those who have recently had a baby.				1 2 3 4 5 6	
34. At times I have dealt with our inability to conceive by trying to push it out of my mind.				1 2 3 4 5 6	
35. I have experienced little or no anger towards myself or others since realizing that we are infertile.				1 2 3 4 5 6	
36. Infertility has, for me, meant the death of hopes, dreams, and plans for this period of my life.				1 2 3 4 5 6	
37. I have been hesitant to describe myself/my spouse as infertile to others.				1 2 3 4 5 6	
38. As time has passed, I have been able to face a future without children with increased optimism.				1 2 3 4 5 6	
39. Since we began putting forth so much effort to achieve pregnancy, sexual relations with my spouse have seemed less appealing.				1 2 3 4 5 6	
40. At first, I could not believe we were infertile.				1 2 3 4 5 6	
41. I have hoped for us to conceive many months, only to have felt despair when my(my wife's) menstrual cycle began.				1 2 3 4 5 6	
42. I have felt isolated from my spouse who often has seemed not to understand my feelings regarding our infertility.				1 2 3 4 5 6	
43. Believing pregnancy to be a personal choice, I was shocked upon learning of our infertility.				1 2 3 4 5 6	
44. I have come to terms with our infertility and view the future from a more positive perspective.				1 2 3 4 5 6	
45. Since realizing our infertility, I have sometimes avoided social events which would mean my being around new parents and/or young children.				1 2 3 4 5 6	
46. Even though months and years have passed without conception, admitting infertility to myself has been difficult.				1 2 3 4 5 6	
47. I have not felt guilty when thinking about our infertility.				1 2 3 4 5 6	
48. The knowledge of our infertility has been unbelievable.				1 2 3 4 5 6	
49. I have had fewer orgasms(been impotent more frequently) since we began "scheduling" sexual relations.				1 2 3 4 5 6	

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
50. My grief concerning our infertility has seemed especially hard to deal with because the loss is so intangible.				1 2 3 4 5 6	
51. Sexual relations were equally enjoyable before and after learning of our infertility.				1 2 3 4 5 6	
52. Even though I still want children, I have put our infertility in its proper place and have taken steps to go on with my life.				1 2 3 4 5 6	
53. My anger over our infertility has never been directed toward women/ couples who seem to conceive with ease.				1 2 3 4 5 6	
54. I have viewed myself as less adequate sexually since learning of our infertility.				1 2 3 4 5 6	
55. Since learning of our infertility, I have sometimes tried to convince myself, and others, that I do not want children.				1 2 3 4 5 6	
56. Since realizing our infertility, I have found myself bargaining with God or Fate in hopes that I(my wife) will conceive.				1 2 3 4 5 6	
57. I often have felt as if I am the only one around experiencing infertility.				1 2 3 4 5 6	
58. Since I had grown up believing that pregnancy should be guarded against, I was amazed when I learned of our infertility.				1 2 3 4 5 6	
59. I have acknowledged that it is time to put the pain surrounding our infertility behind us and consider other life styles such as adoption or child free living.				1 2 3 4 5 6	
60. I sometimes have avoided friends and family members who know of our infertility because I do not want to discuss the issue or hear their advice.				1 2 3 4 5 6	
61. Our infertility has made me feel that many of life's dreams are lost.				1 2 3 4 5 6	
62. I have considered that I/my spouse did something wrong years ago and our infertility is punishment for such.				1 2 3 4 5 6	
63. I have not hesitated to seek out medical advice and/or treatment in reference to our infertility.				1 2 3 4 5 6	
64. At times our infertility has made me feel hopeless and out of control of my life.				1 2 3 4 5 6	
65. I have not considered the possibility that our infertility is punishment for past thoughts or acts.				1 2 3 4 5 6	
66. Our infertility came as no surprise to me.				1 2 3 4 5 6	

The statements which follow explore reactions and feelings commonly realized by infertile individuals. Previously you were asked to respond to each of these statements by reviewing the years since recognizing your/your spouse's infertility. You are now asked to respond to each of these statements in terms of your present reactions and feelings regarding your/your spouse's infertility. For each statement, decide which of the possible responses, listed at the top of each page, best applies to you currently. Circle the appropriate response number which follows each statement. Only one number should be circled.

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
67. I cannot believe that we are infertile.				1 2 3 4 5 6	
68. Many months I hope for us to conceive, only to feel despair when my(my wife's) menstrual cycle begins.				1 2 3 4 5 6	
69. I am angry that I am treated impersonally by infertility medical personnel.				1 2 3 4 5 6	
70. I do not hesitate seeking out medical advice and/or treatment in reference to our infertility.				1 2 3 4 5 6	
71. I do not feel guilty when thinking about our infertility.				1 2 3 4 5 6	
72. I never direct my anger over our infertility towards women/couples who seem to conceive with ease.				1 2 3 4 5 6	
73. Our infertility is not surprising to me.				1 2 3 4 5 6	
74. I am putting the pain surrounding our infertility behind me and considering other life styles such as adoption or child free living.				1 2 3 4 5 6	
75. Even though months and years have passed without conception, admitting infertility to myself is difficult.				1 2 3 4 5 6	
76. Scheduled sex, especially during my(my wife's) mid cycle, has replaced spontaneous sexual relations between my spouse and myself.				1 2 3 4 5 6	
77. I sometimes avoid friends and family members who know of our infertility because I do not want to discuss the issue or hear their advice.				1 2 3 4 5 6	
78. At times, I deal with our inability to conceive by trying to push it out of my mind.				1 2 3 4 5 6	
79. After avoiding pregnancy for a number of years, I am truly shocked that we cannot conceive.				1 2 3 4 5 6	
80. I feel isolated from my spouse who often seems not to understand my feelings regarding our infertility.				1 2 3 4 5 6	

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
81. I experience little or no anger towards myself or others due to our infertility.				1 2 3 4 5 6	
82. My pain over our infertility is less overwhelming and I am learning to deal with it more effectively.				1 2 3 4 5 6	
83. At times our infertility makes me feel hopeless and out of control of my life.				1 2 3 4 5 6	
84. I have come to terms with our infertility and view the future from a more positive perspective.				1 2 3 4 5 6	
85. I am rechanneling my energy which once was spent on dealing with our infertility into more positive directions.				1 2 3 4 5 6	
86. I consider it possible that I/my spouse did something wrong years ago and our infertility is punishment for such.				1 2 3 4 5 6	
87. In order to deal with the fact of our infertility, I sometimes act as though it does not bother me.				1 2 3 4 5 6	
88. I wonder if our infertility is punishment for some past mistake.				1 2 3 4 5 6	
89. I often feel as if I am the only one around experiencing infertility.				1 2 3 4 5 6	
90. The knowledge of our infertility remains unbelievable.				1 2 3 4 5 6	
91. I now view myself as less adequate sexually than before knowing of our infertility.				1 2 3 4 5 6	
92. I sometimes try to convince myself, and others, that I do not want children.				1 2 3 4 5 6	
93. Believing pregnancy to be a personal choice, I am shocked that we are infertile.				1 2 3 4 5 6	
94. Few people understand the sense of loss which I feel in response to our infertility.				1 2 3 4 5 6	
95. For me, infertility means the death of hopes, dreams, and plans for this period of my life.				1 2 3 4 5 6	
96. Sexual relations remain as enjoyable now as they were before knowing of our infertility.				1 2 3 4 5 6	
97. I often feel aggravated when friends and family members do not seem to understand our infertility.				1 2 3 4 5 6	
98. I see sexual relations as less of a pleasure now than they were before realizing our infertility.				1 2 3 4 5 6	

Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1	2	3	4	5	6
99. I feel so alone sometimes, so unsupported, in my attempts to deal with our infertility.				1 2 3 4 5 6	
100. I have fewer orgasms(am impotent more frequently) now that sexual relations are "scheduled."				1 2 3 4 5 6	
101. Our infertility makes me feel that many of life's dreams are lost.				1 2 3 4 5 6	
102. Since I grew up believing that pregnancy should be guarded against, I am still amazed when I think of our infertility.				1 2 3 4 5 6	
103. I sometimes avoid social events which mean my being around new parents and/or young children.				1 2 3 4 5 6	
104. My grief concerning our infertility is especially hard to deal with because the loss is so intangible.				1 2 3 4 5 6	
105. I often feel guilty when recalling past behaviors and wonder if I can do something as a means of atonement in order for us to achieve pregnancy.				1 2 3 4 5 6	
106. I do not consider the possibility that our infertility is punishment for past thoughts or acts.				1 2 3 4 5 6	
107. Our infertility does not affect my being with friends who are pregnant, friends whose wives are pregnant, and/or those who have recently had a baby.				1 2 3 4 5 6	
108. I find myself bargaining with God or Fate in hopes that I(my wife) will conceive.				1 2 3 4 5 6	
109. I am often angry at my spouse because he(she) does not seem to understand my feelings and reactions in response to our infertility.				1 2 3 4 5 6	
110. At times, our infertility makes me feel angry at myself for failing to perform as other women(men).				1 2 3 4 5 6	
111. I hesitate to describe myself/my spouse as infertile to others.				1 2 3 4 5 6	
112. Even though I still want children, I have put our infertility in its proper place and I am taking steps to go on with my life.				1 2 3 4 5 6	
113. I now can face a future without children with increased optimism.				1 2 3 4 5 6	
114. Sexual relations with my spouse are less appealing since we began putting so much effort into achieving pregnancy.				1 2 3 4 5 6	



The following statements explore attitudes regarding counseling and/or outside support as one deals with infertility. Please respond to each in terms of how your needs would best be met as you deal with your infertility. For each statement decide which of the possible responses, listed below, best applies to you. Circle the appropriate response number which follows each statement. Only one number should be circled for each statement.

- | Strongly<br>Disagree | Disagree   | Somewhat<br>Disagree | Somewhat<br>Agree | Agree | Strongly<br>Agree |   |   |   |   |
|----------------------|--|----------------------|-------------------|-------|-------------------|---|---|---|---|
| 1                    | 2  | 3                    | 4                 | 5     | 6                 |   |   |   |   |
| 115.                 | I would consider individual counseling with a mental health professional to work through my feelings and reactions to infertility.   |                      |                   | 1     | 2                 | 3 | 4 | 5 | 6 |
| 116.                 | I would consider couple counseling with my spouse, led by a mental health professional, in order to discuss our concerns regarding infertility.  |                      |                   | 1     | 2                 | 3 | 4 | 5 | 6 |
| 117.                 | I would consider group counseling with members of my own sex, led by a mental health professional, to work through my feelings and reactions to infertility.                                   |                      |                   | 1     | 2                 | 3 | 4 | 5 | 6 |
| 118.                 | My thoughts and feelings regarding infertility could be explored in a group of both men and women which was led by a mental health professional.   |                      |                   | 1     | 2                 | 3 | 4 | 5 | 6 |
| 119.                 | I would consider group counseling for infertile couples in which husbands and wives shared thoughts and feelings concerning infertility with a mental health professional and with each other. |                      |                   | 1     | 2                 | 3 | 4 | 5 | 6 |
| 120.                 | I would consider a peer support group for both individuals and couples which was led by people who have experienced infertility as a means of exploring common feelings and concerns.          |                      |                   | 1     | 2                 | 3 | 4 | 5 | 6 |
| 121.                 | Of the six options for counseling to deal with infertility, which <u>one</u> would you <u>most likely</u> be involved in? Indicate such by placing an X beside your choice.                    |                      |                   |       |                   |   |   |   |   |

- ☐ Individual counseling led by a mental health professional
- ☐ Couple counseling with my spouse led by a mental health professional
- ☐ Group counseling with members of my own sex led by a mental health professional
- ☐ Group counseling for women and men led by a mental health professional
- ☐ Group counseling for couples led by a mental health professional
- ☐ Involvement in a peer support group led by other infertile individuals and/or couples

Male/Female

Agency \_\_\_\_\_

ID # \_\_\_\_\_

Please read instructions for each instrument carefully and respond as directed.

Beck Depression Inventory

Rosenberg Self-Esteem Scale

Adult Nowicki-Strickland Internal-External Locus of Control Scale

## BECK DEPRESSION INVENTORY

On this questionnaire are groups of statements. Please read each group of statements carefully. Then pick out the one statement in each group which best describes the way you have been feeling the PAST WEEK, INCLUDING TODAY! Circle the number beside the statement you picked. If several statements in the group seem to apply equally well, circle each one. Be sure to read all statements in each group before making your choice.

1.   0   I do not feel sad.  
     1   I feel sad.  
     2   I am sad all the time and I can't snap out of it.  
     3   I am so sad or unhappy that I can't stand it.
2.   0   I am not particularly discouraged about the future.  
     1   I feel discouraged about the future.  
     2   I feel I have nothing to look forward to.  
     3   I feel that the future is hopeless and that things cannot improve.
3.   0   I do not feel like a failure.  
     1   I feel I have failed more than the average person.  
     2   As I look back on my life, all I can see is a lot of failures.  
     3   I feel I am a complete failure as a person.
4.   0   I get as much satisfaction out of things as I used to.  
     1   I don't enjoy things that way I used to.  
     2   I don't get real satisfaction out of anything anymore.  
     3   I am dissatisfied or bored with everything.
5.   0   I don't feel particularly guilty.  
     1   I feel guilty a good part of the time.  
     2   I feel quite guilty most of the time.  
     3   I feel guilty all of the time.
6.   0   I don't feel I am being punished.  
     1   I feel I may be punished.  
     2   I expect to be punished.  
     3   I feel I am being punished.
7.   0   I don't feel disappointed in myself.  
     1   I am disappointed in myself.  
     2   I am disgusted with myself.  
     3   I hate myself.

8. 0 I don't feel I am any worse than anybody else.  
1 I am critical of myself for my weaknesses or mistakes.  
2 I blame myself all the time for my faults.  
3 I blame myself for everything bad that happens.
9. 0 I don't have any thoughts of killing myself.  
1 I have thoughts of killing myself, but I would not carry them out.  
2 I would like to kill myself.  
3 I would kill myself if I had the chance.
10. 0 I don't cry any more than usual.  
1 I cry more now than I used to.  
2 I cry all the time now.  
3 I used to be able to cry, but now I can't cry even though I want to.
11. 0 I am no more irritated now than I ever am.  
1 I get annoyed or irritated more easily than I used to.  
2 I feel irritated all the time now.  
3 I don't get irritated at all by the things that used to irritate me.
12. 0 I have not lost interest in other people.  
1 I am less interested in other people than I used to be.  
2 I have lost most of my interest in other people.  
3 I have lost all of my interest in other people.
13. 0 I make decisions about as well as I ever could.  
1 I put off making decisions more than I used to.  
2 I have greater difficulty in making decisions than before.  
3 I can't make decisions at all anymore.
14. 0 I don't feel I look any worse than I used to.  
1 I am worried that I am looking old or unattractive.  
2 I feel that there are permanent changes in my appearance that make me look unattractive.  
3 I believe that I look ugly.
15. 0 I can work about as well as before.  
1 It takes an extra effort to get started at doing something.  
2 I have to push myself very hard to do anything.  
3 I can't do any work at all.
16. 0 I can sleep as well as usual.  
1 I don't sleep as well as I used to.  
2 I wake up 1-2 hours earlier than usual and find it hard to get back to sleep.  
3 I wake up several hours earlier than I used to and cannot get back to sleep.
17. 0 I don't get more tired than usual.  
1 I get tired more easily than I used to.  
2 I get tired from doing almost anything.  
3 I am too tired to do anything.

18. 0 My appetite is no worse than usual.  
1 My appetite is not as good as it used to be.  
2 My appetite is much worse now.  
3 I have no appetite at all anymore.
19. 0 I haven't lost much weight, if any, lately.  
1 I have lost more than 5 pounds. I am purposely trying to lose weight  
2 I have lost more than 10 pounds. by eating less. Yes \_\_\_\_\_ No \_\_\_\_\_  
3 I have lost more than 15 pounds.
20. 0 I am no more worried about my health than usual.  
1 I am worried about physical problems such as aches and pains; or upset stomach; or constipation.  
2 I am very worried about physical problems and it's hard to think of much else.  
3 I am so worried about my physical problems that I cannot think about anything else.
21. 0 I have not noticed any recent change in my interest in sex.  
1 I am less interested in sex than I used to be.  
2 I am much less interested in sex now.  
3 I have lost interest in sex completely.

## ROSENBERG SELF-ESTEEM SCALE

Below is a list of statements dealing with your general feelings about yourself. If you Agree with the Statement, circle A. If you Strongly Agree, circle SA. If you Disagree, circle D. If you Strongly Disagree, circle SD.

	1 <u>Strongly Agree</u>	2 <u>Agree</u>	3 <u>Disagree</u>	4 <u>Strongly Disagree</u>
1. On the whole, I am satisfied with myself.	SA	A	D	SD
2. At times I think I am no good at all.	SA	A	D	SD
3. I feel that I have a number of good qualities.	SA	A	D	SD
4. I am able to do things as well as most other people.	SA	A	D	SD
5. I feel I do not have much to be proud of.	SA	A	D	SD
6. I certainly feel useless at times.	SA	A	D	SD
7. I feel that I'm a person of worth, at least on an equal plane with others.	SA	A	D	SD
8. I wish I could have more respect for myself.	SA	A	D	SD
9. All in all, I am inclined to feel that I am a failure.	SA	A	D	SD
10. I take a positive attitude toward myself.	SA	A	D	SD

## ADULT NOWICKI-STRICKLAND INTERNAL-EXTERNAL

## LOCUS OF CONTROL SCALE

This questionnaire deals with ideas and beliefs held by men and women your age. You are to answer the following questions based on the way you feel. Read each question carefully. If your response is "Yes" circle the Y which follows the question, and if your answer is "No" circle the N which follows the question. Pick only one response to each question.

- |   |   |   |
|---|---|---|
| 1. Do you believe that most problems will solve themselves if you just don't fool with them?                        | Y | N |
| 2. Do you believe that you can stop yourself from catching a cold?  | Y | N |
| 3. Are some people just born lucky?   | Y | N |
| 4. Most of the time do you feel that getting good grades meant a great deal to you?                                 | Y | N |
| 5. Are you often blamed for things that just aren't your fault?   | Y | N |
| 6. Do you believe that if somebody studies hard enough he or she can pass any subject?                              | Y | N |
| 7. Do you feel that most of the time it doesn't pay to try hard because things never turn out right anyway?         | Y | N |
| 8. Do you feel that if things start out well in the morning that it's going to be a good day no matter what you do? | Y | N |
| 9. Do you feel that most of the time parents listen to what their children have to say?                             | Y | N |
| 10. Do you believe that wishing can make good things happen?  | Y | N |
| 11. When you get punished does it usually seem it's for no good reason at all?                                      | Y | N |
| 12. Most of the time do you find it hard to change a friend's (mind) opinion?                                       | Y | N |
| 13. Do you think that cheering more than luck helps a team to win?  | Y | N |
| 14. Did you feel that it's nearly impossible to change your parent's mind about anything?                           | Y | N |

- |  |   |   |
|--|---|---|
| 15. Do you believe that parents should allow children to make most of their own decisions?   | Y | N |
| 16. Do you feel that when you do something wrong there's very little you can do to make it right?                                    | Y | N |
| 17. Do you believe that most people are just born good at sports?  | Y | N |
| 18. Are most of the other people your age stronger than you are?   | Y | N |
| 19. Do you feel that one of the best ways to handle most problems is just not to think about them?                                   | Y | N |
| 20. Do you feel that you have a lot of choice in deciding whom your friends are?   | Y | N |
| 21. If you find a four leaf clover do you believe that it might bring you good luck?   | Y | N |
| 22. Did you often feel that whether you did your homework has much to do with what kinds of grades you got?                          | Y | N |
| 23. Do you feel that when a person your age decides to hit you there's little you can do to stop him or her?                         | Y | N |
| 24. Have you ever had a good luck charm?   | Y | N |
| 25. Do you believe that whether or not people like you depends on how you act?   | Y | N |
| 26. Did your parents usually help if you asked them to?  | Y | N |
| 27. Have you felt that when people were angry to you it was usually for no reason at all?  | Y | N |
| 28. Most of the time, do you feel that you can change what might happen tomorrow by what you do today?                               | Y | N |
| 29. Do you believe that when bad things are going to happen they just are going to happen no matter what you try to do to stop them? | Y | N |
| 30. Do you think that people can get their own way if they just keep trying?   | Y | N |
| 31. Most of the time do you find it useless to try to get your own way at home?  | Y | N |
| 32. Do you feel that when good things happen they happen because of hard work?   | Y | N |
| 33. Do you feel that when somebody your age wants to be your enemy there's little you can do to change matters?                      | Y | N |



- |  |   |   |
|--|---|---|
| 34. Do you feel that it's easy to get friends to do what you want them to?   | Y | N |
| 35. Do you usually feel that you have little to say about what you get to eat at home?   | Y | N |
| 36. Do you feel that when someone doesn't like you there's little you can do about it?   | Y | N |
| 37. Did you usually feel that it was almost useless to try in school because most other children were just plain smarter than you are? | Y | N |
| 38. Are you the kind of person who believes that planning ahead makes things turn out better?  | Y | N |
| 39. Most of the time, do you feel that you have little to say about what your family decides to do?                                    | Y | N |
| 40. Do you think it's better to be smart than to be lucky?   | Y | N |

APPENDIX D  
TABLES OF MEANS AND STANDARD DEVIATIONS,  
SOURCE TABLES, AND POST HOC RESULTS  
FOR RESEARCH QUESTION 2

Table D-1

Group Means and Standard Deviations  
for Attitudes Regarding Parenthood:  
Gender by Religion

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	15.95	4.51
Males		14.91	4.57

Table D-3

Group Means and Standard Deviations  
for Attitudes Regarding Parenthood:  
Gender by Psychology

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	18.27	2.93
Males		18.15	2.72

Table D-5

Group Means and Standard Deviations  
for Attitudes Regarding Parenthood:  
Gender by Sociology

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	20.39	4.76
Males		19.54	3.80

Table D-2

Source Table for  
Attitudes Regarding  
Parenthood: Gender  
by Religion

Source	df	t Value
Gender	73	2.07

Table D-4

Source Table for  
Attitudes Regarding  
Parenthood: Gender  
by Psychology

Source	df	t Value
Gender	73	.30

Table D-6

Source Table for  
Attitudes Regarding  
Parenthood: Gender  
by Sociology

Source	df	t Value
Gender	73	1.80

Table D-7

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Age by Religion

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	18.00	8.00
25-29 years	25	15.48	4.28
30-34 years	30	16.47	4.31
35-39 years	14	15.79	4.95
> 39 years	2	12.00	.00

Table D-9

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Age by Psychology

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	20.00	2.65
25-29 years	25	18.76	2.44
30-34 years	30	18.83	2.53
35-39 years	14	15.86	3.70
> 39 years	2	18.00	1.41

Table D-11

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Age by Sociology

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	20.00	6.56
25-29 years	25	20.04	4.39
30-34 years	30	20.73	4.79
35-39 years	14	19.76	4.90
> 39 years	2	24.50	3.54

Table D-13

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Duration of Infertility by Religion

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	13.20	5.14
Between 2 and 5 years	36	15.94	4.57
> 5 years	28	16.93	3.91

Table D-8

Source Table for Female Attitudes  
Regarding Parenthood:  
Age by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	57.72	14.43	.70
Within Groups	69	1424.06	20.64	
Total	73	1481.78		

Table D-10

Source Table for Female Attitudes  
Regarding Parenthood:  
Age by Psychology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	106.15	26.55	3.51
Within Groups	69	522.44	7.57	
Total	73	628.59		

Table D-12

Source Table for Female Attitudes  
Regarding Parenthood:  
Age by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	45.95	11.49	.51
Within Groups	69	1539.68	22.31	
Total	73	1585.64		

Table D-14

Source Table for Female Attitudes  
Regarding Parenthood:  
Duration of Infertility by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	102.44	51.22	2.64
Within Groups	71	1379.35	19.43	
Total	73	1481.78		

Table D-15

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Duration of Infertility by Psychology

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	17.80	2.62
Between 2 and 5 years	36	18.33	2.78
> 5 years	28	18.36	3.30

Table D-17

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Duration of Infertility by Sociology

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	19.20	3.91
Between 2 and 5 years	36	21.14	4.34
> 5 years	28	19.86	5.26

Table D-19

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Origin of Infertility by Religion

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	16.04	4.81
Male Only	14	17.07	3.93
Female and Male	20	16.40	4.01
Cause Unknown	13	13.85	4.96

Table D-21

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Origin of Infertility by Psychology

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	19.22	2.49
Male Only	14	17.79	4.04
Female and Male	20	18.05	2.96
Cause Unknown	13	17.15	1.91

Table D-16

Source Table for Female Attitudes  
Regarding Parenthood:  
Duration of Infertility by Psychology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	2.57	1.28	.15
Within Groups	71	626.03	8.83	
Total	73	628.59		

Table D-18

Source Table for Female Attitudes  
Regarding Parenthood:  
Duration of Infertility by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	42.30	21.15	.97
Within Groups	71	1543.33	21.74	
Total	73	1585.64		

Table D-20

Source Table for Female Attitudes  
Regarding Parenthood:  
Origin of Infertility by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	79.40	26.47	1.32
Within Groups	70	1402.38	20.03	
Total	73	1481.78		

Table D-22

Source Table for Female Attitudes  
Regarding Parenthood:  
Origin of Infertility by Psychology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	44.93	14.98	1.80
Within Groups	70	583.67	8.34	
Total	73	628.59		

Table D-23

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Origin of Infertility by Sociology

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	20.89	4.45
Male Only	14	19.57	4.26
Female and Male	20	21.70	5.24
Cause Unknown	13	18.23	4.11

Table D-25

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Present Treatment Status by Religion

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	15.58	4.15
Medical Treat. Only	14	14.93	3.99
3rd Party Proc. Only	31	16.32	5.00
No Med. Treat. and No 3rd Party Proc.	10	16.90	4.51

Table D-27

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Present Treatment Status by Psychology

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	18.89	2.60
Medical Treat. Only	14	18.36	3.97
3rd Party Proc. Only	31	17.71	2.66
No Med. Treat. and No 3rd Party Proc.	10	18.70	2.79

Table D-29

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Present Treatment Status by Sociology

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	21.00	4.36
Medical Treat. Only	14	20.71	4.84
3rd Party Proc. Only	31	19.13	4.79
No Med. Treat. and No 3rd Party Proc.	10	22.70	3.95

Table D-24

Source Table for Female Attitudes  
Regarding Parenthood:  
Origin of Infertility by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	111.03	37.01	1.76
Within Groups	70	1474.60	21.07	
Total	73	1585.64		

Table D-26

Source Table for Female Attitudes  
Regarding Parenthood:  
Present Treatment Status by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	30.55	10.18	.49
Within Groups	70	1451.23	20.73	
Total	73	1481.78		

Table D-28

Source Table for Female Attitudes  
Regarding Parenthood:  
Present Treatment Status by Psychology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	19.10	6.37	.73
Within Groups	70	609.49	8.71	
Total	73	628.59		

Table D-30

Source Table for Female Attitudes  
Regarding Parenthood:  
Present Treatment Status by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	111.19	37.06	1.76
Within Groups	70	1474.44	21.06	
Total	73	1585.64		

Table D-31

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Religion by Religion

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	16.33	3.98
Protestant	38	15.84	4.10
Other	24	17.88	3.54
None	6	8.50	3.67

Table D-33

Tukey Post Hoc Results for Female Attitudes Regarding  
Parenthood: Religion by Religion

Mean	Group	Group			
		None	Protestant	Catholic	Other
8.50	None				
15.84	Protestant	*			
16.33	Catholic	*			
17.88	Other	*			

\* $p < .05$

Table D-34

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Religion by Psychology

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	19.83	3.13
Protestant	38	17.45	3.10
Other	24	19.38	2.46
None	6	17.50	1.52

Table D-36

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Religion by Sociology

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	18.17	6.31
Protestant	38	20.16	4.49
Other	24	22.00	4.45
None	6	17.67	3.01

Table D-32

Source Table for Female Attitudes  
Regarding Parenthood:  
Religion by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	423.27	141.09	9.33*
Within Groups	70	1058.51	15.12	
Total	73	1481.78		

\* $p < .01$

Table D-35

Source Table for Female Attitudes  
Regarding Parenthood:  
Religion by Psychology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	73.24	24.41	3.08
Within Groups	70	555.35	7.93	
Total	73	628.59		

Table D-37

Source Table for Female Attitudes  
Regarding Parenthood:  
Religion by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	138.42	46.14	2.23
Within Groups	70	1447.22	20.67	
Total	73	1585.64		

Table D-38

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Religiosity by Religion

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	6	8.67	3.98
One Time A Year	6	14.50	3.08
Several Times A Year	10	14.60	4.17
One Time A Week	34	17.09	3.72
Several Times A Week	18	17.44	4.26

Table D-40

Tukey Post Hoc Results for Female Attitudes Regarding  
Parenthood: Religiosity by Religion

		Group				
Mean	Group	No Religious Service Attendance	One Time A Year	Several Times A Year	One Time A Week	Several Times A Week
8.67	No Religious Service Attendance					
14.50	One Time A Year					
14.60	Several Times A Year	*				
17.09	One Time A Week	*				
17.44	Several Times A Week	*				

\*p < .05

Table D-41

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Religiosity by Psychology

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	6	17.00	1.67
One Time A Year	6	17.50	1.05
Several Times A Year	10	18.70	3.16
One Time A Week	34	18.29	3.32
Several Times A Week	18	18.67	2.85

Table D-43

Group Means and Standard Deviations for  
Female Attitudes Regarding Parenthood:  
Religiosity by Sociology

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	6	18.33	3.50
One Time A Year	6	20.17	3.31
Several Times A Year	10	21.40	6.06
One Time A Week	34	19.94	5.19
Several Times A Week	18	21.44	3.33

Table D-39

Source Table for Female Attitudes  
Regarding Parenthood:  
Religiosity by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	433.37	108.34	7.13*
Within Groups	69	1048.41	15.19	
Total	73	1481.78		

\*p < .01

Table D-42

Source Table for Female Attitudes  
Regarding Parenthood:  
Religiosity by Psychology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	17.94	4.48	.51
Within Groups	69	610.66	8.85	
Total	73	628.59		

Table D-44

Source Table for Female Attitudes  
Regarding Parenthood:  
Religiosity by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	62.74	15.69	.71
Within Groups	69	1522.89	22.07	
Total	73	1585.64		



Table D-45

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Age by Religion

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	16.33	6.11
25-29 years	17	14.88	3.97
30-34 years	34	16.21	4.93
35-39 years	14	12.64	2.71
> 39 years	6	12.17	4.96

Table D-47

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Age by Psychology

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	19.67	2.08
25-29 years	17	18.06	1.98
30-34 years	34	18.76	2.20
35-39 years	14	17.79	2.72
> 39 years	6	15.00	5.14

Table D-49

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Age by Sociology

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	23.33	2.89
25-29 years	17	19.47	3.56
30-34 years	34	20.06	3.58
35-39 years	14	17.64	3.82
> 39 years	6	19.33	4.93

Table D-51

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Duration of Infertility by Religion

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	13.80	4.44
Between 2 and 5 years	36	14.36	4.74
> 5 years	28	16.00	4.33

Table D-46

Source Table for Male Attitudes  
Regarding Parenthood:  
Age by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	180.30	45.08	2.31
Within Groups	69	1346.04	19.51	
Total	73	1526.34		

Table D-48

Source Table for Male Attitudes  
Regarding Parenthood:  
Age by Psychology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	81.28	20.32	3.05
Within Groups	69	460.08	6.67	
Total	73	541.36		

Table D-50

Source Table for Male Attitudes  
Regarding Parenthood:  
Age by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	103.05	25.76	1.86
Within Groups	69	953.33	13.82	
Total	73	1056.38		

Table D-52

Source Table for Male Attitudes  
Regarding Parenthood:  
Duration of Infertility by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	56.43	28.22	1.36
Within Groups	71	1469.91	20.70	
Total	73	1526.34		

Table D-53

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Duration of Infertility by Psychology

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	18.10	2.56
Between 2 and 5 years	36	17.97	2.87
> 5 years	28	18.39	2.66

Table D-55

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Duration of Infertility by Sociology

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	18.80	4.89
Between 2 and 5 years	36	20.19	3.29
> 5 years	28	18.96	4.00

Table D-57

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Origin of Infertility by Religion

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	14.56	4.61
Medical Problems			
Male Only	14	16.07	3.75
Medical Problems			
Female and Male	20	14.45	4.58
Medical Problems			
Cause Unknown	13	15.08	5.51

Table D-59

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Origin of Infertility by Psychology

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	18.74	1.83
Medical Problems			
Male Only	14	17.36	2.10
Medical Problems			
Female and Male	20	18.10	3.51
Medical Problems			
Cause Unknown	13	17.85	3.46

Table D-54

Source Table for Male Attitudes  
Regarding Parenthood:  
Duration of Infertility by Psychology

Source	df	Sum of Squares	Mean Squares	F
Between Groups	2	2.81	1.41	.19
Within Groups	71	538.55	7.59	
Total	73	541.36		

Table D-56

Source Table for Male Attitudes  
Regarding Parenthood:  
Duration of Infertility by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	30.18	15.09	1.04
Within Groups	71	1026.20	14.45	
Total	73	1056.38		

Table D-58

Source Table for Male Attitudes  
Regarding Parenthood:  
Origin of Infertility by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	26.87	8.96	.42
Within Groups	70	1499.47	21.42	
Total	73	1526.34		

Table D-60

Source Table for Male Attitudes  
Regarding Parenthood:  
Origin of Infertility by Psychology

Source	df	Sum of Squares	Mean Squares	F
Between Groups	3	19.47	6.49	.87
Within Groups	70	521.89	7.46	
Total	73	541.36		

Table D-61

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Origin of Infertility by Sociology

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	19.67	3.73
Medical Problems			
Male Only	14	19.14	4.26
Medical Problems			
Female and Male	20	20.05	3.78
Medical Problems			
Cause Unknown	13	18.92	3.89

Table D-63

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Present Treatment Status by Religion

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	14.42	4.69
Medical Treat. Only	14	13.29	5.27
3rd Party Proc. Only	31	16.03	4.29
No Med. Treat. and No 3rd Party Proc.	10	14.60	3.86

Table D-65

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Present Treatment Status by Psychology

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	18.16	3.29
Medical Treat. Only	14	18.00	2.66
3rd Party Proc. Only	31	18.00	2.59
No Med. Treat. and No 3rd Party Proc.	10	18.80	2.30

Table D-67

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Present Treatment Status by Sociology

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	20.68	3.09
Medical Treat. Only	14	19.07	4.18
3rd Party Proc. Only	31	18.71	4.04
No Med. Treat. and No 3rd Party Proc.	10	20.60	3.44

Table D-62

Source Table for Male Attitudes  
Regarding Parenthood:  
Origin of Infertility by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	12.79	4.26	.29
Within Groups	70	1043.59	14.91	
Total	73	1056.38		

Table D-64

Source Table for Male Attitudes  
Regarding Parenthood:  
Present Treatment Status by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	81.48	27.16	1.32
Within Groups	70	1444.86	20.64	
Total	73	1526.34		

Table D-66

Source Table for Male Attitudes  
Regarding Parenthood:  
Present Treatment Status by Psychology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	5.24	1.75	.23
Within Groups	70	536.13	7.66	
Total	73	541.36		

Table D-68

Source Table for Male Attitudes  
Regarding Parenthood:  
Present Treatment Status by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	60.56	20.19	1.42
Within Groups	70	995.82	14.23	
Total	73	1056.38		

Table D-69

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Religion by Religion

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	12.86	3.76
Protestant	31	15.42	3.76
Other	27	16.67	4.49
None	9	9.44	3.61

Table D-71

Tukey Post Hoc Results for Male Attitudes Regarding  
Parenthood: Religion by Religion

Mean	Group	Group			
		None	Protestant	Catholic	Other
9.44	None				
12.86	Catholic				
15.42	Protestant	*			
16.67	Other	*			

\*p < .05

Table D-72

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Religion by Psychology

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	18.57	1.51
Protestant	31	18.10	2.65
Other	27	18.33	3.08
None	9	17.44	2.83

Table D-74

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Religion by Sociology

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	18.00	3.83
Protestant	31	18.58	3.57
Other	27	21.07	3.46
None	9	19.44	4.56

Table D-70

Source Table for Male Attitudes  
Regarding Parenthood:  
Religion by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	389.71	129.90	8.00*
Within Groups	70	1136.63	16.24	
Total	73	1526.34		

\*p < .01

Table D-73

Source Table for Male Attitudes  
Regarding Parenthood:  
Religion by Psychology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	6.72	2.24	.29
Within Groups	70	534.65	7.64	
Total	73	541.36		

Table D-75

Source Table for Male Attitudes  
Regarding Parenthood:  
Religion by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	108.76	36.25	2.68
Within Groups	70	947.62	13.54	
Total	73	1056.38		

Table D-76

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Religiosity by Religion

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	7	9.00	3.32
One Time A Year	8	11.75	2.92
Several Times A Year	13	14.00	3.98
One Time A Week	26	16.12	4.01
Several Times A Week	20	17.25	4.14

Table D-77

Source Table for Male Attitudes  
Regarding Parenthood:  
Religiosity by Religion

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	482.43	120.61	7.97*
Within Groups	69	1043.90	15.13	
Total	73	1526.34		

\*p < .01

Table D-78

Tukey Post Hoc Results for Male Attitudes Regarding  
Parenthood: Religiosity by Religion

		Group				
Mean	Group	No Religious Service Attendance	One Time A Year	Several Times A Year	One Time A Week	Several Times A Week
9.00	No Religious Service Attendance					
11.75	One Time A Year					
14.00	Several Times A Year					
16.12	One Time A Week	*				
17.25	Several Times A Week	*	*			

\*p < .05

Table D-79

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Religiosity by Psychology

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	7	17.71	3.25
One Time A Year	8	17.75	3.77
Several Times A Year	13	17.38	2.14
One Time A Week	26	18.31	3.06
Several Times A Week	20	18.75	1.94

Table D-80

Source Table for Male Attitudes  
Regarding Parenthood:  
Religiosity by Psychology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	18.07	4.52	.60
Within Groups	69	523.29	7.58	
Total	73	541.36		

Table D-81

Group Means and Standard Deviations for  
Male Attitudes Regarding Parenthood:  
Religiosity by Sociology

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	7	19.29	3.64
One Time A Year	8	19.00	4.00
Several Times A Year	13	18.23	3.37
One Time A Week	26	20.23	4.07
Several Times A Week	20	19.80	3.81

Table D-82

Source Table for Male Attitudes  
Regarding Parenthood:  
Religiosity by Sociology

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	38.83	9.71	.66
Within Groups	69	1017.55	14.75	
Total	73	1056.38		

APPENDIX E  
TABLES OF MEANS AND STANDARD DEVIATIONS,  
SOURCE TABLES, AND POST HOC RESULTS  
FOR RESEARCH QUESTION 3

Table E-1

Group Means and Standard Deviations for Emotional and Behavioral Reactions Since Recognizing Infertility: Gender by Surprise

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	25.38	6.57
Males		21.43	6.76

Table E-3

Group Means and Standard Deviations for Emotional and Behavioral Reactions Since Recognizing Infertility: Gender by Denial

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	15.11	3.95
Males		12.84	4.01

Table E-5

Group Means and Standard Deviations for Emotional and Behavioral Reactions Since Recognizing Infertility: Gender by Anger

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	23.30	5.85
Males		17.38	5.70

Table E-7

Group Means and Standard Deviations for Emotional and Behavioral Reactions Since Recognizing Infertility: Gender by Isolation

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	21.42	6.50
Males		16.53	5.41

Table E-2

Source Table for Emotional and Behavioral Reactions Since Recognizing Infertility: Gender by Surprise

Source	df	t Value
Gender	73	4.26*

\* $p < .01$

Table E-4

Source Table for Emotional and Behavioral Reactions Since Recognizing Infertility: Gender by Denial

Source	df	t Value
Gender	73	4.04*

\* $p < .01$

Table E-6

Source Table for Emotional and Behavioral Reactions Since Recognizing Infertility: Gender by Anger

Source	df	t Value
Gender	73	8.42*

\* $p < .01$

Table E-8

Source Table for Emotional and Behavioral Reactions Since Recognizing Infertility: Gender by Isolation

Source	df	t Value
Gender	73	6.93*

\* $p < .01$

Table E-9

Group Means and Standard Deviations for  
Emotional and Behavioral Reactions Since  
Recognizing Infertility:  
Gender by Guilt

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	17.97	6.95
Males		13.59	5.99

Table E-11

Group Means and Standard Deviations for  
Emotional and Behavioral Reactions Since  
Recognizing Infertility:  
Gender by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	25.84	6.63
Males		19.11	6.20

Table E-13

Group Means and Standard Deviations for  
Emotional and Behavioral Reactions Since  
Recognizing Infertility:  
Gender by Resolution

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	25.93	6.53
Males		27.28	4.73

Table E-15

Group Means and Standard Deviations for  
Emotional and Behavioral Reactions Since  
Recognizing Infertility:  
Gender by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	17.89	7.33
Males		16.45	7.42

Table E-10

Source Table for  
Emotional and  
Behavioral Reactions  
Since Recognizing  
Infertility: Gender by  
Guilt

Source	df	t Value
Gender	73	4.74*

\* $p < .01$

Table E-12

Source Table for  
Emotional and  
Behavioral Reactions  
Since Recognizing  
Infertility: Gender by  
Depression/Grief

Source	df	t Value
Gender	73	9.46*

\* $p < .01$

Table E-14

Source Table for  
Emotional and  
Behavioral Reactions  
Since Recognizing  
Infertility: Gender by  
Resolution

Source	df	t Value
Gender	73	1.95

Table E-16

Source Table for  
Emotional and  
Behavioral Reactions  
Since Recognizing  
Infertility: Gender by  
Sexual Dysfunction

Source	df	t Value
Gender	73	1.79



Table E-17

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Surprise

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	25.67	4.04
25-29 years	25	24.68	8.07
30-34 years	30	26.67	4.66
35-39 years	14	22.79	7.15
> 39 years	2	32.50	2.12

Table E-19

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Denial

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	17.00	6.25
25-29 years	25	14.12	4.23
30-34 years	30	16.30	3.79
35-39 years	14	13.93	3.00
> 39 years	2	15.00	1.41

Table E-21

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Anger

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	26.33	4.51
25-29 years	25	22.68	6.25
30-34 years	30	23.83	5.68
35-39 years	14	21.79	5.79
> 39 years	2	29.00	2.83

Table E-23

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Isolation

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	26.00	6.93
25-29 years	25	20.04	7.06
30-34 years	30	22.80	5.47
35-39 years	14	19.00	6.43
> 39 years	2	28.00	7.07

Table E-18

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	257.77	64.44	1.54
Within Groups	69	2895.63	41.97	
Total	73	3153.41		

Table E-20

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	97.27	24.32	1.61
Within Groups	69	1041.87	15.10	
Total	73	1139.14		

Table E-22

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	142.83	35.71	1.04
Within Groups	69	2358.63	34.18	
Total	73	2501.46		

Table E-24

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	336.25	84.06	2.11
Within Groups	69	2747.76	39.82	
Total	73	3084.01		

Table E-25

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Guilt

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	16.67	7.37
25-29 years	25	17.76	7.00
30-34 years	30	18.77	7.29
35-39 years	14	15.79	6.07
> 39 years	2	26.00	2.83

Table E-27

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	27.33	6.66
25-29 years	25	24.36	7.05
30-34 years	30	27.30	5.91
35-39 years	14	23.86	6.72
> 39 years	2	34.00	2.83

Table E-29

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Resolution

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	20.00	11.27
25-29 years	25	27.32	5.91
30-34 years	30	25.40	6.13
35-39 years	14	27.71	5.44
> 39 years	2	13.00	1.41

Table E-31

Tukey Post Hoc Results for Female Emotional and Behavioral Reactions  
Since Recognizing Infertility: Age by Resolution

Mean	Group	Group				
		> 39 years	< 25 years	30-34 years	25-29 years	35-39 years
13.00	> 39 years					
20.00	< 25 years					
25.40	30-34 years					
27.32	25-29 years	*				
27.71	35-39 years	*				

\* $p < .05$

Table E-26

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	221.00	55.25	1.15
Within Groups	69	3308.95	47.96	
Total	73	3529.95		

Table E-28

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	313.61	78.40	1.87
Within Groups	69	2890.44	41.89	
Total	73	3204.05		

Table E-30

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	541.17	135.29	3.64*
Within Groups	69	2567.50	37.21	
Total	73	3108.66		

\* $p < .01$

Table E-32

Group Means and Standard Deviations for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Age by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	19.00	10.58
25-29 years	25	15.80	6.06
30-34 years	30	19.20	7.87
35-39 years	14	16.93	6.39
> 39 years	2	29.50	6.36

Table E-34

Group Means and Standard Deviations for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Surprise

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	25.80	7.39
Between 2 and 5 years	36	26.08	6.20
> 5 years	28	24.32	6.84

Table E-36

Group Means and Standard Deviations for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Denial

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	13.20	3.01
Between 2 and 5 years	36	15.11	4.21
> 5 years	28	15.79	3.79

Table E-38

Group Means and Standard Deviations for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Anger

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	21.10	6.37
Between 2 and 5 years	36	23.50	6.01
> 5 years	28	23.82	5.50

Table E-33

Source Table for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Age by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	446.91	111.73	2.22
Within Groups	69	3472.23	50.32	
Total	73	3919.14		

Table E-35

Source Table for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	50.95	25.47	.58
Within Groups	71	3102.46	43.70	
Total	73	3153.41		

Table E-37

Source Table for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	49.27	24.63	1.60
Within Groups	71	1089.87	15.35	
Total	73	1139.14		

Table E-39

Source Table for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	57.45	28.73	.83
Within Groups	71	2444.01	34.42	
Total	73	2501.46		

Table E-40

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Duration of Infertility by Isolation

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	19.30	7.41
Between 2 and 5 years	36	21.92	6.03
> 5 years	28	21.54	6.84

Table E-42

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Duration of Infertility by Guilt

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	16.60	8.30
Between 2 and 5 years	36	18.83	7.07
> 5 years	28	17.36	6.39

Table E-44

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Duration of Infertility by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	24.80	6.44
Between 2 and 5 years	36	26.03	6.43
> 5 years	28	25.96	7.13

Table E-46

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Duration of Infertility by Resolution

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	25.80	8.56
Between 2 and 5 years	36	25.00	6.10
> 5 years	28	27.18	6.30

Table E-41

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Duration of Infertility by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	54.20	27.10	.64
Within Groups	71	3029.81	42.67	
Total	73	3084.01		

Table E-43

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Duration of Infertility by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	56.12	28.06	.57
Within Groups	71	3473.83	48.93	
Total	73	3529.95		

Table E-45

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Duration of Infertility by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	12.52	6.26	.14
Within Groups	71	3191.54	44.95	
Total	73	3204.05		

Table E-47

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Duration of Infertility by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	74.96	37.48	.88
Within Groups	71	3033.71	42.73	
Total	73	3108.66		

Table E-48

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Duration of Infertility by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	17.60	6.47
Between 2 and 5 years	36	18.22	6.28
> 5 years	28	17.57	8.94

Table E-50

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Origin of Infertility by Surprise

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	25.59	6.01
Medical Problems			
Male Only	14	24.93	7.60
Medical Problems			
Female and Male	20	25.95	7.19
Medical Problems			
Cause Unknown	13	24.54	6.20

Table E-52

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Origin of Infertility by Denial

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	15.63	4.35
Medical Problems			
Male Only	14	15.14	3.98
Medical Problems			
Female and Male	20	15.45	4.02
Medical Problems			
Cause Unknown	13	13.46	2.73

Table E-54

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Origin of Infertility by Anger

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	25.11	5.67
Medical Problems			
Male Only	14	19.57	5.61
Medical Problems			
Female and Male	20	23.40	5.62
Medical Problems			
Cause Unknown	13	23.38	5.56

Table E-49

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Duration of Infertility by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	7.66	3.83	.07
Within Groups	71	3911.48	55.09	
Total	73	3919.14		

Table E-51

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Origin of Infertility by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	19.78	6.59	.15
Within Groups	70	3133.63	44.77	
Total	73	3153.41		

Table E-53

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Origin of Infertility by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	44.94	14.98	.96
Within Groups	70	1094.19	15.63	
Total	73	1139.14		

Table E-55

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Origin of Infertility by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	283.49	94.50	2.98
Within Groups	70	2217.97	31.69	
Total	73	2501.46		

Table E-56

Group Means and Standard Deviations for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Isolation

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	22.26	6.73
Medical Problems			
Male Only	14	17.64	6.74
Medical Problems			
Female and Male	20	22.55	6.25
Medical Problems			
Cause Unknown	13	22.00	5.18

Table E-58

Group Means and Standard Deviations for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Guilt

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	19.63	6.44
Medical Problems			
Male Only	14	15.86	6.63
Medical Problems			
Female and Male	20	17.90	7.85
Medical Problems			
Cause Unknown	13	16.92	6.81

Table E-60

Group Means and Standard Deviations for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	27.44	5.29
Medical Problems			
Male Only	14	22.14	7.84
Medical Problems			
Female and Male	20	25.90	7.07
Medical Problems			
Cause Unknown	13	26.38	6.20

Table E-62

Group Means and Standard Deviations for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Resolution

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	24.67	7.46
Medical Problems			
Male Only	14	27.57	6.01
Medical Problems			
Female and Male	20	26.00	5.67
Medical Problems			
Cause Unknown	13	26.69	6.41

Table E-57

Source Table for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	248.66	82.89	2.05
Within Groups	70	2835.35	40.51	
Total	73	3084.01		

Table E-59

Source Table for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	151.21	50.40	1.04
Within Groups	70	3378.73	48.27	
Total	73	3529.95		

Table E-61

Source Table for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	264.80	88.27	2.10
Within Groups	70	2939.26	41.99	
Total	73	3204.05		

Table E-63

Source Table for Female Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	88.46	29.49	.68
Within Groups	70	3020.20	43.15	
Total	73	3108.66		

Table E-64

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Origin of Infertility by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	17.52	6.96
Medical Problems			
Male Only	14	12.36	4.29
Medical Problems			
Female and Male	20	21.00	6.94
Medical Problems			
Cause Unknown	13	19.85	8.31

Table E-65

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Origin of Infertility by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	675.49	225.16	4.87*
Within Groups	70	3243.65	46.34	
Total	73	3919.14		

\* $p < .01$

Table E-66

Tukey Post Hoc Results for Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Origin of Infertility by Sexual Dysfunction

		Group			
Mean	Group	Male Only Medical Problems	Female Only Medical Problems	Cause Unknown	Female and Male Medical Problems
12.36	Male Only				
	Medical Problems				
17.52	Female Only				
	Medical Problems				
19.85	Cause Unknown	*			
21.00	Female and Male	*			
	Medical Problems				

\* $p < .05$

Table E-67

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Surprise

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	26.11	5.71
Medical Treat. Only	14	27.14	5.72
3rd Party Proc. Only	31	23.94	7.52
No Med. Treat. and No 3rd Party Proc.	10	26.00	5.98

Table E-68

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	122.03	40.68	.94
Within Groups	70	3031.37	43.31	
Total	73	3153.41		

Table E-69

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Denial

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	15.42	4.23
Medical Treat. Only	14	15.64	3.25
3rd Party Proc. Only	31	14.51	4.35
No Med. Treat. and No 3rd Party Proc.	10	15.60	3.20

Table E-71

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Anger

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	23.84	5.52
Medical Treat. Only	14	24.36	5.02
3rd Party Proc. Only	31	22.23	6.19
No Med. Treat. and No 3rd Party Proc.	10	24.10	6.77

Table E-73

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Isolation

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	22.47	4.64
Medical Treat. Only	14	21.29	5.93
3rd Party Proc. Only	31	20.39	7.49
No Med. Treat. and No 3rd Party Proc.	10	22.80	7.33

Table E-75

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Guilt

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	19.32	6.62
Medical Treat. Only	14	20.50	6.79
3rd Party Proc. Only	31	15.23	6.61
No Med. Treat. and No 3rd Party Proc.	10	20.40	6.80

Table E-70

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	19.15	6.38	.40
Within Groups	70	1119.99	16.00	
Total	73	1139.14		

Table E-72

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	63.40	21.13	.61
Within Groups	70	2438.06	34.83	
Total	73	2501.46		

Table E-74

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	73.46	24.49	.57
Within Groups	70	3010.55	43.01	
Total	73	3084.01		

Table E-76

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	416.52	138.84	3.12
Within Groups	70	3113.42	44.48	
Total	73	3529.95		



Table E-77

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	27.21	5.36
Medical Treat. Only	14	27.36	4.94
3rd Party Proc. Only	31	24.29	7.41
No Med. Treat. and No 3rd Party Proc.	10	25.90	8.03

Table E-79

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Resolution

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	22.26	5.41
Medical Treat. Only	14	25.29	4.73
3rd Party Proc. Only	31	27.84	6.69
No Med. Treat. and No 3rd Party Proc.	10	27.90	7.69

Table E-81

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	18.11	5.52
Medical Treat. Only	14	22.29	7.17
3rd Party Proc. Only	31	15.26	7.62
No Med. Treat. and No 3rd Party Proc.	10	19.50	7.06

Table E-83

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Surprise

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	27.17	5.27
Protestant	38	25.76	6.59
Other	24	23.79	6.13
None	6	27.50	9.27

Table E-78

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	142.39	47.46	1.09
Within Groups	70	3061.66	43.74	
Total	73	3204.05		

Table E-80

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	413.03	137.68	3.58
Within Groups	70	2695.63	38.51	
Total	73	3108.66		

Table E-82

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	512.05	170.68	3.51
Within Groups	70	3407.08	48.67	
Total	73	3919.14		

Table E-84

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	112.25	37.42	.86
Within Groups	70	3041.16	43.45	
Total	73	3153.41		

Table E-85

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Denial

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	14.33	3.50
Protestant	38	15.03	3.77
Other	24	16.29	4.15
None	6	11.67	3.01

Table E-87

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Anger

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	22.83	9.02
Protestant	38	23.00	5.60
Other	24	24.75	4.76
None	6	19.83	7.57

Table E-89

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Isolation

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	19.50	8.19
Protestant	38	20.97	6.68
Other	24	23.17	4.82
None	6	19.17	9.30

Table E-91

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Guilt

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	15.33	8.21
Protestant	38	16.92	7.52
Other	24	20.67	5.38
None	6	16.50	5.68

Table E-86

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	108.54	36.18	2.46
Within Groups	70	1030.60	14.72	
Total	73	1139.14		

Table E-88

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	127.29	42.43	1.25
Within Groups	70	2374.17	33.92	
Total	73	2501.46		

Table E-90

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	133.37	44.46	1.05
Within Groups	70	2950.64	42.15	
Total	73	3084.01		

Table E-92

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	271.02	90.34	1.94
Within Groups	70	3258.93	46.56	
Total	73	3529.95		

Table E-93

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	23.50	7.61
Protestant	38	24.89	6.85
Other	24	28.00	5.60
None	6	25.50	7.50

Table E-95

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Resolution

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	24.00	9.21
Protestant	38	27.37	5.32
Other	24	24.71	7.29
None	6	23.67	7.06

Table E-97

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	17.17	7.19
Protestant	38	17.24	7.02
Other	24	18.29	7.75
None	6	21.17	8.59

Table E-99

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Surprise

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	6	25.67	11.41
One Time A Year	6	25.00	3.90
Several Times A Year	10	30.00	3.40
One Time A Week	34	23.44	6.46
Several Times A Week	18	26.50	5.83

Table E-94

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	179.48	59.83	1.38
Within Groups	70	3024.58	43.21	
Total	73	3204.05		

Table E-96

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	167.53	55.84	1.33
Within Groups	70	2941.13	42.01	
Total	73	3108.66		

Table E-98

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	87.64	29.21	.53
Within Groups	70	3831.49	54.74	
Total	73	3919.14		

Table E-100

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	365.19	91.30	2.26
Within Groups	69	2788.22	40.41	
Total	73	3153.41		

Table E-101

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Denial

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	12.33	4.89
Service Attendance			
One Time A Year	6	14.50	4.18
Several Times A Year	10	16.90	3.04
One Time A Week	34	15.21	3.66
Several Times A Week	18	15.05	4.39

Table E-103

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Anger

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	20.50	8.17
Service Attendance			
One Time A Year	6	22.17	2.99
Several Times A Year	10	26.10	6.31
One Time A Week	34	23.12	6.02
Several Times A Week	18	23.39	5.05

Table E-105

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Isolation

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	20.50	9.67
Service Attendance			
One Time A Year	6	20.50	4.37
Several Times A Year	10	24.00	6.45
One Time A Week	34	20.76	6.84
Several Times A Week	18	21.83	5.46

Table E-107

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Guilt

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	18.17	7.73
Service Attendance			
One Time A Year	6	15.33	6.89
Several Times A Year	10	18.40	7.32
One Time A Week	34	18.18	7.15
Several Times A Week	18	18.17	6.78

Table E-102

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	80.90	20.22	1.32
Within Groups	69	1058.24	15.34	
Total	73	1139.14		

Table E-104

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	134.42	33.60	.98
Within Groups	69	2367.04	34.30	
Total	73	2501.46		

Table E-106

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	94.40	23.60	.54
Within Groups	69	2989.62	43.33	
Total	73	3084.01		

Table E-108

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	45.94	11.48	.23
Within Groups	69	3484.01	50.49	
Total	73	3529.95		

Table E-109

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	24.83	5.91
Service Attendance			
One Time A Year	6	22.83	5.12
Several Times A Year	10	28.00	6.70
One Time A Week	34	25.44	7.28
Several Times A Week	18	26.72	6.04

Table E-111

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Resolution

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	26.50	4.32
Service Attendance			
One Time A Year	6	24.00	2.76
Several Times A Year	10	25.00	7.81
One Time A Week	34	25.59	7.17
Several Times A Week	18	27.56	6.16

Table E-113

Group Means and Standard Deviations for  
Female Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	19.83	6.21
Service Attendance			
One Time A Year	6	21.00	4.52
Several Times A Year	10	22.20	8.61
One Time A Week	34	17.24	7.56
Several Times A Week	18	15.06	6.15

Table E-115

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Surprise

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	22.00	8.00
25-29 years	17	19.65	6.31
30-34 years	34	22.62	6.87
35-39 years	14	19.43	6.80
> 39 years	6	24.17	6.37

Table E-110

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	126.39	31.60	.71
Within Groups	69	3077.66	44.60	
Total	73	3204.05		

Table E-112

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	84.48	21.12	.48
Within Groups	69	3024.18	43.83	
Total	73	3108.66		

Table E-114

Source Table for Female Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	425.64	106.41	2.10
Within Groups	69	3493.50	50.63	
Total	73	3919.14		

Table E-116

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	203.99	51.00	1.12
Within Groups	69	3128.17	45.34	
Total	73	3332.16		

Table E-117

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Denial

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	13.33	5.86
25-29 years	17	12.41	4.50
30-34 years	34	12.91	3.77
35-39 years	14	12.64	4.20
> 39 years	6	13.83	3.76

Table E-119

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Anger

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	15.33	3.79
25-29 years	17	16.88	5.22
30-34 years	34	17.44	5.61
35-39 years	14	17.29	6.78
> 39 years	6	19.67	6.65

Table E-121

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Isolation

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	19.00	6.93
25-29 years	17	16.00	4.57
30-34 years	34	16.59	5.74
35-39 years	14	14.93	5.62
> 39 years	6	20.17	3.60

Table E-123

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Age by Guilt

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	8.33	2.52
25-29 years	17	14.29	6.04
30-34 years	34	14.26	6.50
35-39 years	14	12.86	4.91
> 39 years	6	12.17	6.11

Table E-118

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	10.49	2.62	.16
Within Groups	69	1161.57	16.83	
Total	73	1172.05		

Table E-120

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	48.40	12.10	.36
Within Groups	69	2323.00	33.67	
Total	73	2371.41		

Table E-122

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	138.45	34.61	1.20
Within Groups	69	1994.00	28.90	
Total	73	2132.45		

Table E-124

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Age by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	126.48	31.62	.88
Within Groups	69	2491.36	36.11	
Total	73	2617.84		

Table E-125

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Age by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	21.00	12.12
25-29 years	17	18.24	6.22
30-34 years	34	19.47	5.20
35-39 years	14	17.64	5.93
> 39 years	6	22.00	9.32

Table E-127

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Age by Resolution

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	24.00	12.77
25-29 years	17	27.76	4.42
30-34 years	34	27.09	2.96
35-39 years	14	28.57	3.78
> 39 years	6	25.67	9.44

Table E-129

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Age by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	15.00	10.15
25-29 years	17	14.94	7.56
30-34 years	34	15.88	7.08
35-39 years	14	16.86	7.99
> 39 years	6	23.67	2.73

Table E-131

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Surprise

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	18.00	6.70
Between 2 and 5 years	36	23.14	6.94
> 5 years	28	20.46	6.07

Table E-126

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Age by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	108.39	27.10	.69
Within Groups	69	2696.74	39.08	
Total	73	2805.14		

Table E-128

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Age by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	76.48	19.12	.85
Within Groups	69	1558.56	22.59	
Total	73	1635.04		

Table E-130

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Age by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	370.77	92.69	1.76
Within Groups	69	3643.52	52.80	
Total	73	4014.28		

Table E-132

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	248.89	124.45	2.87
Within Groups	71	3083.27	43.43	
Total	73	3332.16		

Table E-133

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Duration of Infertility by Denial

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	10.80	4.52
Between 2 and 5 years	36	13.14	3.80
> 5 years	28	13.18	4.02

Table E-135

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Duration of Infertility by Anger

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	14.70	4.00
Between 2 and 5 years	36	18.08	5.77
> 5 years	28	17.43	6.00

Table E-137

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Duration of Infertility by Isolation

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	13.50	3.92
Between 2 and 5 years	36	16.94	4.83
> 5 years	28	17.07	6.30

Table E-139

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Duration of Infertility by Guilt

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	9.70	4.32
Between 2 and 5 years	36	13.53	5.75
> 5 years	28	15.07	6.32

Table E-134

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Duration of Infertility by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	48.04	24.02	1.52
Within Groups	71	1124.01	15.83	
Total	73	1172.05		

Table E-136

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Duration of Infertility by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	89.70	44.85	1.40
Within Groups	71	2281.71	32.14	
Total	73	2371.41		

Table E-138

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Duration of Infertility by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	106.20	53.10	1.86
Within Groups	71	2026.25	28.54	
Total	73	2132.45		

Table E-140

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Duration of Infertility by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	212.91	106.45	3.14
Within Groups	71	2404.93	33.87	
Total	73	2617.84		



Table E-141

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	15.20	6.27
Between 2 and 5 years	36	19.81	5.72
> 5 years	28	19.61	6.47

Table E-143

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Resolution

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	26.00	6.53
Between 2 and 5 years	36	27.19	4.60
> 5 years	28	27.86	4.23

Table E-145

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	14.50	5.89
Between 2 and 5 years	36	16.81	7.15
> 5 years	28	16.68	8.32

Table E-147

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Surprise

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	21.04	6.06
Medical Problems			
Male Only	14	20.29	7.51
Medical Problems			
Female and Male	20	21.40	6.76
Medical Problems			
Cause Unknown	13	23.54	7.61

Table E-142

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	177.22	88.61	2.39
Within Groups	71	2627.92	37.01	
Total	73	2805.14		

Table E-144

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	25.97	12.99	.57
Within Groups	71	1609.07	22.66	
Total	73	1635.04		

Table E-146

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Duration of Infertility by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	44.04	22.02	.39
Within Groups	71	3970.25	55.92	
Total	73	4014.28		

Table E-148

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	80.31	26.77	.58
Within Groups	70	3251.85	46.46	
Total	73	3332.16		

Table E-149

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Origin of Infertility by Denial

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	12.81	4.39
Medical Problems			
Male Only	14	12.29	3.20
Medical Problems			
Female and Male	20	13.40	4.26
Medical Problems			
Cause Unknown	13	12.62	3.88

Table E-151

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Origin of Infertility by Anger

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	16.19	4.90
Medical Problems			
Male Only	14	16.86	5.79
Medical Problems			
Female and Male	20	18.95	6.30
Medical Problems			
Cause Unknown	13	18.00	6.19

Table E-153

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Origin of Infertility by Isolation

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	16.56	5.85
Medical Problems			
Male Only	14	14.79	4.90
Medical Problems			
Female and Male	20	17.70	5.50
Medical Problems			
Cause Unknown	13	16.54	4.85

Table E-155

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Origin of Infertility by Guilt

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	12.74	5.69
Medical Problems			
Male Only	14	15.29	6.97
Medical Problems			
Female and Male	20	13.05	5.48
Medical Problems			
Cause Unknown	13	14.38	6.45

Table E-150

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Origin of Infertility by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	11.25	3.75	.23
Within Groups	70	1160.81	16.58	
Total	73	1172.05		

Table E-152

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Origin of Infertility by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	96.67	32.22	.99
Within Groups	70	2274.74	32.50	
Total	73	2371.41		

Table E-154

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Origin of Infertility by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	69.99	23.33	.79
Within Groups	70	2062.45	29.46	
Total	73	2132.45		

Table E-156

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Origin of Infertility by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	73.77	24.59	.68
Within Groups	70	2544.07	36.34	
Total	73	2617.84		

Table E-157

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	20.15	6.09
Medical Problems			
Male Only	14	17.36	5.53
Medical Problems			
Female and Male	20	20.25	5.68
Medical Problems			
Cause Unknown	13	17.08	7.52

Table E-159

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Resolution

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	25.93	5.74
Medical Problems			
Male Only	14	27.43	2.95
Medical Problems			
Female and Male	20	28.60	3.94
Medical Problems			
Cause Unknown	13	27.92	4.82

Table E-161

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	16.37	7.54
Medical Problems			
Male Only	14	13.43	5.23
Medical Problems			
Female and Male	20	17.40	7.28
Medical Problems			
Cause Unknown	13	18.38	9.03

Table E-163

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Present Treatment Status by Surprise

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	19.63	6.47
Medical Treat. Only	14	23.14	7.08
3rd Party Proc. Only	31	21.77	7.14
No Med. Treat. and No 3rd Party Proc.	10	21.40	5.72

Table E-158

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	151.84	50.61	1.34
Within Groups	70	2653.29	37.90	
Total	73	2805.13		

Table E-160

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	90.04	30.01	1.36
Within Groups	70	1545.00	22.07	
Total	73	1635.04		

Table E-162

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Origin of Infertility by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	194.68	64.89	1.19
Within Groups	70	3819.60	54.57	
Total	73	4014.28		

Table E-164

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Present Treatment Status by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	106.21	35.40	.77
Within Groups	70	3225.95	46.09	
Total	73	3332.16		

Table E-165

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Denial

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	13.11	4.24
Medical Treat. Only	14	13.64	3.67
3rd Party Proc. Only	31	12.10	3.84
No Med. Treat. and No 3rd Party Proc.	10	13.50	4.70

Table E-167

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Anger

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	18.11	5.53
Medical Treat. Only	14	19.29	7.22
3rd Party Proc. Only	31	16.19	5.13
No Med. Treat. and No 3rd Party Proc.	10	17.00	5.27

Table E-169

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Isolation

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	16.32	4.44
Medical Treat. Only	14	18.21	5.94
3rd Party Proc. Only	31	16.39	6.15
No Med. Treat. and No 3rd Party Proc.	10	15.00	3.68

Table E-171

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Guilt

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	14.47	7.89
Medical Treat. Only	14	13.43	5.77
3rd Party Proc. Only	31	12.65	5.20
No Med. Treat. and No 3rd Party Proc.	10	15.10	4.56

Table E-166

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	31.84	10.61	.65
Within Groups	70	1140.21	16.29	
Total	73	1172.05		

Table E-168

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	105.92	35.31	1.09
Within Groups	70	2265.49	32.36	
Total	73	2371.41		

Table E-170

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	64.63	21.54	.73
Within Groups	70	2067.82	29.54	
Total	73	2132.45		

Table E-172

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	65.68	21.89	.60
Within Groups	70	2552.16	36.46	
Total	73	2617.84		

Table E-173

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	19.68	6.63
Medical Treat. Only	14	20.43	6.56
3rd Party Proc. Only	31	18.10	6.01
No Med. Treat. and No 3rd Party Proc.	10	19.30	5.85

Table E-175

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Resolution

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	26.37	5.19
Medical Treat. Only	14	26.43	3.23
3rd Party Proc. Only	31	27.52	5.25
No Med. Treat. and No 3rd Party Proc.	10	29.50	3.54

Table E-177

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Present Treatment Status by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	18.10	7.23
Medical Treat. Only	14	19.57	8.22
3rd Party Proc. Only	31	14.55	7.16
No Med. Treat. and No 3rd Party Proc.	10	14.80	6.03

Table E-179

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Surprise

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	23.86	5.90
Protestant	31	21.97	6.55
Other	27	20.67	6.97
None	9	20.00	7.81

Table E-174

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	62.79	20.93	.53
Within Groups	70	2742.34	39.18	
Total	73	2805.14		

Table E-176

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	76.95	25.65	1.15
Within Groups	70	1558.09	22.26	
Total	73	1635.04		

Table E-178

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Present Treatment Status by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	327.79	109.26	2.07
Within Groups	70	3686.50	52.66	
Total	73	4014.28		

Table E-180

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	84.34	28.11	.61
Within Groups	70	3247.82	46.40	
Total	73	3332.16		

Table E-181

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Religion by Denial

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	12.14	4.14
Protestant	31	12.71	3.92
Other	27	13.48	3.75
None	9	11.89	5.25

Table E-183

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Religion by Anger

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	15.14	6.41
Protestant	31	16.68	5.34
Other	27	18.41	5.51
None	9	18.44	6.97

Table E-185

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Religion by Isolation

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	15.14	6.54
Protestant	31	16.35	5.61
Other	27	17.56	4.89
None	9	15.11	5.60

Table E-187

Group Means and Standard Deviations for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Religion by Guilt

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	17.14	3.02
Protestant	31	12.81	4.82
Other	27	15.07	7.38
None	9	9.11	3.55

Table E-182

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Religion by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	23.18	7.73	.47
Within Groups	70	1148.87	16.41	
Total	73	1172.05		

Table E-184

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Religion by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	89.03	29.68	.91
Within Groups	70	2282.37	32.61	
Total	73	2371.41		

Table E-186

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Religion by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	60.94	20.31	.69
Within Groups	70	2071.51	29.59	
Total	73	2132.45		

Table E-188

Source Table for Male Emotional and Behavioral Reactions Since Recognizing Infertility: Religion by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	347.40	115.80	3.57
Within Groups	70	2270.44	32.43	
Total	73	2617.84		

Table E-189

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	20.29	4.96
Protestant	31	18.39	5.39
Other	27	19.67	6.79
None	9	19.00	8.32

Table E-191

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Resolution

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	26.00	4.12
Protestant	31	27.45	3.78
Other	27	27.52	5.19
None	9	27.00	6.96

Table E-193

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religion by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	11.71	4.72
Protestant	31	15.90	7.52
Other	27	17.70	7.65
None	9	18.22	7.31

Table E-195

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Surprise

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	20.57	3.78
Service Attendance			
One Time A Year	8	18.13	8.58
Several Times A Year	13	23.31	7.13
One Time A Week	26	21.62	7.13
Several Times A Week	20	21.60	6.12

Table E-190

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	34.35	11.45	.29
Within Groups	70	2770.78	39.58	
Total	73	2805.14		

Table E-192

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	14.62	4.87	.21
Within Groups	70	1620.42	23.15	
Total	73	1635.04		

Table E-194

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religion by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	236.96	78.99	1.46
Within Groups	70	3777.32	53.96	
Total	73	4014.28		

Table E-196

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	139.85	34.96	.76
Within Groups	69	3192.31	46.27	
Total	73	3332.16		

Table E-197

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Denial

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	10.43	4.61
Service Attendance			
One Time A Year	8	12.88	4.55
Several Times A Year	13	13.54	3.28
One Time A Week	26	13.08	4.08
Several Times A Week	20	12.90	4.01

Table E-199

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Anger

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	15.71	4.92
Service Attendance			
One Time A Year	8	18.63	7.27
Several Times A Year	13	17.31	7.12
One Time A Week	26	17.31	5.64
Several Times A Week	20	17.60	4.69

Table E-201

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Isolation

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	13.71	3.55
Service Attendance			
One Time A Year	8	16.75	6.20
Several Times A Year	13	17.31	6.65
One Time A Week	26	15.96	4.64
Several Times A Week	20	17.65	5.71

Table E-203

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Guilt

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	9.85	4.38
Service Attendance			
One Time A Year	8	10.50	3.59
Several Times A Year	13	13.85	5.26
One Time A Week	26	14.04	6.08
Several Times A Week	20	15.40	6.93

Table E-198

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	48.59	12.15	.75
Within Groups	69	1123.47	16.28	
Total	73	1172.05		

Table E-200

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	32.99	8.25	.24
Within Groups	69	2338.41	33.89	
Total	73	2371.41		

Table E-202

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	97.24	24.31	.82
Within Groups	69	2035.21	29.50	
Total	73	2132.45		

Table E-204

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	245.53	61.38	1.79
Within Groups	69	2372.31	34.38	
Total	73	2617.84		



Table E-205

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	17.57	5.26
Service Attendance			
One Time A Year	8	18.75	9.22
Several Times A Year	13	20.15	6.18
One Time A Week	26	18.65	6.14
Several Times A Week	20	19.70	5.62

Table E-207

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Resolution

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	26.86	7.01
Service Attendance			
One Time A Year	8	29.25	4.92
Several Times A Year	13	25.92	5.07
One Time A Week	26	26.54	4.89
Several Times A Week	20	28.50	2.93

Table E-209

Group Means and Standard Deviations for  
Male Emotional and Behavioral  
Reactions Since Recognizing Infertility:  
Religiosity by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	18.43	7.68
Service Attendance			
One Time A Year	8	16.88	7.28
Several Times A Year	13	16.38	8.62
One Time A Week	26	16.38	7.16
Several Times A Week	20	15.70	7.53

Table E-206

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	44.14	11.04	.28
Within Groups	69	2760.99	40.01	
Total	73	2805.14		

Table E-208

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	100.30	25.07	1.13
Within Groups	69	1534.74	22.24	
Total	73	1635.04		

Table E-210

Source Table for Male Emotional  
and Behavioral Reactions Since  
Recognizing Infertility:  
Religiosity by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	40.26	10.07	.17
Within Groups	69	3974.02	57.59	
Total	73	4014.28		

Table E-211

Group Means and Standard Deviations for  
Current Emotional and Behavioral Reactions  
to Infertility: Gender by Surprise

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	18.00	7.26
Males		17.36	6.54

Table E-213

Group Means and Standard Deviations for  
Current Emotional and Behavioral Reactions  
to Infertility: Gender by Denial

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	16.03	5.31
Males		14.84	4.92

Table E-215

Group Means and Standard Deviations for  
Current Emotional and Behavioral Reactions  
to Infertility: Gender by Anger

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	19.22	6.30
Males		15.62	4.57

Table E-217

Group Means and Standard Deviations for  
Current Emotional and Behavioral Reactions  
to Infertility: Gender by Isolation

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	17.80	7.08
Males		14.78	5.24

Table E-212

Source Table for  
Current Emotional and  
Behavioral Reactions  
to Infertility: Gender  
by Surprise

Source	df	t Value
Gender	73	.69

Table E-214

Source Table for  
Current Emotional and  
Behavioral Reactions  
to Infertility: Gender  
by Denial

Source	df	t Value
Gender	73	1.62

Table E-216

Source Table for  
Current Emotional and  
Behavioral Reactions  
to Infertility: Gender  
by Anger

Source	df	t Value
Gender	73	5.29*

\*p < .01

Table E-218

Source Table for  
Current Emotional and  
Behavioral Reactions  
to Infertility: Gender  
by Isolation

Source	df	t Value
Gender	73	3.81*

\*p < .01

Table E-219

Group Means and Standard Deviations for  
Current Emotional and Behavioral Reactions  
to Infertility: Gender by Guilt

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	13.69	6.28
Males		12.22	5.43

Table E-221

Group Means and Standard Deviations for  
Current Emotional and Behavioral Reactions  
to Infertility: Gender by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	21.42	7.83
Males		17.39	5.85

Table E-223

Group Means and Standard Deviations for  
Current Emotional and Behavioral Reactions  
to Infertility: Gender by Resolution

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	27.45	6.39
Males		28.99	4.93

Table E-225

Group Means and Standard Deviations for  
Current Emotional and Behavioral Reactions  
to Infertility: Gender by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	14.09	7.23
Males		14.58	6.50

Table E-220

Source Table for  
Current Emotional and  
Behavioral Reactions  
to Infertility: Gender  
by Guilt

Source	df	t Value
Gender	73	1.79

Table E-222

Source Table for  
Current Emotional and  
Behavioral Reactions  
to Infertility: Gender  
by Depression/Grief

Source	df	t Value
Gender	73	5.86*

\*p < .01

Table E-224

Source Table for  
Current Emotional and  
Behavioral Reactions  
to Infertility: Gender  
by Resolution

Source	df	t Value
Gender	73	2.23

Table E-226

Source Table for  
Current Emotional and  
Behavioral Reactions  
to Infertility: Gender  
by Sexual Dysfunction

Source	df	t Value
Gender	73	.60

Table E-227

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Surprise

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	26.00	6.08
25-29 years	25	18.52	7.89
30-34 years	30	17.73	6.27
35-39 years	14	14.64	6.15
> 39 years	2	27.00	11.31

Table E-229

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Denial

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	17.67	6.03
25-29 years	25	15.48	5.09
30-34 years	30	17.30	6.06
35-39 years	14	13.79	3.31
> 39 years	2	17.00	4.24

Table E-231

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Anger

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	25.33	4.04
25-29 years	25	18.60	7.23
30-34 years	30	19.87	5.72
35-39 years	14	16.21	3.66
> 39 years	2	29.00	5.66

Table E-233

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Isolation

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	24.33	8.50
25-29 years	25	17.72	6.94
30-34 years	30	18.50	6.93
35-39 years	14	13.71	5.15
> 39 years	2	27.00	8.49

Table E-228

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	520.68	130.17	2.70
Within Groups	69	3329.32	48.25	
Total	73	3850.00		

Table E-230

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	136.38	34.10	1.23
Within Groups	69	1919.56	27.82	
Total	73	2055.95		

Table E-232

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	452.05	113.01	3.19
Within Groups	69	2442.49	35.40	
Total	73	2894.54		

Table E-234

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	545.90	136.47	3.03
Within Groups	69	3110.06	45.07	
Total	73	3655.96		

Table E-235

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Guilt

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	16.33	10.69
25-29 years	25	13.40	5.77
30-34 years	30	14.80	6.78
35-39 years	14	10.57	4.38
> 39 years	2	18.50	4.95

Table E-237

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	26.00	9.54
25-29 years	25	20.40	7.86
30-34 years	30	22.50	7.68
35-39 years	14	18.36	6.66
> 39 years	2	32.50	4.95

Table E-239

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Resolution

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	22.67	14.47
25-29 years	25	28.36	5.23
30-34 years	30	27.30	6.39
35-39 years	14	28.71	5.27
> 39 years	2	16.50	3.54

Table E-241

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	17.67	13.20
25-29 years	25	12.16	4.99
30-34 years	30	14.83	7.94
35-39 years	14	13.64	6.36
> 39 years	2	25.00	11.31

Table E-236

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	242.46	60.61	1.59
Within Groups	69	2635.40	38.19	
Total	73	2877.85		

Table E-238

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	500.80	125.20	2.17
Within Groups	69	3977.21	57.64	
Total	73	4478.01		

Table E-240

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	352.20	88.05	2.31
Within Groups	69	2630.08	38.12	
Total	73	2982.28		

Table E-242

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	388.93	97.23	1.96
Within Groups	69	3427.41	49.67	
Total	73	3816.34		

Table E-243

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Surprise

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	16.80	7.67
Between 2 and 5 years	36	18.28	6.96
> 5 years	28	18.07	7.72

Table E-245

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Denial

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	13.30	4.45
Between 2 and 5 years	36	16.75	5.42
> 5 years	28	16.07	5.29

Table E-247

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Anger

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	16.50	6.28
Between 2 and 5 years	36	19.86	5.74
> 5 years	28	19.39	6.91

Table E-249

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Isolation

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	15.60	8.19
Between 2 and 5 years	36	18.03	6.36
> 5 years	28	18.29	7.64

Table E-244

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	17.32	8.66	.16
Within Groups	71	3832.68	53.98	
Total	73	3850.00		

Table E-246

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	93.24	46.62	1.69
Within Groups	71	1962.71	27.64	
Total	73	2055.95		

Table E-248

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	95.16	47.58	1.21
Within Groups	71	2799.38	39.43	
Total	73	2894.54		

Table E-250

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	56.87	28.44	.56
Within Groups	71	3599.09	50.69	
Total	73	3655.96		

Table E-251

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Guilt

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	10.40	6.04
Between 2 and 5 years	36	15.06	6.62
> 5 years	28	13.11	5.54

Table E-253

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	19.90	9.56
Between 2 and 5 years	36	21.64	7.36
> 5 years	28	21.68	8.01

Table E-255

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Resolution

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	27.10	8.16
Between 2 and 5 years	36	26.83	5.77
> 5 years	28	28.36	6.61

Table E-257

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	13.80	6.37
Between 2 and 5 years	36	13.78	5.93
> 5 years	28	14.61	9.04

Table E-252

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	184.88	92.44	2.44
Within Groups	71	2692.97	37.93	
Total	73	2877.85		

Table E-254

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	26.70	13.35	.21
Within Groups	71	4451.31	62.69	
Total	73	4478.01		

Table E-256

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	37.96	18.98	.46
Within Groups	71	2944.33	41.47	
Total	73	2982.28		

Table E-258

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	11.84	5.92	.11
Within Groups	71	3804.50	53.58	
Total	73	3816.34		

Table E-259

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Surprise

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	20.52	8.23
Medical Problems			
Male Only	14	17.00	7.23
Medical Problems			
Female and Male	20	16.50	5.60
Medical Problems			
Cause Unknown	13	16.15	6.71

Table E-261

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Denial

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	16.30	5.62
Medical Problems			
Male Only	14	17.21	7.05
Medical Problems			
Female and Male	20	16.25	4.05
Medical Problems			
Cause Unknown	13	13.85	4.00

Table E-263

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Anger

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	21.59	7.39
Medical Problems			
Male Only	14	16.43	6.30
Medical Problems			
Female and Male	20	19.15	5.05
Medical Problems			
Cause Unknown	13	17.38	3.75

Table E-265

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Isolation

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	19.89	7.73
Medical Problems			
Male Only	14	15.29	7.26
Medical Problems			
Female and Male	20	18.10	6.44
Medical Problems			
Cause Unknown	13	15.69	5.50

Table E-260

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	274.57	91.52	1.79
Within Groups	70	3575.43	51.08	
Total	73	3850.00		

Table E-262

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	84.52	28.17	1.00
Within Groups	70	1971.43	28.16	
Total	73	2055.95		

Table E-264

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	304.97	101.66	2.75
Within Groups	70	2589.57	36.99	
Total	73	2894.54		

Table E-266

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	265.87	88.62	1.83
Within Groups	70	3390.09	48.43	
Total	73	3655.96		



Table E-267

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Guilt

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	14.81	6.84
Medical Problems			
Male Only	14	12.43	4.94
Medical Problems			
Female and Male	20	14.60	7.08
Medical Problems			
Cause Unknown	13	11.31	4.48

Table E-269

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	23.33	8.25
Medical Problems			
Male Only	14	18.64	7.80
Medical Problems			
Female and Male	20	22.30	7.36
Medical Problems			
Cause Unknown	13	19.08	7.04

Table E-271

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Resolution

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	26.59	8.17
Medical Problems			
Male Only	14	27.71	5.48
Medical Problems			
Female and Male	20	27.90	4.27
Medical Problems			
Cause Unknown	13	28.23	6.31

Table E-273

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	13.96	7.87
Medical Problems			
Male Only	14	10.36	3.84
Medical Problems			
Female and Male	20	16.60	7.28
Medical Problems			
Cause Unknown	13	14.54	7.55

Table E-268

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	146.78	48.93	1.25
Within Groups	70	2731.07	39.02	
Total	73	2877.85		

Table E-270

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	293.68	97.89	1.64
Within Groups	70	4184.34	59.78	
Total	73	4478.01		

Table E-272

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	32.80	10.93	.26
Within Groups	70	2949.48	42.14	
Total	73	2982.28		

Table E-274

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	324.13	108.04	2.17
Within Groups	70	3492.21	49.89	
Total	73	3816.34		

Table E-275

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Surprise

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	19.63	6.32
Medical Treat. Only	14	20.07	6.62
3rd Party Proc. Only	31	16.32	8.12
No Med. Treat. and No 3rd Party Proc.	10	17.20	6.51

Table E-277

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Denial

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	18.63	5.46
Medical Treat. Only	14	15.93	4.23
3rd Party Proc. Only	31	14.68	5.85
No Med. Treat. and No 3rd Party Proc.	10	15.40	2.80

Table E-279

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Anger

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	21.95	4.94
Medical Treat. Only	14	20.21	6.05
3rd Party Proc. Only	31	17.42	7.06
No Med. Treat. and No 3rd Party Proc.	10	18.20	4.92

Table E-281

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Isolation

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	20.47	5.27
Medical Treat. Only	14	17.14	6.95
3rd Party Proc. Only	31	16.84	8.28
No Med. Treat. and No 3rd Party Proc.	10	16.60	5.64

Table E-276

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	204.28	68.09	1.31
Within Groups	70	3645.72	52.08	
Total	73	3850.00		

Table E-278

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	189.42	63.14	2.37
Within Groups	70	1866.52	26.66	
Total	73	2055.95		

Table E-280

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	266.09	88.70	2.36
Within Groups	70	2628.45	37.55	
Total	73	2894.54		

Table E-282

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	184.91	61.64	1.24
Within Groups	70	3471.04	49.59	
Total	73	3655.96		

Table E-283

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Guilt

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	15.32	7.11
Medical Treat. Only	14	12.36	3.52
3rd Party Proc. Only	31	12.45	6.33
No Med. Treat. and No 3rd Party Proc.	10	16.30	6.77

Table E-285

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	25.47	4.98
Medical Treat. Only	14	23.00	7.34
3rd Party Proc. Only	31	18.48	8.46
No Med. Treat. and No 3rd Party Proc.	10	20.60	7.92

Table E-287

Tukey Post Hoc Results for Female Current Emotional and Behavioral Reactions  
to Infertility: Present Treatment Status by Depression/Grief

		Group			
Mean	Group	Third Party Procedure Only	No Medical Treatment and No 3rd Party Proc.	Medical Treatment Only	Med. Treat. and 3rd Party Proc.
18.48	3rd Party Proc. Only				
20.60	No Med. Treat. and No 3rd Party Proc.				
23.00	Medical Treat. Only				
25.47	Medical Treatment and 3rd Party Procedure	*			

\* $p < .05$

Table E-284

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	190.75	63.58	1.66
Within Groups	70	2687.10	38.39	
Total	73	2877.85		

Table E-286

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	621.13	207.04	3.76*
Within Groups	70	3856.88	55.10	
Total	73	4478.01		

\* $p < .01$

Table E-288

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Resolution

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	23.84	4.79
Medical Treat. Only	14	26.29	4.43
3rd Party Proc. Only	31	29.74	6.70
No Med. Treat. and No 3rd Party Proc.	10	28.80	7.61

Table E-289

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	447.36	149.12	4.12*
Within Groups	70	2534.92	36.21	
Total	73	2982.28		

\* $p < .01$

Table E-290

Tukey Post Hoc Results for Female Current Emotional and Behavioral Reactions  
to Infertility: Present Treatment Status by Resolution

		Group			
Mean	Group	Third Party Procedure Only	No Medical Treatment and No 3rd Party Proc.	Medical Treatment Only	Med. Treat. and 3rd Party Proc.
23.84	Medical Treatment and 3rd Party Procedure				
26.29	Medical Treat. Only				
28.80	No Med. Treat. and No 3rd Party Proc.				
29.74	3rd Party Proc. Only				*

\* $p < .05$

Table E-291

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	15.11	6.31
Medical Treat. Only	14	17.21	7.62
3rd Party Proc. Only	31	11.87	7.26
No Med. Treat. and No 3rd Party Proc.	10	14.70	7.07

Table E-292

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	312.61	104.20	2.08
Within Groups	70	3503.73	50.05	
Total	73	3816.34		

Table E-293

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Surprise

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	20.67	7.87
Protestant	38	16.34	6.47
Other	24	19.21	7.82
None	6	21.00	8.34

Table E-295

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Denial

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	13.63	5.43
Protestant	38	15.21	5.36
Other	24	18.33	4.90
None	6	14.33	4.27

Table E-297

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Anger

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	19.33	9.63
Protestant	38	18.26	5.68
Other	24	21.00	5.80
None	6	18.00	8.27

Table E-299

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Isolation

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	17.83	8.80
Protestant	38	16.37	6.73
Other	24	20.42	6.56
None	6	16.33	8.36

Table E-294

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	236.16	78.72	1.52
Within Groups	70	3613.84	51.63	
Total	73	3850.00		

Table E-296

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	203.63	67.88	2.57
Within Groups	70	1852.32	26.46	
Total	73	2055.95		

Table E-298

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	119.84	39.95	1.01
Within Groups	70	2774.70	39.64	
Total	73	2894.54		

Table E-300

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	255.12	85.04	1.75
Within Groups	70	3400.84	48.58	
Total	73	3655.96		

Table E-301

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Guilt

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	13.00	7.40
Protestant	38	12.16	5.68
Other	24	16.50	6.14
None	6	12.83	7.17

Table E-303

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	19.67	10.61
Protestant	38	19.39	7.19
Other	24	25.17	7.03
None	6	21.00	8.37

Table E-305

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Resolution

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	24.83	9.50
Protestant	38	29.05	4.67
Other	24	26.17	7.61
None	6	25.00	5.97

Table E-307

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	12.83	8.77
Protestant	38	12.34	5.47
Other	24	16.08	8.41
None	6	18.50	8.46

Table E-302

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	285.97	95.32	2.57
Within Groups	70	2591.89	37.03	
Total	73	2877.85		

Table E-304

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	512.27	170.76	3.01
Within Groups	70	3965.75	56.65	
Total	73	4478.01		

Table E-306

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	214.22	71.41	1.81
Within Groups	70	2768.06	39.54	
Total	73	2982.28		

Table E-308

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	337.62	112.54	2.26
Within Groups	70	3478.72	49.70	
Total	73	3816.34		

Table E-309

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Surprise

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	19.50	7.42
Service Attendance			
One Time A Year	6	17.17	5.23
Several Times A Year	10	20.50	9.59
One Time A Week	34	16.71	7.21
Several Times A Week	18	18.83	6.64

Table E-311

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Denial

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	14.00	3.79
Service Attendance			
One Time A Year	6	16.33	4.23
Several Times A Year	10	16.90	4.23
One Time A Week	34	16.09	5.70
Several Times A Week	18	16.00	6.08

Table E-313

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Anger

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	18.17	5.81
Service Attendance			
One Time A Year	6	19.50	5.32
Several Times A Year	10	22.50	6.93
One Time A Week	34	18.03	6.24
Several Times A Week	18	19.89	6.41

Table E-315

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Isolation

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	16.50	6.22
Service Attendance			
One Time A Year	6	17.83	4.71
Several Times A Year	10	20.40	8.46
One Time A Week	34	17.00	7.42
Several Times A Week	18	18.28	6.81

Table E-310

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	149.61	37.40	.70
Within Groups	69	3700.39	53.63	
Total	73	3850.00		

Table E-312

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	32.98	8.24	.28
Within Groups	69	2022.97	29.32	
Total	73	2055.95		

Table E-314

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	170.96	42.74	1.08
Within Groups	69	2723.58	39.47	
Total	73	2894.54		

Table E-316

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	103.62	25.90	.50
Within Groups	69	3552.34	51.48	
Total	73	3655.96		

Table E-317

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Guilt

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	13.50	7.58
Service Attendance			
One Time A Year	6	13.83	6.97
Several Times A Year	10	13.70	6.53
One Time A Week	34	13.79	6.16
Several Times A Week	18	13.50	6.46

Table E-319

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	18.50	5.21
Service Attendance			
One Time A Year	6	20.83	4.71
Several Times A Year	10	24.20	8.82
One Time A Week	34	21.09	8.92
Several Times A Week	18	21.67	6.73

Table E-321

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Resolution

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	27.50	2.74
Service Attendance			
One Time A Year	6	27.00	4.77
Several Times A Year	10	26.20	6.81
One Time A Week	34	27.21	7.42
Several Times A Week	18	28.72	5.69

Table E-323

Group Means and Standard Deviations  
for Female Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	16.17	4.26
Service Attendance			
One Time A Year	6	16.00	5.22
Several Times A Year	10	16.50	10.87
One Time A Week	34	14.09	7.45
Several Times A Week	18	11.44	5.23

Table E-318

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	1.36	.34	.01
Within Groups	69	2876.49	41.69	
Total	73	2877.85		

Table E-320

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	135.34	33.84	.54
Within Groups	69	4342.67	62.94	
Total	73	4478.01		

Table E-322

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	48.01	12.00	.28
Within Groups	69	2934.27	42.53	
Total	73	2982.28		

Table E-324

Source Table for Female Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	231.82	57.96	1.12
Within Groups	69	3584.51	51.95	
Total	73	3816.34		



Table E-325

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Surprise

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	20.00	11.14
25-29 years	17	16.29	6.63
30-34 years	34	18.62	6.56
35-39 years	14	16.21	6.48
> 39 years	6	14.67	3.08

Table E-327

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Denial

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	15.00	1.00
25-29 years	17	13.82	5.70
30-34 years	34	15.41	4.80
35-39 years	14	14.21	5.42
> 39 years	6	15.83	3.49

Table E-329

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Anger

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	14.67	5.13
25-29 years	17	15.88	5.60
30-34 years	34	15.88	4.46
35-39 years	14	14.64	4.11
> 39 years	6	16.17	3.87

Table E-331

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Isolation

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	17.67	8.50
25-29 years	17	14.53	4.93
30-34 years	34	15.00	5.45
35-39 years	14	13.07	5.18
> 39 years	6	16.83	3.06

Table E-326

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	155.90	38.97	.91
Within Groups	69	2965.25	42.97	
Total	73	3121.15		

Table E-328

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	40.16	10.04	.40
Within Groups	69	1725.90	25.01	
Total	73	1766.05		

Table E-330

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	21.40	5.35	.25
Within Groups	69	1504.01	21.80	
Total	73	1525.41		

Table E-332

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	93.88	23.47	.85
Within Groups	69	1908.66	27.66	
Total	73	2002.54		

Table E-333

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Guilt

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	9.33	3.06
25-29 years	17	12.76	5.44
30-34 years	34	13.12	6.03
35-39 years	14	11.50	4.60
> 39 years	6	8.67	3.08

Table E-335

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	21.00	13.11
25-29 years	17	17.65	5.67
30-34 years	34	17.12	5.10
35-39 years	14	15.71	5.95
> 39 years	6	20.33	6.19

Table E-337

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Resolution

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	25.00	12.49
25-29 years	17	29.24	5.29
30-34 years	34	29.18	3.61
35-39 years	14	30.00	3.59
> 39 years	6	26.83	8.11

Table E-339

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Age by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	15.00	12.29
25-29 years	17	13.18	7.22
30-34 years	34	13.59	5.16
35-39 years	14	15.50	7.04
> 39 years	6	21.83	2.32

Table E-334

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	140.45	35.11	1.20
Within Groups	69	2014.09	29.19	
Total	73	2154.54		

Table E-336

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	134.03	33.51	.98
Within Groups	69	2367.60	34.31	
Total	73	2501.64		

Table E-338

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	92.15	23.04	.94
Within Groups	69	1684.83	24.42	
Total	73	1776.99		

Table E-340

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Age by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	394.97	98.74	2.54
Within Groups	69	2687.04	38.94	
Total	73	3082.01		

Table E-341

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Surprise

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	15.10	5.84
Between 2 and 5 years	36	18.00	6.86
> 5 years	28	17.36	6.38

Table E-343

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Denial

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	11.70	5.81
Between 2 and 5 years	36	14.72	4.93
> 5 years	28	16.11	4.17

Table E-345

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Anger

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	13.60	6.19
Between 2 and 5 years	36	15.75	4.11
> 5 years	28	16.18	4.47

Table E-347

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Isolation

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	12.10	4.56
Between 2 and 5 years	36	14.25	4.61
> 5 years	28	16.43	5.81

Table E-342

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	65.82	32.91	.76
Within Groups	71	3055.33	43.03	
Total	73	3121.15		

Table E-344

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	144.05	72.03	3.15
Within Groups	71	1622.00	22.85	
Total	73	1766.05		

Table E-346

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	50.15	25.07	1.21
Within Groups	71	1475.26	20.78	
Total	73	1525.41		

Table E-348

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	158.03	79.02	3.04
Within Groups	71	1844.51	25.98	
Total	73	2002.54		

Table E-349

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Guilt

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	9.40	3.31
Between 2 and 5 years	36	11.92	5.05
> 5 years	28	13.61	6.17

Table E-351

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	14.50	5.60
Between 2 and 5 years	36	17.78	5.68
> 5 years	28	17.93	6.06

Table E-353

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Resolution

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	27.50	7.35
Between 2 and 5 years	36	29.19	5.30
> 5 years	28	29.25	3.24

Table E-355

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Duration of Infertility by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	13.00	5.05
Between 2 and 5 years	36	14.86	7.03
> 5 years	28	14.79	6.37

Table E-350

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	136.71	68.36	2.41
Within Groups	71	2017.83	28.42	
Total	73	2154.54		

Table E-352

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	97.06	48.53	1.43
Within Groups	71	2404.58	33.87	
Total	73	2501.64		

Table E-354

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	25.60	12.80	.52
Within Groups	71	1751.39	24.67	
Total	73	1776.99		

Table E-356

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Duration of Infertility by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	28.99	14.50	.34
Within Groups	71	3053.02	43.00	
Total	73	3082.01		

Table E-357

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Surprise

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	18.44	6.30
Medical Problems			
Male Only	14	15.29	6.47
Medical Problems			
Female and Male	20	17.60	6.75
Medical Problems			
Cause Unknown	13	17.00	6.98

Table E-359

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Denial

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	14.37	4.98
Medical Problems			
Male Only	14	15.14	4.33
Medical Problems			
Female and Male	20	16.00	4.93
Medical Problems			
Cause Unknown	13	13.69	5.51

Table E-361

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Anger

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	15.96	4.60
Medical Problems			
Male Only	14	15.71	5.12
Medical Problems			
Female and Male	20	16.55	4.41
Medical Problems			
Cause Unknown	13	13.38	3.88

Table E-363

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Isolation

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	15.78	5.89
Medical Problems			
Male Only	14	14.00	4.22
Medical Problems			
Female and Male	20	15.10	5.58
Medical Problems			
Cause Unknown	13	13.08	4.11

Table E-358

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	94.82	31.61	.73
Within Groups	70	3026.32	43.23	
Total	73	3121.15		

Table E-360

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	51.27	17.09	.70
Within Groups	70	1714.78	24.50	
Total	73	1766.05		

Table E-362

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	85.56	28.52	1.39
Within Groups	70	1439.85	20.57	
Total	73	1525.41		

Table E-364

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	75.15	25.05	.91
Within Groups	70	1927.39	27.53	
Total	73	2002.54		

Table E-365

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Guilt

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	12.00	4.54
Medical Problems			
Male Only	14	14.36	7.74
Medical Problems			
Female and Male	20	10.90	5.30
Medical Problems			
Cause Unknown	13	12.38	4.13

Table E-367

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	18.85	6.30
Medical Problems			
Male Only	14	15.57	5.46
Medical Problems			
Female and Male	20	18.35	5.45
Medical Problems			
Cause Unknown	13	14.85	5.10

Table E-369

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Resolution

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	27.07	5.70
Medical Problems			
Male Only	14	29.71	3.52
Medical Problems			
Female and Male	20	30.05	4.02
Medical Problems			
Cause Unknown	13	30.54	5.03

Table E-371

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Origin of Infertility by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	15.30	7.28
Medical Problems			
Male Only	14	11.71	3.97
Medical Problems			
Female and Male	20	15.85	6.66
Medical Problems			
Cause Unknown	13	14.23	6.41

Table E-366

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	100.45	33.48	1.14
Within Groups	70	2054.09	29.34	
Total	73	2154.54		

Table E-368

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	206.56	68.85	2.10
Within Groups	70	2295.08	32.79	
Total	73	2501.64		

Table E-370

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	160.10	53.37	2.31
Within Groups	70	1616.89	23.10	
Total	73	1776.99		

Table E-372

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Origin of Infertility by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	162.67	54.22	1.30
Within Groups	70	2919.34	41.70	
Total	73	3082.01		

Table E-373

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Surprise

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	17.05	6.48
Medical Treat. Only	14	20.00	6.03
3rd Party Proc. Only	31	16.58	7.19
No Med. Treat. and No 3rd Party Proc.	10	16.70	4.95

Table E-375

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Denial

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	15.84	5.19
Medical Treat. Only	14	16.50	5.85
3rd Party Proc. Only	31	13.32	4.05
No Med. Treat. and No 3rd Party Proc.	10	15.30	4.85

Table E-377

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Anger

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	16.58	4.34
Medical Treat. Only	14	15.86	4.61
3rd Party Proc. Only	31	14.71	4.17
No Med. Treat. and No 3rd Party Proc.	10	16.30	6.15

Table E-379

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Isolation

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	15.21	3.65
Medical Treat. Only	14	16.57	6.25
3rd Party Proc. Only	31	13.97	5.93
No Med. Treat. and No 3rd Party Proc.	10	14.00	3.74

Table E-374

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	122.55	40.85	.95
Within Groups	70	2993.60	42.84	
Total	73	3121.15		

Table E-376

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	131.15	43.72	1.87
Within Groups	70	1634.90	23.36	
Total	73	1766.05		

Table E-378

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	48.57	16.19	.77
Within Groups	70	1476.83	21.10	
Total	73	1525.41		

Table E-380

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	74.99	25.00	.91
Within Groups	70	1927.55	27.54	
Total	73	2002.54		

Table E-381

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Guilt

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	13.42	7.62
Medical Treat. Only	14	12.29	5.77
3rd Party Proc. Only	31	11.16	4.01
No Med. Treat. and No 3rd Party Proc.	10	13.10	3.73

Table E-383

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	18.68	5.47
Medical Treat. Only	14	19.07	6.11
3rd Party Proc. Only	31	15.84	6.18
No Med. Treat. and No 3rd Party Proc.	10	17.40	4.58

Table E-385

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Resolution

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	28.00	6.20
Medical Treat. Only	14	28.43	3.34
3rd Party Proc. Only	31	29.35	5.03
No Med. Treat. and No 3rd Party Proc.	10	30.50	3.81

Table E-387

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Present Treatment Status by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	16.21	6.25
Medical Treat. Only	14	18.07	6.78
3rd Party Proc. Only	31	12.39	6.13
No Med. Treat. and No 3rd Party Proc.	10	13.40	5.48

Table E-382

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	69.95	23.32	.78
Within Groups	70	2084.58	29.78	
Total	73	2154.54		

Table E-384

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	146.01	48.67	1.45
Within Groups	70	2355.63	33.65	
Total	73	2501.64		

Table E-386

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	49.96	16.65	.68
Within Groups	70	1727.03	24.67	
Total	73	1776.99		

Table E-388

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Present Treatment Status by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	384.17	128.05	3.32
Within Groups	70	2697.84	38.54	
Total	73	3082.01		



Table E-389

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Surprise

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	19.71	5.88
Protestant	31	17.25	6.56
Other	27	18.00	7.22
None	9	14.00	3.81

Table E-391

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Denial

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	13.43	5.83
Protestant	31	15.06	4.85
Other	27	15.85	4.08
None	9	12.11	6.25

Table E-393

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Anger

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	15.71	6.58
Protestant	31	14.58	3.93
Other	27	17.11	4.46
None	9	14.67	4.80

Table E-395

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Isolation

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	13.57	6.55
Protestant	31	14.65	5.52
Other	27	15.74	4.84
None	9	13.33	4.58

Table E-390

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	151.78	50.59	1.19
Within Groups	70	2969.36	42.42	
Total	73	3121.15		

Table E-392

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	110.17	36.72	1.55
Within Groups	70	1655.88	23.66	
Total	73	1766.05		

Table E-394

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	101.76	33.92	1.67
Within Groups	70	1423.64	20.34	
Total	73	1525.41		

Table E-396

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	54.54	18.18	.65
Within Groups	70	1948.00	27.83	
Total	73	2002.54		

Table E-397

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Guilt

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	13.86	3.24
Protestant	31	11.52	4.19
Other	27	13.96	6.91
None	9	8.11	2.62

Table E-399

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	16.14	6.87
Protestant	31	16.45	4.99
Other	27	18.59	6.26
None	9	18.00	6.82

Table E-401

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Resolution

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	27.86	4.18
Protestant	31	29.84	4.05
Other	27	28.85	5.19
None	9	27.33	7.28

Table E-403

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religion by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	11.43	4.58
Protestant	31	13.97	6.71
Other	27	15.00	6.15
None	9	17.89	7.39

Table E-398

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	268.09	89.36	3.32
Within Groups	70	1886.45	26.95	
Total	73	2154.54		

Table E-400

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	80.58	26.86	.78
Within Groups	70	2421.05	34.59	
Total	73	2501.64		

Table E-402

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	56.53	18.84	.77
Within Groups	70	1720.46	24.58	
Total	73	1776.99		

Table E-404

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religion by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	184.44	61.48	1.49
Within Groups	70	2897.57	41.39	
Total	73	3082.01		

Table E-405

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Surprise

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	15.57	2.64
Service Attendance			
One Time A Year	8	13.50	4.81
Several Times A Year	13	17.85	6.39
One Time A Week	26	19.08	7.48
Several Times A Week	20	17.00	6.51

Table E-407

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Denial

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	10.14	5.15
Service Attendance			
One Time A Year	8	14.63	5.07
Several Times A Year	13	16.62	5.12
One Time A Week	26	14.88	4.47
Several Times A Week	20	15.35	4.66

Table E-409

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Anger

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	13.43	3.46
Service Attendance			
One Time A Year	8	15.50	5.01
Several Times A Year	13	15.77	4.75
One Time A Week	26	16.00	4.66
Several Times A Week	20	15.85	4.74

Table E-411

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Isolation

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	11.57	3.10
Service Attendance			
One Time A Year	8	15.25	5.50
Several Times A Year	13	15.69	5.79
One Time A Week	26	14.35	4.91
Several Times A Week	20	15.70	5.72

Table E-406

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Surprise

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	223.90	55.97	1.33
Within Groups	69	2897.25	41.99	
Total	73	3121.15		

Table E-408

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Denial

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	201.04	50.26	2.22
Within Groups	69	1565.01	22.68	
Total	73	1766.05		

Table E-410

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Anger

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	38.83	9.71	.45
Within Groups	69	1486.57	21.54	
Total	73	1525.41		

Table E-412

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Isolation

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	106.47	26.62	.97
Within Groups	69	1896.07	27.48	
Total	73	2002.54		

Table E-413

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Guilt

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	9.71	4.86
Service Attendance			
One Time A Year	8	9.50	2.67
Several Times A Year	13	12.77	5.43
One Time A Week	26	12.88	5.15
Several Times A Week	20	12.95	6.56

Table E-415

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Depression/Grief

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	16.43	4.35
Service Attendance			
One Time A Year	8	17.50	7.67
Several Times A Year	13	17.31	6.17
One Time A Week	26	17.23	6.15
Several Times A Week	20	17.95	5.43

Table E-417

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Resolution

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	27.43	7.46
Service Attendance			
One Time A Year	8	29.88	4.67
Several Times A Year	13	27.69	3.52
One Time A Week	26	28.58	5.76
Several Times A Week	20	30.55	3.35

Table E-419

Group Means and Standard Deviations  
for Male Current Emotional and  
Behavioral Reactions to Infertility:  
Religiosity by Sexual Dysfunction

Group	Number of Cases	Mean	Standard Deviation
No Religious	7	17.71	8.08
Service Attendance			
One Time A Year	8	15.63	6.59
Several Times A Year	13	14.85	6.04
One Time A Week	26	14.81	6.83
Several Times A Week	20	12.60	5.73

Table E-414

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Guilt

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	129.20	32.30	1.10
Within Groups	69	2025.34	29.35	
Total	73	2154.54		

Table E-416

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Depression/Grief

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	13.59	3.40	.09
Within Groups	69	2488.05	36.06	
Total	73	2501.64		

Table E-418

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Resolution

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	98.33	24.58	1.01
Within Groups	69	1678.65	24.33	
Total	73	1776.99		

Table E-420

Source Table for Male Current Emotional  
and Behavioral Reactions to Infertility:  
Religiosity by Sexual Dysfunction

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	158.18	39.54	.93
Within Groups	69	2923.83	42.37	
Total	73	3082.01		

APPENDIX F  
TABLES OF MEANS AND STANDARD DEVIATIONS,  
SOURCE TABLES, AND POST HOC RESULTS  
FOR RESEARCH QUESTION 4

Table F-1

Group Means and Standard Deviations for Attitudes Regarding Therapeutic Intervention: Gender by Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	3.78	1.61
Males		3.09	1.36

Table F-3

Group Means and Standard Deviations for Attitudes Regarding Therapeutic Intervention: Gender by Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	4.09	1.49
Males		3.72	1.38

Table F-5

Group Means and Standard Deviations for Attitudes Regarding Therapeutic Intervention: Gender by Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	3.82	1.46
Males		3.20	1.38

Table F-2

Source Table for Attitudes Regarding Therapeutic Intervention: Gender by Individual Counseling

Source	df	t Value
Gender	73	3.78*

\*p < .01

Table F-4

Source Table for Attitudes Regarding Therapeutic Intervention: Gender by Couple Counseling

Source	df	t Value
Gender	73	2.37

Table F-6

Source Table for Attitudes Regarding Therapeutic Intervention: Gender by Same Sex Group Counseling

Source	df	t Value
Gender	73	3.22*

\*p < .01

Table F-7

Group Means and Standard Deviations for Attitudes Regarding Therapeutic Intervention: Gender by Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	3.81	1.52
Males		3.53	1.39

Table F-9

Group Means and Standard Deviations for Attitudes Regarding Therapeutic Intervention: Gender by Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	4.19	1.42
Males		3.80	1.40

Table F-11

Group Means and Standard Deviations for Attitudes Regarding Therapeutic Intervention: Gender by Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
Females	74 (Couples)	4.47	1.24
Males		4.03	1.36

Table F-8

Source Table for Attitudes Regarding Therapeutic Intervention: Gender by Mixed Sex Group Counseling

Source	df	t Value
Gender	73	1.44

Table F-10

Source Table for Attitudes Regarding Therapeutic Intervention: Gender by Couple Group Counseling

Source	df	t Value
Gender	73	2.21

Table F-12

Source Table for Attitudes Regarding Therapeutic Intervention: Gender by Peer Support Group

Source	df	t Value
Gender	73	2.41

Table F-13

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	5.33	1.15
25-29 years	25	3.32	1.63
30-34 years	30	4.17	1.51
35-39 years	14	3.14	1.35
> 39 years	2	6.00	.00

Table F-15

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	5.33	1.15
25-29 years	25	3.80	1.61
30-34 years	30	4.27	1.36
35-39 years	14	3.71	1.44
> 39 years	2	6.00	.00

Table F-17

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	5.67	.58
25-29 years	25	3.56	1.53
30-34 years	30	3.93	1.41
35-39 years	14	3.43	1.22
> 39 years	2	5.50	.71

Table F-19

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	4.67	1.15
25-29 years	25	3.76	1.69
30-34 years	30	3.87	1.38
35-39 years	14	3.36	1.60
> 39 years	2	5.50	.71

Table F-14

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	32.55	8.14	3.60*
Within Groups	69	155.99	2.26	
Total	73	188.54		

\*p < .01

Table F-16

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	16.95	4.24	2.01
Within Groups	69	145.39	2.11	
Total	73	162.34		

Table F-18

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	20.08	5.02	2.57
Within Groups	69	134.62	1.85	
Total	73	154.72		

Table F-20

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	10.94	2.74	1.19
Within Groups	69	158.41	2.30	
Total	73	169.35		



Table F-21

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	5.33	1.15
25-29 years	25	4.08	1.53
30-34 years	30	4.40	1.30
35-39 years	14	3.50	1.34
> 39 years	2	5.50	.71

Table F-23

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	5.00	1.00
25-29 years	25	4.44	1.26
30-34 years	30	4.43	1.38
35-39 years	14	4.29	.91
> 39 years	2	6.00	.00

Table F-25

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	3.80	1.99
Between 2 and 5 years	36	4.03	1.52
> 5 years	28	3.46	1.57

Table F-27

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	4.20	1.62
Between 2 and 5 years	36	4.28	1.43
> 5 years	28	3.82	1.54

Table F-22

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	15.64	3.91	2.05
Within Groups	69	131.71	1.81	
Total	73	147.35		

Table F-24

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Age by  
Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	6.06	1.52	.98
Within Groups	69	106.38	1.54	
Total	73	112.45		

Table F-26

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	5.00	2.50	.97
Within Groups	71	183.54	2.59	
Total	73	188.54		

Table F-28

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	3.41	1.70	.76
Within Groups	71	158.93	2.24	
Total	73	162.34		

Table F-29

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	4.10	1.60
Between 2 and 5 years	36	3.83	1.42
> 5 years	28	3.71	1.49

Table F-31

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	4.40	1.17
Between 2 and 5 years	36	3.83	1.50
> 5 years	28	3.57	1.64

Table F-33

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	4.60	1.17
Between 2 and 5 years	36	4.39	1.34
> 5 years	28	3.79	1.55

Table F-35

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	4.70	1.25
Between 2 and 5 years	36	4.39	1.27
> 5 years	28	4.50	1.23

Table F-30

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	1.10	.55	.25
Within Groups	71	153.61	2.16	
Total	73	154.72		

Table F-32

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	5.09	2.55	1.10
Within Groups	71	164.26	2.31	
Total	73	169.35		

Table F-34

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	7.68	3.84	1.95
Within Groups	71	139.67	1.97	
Total	73	147.35		

Table F-36

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	.79	.40	.25
Within Groups	71	111.66	1.57	
Total	73	112.45		

Table F-37

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	4.15	1.51
Medical Problems			
Male Only	14	2.86	1.79
Medical Problems			
Female and Male	20	4.15	1.35
Medical Problems			
Cause Unknown	13	3.46	1.66

Table F-39

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	4.33	1.27
Medical Problems			
Male Only	14	3.43	1.99
Medical Problems			
Female and Male	20	4.35	1.23
Medical Problems			
Cause Unknown	13	3.92	1.61

Table F-41

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	4.11	1.31
Medical Problems			
Male Only	14	3.14	1.70
Medical Problems			
Female and Male	20	4.20	1.24
Medical Problems			
Cause Unknown	13	3.38	1.56

Table F-43

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	3.96	1.48
Medical Problems			
Male Only	14	3.14	1.75
Medical Problems			
Female and Male	20	4.15	1.46
Medical Problems			
Cause Unknown	13	3.69	1.38

Table F-38

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	19.64	6.55	2.71
Within Groups	70	168.90	2.41	
Total	73	188.54		

Table F-40

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	9.44	3.15	1.44
Within Groups	70	152.90	2.18	
Total	73	162.34		

Table F-42

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	14.06	4.69	2.33
Within Groups	70	140.66	2.01	
Total	73	154.72		

Table F-44

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	9.35	3.12	1.36
Within Groups	70	160.00	2.29	
Total	73	169.35		

Table F-45

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	4.30	1.46
Medical Problems			
Male Only	14	3.79	1.63
Medical Problems			
Female and Male	20	4.35	1.27
Medical Problems			
Cause Unknown	13	4.15	1.41

Table F-47

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	4.85	1.17
Medical Problems			
Male Only	14	4.14	1.51
Medical Problems			
Female and Male	20	4.50	.95
Medical Problems			
Cause Unknown	13	4.00	1.35

Table F-49

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment	19	4.00	1.41
and 3rd Party Procedure			
Medical Treat. Only	14	4.21	1.31
3rd Party Proc. Only	31	3.48	1.60
No Med. Treat. and	10	3.70	2.06
No 3rd Party Proc.			

Table F-51

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment	19	4.37	1.21
and 3rd Party Procedure			
Medical Treat. Only	14	4.43	1.22
3rd Party Proc. Only	31	3.97	1.60
No Med. Treat. and	10	3.50	1.90
No 3rd Party Proc.			

Table F-46

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	3.12	1.04	.51
Within Groups	70	144.23	2.06	
Total	73	147.35		

Table F-48

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	8.32	2.77	1.87
Within Groups	70	104.12	1.49	
Total	73	112.45		

Table F-50

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	6.34	2.11	.81
Within Groups	70	182.20	2.60	
Total	73	188.54		

Table F-52

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	7.02	2.34	1.05
Within Groups	70	155.32	2.22	
Total	73	162.34		

Table F-53

Group Means and Standard Deviations for  
Female Attitudes Regarding Therapeutic  
Intervention: Present Treatment  
Status by Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	3.84	1.39
Medical Treat. Only	14	4.07	1.44
3rd Party Proc. Only	31	3.97	1.47
No Med. Treat. and No 3rd Party Proc.	10	3.00	1.49

Table F-55

Group Means and Standard Deviations for  
Female Attitudes Regarding Therapeutic  
Intervention: Present Treatment  
Status by Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	3.47	1.61
Medical Treat. Only	14	4.36	1.39
3rd Party Proc. Only	31	3.90	1.56
No Med. Treat. and No 3rd Party Proc.	10	3.40	1.35

Table F-57

Group Means and Standard Deviations for  
Female Attitudes Regarding Therapeutic  
Intervention: Present Treatment  
Status by Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	4.05	1.51
Medical Treat. Only	14	4.84	1.34
3rd Party Proc. Only	31	4.16	1.48
No Med. Treat. and No 3rd Party Proc.	10	3.90	1.29

Table F-59

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	4.11	1.52
Medical Treat. Only	14	4.71	1.33
3rd Party Proc. Only	31	4.65	1.02
No Med. Treat. and No 3rd Party Proc.	10	4.30	1.16

Table F-54

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Present Treatment  
Status by Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	8.29	2.76	1.32
Within Groups	70	146.42	2.09	
Total	73	154.72		

Table F-56

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Present Treatment  
Status by Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	8.29	2.76	1.20
Within Groups	70	161.06	2.30	
Total	73	169.35		

Table F-58

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Present Treatment  
Status by Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	4.10	1.37	.67
Within Groups	70	143.26	2.05	
Total	73	147.35		

Table F-60

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	4.60	1.53	1.00
Within Groups	70	107.84	1.54	
Total	73	112.45		

Table F-61

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	4.00	1.41
Protestant	38	3.74	1.67
Other	24	3.79	1.53
None	6	3.83	2.04

Table F-63

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	3.67	1.03
Protestant	38	4.08	1.60
Other	24	4.17	1.37
None	6	4.33	1.86

Table F-65

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	3.83	1.17
Protestant	38	3.76	1.51
Other	24	3.88	1.45
None	6	4.00	1.67

Table F-67

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	4.17	.75
Protestant	38	3.76	1.62
Other	24	3.75	1.54
None	6	4.00	1.67

Table F-62

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	.38	.13	.05
Within Groups	70	188.16	2.69	
Total	73	188.54		

Table F-64

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	1.57	.52	.23
Within Groups	70	160.76	2.30	
Total	73	162.34		

Table F-66

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	.39	.13	.06
Within Groups	70	154.33	2.20	
Total	73	154.72		

Table F-68

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	1.15	.38	.16
Within Groups	70	168.20	2.40	
Total	73	169.35		

Table F-69

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	4.33	.82
Protestant	38	4.24	1.42
Other	24	4.13	1.54
None	6	4.00	1.67

Table F-71

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
Catholic	6	5.00	.89
Protestant	38	4.50	1.13
Other	24	4.33	1.40
None	6	4.33	1.63

Table F-73

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	6	4.17	1.72
One Time A Year	6	4.00	1.79
Several Times A Year	10	4.60	1.58
One Time A Week	34	3.71	1.49
Several Times A Week	18	3.28	1.71

Table F-75

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	6	4.67	1.37
One Time A Year	6	4.00	1.79
Several Times A Year	10	4.90	1.29
One Time A Week	34	4.03	1.35
Several Times A Week	18	3.61	1.69

Table F-70

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	.52	.17	.08
Within Groups	70	146.83	2.10	
Total	73	147.35		

Table F-72

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religion  
by Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	2.28	.76	.48
Within Groups	70	110.17	1.57	
Total	73	112.45		

Table F-74

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	12.64	3.16	1.24
Within Groups	69	175.90	2.55	
Total	73	188.54		

Table F-76

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	12.85	3.21	1.48
Within Groups	69	149.48	2.17	
Total	73	162.34		

Table F-77

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	4.17	1.47
Service Attendance			
One Time A Year	6	4.00	1.79
Several Times A Year	10	4.10	1.45
One Time A Week	34	3.82	1.40
Several Times A Week	18	3.50	1.54

Table F-79

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	4.33	1.63
Service Attendance			
One Time A Year	6	3.83	1.83
Several Times A Year	10	4.60	1.08
One Time A Week	34	3.79	1.43
Several Times A Week	18	3.22	1.86

Table F-81

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	4.33	1.63
Service Attendance			
One Time A Year	6	4.17	1.83
Several Times A Year	10	5.10	.88
One Time A Week	34	4.12	1.47
Several Times A Week	18	3.78	1.28

Table F-83

Group Means and Standard Deviations  
for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
No Religious	6	4.50	1.38
Service Attendance			
One Time A Year	6	4.50	1.52
Several Times A Year	10	4.80	1.23
One Time A Week	34	4.32	1.45
Several Times A Week	18	4.56	.62

Table F-78

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	3.54	.89	.40
Within Groups	69	151.17	2.19	
Total	73	154.72		

Table F-80

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	14.11	3.53	1.57
Within Groups	69	155.24	2.25	
Total	73	169.35		

Table F-82

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	11.64	2.91	1.48
Within Groups	69	135.71	1.97	
Total	73	147.35		

Table F-84

Source Table for Female Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	1.96	.49	.31
Within Groups	69	110.49	1.60	
Total	73	112.45		



Table F-85

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	2.67	2.08
25-29 years	17	2.88	1.41
30-34 years	34	2.85	1.21
35-39 years	14	3.79	1.25
> 39 years	6	3.67	1.63

Table F-87

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	4.33	.58
25-29 years	17	3.47	1.46
30-34 years	34	3.53	1.44
35-39 years	14	4.21	1.05
> 39 years	6	4.00	1.87

Table F-89

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	3.00	2.00
25-29 years	17	2.71	1.21
30-34 years	34	3.21	1.41
35-39 years	14	3.93	1.33
> 39 years	6	3.00	1.10

Table F-91

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	2.67	2.08
25-29 years	17	3.29	1.36
30-34 years	34	3.68	1.43
35-39 years	14	3.86	1.29
> 39 years	6	3.00	1.20

Table F-86

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	11.95	2.99	1.68
Within Groups	69	122.39	1.77	
Total	73	134.34		

Table F-88

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	7.31	1.83	.96
Within Groups	69	131.73	1.91	
Total	73	139.04		

Table F-90

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	11.94	2.99	1.63
Within Groups	69	126.02	1.83	
Total	73	137.96		

Table F-92

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	7.09	1.77	.92
Within Groups	69	133.35	1.93	
Total	73	140.45		

Table F-93

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	3.67	1.53
25-29 years	17	3.65	1.54
30-34 years	34	3.88	1.41
35-39 years	14	4.00	1.24
> 39 years	6	3.33	1.51

Table F-95

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
< 25 years	3	3.00	1.73
25-29 years	17	4.12	1.45
30-34 years	34	4.00	1.35
35-39 years	14	4.36	1.15
> 39 years	6	3.67	1.51

Table F-97

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	2.30	1.16
Between 2 and 5 years	36	3.31	1.39
> 5 years	28	3.11	1.31

Table F-99

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	3.70	1.49
Between 2 and 5 years	36	4.06	1.33
> 5 years	28	3.29	1.33

Table F-94

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	2.55	.64	.32
Within Groups	69	139.41	2.02	
Total	73	141.96		

Table F-96

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Age by  
Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	5.63	1.41	.76
Within Groups	69	128.31	1.86	
Total	73	133.95		

Table F-98

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	7.92	3.96	2.22
Within Groups	71	126.42	1.78	
Total	73	134.34		

Table F-100

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	9.34	4.67	2.56
Within Groups	71	129.70	1.83	
Total	73	139.04		

Table F-101

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	2.90	1.37
Between 2 and 5 years	36	3.33	1.39
> 5 years	28	3.14	1.38

Table F-103

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	3.00	1.41
Between 2 and 5 years	36	3.72	1.32
> 5 years	28	3.46	1.45

Table F-105

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	3.50	1.58
Between 2 and 5 years	36	4.08	1.34
> 5 years	28	3.54	1.37

Table F-107

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
> 1 but < 2 years	10	4.10	1.52
Between 2 and 5 years	36	3.97	1.30
> 5 years	28	4.07	1.41

Table F-102

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	1.63	.82	.42
Within Groups	71	136.33	1.92	
Total	73	137.96		

Table F-104

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	4.26	2.13	1.11
Within Groups	71	136.19	1.92	
Total	73	140.45		

Table F-106

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	5.75	2.87	1.50
Within Groups	71	136.21	1.92	
Total	73	141.96		

Table F-108

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Duration of  
Infertility by Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	2	.22	.11	.06
Within Groups	71	133.73	1.88	
Total	73	133.95		

Table F-109

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	3.44	1.22
Medical Problems			
Male Only	14	2.93	1.33
Medical Problems			
Female and Male	20	3.15	1.53
Medical Problems			
Cause Unknown	13	2.46	1.27

Table F-111

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	3.96	1.09
Medical Problems			
Male Only	14	3.36	1.50
Medical Problems			
Female and Male	20	4.00	1.41
Medical Problems			
Cause Unknown	13	3.15	1.63

Table F-113

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	3.33	1.18
Medical Problems			
Male Only	14	3.36	1.39
Medical Problems			
Female and Male	20	3.00	1.49
Medical Problems			
Cause Unknown	13	3.08	1.66

Table F-115

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	3.44	1.28
Medical Problems			
Male Only	14	3.50	1.40
Medical Problems			
Female and Male	20	3.95	1.39
Medical Problems			
Cause Unknown	13	3.08	1.55

Table F-110

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	8.96	2.99	1.67
Within Groups	70	125.38	1.79	
Total	73	134.34		

Table F-112

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	9.17	3.06	1.65
Within Groups	70	129.87	1.86	
Total	73	139.04		

Table F-114

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	1.82	.61	.31
Within Groups	70	136.14	1.94	
Total	73	137.96		

Table F-116

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	6.41	2.14	1.12
Within Groups	70	134.04	1.91	
Total	73	140.45		

Table F-117

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	3.78	1.19
Medical Problems			
Male Only	14	3.43	1.45
Medical Problems			
Female and Male	20	4.20	1.47
Medical Problems			
Cause Unknown	13	3.62	1.61

Table F-119

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
Female Only	27	3.93	1.30
Medical Problems			
Male Only	14	3.79	1.42
Medical Problems			
Female and Male	20	4.40	1.39
Medical Problems			
Cause Unknown	13	3.92	1.38

Table F-121

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment	19	3.26	1.24
and 3rd Party Procedure			
Medical Treat. Only	14	3.43	1.34
3rd Party Proc. Only	31	2.87	1.36
No Med. Treat. and	10	3.00	1.63
No 3rd Party Proc.			

Table F-123

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment	19	3.74	1.37
and 3rd Party Procedure			
Medical Treat. Only	14	4.00	1.30
3rd Party Proc. Only	31	3.55	1.36
No Med. Treat. and	10	3.80	1.69
No 3rd Party Proc.			

Table F-118

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	5.59	1.86	.96
Within Groups	70	136.37	1.95	
Total	73	141.96		

Table F-120

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Origin of  
Infertility by Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	4.01	1.34	.72
Within Groups	70	129.93	1.86	
Total	73	133.95		

Table F-122

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	3.74	1.25	.67
Within Groups	70	130.60	1.87	
Total	73	134.34		

Table F-124

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	2.08	.69	.35
Within Groups	70	136.96	1.96	
Total	73	139.04		

Table F-125

Group Means and Standard Deviations for  
Male Attitudes Regarding Therapeutic  
Intervention: Present Treatment  
Status by Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	3.16	1.30
Medical Treat. Only	14	3.57	1.34
3rd Party Proc. Only	31	3.13	1.38
No Med. Treat. and No 3rd Party Proc.	10	3.00	1.63

Table F-127

Group Means and Standard Deviations for  
Male Attitudes Regarding Therapeutic  
Intervention: Present Treatment  
Status by Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	3.47	1.35
Medical Treat. Only	14	3.50	1.34
3rd Party Proc. Only	31	3.48	1.36
No Med. Treat. and No 3rd Party Proc.	10	3.80	1.75

Table F-129

Group Means and Standard Deviations for  
Male Attitudes Regarding Therapeutic  
Intervention: Present Treatment  
Status by Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	3.58	1.39
Medical Treat. Only	14	3.57	1.22
3rd Party Proc. Only	31	3.97	1.35
No Med. Treat. and No 3rd Party Proc.	10	4.00	1.83

Table F-131

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
Medical Treatment and 3rd Party Procedure	19	3.58	1.30
Medical Treat. Only	14	4.07	1.14
3rd Party Proc. Only	31	4.18	1.40
No Med. Treat. and No 3rd Party Proc.	10	4.80	1.51

Table F-126

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Present Treatment  
Status by Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	2.52	.84	.43
Within Groups	70	135.44	1.93	
Total	73	137.96		

Table F-128

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Present Treatment  
Status by Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	.87	.29	.15
Within Groups	70	139.58	1.99	
Total	73	140.45		

Table F-130

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Present Treatment  
Status by Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	2.93	.98	.49
Within Groups	70	139.03	1.99	
Total	73	141.96		

Table F-132

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Present  
Treatment Status by Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	7.28	2.43	1.34
Within Groups	70	126.67	1.81	
Total	73	133.95		

Table F-133

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	3.29	1.25
Protestant	31	3.23	1.36
Other	27	2.89	1.28
None	9	3.11	1.76

Table F-135

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	3.71	1.25
Protestant	31	3.61	1.49
Other	27	3.74	1.32
None	9	4.00	1.41

Table F-137

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	3.14	1.46
Protestant	31	3.29	1.35
Other	27	3.07	1.47
None	9	3.33	1.32

Table F-139

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	3.14	1.46
Protestant	31	3.45	1.41
Other	27	3.56	1.37
None	9	4.00	1.41

Table F-134

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	1.93	.64	.34
Within Groups	70	132.40	1.89	
Total	73	134.34		

Table F-136

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	1.07	.36	.18
Within Groups	70	137.97	1.97	
Total	73	139.04		

Table F-138

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	.86	.29	.15
Within Groups	70	137.10	1.96	
Total	73	137.96		

Table F-140

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	3.24	1.08	.55
Within Groups	70	137.20	1.96	
Total	73	140.45		

Table F-141

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	3.29	1.25
Protestant	31	3.71	1.51
Other	27	3.81	1.30
None	9	4.44	1.33

Table F-143

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
Catholic	7	4.00	1.53
Protestant	31	4.13	1.31
Other	27	3.89	1.45
None	9	4.11	1.27

Table F-145

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Individual Counseling

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	7	3.00	1.41
One Time A Year	8	3.75	1.83
Several Times A Year	13	3.31	1.18
One Time A Week	26	2.92	1.23
Several Times A Week	20	2.95	1.43

Table F-147

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Couple Counseling

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	7	4.00	1.15
One Time A Year	8	4.00	1.69
Several Times A Year	13	3.69	1.32
One Time A Week	26	3.85	1.26
Several Times A Week	20	3.35	1.57

Table F-142

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	5.85	1.95	1.00
Within Groups	70	136.11	1.94	
Total	73	141.96		

Table F-144

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religion  
by Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	3	.91	.30	.16
Within Groups	70	133.04	1.90	
Total	73	133.95		

Table F-146

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Individual Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	5.27	1.32	.70
Within Groups	69	129.07	1.87	
Total	73	134.34		

Table F-148

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Couple Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	4.34	1.08	.56
Within Groups	69	134.70	1.95	
Total	73	139.04		



Table F-149

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Same Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	7	3.14	1.46
One Time A Year	8	3.63	1.41
Several Times A Year	13	3.31	1.32
One Time A Week	26	3.08	1.41
Several Times A Week	20	3.15	1.42

Table F-151

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Mixed Sex Group Counseling

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	7	3.43	1.51
One Time A Year	8	4.38	1.19
Several Times A Year	13	3.62	1.45
One Time A Week	26	3.46	1.30
Several Times A Week	20	3.25	1.48

Table F-153

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Couple Group Counseling

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	7	3.86	1.57
One Time A Year	8	4.50	1.20
Several Times A Year	13	3.46	1.20
One Time A Week	26	3.88	1.31
Several Times A Week	20	3.60	1.64

Table F-155

Group Means and Standard Deviations  
for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Peer Support Group

Group	Number of Cases	Mean	Standard Deviation
No Religious Service Attendance	7	4.14	1.35
One Time A Year	8	4.00	1.41
Several Times A Year	13	3.46	1.13
One Time A Week	26	4.12	1.42
Several Times A Week	20	4.25	1.41

Table F-150

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Same Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	2.06	.52	.26
Within Groups	69	135.90	1.97	
Total	73	137.96		

Table F-152

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Mixed Sex Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	7.57	1.89	.98
Within Groups	69	132.88	1.93	
Total	73	140.45		

Table F-154

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Couple Group Counseling

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	6.42	1.60	.82
Within Groups	69	135.54	1.96	
Total	73	141.96		

Table F-156

Source Table for Male Attitudes Regarding  
Therapeutic Intervention: Religiosity  
by Peer Support Group

Source	df	Sum of Squares	Mean Squares	F Ratio
Between Groups	4	5.45	1.36	.73
Within Groups	69	128.49	1.86	
Total	73	133.95		

2

VITA

Patricia N. Sterling

Candidate for the Degree of

Doctor of Philosophy

**Thesis:** AN EXAMINATION OF ATTITUDES AND PERCEPTIONS EXPRESSED  
BY THE INDIVIDUAL EXPERIENCING INFERTILITY

**Major Field:** Applied Behavioral Studies

**Specialization:** Counseling Psychology

**Biographical:**

**Personal Data:** Born in Atlanta, Georgia, September 9, 1949, the daughter  
of Grady and Frances Nation.

**Education:** Graduated from Tatescreek High School, Lexington, Kentucky  
in June, 1967; received Bachelor of Arts degree in Education from  
the University of Kentucky, Lexington, Kentucky, in May, 1971;  
received Master of Education degree in Learning Disabilities from  
Central State University, Edmond, Oklahoma, in May, 1981; received  
Master of Education Degree in Counseling Psychology from Central  
State University, Edmond, Oklahoma, in May, 1984; completed  
requirements for the Doctor of Philosophy degree in Applied  
Behavioral Studies in Counseling Psychology at Oklahoma State  
University in December, 1988.

**Professional Experience:** Teacher of Learning Disabilities, Fayette County  
Public Schools, Lexington, Kentucky, 1971 to 1973; Teacher of  
Learning Disabilities, Columbus Public Schools, Columbus, Ohio, 1973  
to 1974; Teacher of Learning Disabilities, Birmingham Public Schools,  
Birmingham, Alabama, 1974 to 1976; Editor, Economy Publishing  
Company, Oklahoma City, Oklahoma, 1976 to 1977; Office Manager,  
Midland Mortgage, Oklahoma City, Oklahoma, 1977 to 1978; Teacher  
of Learning Disabilities, Moore Public Schools, Moore, Oklahoma,  
1978 to 1983; Practicum Outpatient Therapist: Guidance Center  
System of Oklahoma, Guthrie, Oklahoma, El Reno, Oklahoma, Yukon,  
Oklahoma, Kingfisher, Oklahoma, 1984 to 1986; Marriage and Family  
Counseling Service, Stillwater, Oklahoma, 1984 to 1986;  
Psychological Assistant, Kingfisher County Guidance Center,

Kingfisher, Oklahoma, 1985 to 1986; Psychology Intern, Primary Children's Medical Center, Salt Lake City, Utah, 1986 to 1987; Therapist, Oklahoma Christian Counseling Center, Oklahoma City, Oklahoma, 1987 to present.

Professional Organizations: American Psychological Association;  
American Association for Marriage and Family Therapy.