THE RELATIONSHIP BETWEEN FAMILY SUPPORT, COPING MECHANISMS AND ANXIETY IN INFERTILE MOTHERS

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ABSTRACT

About 10–15% of the 39.8 million fertile couples in Indonesia struggle with infertility. As a result, an estimated 4 to 6 million couples require treatment to help them have children. 74.6% of infertile women reported experiencing mood swings, feeling helpless because of the duration of infertility they experienced. This study aims to determine whether there is a relationship between husband support and coping mechanisms with stress levels in infertile mothers at the Varia Medika Clinic. This study used a quantitative, cross-sectional design. The population in this study was all infertile couples at the Varia Medika Clinic in 2024, with a sample taken through a purposive sampling technique of 52 respondents. Data were collected using a questionnaire that has been tested for validity and reliability. Based on the results of the study, statistically, there is a relationship between coping mechanisms and anxiety (p = 0.000). The chi-square test in SPSS yielded a p-value of p 0.008 (α = 0.05), indicating a significant association between family support and stress levels among women experiencing infertility.

Keywords: Coping mechanisms, Anxiety, Infertile couples

Introduction

Infertility is the inability to conceive, the failure to maintain a pregnancy, or the inability to carry a pregnancy to a live birth (Moutzouri et al., 2024). Infertility can be primary, where a couple fails to conceive in at least one year of regular sexual intercourse without contraception, with an incidence of 62.0% and secondary infertility, namely the inability of a person to have children or maintain a pregnancy, with an incidence of 38.0%. Globally, estimates suggest that 50 to 80 million couples experience infertility. This issue shows a significant disparity in prevalence; it is approximately 30% in developing countries, whereas in developed countries, it is only 5%–8% (WHO, 2020).

Coping mechanisms are what individuals use to manage situations perceived as challenges, injuries, losses, or threats (Pásztor et al., 2019). Coping mechanisms are more directly oriented toward how people deal with stressful or emotionally arousing demands. Adjustment in dealing with stress and in the concept of mental health is known as coping a social support mechanism (Bondarchuk & Pavlenok, 2024). Assisting the patient's parents, family, friends, and the community can foster feelings of being cared for, liked, and appreciated, thereby altering the individual's coping mechanisms. The husband is the first and foremost person who can provide support, inner peace, and happiness to the wife (Jain & Khan, 2025). In the context of North Sumatra, this support is often integrated within local wisdom, such as the Dalihan Na Tolu approach, which emphasizes community

and family participation in empowering maternal health (Sinaga,dkk. 2021).

Anxiety, according to the APA, is more than just a feeling; it is a complex reaction to stress. It involves three key components: emotional tension, worry, and physical symptoms such as increased heart rate or blood pressure (Szuhany & Simon, 2022).

Infertility can cause significant psychological distress for couples, especially for mothers experiencing primary infertility. This condition is often accompanied by anxiety, stress, and challenges during treatment (Jadhav & Govil, 2025). Family support, particularly from the husband, along with effective coping strategies, can influence the stress levels experienced by infertile mothers. Therefore, it is essential to understand the relationship between family support and coping mechanisms and anxiety levels in infertile mothers (Antonia et al., 2021; Putri & Dwihestie, 2021)

This study aims to determine whether there is a relationship between family support and coping mechanisms with anxiety levels in infertile mothers at the Varia Medika Clinic in 2024. The results of this study are expected to provide deeper insights into the role of family support and coping strategies in managing anxiety, as well as become the basis for developing more appropriate interventions to improve the psychological health of infertile mothers.

Research Method

This study used a quantitative cross-sectional approach. This study aimed to determine the relationship between husbands' support and coping mechanisms on stress levels in infertile women at the Varia Medika Clinic. The study design was a correlational survey, a study conducted at a single point in time to analyze relationships between variables. The study was conducted at the Varia Medika Clinic in Medan, which provides healthcare services for infertile couples. The study was scheduled to run from May 2024 to June 2024, with stages including proposal preparation, revision, ethics submission, data collection, and data analysis. The study population was fertile couples experiencing infertility. Primary patients who are undergoing treatment at the Varia Medika Clinic. A purposive sample of 52 infertile mothers was drawn who met the inclusion and exclusion criteria. Sampling was carried out using a non-probability purposive sampling technique, namely selecting infertile couples who met specific criteria,

such as age 20-45 years, primary infertility diagnosis, and willingness to participate in the study. Data were collected using a Likert-scale questionnaire comprising the Husband Support Scale (measuring the level of support provided by the husband), the Coping Mechanism Scale (measuring how the mother deals with anxiety), and the Stress Level Scale (measuring the level of anxiety and stress). This instrument has previously been tested for validity and reliability. Data were collected through interviews and direct distribution of questionnaires to respondents.

The research stages included preparation, data collection, processing, and analysis. Data were analyzed using SPSS version 25, including validity and reliability tests, descriptions of respondent characteristics, and Pearson correlation analyses to examine the relationships among husband support, coping mechanisms, and stress levels in infertile mothers. Hypothesis testing was conducted at a significance level of $p < 0.05$

Result

The results of this study can be summarized as follows: the Relationship between Family Support and Coping Mechanisms with anxiety among infertile mothers at the Varia Medika Clinic in 2024, with a total of 52 respondents, was assessed using the chi-square test.

1. Univariate Analysis

The characteristics of respondents based on the Relationship between Family Support and Coping Mechanisms with Anxiety in Infertile Mothers at the Varia Medika Clinic in 2024 can be seen in the Table below:

Table 1.1 Frequency and percentage distribution based on respondent characteristics at Varia Medika Clinic in 2024

No	Variables	(n)	(%)
1	**Mother's Age**		
	<20 years	2	3.8
	20-35 years	38	73.1
	>35 years	12	23.1
	Total	**52**	**100**
2	**Mother's Education**		
	Low Education (Not Elementary School)	6	11.5
	Secondary Education (SMP)	41	78.8
	Higher Education (SMA-PT)	5	9.6
	Total	**52**	**100**
3	**Employment Status**		
	Work	29	55.8
	Does not work	23	44.2
4	**Parity**		
	Primipara	4	5.3
	Multipara	21	27.6
	Grandemultipara	27	35.5
	Total	**52**	**100**

Based on the demographic data of the 52 respondents, the majority of mothers fall within the 20–35 year age range, accounting for 73.1% of the sample. In terms of educational background, a significant portion of the participants (78.8%) attained a secondary education (SMP). Regarding employment, more than half of the respondents are currently working (55.8%), while the remaining 44.2% do not work. Furthermore, the parity data indicates that grandemultipara mothers represent the largest group at 35.5%, followed by multipara at 27.6% and primipara at 5.3%.

Table 1.2 Frequency and percentage distribution based on respondents' family support at the Varia Medika Clinic

Variables	(n)	(%)
Support	16	30,7
Does not support	36	69,2
Total	**52**	**100**

Based on the survey results involving 52 respondents, the data reveals that a significant majority do not support the variable under study. Specifically, 36 individuals (69.2%) indicated they "Does not support," while only 16 individuals (30.7%) expressed their "Support." This distribution indicates that the level of non-support is more than double the level of support within the sampled group.

Table 1.3 Frequency and percentage distribution based on Copping Mechanism at Varia Medika Clinic

Variables	(n)	(%)
Foccus on emotions	24	46,2
Foccus on problem	28	53,8
Total	**52**	**100**

According to Table 1.3, the distribution of coping mechanisms among the 52 respondents at Varia Medika Clinic shows that a slight majority utilize a problem-focused approach. Specifically, 28 respondents (53.8%) reported a focus on problems, while the remaining 24 respondents (46.2%) reported a focus on emotions as their primary coping mechanism. These findings indicate a relatively balanced distribution between the two strategies, with problem-focused

coping being the more prevalent method used by the participants.

Table 1.4 Frequency and Percentage Distribution Based on Anxiety Level at Varia Medika Clinic in 2024

Variables	(n)	(%)
Mild anxiety	19	46,3
Moderate anxiety	20	53,8
Severe anxiety	15	8
Total	**52**	**100**

The data indicates that the majority of respondents experienced moderate anxiety, accounting for 20 individuals (53.8%). This was followed by mild anxiety, which was reported by 19 respondents (46.2%). Meanwhile, severe anxiety represented the smallest group, with 15 respondents contributing to the total sample size of 52 individuals.

2. Bivariate Analysis
Tabel 2.1. Cros-table of relationship between family support and anxiety level

Family Support	Mild Anxiety	Moderate Anxiety	Severe Anxiety	Total	P-Value
	n (%)	n (%)	n (%)	n (%)	
Supporting	47 (57.3)	3 (20.7)	2 (2.4)	52 (100)	**0.008**
Less Supporting	4 (4.8)	16 (5.8)	24 (46)	52 (100)	

Table 2.1 shows a significant relationship between family support and anxiety levels, as indicated by a p-value of 0.008. Respondents with supporting families primarily experienced mild anxiety (57.3%), whereas those with less supporting families were more likely to suffer from severe anxiety (46%). These findings suggest that higher levels of family support are statistically associated with lower levels of anxiety among the respondents

Table 2.2 Cross-Table of the Relationship Between Coping Mechanisms and Anxiety Level

Coping Mechanisms	Mild Anxiety n (%)	Moderate Anxiety n (%)	Severe Anxiety n (%)	Total n (%)	P-Value
Focus on the problem	47 (57.3)	3 (20.7)	2 (2.4)	52 (100)	0.004
Focuses on emotions	4 (4.8)	16 (5.8)	24 (46)	52 (100)	

Table 2.2 indicates a significant relationship between coping mechanisms and anxiety levels, as evidenced by a p-value of 0.004 (p < 0.05). The data reveals that respondents who used a "focus on the problem" coping mechanism predominantly experienced mild anxiety (57.3%), while those who utilized a "focuses on emotions" mechanism were more likely to report severe anxiety (46%). These results suggest that the type of coping mechanism employed by individuals at Varia Medika Clinic is statistically associated with their level of anxiety.

Discussion

The study reveals that family support plays a critical role in managing psychological distress among infertile mothers. Statistical analysis indicates a significant relationship between family support and anxiety levels with a p= 0,008. Respondents who perceived their families as "supporting" were overwhelmingly likely to experience only mild anxiety (57.3%), whereas those with "less supporting" families were more prone to severe anxiety (46%). This aligns with the theory that a husband's presence as a primary source of inner peace and happiness can significantly alter a wife's emotional response to the challenges of infertility

Furthermore, the type of coping mechanism adopted by these women significantly influences their anxiety outcomes p = 0,004. Individuals utilizing a problem-focused approach showed much better emotional stability, with 57.3% reporting only mild anxiety. In contrast, those who focused primarily on emotions were significantly more likely to experience severe anxiety. This suggests that adaptive coping strategies—specifically those

oriented toward directly dealing with stressful demands—are more effective in mitigating the complex emotional tension and worry associated with infertility

The demographic profile of the respondents at Varia Medika Clinic also provides essential context for these findings. The majority of the sample (73.1%) consists of women in their peak reproductive years (20–35 years old), a period where the social and personal pressure to conceive is often highest. Additionally, the high prevalence of non-support (69.2%) observed in the univariate analysis is a concerning trend, as it directly correlates with the higher stress levels noted in the bivariate results. These factors combined underscore the high psychological vulnerability of infertile mothers in this specific clinical setting (Danfeng Cao, 2022)·

In conclusion, the findings emphasize that managing infertility is not merely a physical challenge but a deeply psychological one. Social support from a partner and the development of adaptive coping mechanisms are essential interventions to reduce anxiety levels in this population (Gutiez et al., 2025). Since there is a proven significant relationship between these variables, clinical practitioners at Varia Medika Clinic should consider incorporating psychological counseling and family-based support programs into their standard fertility treatments to improve the overall mental health of their patients

Conclusion And Suggestion

1. Based on the research results, almost all infertile women (85.7%) who focused on emotions experienced moderate anxiety. Statistically, there was a relationship between coping mechanisms and anxiety ($p = 0.000$).

2. From the results of research conducted on women experiencing infertility at Morula IVF Makassar, the statistical analysis (SPSS) using the chi-square test shows a p-value of p 0.008 and a significant α of 0.05. These results indicate that the value of α states that Ha is accepted and Ho is rejected, meaning that there is a relationship between 40 family support and stress levels in women experiencing infertility at Morula IVF Makassar.

Suggestion

The results of this study indicate that spousal support and coping mechanisms significantly influence anxiety levels in infertile mothers. Social support from a partner and adaptive coping mechanisms can help reduce anxiety levels in infertile mothers.

Because there is a significant relationship between coping mechanisms and the level of anxiety of infertile mothers, there is an essential relationship between family support and the level of anxiety of infertile mothers.

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