



The Influence of Self-Acceptance and Social Support on Infertility Stress in Women Experiencing Infertility at RSAB

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Abstract : The desire to have children for married couples is something that is very desirable, but in fact, not all married couples can have children easily. There are some couples who find it easy to have children, and there are also couples who need hard work to have children. One of the reasons for not being able to have children is due to infertility problems. Women who experience infertility tend to have low self-acceptance which has an impact on their psychological condition, one of which is experiencing infertility stress. Infertility stress is pressure felt from the surrounding social environment, marital relationships, as well as physical and mental health due to the condition of infertility. Women who experience infertility related stress really need social support from family, partners and friends. This study aims to examine the influence of self-acceptance and social support on infertility stress in women experiencing infertility at RSAB Jakarta. This research is a quantitative study with a population of women experiencing infertility, age range 20-39 years and a sample of 150 respondents. The results of the study showed that there was a significant influence of self-acceptance and social support on infertility related stress in women experiencing infertility ($P < 0.001$; $R^2 = 0.515$). So it can be concluded that there is an influence of Self-Acceptance and Social Support on infertility stress in women experiencing infertility at RSAB Jakarta.

Keywords: Infertility Related Stress, Self-Acceptance, Social Support

INTRODUCTION

Marriage is one of the important things that happen in human life. Every couple who gets married dreams of a happy marriage, with material sufficiency fulfilled, feeling loved, and having children. Moreover, the role of women as a wife will feel complete with the presence of children in the family. So becoming a mother is an achievement for a woman Donelson (in Ulfah & Maulana, 2014). However, in fact, not all married couples can have children easily. There are some couples who easily have children, there are also couples who need to work hard to have children, and there are couples who are unable to have children. One of the causes of not being able to have children is experiencing infertility problems (Dewi et al., 2017).

Infertility is a condition where a married couple has not yet experienced pregnancy even though they have had regular sexual intercourse without using contraception (HIFERI, 2013).

Based on the results of the Indonesian Demographic and Health Survey (SDKI), it shows that the fertility rate of each woman has decreased. In the year 2012, the results of the Indonesian Demographic and Health Survey concluded that the fertility rate for each woman was 2.6 and in 2017 it became 2.4 children for each woman. In women, infertility is caused by 15% tubal and pelvic factors, 15% ovulation factors, 5% endometrial polyp factors and uterine abnormalities. Meanwhile, infertility in men is caused by 33% abnormality factors, sperm count, sperm motility, and sperm morphology (Pasaribu et al., 2020). WHO states that 1 in 4 couples in developing countries are found to experience infertility problems. The infertility rate of 12-15% occurs in Indonesia. Conditions that cause infertility from female factors are 65%, male factors are 20%, and other unknown conditions are 15% (Oktarina et al., 2014). The occurrence of infertility in society or social life places women on the side that is often blamed for married couples who do not yet have biological children. Infertility has a major psychological impact. Infertility can cause depression, stress, anxiety, low self-esteem, and decreased sexual satisfaction and quality of life (Bakhtiyar, 2019). In addition, infertility also gives rise to *infertility-related stress* or infertility stress which is defined as pressure felt from the surrounding social environment, marital relationships, and physical and mental health due to infertility conditions. Women who experiencing *infertility stress* can lead to negative self-acceptance.

According to Shepard (in Suzanna and Nora, 2020) self-acceptance can be achieved by stopping criticizing and accepting one's own shortcomings, as well as accepting other people's views of oneself, namely, tolerating oneself as imperfect in some parts. The initial response that arises is to close oneself off, feel guilty, anxious, stressed, helpless, and depressed (Nurhasyanah, 2012). The findings of this study indicate that self-acceptance is an important thing for women with infertility to have or strive for so that the stress they experience is reduced. From the existing phenomenon, most wives who do not yet have children have various problems, one of which is the obstacle when faced with the surrounding community who continue to ask whether they are pregnant or not, when they are pregnant, and not infrequently there are statements like this that make women feel devastated and depressed, as a result it will have an impact on poor psychological conditions such as lack of self-confidence and self-blame. research on *Self-Acceptance and Infertility related stress* conducted by Retnoningias, et al. (2023), namely showing that *self-acceptance* is negatively correlated with *infertility related stress*. Women who experience infertility must have direct social support through their partner or family in order to reduce *the stress of infertility* and be able to accept themselves. Social support provided by a partner and family are very meaningful for women experiencing infertility. obtained from other people who can be trusted. Social support can be considered as a condition that is beneficial for individuals who can be trusted. From this condition, individuals will know that other people care about, appreciate, and love them. The results of a study in Portugal showed that social support was related to infertility stress which was moderated by the decision to disclose infertility conditions (Martins et al., 2013), and higher social support was directly associated with lower stress in women (Martins et al., 2014). The results of this study differ from the results of a study in Vietnam which stated that social support did not have a profound impact on infertility stress (Lam et al., 2021). Infertile women who receive social support feel that they get attention, protection from family or friends so that *the infertility-related stress* they experience is reduced. Meanwhile, infertile women who lack social support are afraid of being ostracized, feel shunned by the environment or friends around them.

Based on the explanation above, this study was conducted to see the stress of infertility in women who experience infertility problems at RSAB Jakarta, which is supported by the problems faced by women who experience infertility. So that it arises negative thoughts that cause stress and lack of self-acceptance within themselves. Then, some women who experience infertility expressed that support from those closest to them greatly influenced them. Thus, this

study aims to create a picture of whether Infertility Stress can affect Self-Acceptance and Social Support in women who experience infertility at RSAB Jakarta.

METHOD

This research method uses a quantitative approach. The data collection method uses a Likert scale, the infertility stress scale uses *the Copenhagen Multi-Centre Psychosocial Infertility-Fertility Problem Stress Scale (COMPI-FPSS)* developed by Sobral, et al. (2017) , the self-acceptance scale uses *the Unconditional Self-Acceptance Questionnaire (USAQ)* measuring instrument developed by Popov & Sokic, 2022 which has been modified and translated by Yuliana 2018 , and the social support scale uses *the Multidimensional Scale of Perceived Social Support (MSPSS)* developed by Zimet, Dahlem, Zimet, and Farley which was adapted by Juniastira (2018) .

The population of this study were patients at RSAB who experienced infertility, and the non-probability sampling technique used in this study was *purposive sampling*. According to Sugiyono (2010), the *purposive sampling method* is a sample determination technique with certain considerations, namely those who experience infertility.

The data collection method used *Google Form* and the data analysis techniques used were descriptive statistical tests, classical assumption tests (normality tests, heteroscedasticity tests, and multicollinearity tests), and multiple linear regression tests using JASP version 19.0.

RESULT AND DISCUSSION

1. The Influence of Self-Acceptance on Infertility Stress

Table 1. Result of Self-Acceptance with Infertility Stress

Model	Unstandardized	Standard Error	Standardized	t	p
H ₀ (Intercept)	90,232	0.935		96,481	< .001
H ₁ (Intercept)	23,660	7,976		2.966	0.004
PD (X1)	-0.931	0.111	-0.566	8,386	< .001

Based on the regression analysis above, the coefficient of self-acceptance (X1) is obtained as $p < 0.001$ where the p value is < 0.05 with $r = -0.566$, this shows that there is a significant and negative influence between self-acceptance and infertility stress.

Model Summary - SI(Y)

Model	R	R²	Adjusted R²	RMSE
H ₀	0.000	0.000	0.000	11,492
H ₁	0.566	0.321	0.316	9,504

Based on the table above, it can be seen that there is a contribution of the influence of self-acceptance on infertility stress, namely 32%.

In line with research conducted by Pelupessy et, al (2023) showed that there is a relationship between self-acceptance and infertility-related stress. Women with infertility conditions who are able to accept themselves will find it easier to overcome infertility-related stress in the marital, personal, and social domains. Conversely, women with infertility conditions who have difficulty accepting themselves will cause an increase in infertility-related stress that occurs in the same three domains. This means that women with infertility conditions who are able to accept themselves will show a sense of happiness, which will then help reduce anxiety or depression in themselves. Previous studies have shown that self-acceptance is positively correlated with happiness, and negatively correlated with anxiety and depression (Szentagotai & David, 2013). The presence of self-acceptance that reduces negative emotions

will lead to the emergence of positive emotions and life satisfaction. Another study found that high self-acceptance is associated with low levels of anxiety, depression, and negative emotions, and is associated with high subjective well-being (Popov, 2018).

2. The Influence of Social Support on Infertility Stress

Table 2. Result of Social Support with Infertility Stress

Model		Unstandardized	Standard Error	Standardized	t	p
H ₀	(Intercept)	90,232	0.935		96,481	< .001
H ₁	(Intercept)	123,916	4,782		25,912	< .001
	DS (X2)	-1.138	0.159	-0.505	-7.147	< .001

Based on the regression analysis above, the coefficient of social support (X2) is obtained as $p < 0.001$ where the p value is < 0.05 with $r = -0.505$, this shows that there is a significant and negative influence between social support and infertility stress.

Model Summary - SI(Y)

Model	R	R ²	Adjusted R ²	RMSE
H ₀	0.000	0.000	0.000	11,492
H ₁	0.505	0.255	0.250	9,951

Based on the table above, it can be seen that there is a contribution of the influence of social support on infertility stress, namely 25.5%.

In line with research conducted by Taylor (2015) in his research stated that social support can help someone think that there is someone who can help in dealing with stressful events. In addition, Rohayati (in Jarmitia et al, 2016) added that a person's self-confidence can be influenced by the environment, factors from outside the individual that also increase individual self-confidence such as motivation and support from others. In addition, Sarafino and Smith (2011) added that each person's reaction to stress varies from one person to another, and from time to time in the same person, this variation is the result of modifications of psychological conditions and social factors on the impact of individual stressors.

3. The Influence of Self-Acceptance and Social Support on Infertility Stress

Table 3. Result of the Self-Acceptance and Social Support with Infertility Stress

Model		Sum of Squares	df	Mean Square	F	p
H ₁	Regression	10330.762	2	5165.381	80,640	< .001
	Residual	9480.125	148	64,055		
	Total	19810.887	150			

Based on the multiple linear regression analysis above, the coefficients of self-acceptance (X1) and social support (X2) were obtained as $p < 0.001$ where the p value < 0.05 with $F = 80.640$, this shows that self-acceptance and social support together can significantly influence infertility stress.

Model Summary - SI(Y)

Model	R	R²	Adjusted R²	RMSE
H ₀	0.000	0.000	0.000	11,492
H ₁	0.722	0.521	0.515	8.003

Based on the table above, it can be seen that there is a joint contribution of self-acceptance and social support to infertility stress, namely 52%.

In line with research conducted by Pelupessy et, al (2023) showed that there are essential conditions for self-acceptance of individuals with infertility. In general, self-acceptance is influenced by factors that include self-understanding, realistic expectations, social support, emotional stability, positive self-concept, ability to achieve success, self-confidence examples from others, and parenting patterns (Hurlock, 2013). Specifically, self-acceptance in infertile women is influenced by external factors, namely getting a positive social attitude, not facing obstacles from the social environment, and having good parenting patterns in childhood (Nurhasyanah, 2012).

In line with that, the existence of emotional support from family and social environment, accompanied by a stress-free marital relationship is an external factor that supports self-acceptance and self-esteem in individuals with infertility (Simarmata & Lestari, 2020). A positive attitude obtained from the social environment is one of the factors that influences self-acceptance in women with infertility. Women with infertility have a positive perception of the support they get from institutions, family, or friends (Dembińska, 2019). A positive attitude or support from the social environment will help women with infertility have positive self-esteem, positive self-concept, and hope. These three things will ultimately help the process of women's self-acceptance of the infertility they experience.

Infertile women who receive high social support will feel comfortable, cared for, loved, or appreciated. Emotionally and psychologically, the presence of social support will cause women with infertility to feel strong, optimistic, able to recognize their own emotions, able to overcome problems faced, and able to adjust themselves. The presence of perceived social support and relationship satisfaction can be important protective factors in psychological adjustment to infertility experienced (Mitrović et al., 2021). The ability to psychologically adjust to infertility conditions can encourage women with infertility to be independent and strong, because they feel they have a family or community that supports them. Ultimately, this condition causes the *infertility-related stress* experienced by women to be low.

Infertile women who lack social support feel afraid of being isolated, feeling shunned by their environment or friends around them. This condition causes women with infertility experience to avoid and not share their problems with others. People who get low social support will choose to avoid their family or close friends (Martins et al., 2013).

CONCLUSION

This study shows that self-acceptance has a negative and significant influence on infertility stress in women experiencing infertility at the Jakarta Maternity and Child Hospital.

This study shows that social support has a negative and significant influence on infertility stress in women experiencing infertility at the Jakarta Maternity and Child Hospital.

This study shows that self-acceptance and support together have a significant influence on infertility stress in women experiencing infertility at the Jakarta Maternity and Child Hospital.

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