

MANAGING THE STRESS OF INFERTILITY

INSIDE:

- Being diagnosed with infertility
- How to cope with IVF
- Communicating with your partner
- Dealing with family and friends



ABOUT THIS BOOKLET

This series of booklets has been developed and written with the support of leading fertility clinics across Australia, and AccessAustralia – a national organisation that provides numerous services for people having difficulty conceiving. We also acknowledge the many people who spoke openly about their own experiences with assisted conception in order to help others experiencing a similar journey. Merck Serono thanks the many individuals, couples and Australian healthcare professionals, including fertility specialists, specialist nurses and psychologists who shared their knowledge and expertise during the production of these booklets.

Important notice: The information provided in this booklet does not replace any of the information or advice provided by a medical practitioner and other members of your healthcare team. Your doctor will determine the best medications and course of action for you based on your requirements and conditions.

Prescription medicines have benefits and risks. Use all medications strictly as directed by your doctor and raise any questions or concerns with them before, during or after using prescribed medicines. If you experience side effects consult your doctor.

Full information regarding the medicines listed in this booklet, including how they are taken and side effects, is available from the Consumer Medicine Information (CMI) sheets. These can be found at the TGA website (www.tga.gov.au) for Australian residents and the Medsafe website (www.medsafe.govt.nz) for NZ residents.

Medication availability and funding criteria may differ between Australia and NZ.

CONTENTS

Introduction 2

Being diagnosed with infertility 3

The testing process..... 4

How will you feel during *in vitro* fertilisation (IVF)? 6

Surviving the ‘two week wait’ 8

The Positive Reappraisal Technique..... 10

The impact on your relationships 11

Communicating with your partner 11

Dealing with family and friends..... 14

Coping with stressful situations 17

Other people’s pregnancies/births 17

Christmas or other celebrations which focus on family life 17

Miscarriages..... 18

Pregnancy 18

Stopping treatment..... 18

How can a counsellor help? 19

Coping with stress checklist..... 20

Support organisations..... 21

Emotional Rescue..... 23

INTRODUCTION

Being diagnosed with infertility can be an extremely confronting and challenging experience. People often talk about the 'roller coaster', or ups and downs of emotions associated with infertility. It is extremely normal for you and your partner to feel stressed about what is often considered a life crisis. However, there are some important points to keep in mind when you are feeling overwhelmed:

- You are **not** the only one going through this. Up to one in six couples worldwide have difficulty conceiving in the first 12 months of trying and go through the **same** processes as you with successful results.
- Everyone feels strong and mixed emotions about what they are experiencing. It is normal to feel shock, anger, anxiety, fear, sadness, guilt and many other emotions.
- There are many coping techniques and numerous avenues of support, which you can use to assist you when you need it.



Learning to manage your stress is an important step towards making sure that you and your partner achieve your goal of becoming parents. This booklet looks at some of the common emotions that you may experience when confronted with infertility and also includes some techniques and tools for managing them. There are certain stages or situations, which are commonly described as being more difficult and we will discuss some ways to help you cope during those tough times.

*"It really helped me to know that what I was feeling was normal and that I wasn't going mad." – Sue**

*The personal statements throughout this booklet are the opinions of real individuals. Individual experiences will vary from person to person.

BEING DIAGNOSED WITH INFERTILITY

“Diagnosing infertility is all about what isn’t happening, and it is hard to know what to feel.” – Karen

Everyone reacts to the diagnosis of infertility differently and it is normal to ask ‘Why me?’ and to feel sad, angry, worried or just totally shocked. However, for most people, it is the strength of the emotional impact that often takes them by surprise.

In reaction to a diagnosis of infertility, you may experience a number of emotions such as:

Shock, surprise or denial – a sense that the diagnosis is not really true. This can also be described as feeling numb or not knowing what to do.

Anger and frustration – this can be expressed as ‘Why is this happening to me?’ or feeling angry at others.

Anxiety, fear or panic – all thoughts are very confused.

Isolation – feeling different from others and feeling out of touch with your partner.

Sense of loss – there are many aspects of grief covering loss of pregnancy, loss of motherhood and fatherhood. These can continue through all stages of infertility.

The way you react and cope with your emotions will be influenced by many things such as:

- how you interpret the situation
- how you have responded to past stresses
- other events that are also happening in your life
- what type and level of support you have.



While all of your emotions are perfectly normal in the face of such a major life crisis, it is important that you do not let these feelings go on for too long or allow them to negatively affect how you manage and cope with everyday life. Learning to recognise and manage your emotional feelings about infertility is as crucial as looking after yourself physically. On page 5, you will find some suggestions, which may help you cope with the initial diagnosis stage.

WARNING SIGNS OF DEPRESSION

You will also need to be aware that there may come a time when these emotions get out of hand and become potentially dangerous. If you are feeling extremely sad or hopeless for more than a couple of weeks and your feelings are interfering with your usual daily activities, you may be suffering from depression and will need to seek help from a healthcare professional.

Some of the warning signs of depression include:

- lack of interest or motivation to perform your normal activities
- decreased energy
- inability to concentrate
- not being able to sleep or sleeping too much
- significant weight loss or gain
- extreme anger and resentment
- persistent thoughts of suicide or death.

See contact details at the back of this booklet for information on some of the organisations that are available to help you.



The testing process

Diagnosis often involves numerous tests, results and re-testing. These give rise to many conflicting emotions including fear, hope and – maybe – relief. Many say it is better to get results, even not very good ones, because it's easier to know 'why'. Understanding is easier to deal with than the 'grey' situations where there are no real answers.

This can be a time of emotional ups and downs which can be exhausting. It may be hard to understand that something unseen is causing so much distress.

In about 10-15% of couples, a cause for infertility may not be found even after thorough investigation of both partners. Emotionally, this is the most frustrating and stressful diagnosis of all because there is no cause or management plan to focus on.

It is important that you regularly discuss how you feel with your partner and allow them to offer you their understanding and support. Whether the cause lies with you or your partner, or a cause cannot be found, infertility is the problem of a couple, and finding a solution is a couple's shared challenge. Now is the time to 'attack the problem' not each other and seek the support of



your healthcare team, family members, close friends and the specific consumer organisations set up to provide you with information and advice.

What can help?

Coping with a diagnosis of infertility

- Gather as much information as you can. Seek information from others who have dealt with the same issues, e.g. online, books, counsellors and support organisations. This will make you feel more in control of your situation and allow you to ask knowledgeable questions of your doctor.
- Attend medical appointments with your partner or a trusted friend or family member. A second 'pair of ears' is always welcome when there is a lot of information to absorb. Don't be afraid to take notes or even tape the conversation. It's also recommended that you write down a list of questions to ask your doctor.
- Talk about your feelings and fears with others, especially your partner. Talking helps you to clarify the situation and identify areas of concern.
- Find stress management techniques that are effective for you, such as exercise, yoga and meditation.
- It may be helpful to see a counsellor to identify your fears and find techniques that help. It is better to talk about issues as they arise rather than bottle things up.
- Try not to think too far ahead. Deal with the current issues rather than worrying about too many 'what ifs'.

HOW WILL YOU FEEL DURING IN VITRO FERTILISATION (IVF)?

“An IVF cycle is all about balancing hope, reality and hormones.” – Margaret

Some of us find that starting treatment is a positive experience because you have something to focus on – something is finally happening for you. However, others may fear the physical implications or feel very disappointed that they have to face intervention.

Initially women may fear the actual process, but waiting for results is often the most difficult part of treatment. Days seem to pass very slowly and it can be a time of acute vulnerability and sensitivity. You may argue with or avoid your partner, and it can be difficult to concentrate on ordinary life (see page 8 for more advice on how to get through the ‘two week wait’).



In vitro fertilisation (IVF) is not a single event but rather a series of steps or hurdles where each stage has to be crossed before tackling the next one. This is a very tiring process. If a cycle hasn't worked there is double disappointment because it means again having to decide what to do, so it can be sad and frustrating.

“You go from being an articulate and clear thinking person to feeling that life is out of control, you can't make any plans – and this is very scary and frustrating.” – Emma

People often say that when they are on IVF they lose control over their lives. They have no control over achieving something that seems so easy for others. Nothing they can do will alter the outcome.

You may find during treatment that you will have the following reactions:

- Your emotions are more intense. You may feel more vulnerable, sad, anxious, or angry than usual.
- You take less interest in things that you previously enjoyed.
- You may stay in more and avoid situations where you encounter babies and pregnant friends.
- You argue with your partner over matters that previously seemed trivial.
- You flare up at your friends over little things they've said.



"It is very hard to cope with cycles that fail. I feel very depressed and alone and feel that I have let everyone down." – Tanya

THE EMOTIONAL IMPACT OF HORMONE MEDICATION

In addition to dealing with feelings of uncertainty and trepidation, as well as hope, you will be dealing with the impact of hormonal changes on your body. Responses to the medications used to stimulate the ovaries during IVF vary enormously. Some women have no symptoms while others feel emotional and much more prone to tears, anxiety and irritability. Others feel uncomfortable with bloating, headaches, tiredness and other symptoms. While you cannot help the way you feel, you may be able to find a way to better manage your feelings and reactions during these times (see 'What can help?' on page 9).

Surviving the ‘two week wait’

After your embryo transfer, it takes around two weeks for pregnancy test results to be accurate. This ‘two week wait’ – the time before your expected period – is understandably a time of high anxiety, worry, and frustration for women trying to conceive.

Here are some ‘survival’ tips to help you get through this time:

- Try not to obsess about pregnancy symptoms – feeling pregnant does not always mean that you are. Some of the medications can have side effects that resemble symptoms of pregnancy.
- Keep busy – this may mean working more, or planning meaningful or fun distractions.
- Allow yourself only 15 to 30 minutes a day to think about pregnancy, write down your thoughts, search information online or discuss it with your partner or supportive friends/family members.
- Try some relaxation techniques such as breathing exercises or meditation (see page 20).
- Avoid pregnancy tests – the chance of getting a positive result before your period is late is very slim. The medications may also cause a false positive result.
- Try using the Positive Reappraisal Technique (see page 10) to encourage yourself to find some positive points in what you are experiencing.



IVF COUNSELLING

Seeing a counsellor should always be considered prior to IVF treatment and is a legal requirement in some states. Most IVF clinics in Australia and New Zealand offer counselling by qualified counsellors who are usually members of the Australian and New Zealand Infertility Counselling Association (ANZICA). An ANZICA counsellor is a social worker or psychologist who has a specialist understanding of infertility and its impact.

A counsellor's role is not to assess your suitability for infertility treatment, but to help you deal with the stress and emotions involved in trying to achieve pregnancy. Seeing a counsellor may help to identify feelings and ways that are useful in dealing with them. See page 19 for more information on how a counsellor can help you.

What can help?

Dealing with the challenges of IVF

- Information is power: the more you know about IVF and what others have been through, the more you can prepare yourself to deal with the issues. Understand as much as possible about what will happen during treatment and what the likely outcomes will be.

You can access other *Pathways to Parenthood* booklets through the website merckserono.fertilityportal.com.au



- Ask questions of all the IVF staff. There are a wide variety of people to help in an IVF clinic – nurses, doctors, counsellors, receptionists and accounts. Find someone who can answer your question – it is sure to have been asked by someone else previously.
- It often helps to have someone at work you can confide in – in case you have a difficult patch or receive bad news at work.
- Plan ahead for where you want to be when you receive the news of your results – at work or in a public place may not be the best location.
- It may be better not to tell too many people where you are in a cycle. You don't want to deal with too many questions and advice.
- Pace yourself and have breaks between cycles.
- It is important not to take on too many other things when undergoing treatment. If you have a big event, such as moving house, a new job or relatives staying, then try to plan treatment for when things are quieter.
- It can be useful to join a support group and talk to others who know what to expect.
- Try to keep life in balance and don't let IVF take over every month.



The Positive Reappraisal Technique

The **Positive Reappraisal Technique** can help you manage some of the negative emotions that are associated with the diagnosis of infertility.

All situations involve some good and some bad aspects and the aspects we pay attention to often determine how we feel. Thinking more about the positive points of a difficult situation and dwelling less on problems or uncertainties for the future helps people feel better.

This does not mean we should pretend that everything is wonderful when you do not feel it is, or thinking that you will definitely get pregnant when you feel unsure. What it does mean is that you are choosing to remind yourself that even very challenging situations have some positive elements.

Remember that it will take time for you to come to terms with your emotions, and you will most likely have your good days and your bad days. Choose a few statements from those below (or in consultation with a counsellor) that will help you cope better each day. Try to make the time to rest and recuperate every day, as you will be better able to manage your emotions when you are not feeling tired.

5 coping statements to help you think positively

Print this page, cut out this card and keep it in your purse or pocket to remind yourself to try to focus on the positive points of your situation.

Read this card once in the morning and once at night and any other time you feel the need.

During this experience I will:

1. **Focus on the benefits and not just the difficulties**, e.g. 'I am using this time to get fit and healthy' or 'This experience is bringing my partner and I closer together'.
2. **Try to think more about the positive things in my life**, e.g. 'I have been able to manage my time very efficiently and that makes me feel good'.
3. **Try to do something meaningful**, e.g. 'Once a week, I will put aside some time to do something for me, like taking up a hobby'.

4. **Learn from the experience**, e.g. 'This is difficult to go through but it is helping me learn skills for the future, such as time management, managing my emotions and communicating with my partner.'

5. **Try to do something that makes me feel positive**, e.g. 'I will make time each day to read my book, walk the dog, phone a friend'.

Thinking differently can feel strange and unnatural at first. However practice will help so try to persevere.

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THE IMPACT ON YOUR RELATIONSHIPS

"I didn't know what to say to her but whatever I said was wrong...so I stopped trying...it was quieter that way... but we are still unhappy." – Steve

Communicating with your partner

Good communication is essential in all relationships but this can be strained when you are undergoing IVF or other procedures. It can be hard to talk about something that is so painful, and often we don't mean the angry or hurtful things that we say.

A partner may be grieving in his or her own way which isn't understood by the other partner. We often think that our partner should know how we are feeling or be able to 'read our mind'. It is unfair to assume this if you haven't talked about it.

Communication usually has to be worked on. It may be helpful to write down feelings and show these to each other, or make an extra effort to find time to talk. Sometimes going away for a few days together can help.



Sex

It may be difficult to have spontaneous loving sex when there is so much intimate medical intervention going on. Spontaneity gets lost.

Sometimes it is better not to worry about sex for a while. It is important, however, to take the time to enjoy some intimate moments, such as cuddling and holding hands. For others it may be comforting to have an intimate relationship when everything else seems out of control. Again, talk about fears and feelings – this will help the both of you to work out the best solution.

Shame and guilt

When one partner has an identified fertility problem it can lead to feelings of inadequacy and inequality in the relationship. It helps if partners tackle the problem together, for example going to appointments and talking afterwards about what was discussed. Approach the situation as 'our problem', and something to work on together.

MEN AND WOMEN COMMUNICATE DIFFERENTLY



Men and women deal with emotions and solve problems differently. You both may care just as deeply about becoming a parent, but express it in different ways.

Women tend to confront a problem directly by talking things out. They seem naturally able to share feelings, especially with other women. On the other hand, **men** find it less



natural to share their feelings and try to work out things themselves. They are often accused of trivialising the issue with a 'she'll be right mate' attitude or bottling up their feelings. Being aware of these differences can help you avoid misunderstandings and allow you to tackle the challenges as a team.

Despite the strain, most couples who have been through fertility treatment say they're brought closer by the experience and their relationship is stronger at the end.

You'll find it helps to:

- Decide on how you want to communicate and support each other. Filling in the chart on the next page may be helpful.
- Draw up a plan for the future. It helps to put things in perspective and focus on what's important should you need to make difficult decisions.
- Don't allow fertility to rule your life. Instead, if there's something you need to discuss, set aside a specific time and give the venue some thought. A walk in the park may be less intense than a fixed table for two.
- During conversations try to avoid 'blaming' statements such as 'you always' or 'you never'.
- Put a conscious effort into planning something fun where you don't need to talk about your fertility. It's important to create some balance in your life.

Working as a team

The months ahead will be easier if you and your partner work as a team. Using each other's strengths can benefit you as a couple. After all, you both want the same thing! Use this chart to help you decide how you want to communicate and support each other.

Choose when and how you want to talk about your treatment so it doesn't take over your life.

* *On a chosen day each week, somewhere relaxing.*

* _____

* _____

Discuss what you expect and don't expect from your partner.

* *Support, but not constant reassurance.*

* _____

* _____

Decide what topics should remain private, shared only between you and your partner.

* *The full details of our infertility.*

* _____

* _____

Plan activities you can enjoy as a couple.

* *Hiking.*

* _____

* _____

Dealing with family and friends

Discussing fertility issues with family members and friends may be uncomfortable, but expressing how you feel may help you release your stress. It's important that you reach out for support.

Infertility is a sensitive subject and many people may not know how to react. Even family members who are aware of your situation can often say the wrong thing.

Guide the conversation and help them avoid topics that may be hurtful or make you feel uncomfortable. Feel free to say you're not in the mood for a heavy chat and ask what's new with them.

It may help if you can talk to your friends and family about the role they can play. Let your friends know how they can support you and give them some detail about what you need, e.g. 'When I call you and I'm crying, I need you to listen to me. You don't have to give me advice or try to fix anything or even say something earth shattering. I just need you to be there for me.'

Some friends may be good listeners. Others may be top of your list with whom to have fun when you are feeling down. Think of what you expect from your support network and let them know. Filling out the chart on this page may be a good starting point.

My support network

The right friends and close family members can provide great comfort and support. However, it may be hard for them to know precisely what you need. Don't leave them guessing. Use this chart to decide what you need from them and start building your support network.

Write your friend / family member's name here

What I expect from you

* *To cheer me up when I'm down*

* _____

* _____

What I won't discuss with you

* _____

* _____

* _____

How I want to spend time with you

* *As if we were on holiday*

* _____

* _____

What can help?

Dealing with insensitive comments

How many times have you heard comments like:

"Just relax and you'll get pregnant..."

"You just need a holiday!"

"You're trying too hard."

The advice may be well-meaning but these kinds of statements are very hard to hear because they blame you for doing something wrong when that is not the case at all.

Unfortunately, you can't change somebody else's behaviour or make them do or say what you want. It is up to you to work out how you will respond and how you will let hurtful words affect you.

It helps to have a bag of phrases that you can practise at home. For example, if someone says, 'Why don't you have children yet?' or 'You're leaving it late to start a family'; you could simply respond, 'Well, we are still looking into it'. You may then like to change the subject or move away saying, 'Just excuse me, I'm going to go say hello to so and so' or 'I need to find the ladies/a drink of water...'. If you don't practise these types of statements beforehand, then you may be caught off guard or become defensive or upset.

There are several other ways to respond to insensitive comments:

- Educate the other person, i.e. "No, this is a common medical condition and no amount of relaxing/holidays/or bottles of wine will help".
- Stand up for yourself and point out that their remarks are hurtful. This approach is especially appropriate for family members and close friends. Tell them that what you would have liked them to have said was something like:

"I am sorry that you are going through this."

"I am here for you."

"Could you use a hug?"

"Call me if you want to talk."

"Is there anything that I can do?"

Use as many sources of support as you feel comfortable using. Each friend or family member will have something different to offer and you will find what works best for you.

Isolation

It's reasonable to feel vulnerable if you've just completed a treatment cycle and the result has been negative. You may feel isolated from others, and friends seem to talk only about their children. Thus couples may find they are isolated from their usual social supports. For a while it may help to do things with other people who do not have children.



WHO AND HOW MUCH TO TELL?

Decide as a couple how much you want to share. Speak to your partner and set privacy boundaries. Discuss how much detail you're willing to share and with whom. Share only what feels comfortable. You don't owe anyone an explanation. You can even tell your family that the infertility treatment is now an 'off-limits' subject, that you appreciate their support, and that they will hear good news just as soon as you have some to share.

Have some responses prepared. You may not always feel you can face another round of enquiries. Have a few short answers ready, like 'we'll keep you posted', or 'you'll be the first to know' – responses that don't require a follow up question.

Adjust your expectations. Friends and family who care about your well-being will want to support you and say the right thing. Sometimes, their efforts may seem clumsy, despite their best intentions. You need to be a little patient and forgiving if they say the wrong thing.

COPING WITH STRESSFUL SITUATIONS

Other people's pregnancies/births

It can be hard to be happy for others who are having babies, and it can seem that everyone around you is pregnant or pushing prams. Keep in mind that it is perfectly normal to feel distress at others' pregnancies and births. You are not a bad person and this experience will one day be behind you.

Some strategies for limiting your anxiety include explaining your situation; not visiting the maternity hospital but visiting when they are back home and don't have others around; and avoiding situations where there may be many young children. If you really feel you have to attend a family event, e.g. your sister's baby's christening, then stay for half an hour and leave quietly. Explain to your sister and other close family members beforehand that this is what is going to happen and ask them to respect your feelings.

Christmas or other celebrations which focus on family life

These seem to emphasise what you **don't** have. Some people can still enjoy these events whilst others prefer to make alternative arrangements.

AccessAustralia has the following suggestions for dealing with child-centred celebrations:

- Plan to see your parents or other family members a week or two before Christmas so they know you care about them. This will leave you free to spend the Christmas period quietly.
- Be selective about the invitations you accept to parties – in particular those where there will be lots of children or pregnant women. Remember, that you don't have to accept every invitation.

Decide not to:

- shop at large shopping centres where families, children and Santas abound
- feel guilty about not participating in all the traditional family celebrations
- pretend that there's nothing wrong and carry on with 'business as usual'
- expect others to understand your pain. Refer to it briefly and ask that they support you by respecting your choices.

Coping with stressful situations (cont.)

Miscarriages

Loss of a pregnancy is always hard but it is even more difficult when it has taken so much time and treatment to fall pregnant. It is hard to have hope that pregnancy will happen again. Usual supports may not have been told, so they are not approached for help.

Some people withdraw and are private in their grief. Others reach out to friends to discuss their painful loss over and over again. Some people deal with intense feelings by becoming very busy. Others become very rational and appear able to cope by denying the depth of their pain. Ways of coping are many and varied. A counsellor and other organisations, such as AccessAustralia and SANDS, will be able to help you through this period of grief and readjustment – see contact details at the back of this booklet.

Pregnancy

You may feel surprised and guilty that you are not joyful about your pregnancy. Fearing that it may not continue could make it hard to relax and enjoy. Talking about these fears and having reliable support people can be helpful.

Stopping treatment

Stopping treatment is also a time of mixed emotions. Most know when it is time to stop and seek relief from the constant procedures and disappointments. You may decide to stop because you are exhausted with it all. It is important to realise that it will still take time to accept that you won't have children from this treatment, and that sadness and anger is normal. It may also be just as hard to realise that you may never know why it didn't work.

With the mixed emotions of relief and sadness there is also the realisation that the time of being in limbo has stopped, and that it is now possible to take back control.

Some things that you may talk about at this time are:

- planning other ways to have children including adoption or fostering
- spending special times with friends' or relatives' children
- re-training for a different career
- getting fit after all the fertility treatments
- taking a well deserved rest or holiday
- planning a completely different lifestyle together.



"It is immensely comforting for us to know that we gave it everything we had – it wasn't to be but we tried."

– Mel and Dave

HOW CAN A COUNSELLOR HELP?

Counselling offers the opportunity to look at how you are feeling, identify areas that are causing you distress, and find strategies that may be more useful to you. Sometimes just being able to talk about your fears with someone who is impartial and non-judgemental, finding out how others cope and whether your reactions are 'normal', is all that you need to manage the rest. People cope well most of the time, but at times a bit of help is needed. You are not 'crazy' or 'weak' if you seek counselling – it is a perfectly acceptable and common avenue of support and help.

Counselling will focus on ways of getting back some control and feeling more at ease with your situation. Sometimes it will be useful to have several sessions with a counsellor. At other times a phone call or single session will be sufficient to allow you to handle things again.

It is important that you feel comfortable with your counsellor if you are going to talk openly with them. We all have different people we 'click' with and sometimes you may decide to see someone else.

GENETIC COUNSELLING

Some people wish to access IVF because of a genetic condition that may make it difficult for them to have a healthy baby. There will be different issues to consider and it is important to discuss this with a genetic counsellor who may be attached to your clinic or to a general genetic service in your city.

COPING WITH STRESS CHECKLIST

- ☐ Communicating to others how you feel and what support you would like is crucial.
Don't expect others to be mind readers.
- ☐ Educating yourself as much as possible about your situation and treatment helps in giving you back a feeling of control.
- ☐ Partners should go to appointments together, whenever possible. It is helpful to share the situation and compare understandings.
- ☐ Infertility is only one part of your life and you need to keep this in perspective. Extra attention may be needed to other areas where you do have control, such as your work and friendships.
- ☐ Exercise and relaxation techniques (see below) are helpful. Try walking, swimming and going to the gym. They are not only physically helpful but can also help in moving thoughts.
- ☐ Don't be afraid of tears. They can be a good way of releasing tension.
- ☐ Find someone you can talk to and confide in, e.g. trusted friend, counsellor, family member, support group.

What can help?

Relaxation techniques

- Yoga – there are many different styles but most classes combine a series of postures, breathing and relaxation techniques. You are able to choose how far you push your body in a peaceful environment.
- Meditation – trains you to focus your thoughts on one relaxing thing for a sustained period of time thereby resting your mind and giving the body time to recuperate.
- Deep breathing – a simple and effective method of relaxation which is also at the core of yoga and meditation techniques.
- Progressive relaxation exercises – involves progressively tensing and relaxing the muscles in your body.
- Mindfulness – a form of self-awareness training that is based on Buddhist meditation principles. It is about being aware of what is happening in the present on a moment-by-moment basis, while not making judgements about whether we like or don't like what we find.



SUPPORT ORGANISATIONS

AUSTRALIA

AccessAustralia

www.access.org.au

Ph: 1800 888 896; Email: info@access.org.au

AccessAustralia is a national organisation, which provides numerous services and resources for people having difficulty conceiving. Its services include:

- fact sheets, newsletters and personal stories
- putting you in contact by phone or email with others sharing a similar infertility experience
- a register of infertility self-help groups
- listing of infertility clinics accredited by the Reproductive Technology Accreditation Committee (RTAC)
- listing of professional infertility counsellors across Australia
- lobbying governments for equal access to affordable, quality assisted conception treatment.

Donor Conception Support Group

<http://www.dcsdg.org.au>

Email: dcsgsupport@hotmail.com

The Donor Conception Support Group of Australia is a self funding organisation run by volunteers. Its members include those who are considering or using donor sperm, egg or embryo, those who already have children conceived on donor programmes, adult donor offspring and donors. It offers a newsletter, information nights, a library of books and articles and telephone support.

Endometriosis Care Centre of Australia

www.ecca.com.au

Formed by a group of health specialists, this organisation provides patient information and a state by state 'find a specialist' search engine on its website.

Endometriosis Australia

admin@endoaustralia.org

www.endometriosisaustralia.org/#!/links/c1bfb provides information on state contacts.

Endometriosis Australia endeavours to increase recognition of endometriosis, provide endometriosis education programs, and help fund endometriosis research. They strive to build strong relationships with existing endometriosis support networks throughout the country.

SANDS

SANDS is a self-help support group comprised of parents who have experienced the death of a baby through miscarriage, stillbirth, or shortly after birth. It provides 24-hour telephone support, information resources, monthly support meetings, name-giving certificates and other support.

Vic

www.sandsvic.org.au

Ph: (03) 9899 0218 (support) or (03) 9899 0217 (admin); Email: info@sandsvic.org.au

Qld

www.sandsqld.com

Ph: 1300 072 637 (support) or (07) 3254 3422; Email: admin@sandsqld.com

SA

www.sandssa.org

Ph: 0417 681 642;

Email: support@sandssa.org (quick response) or info@sandssa.org (general query)

SUPPORT ORGANISATIONS

NEW ZEALAND

FertilityNZ

www.fertilitynz.org.nz

Ph: 0800 333 306;

Email: support@fertilitynz.org.nz

FertilityNZ is New Zealand's national network for those seeking support, information and news on fertility problems. It provides various services including:

- regional support and contact groups
- general advice and contact service
- comprehensive information brochures
- a forum for confidential feedback on any issues or concerns
- a chatroom where you can seek on-line support from people in similar situations.

Endometriosis New Zealand

www.nzendo.co.nz/

Ph: 0800 733 277 (free phone support line);

Email: info@nzendo.org.nz

Endometriosis New Zealand promotes awareness of endometriosis, provides information, education and raises funds to support endometriosis related initiatives. It includes disease information specifically designed for teenagers, a support group network, regular seminars and workshops and a free phone support line.

SANDS New Zealand

www.sands.org.nz

Ph: 0800 726 374;

Email: contact@sands.org.nz

The website www.fertility.com has a wealth of information tailored to three different stages of a couple's journey. In addition to personal stories and frequently asked questions, it offers a number of practical 'tools' to assist you including an ovulation calculator, a questionnaire and advice on your most appropriate coping method.

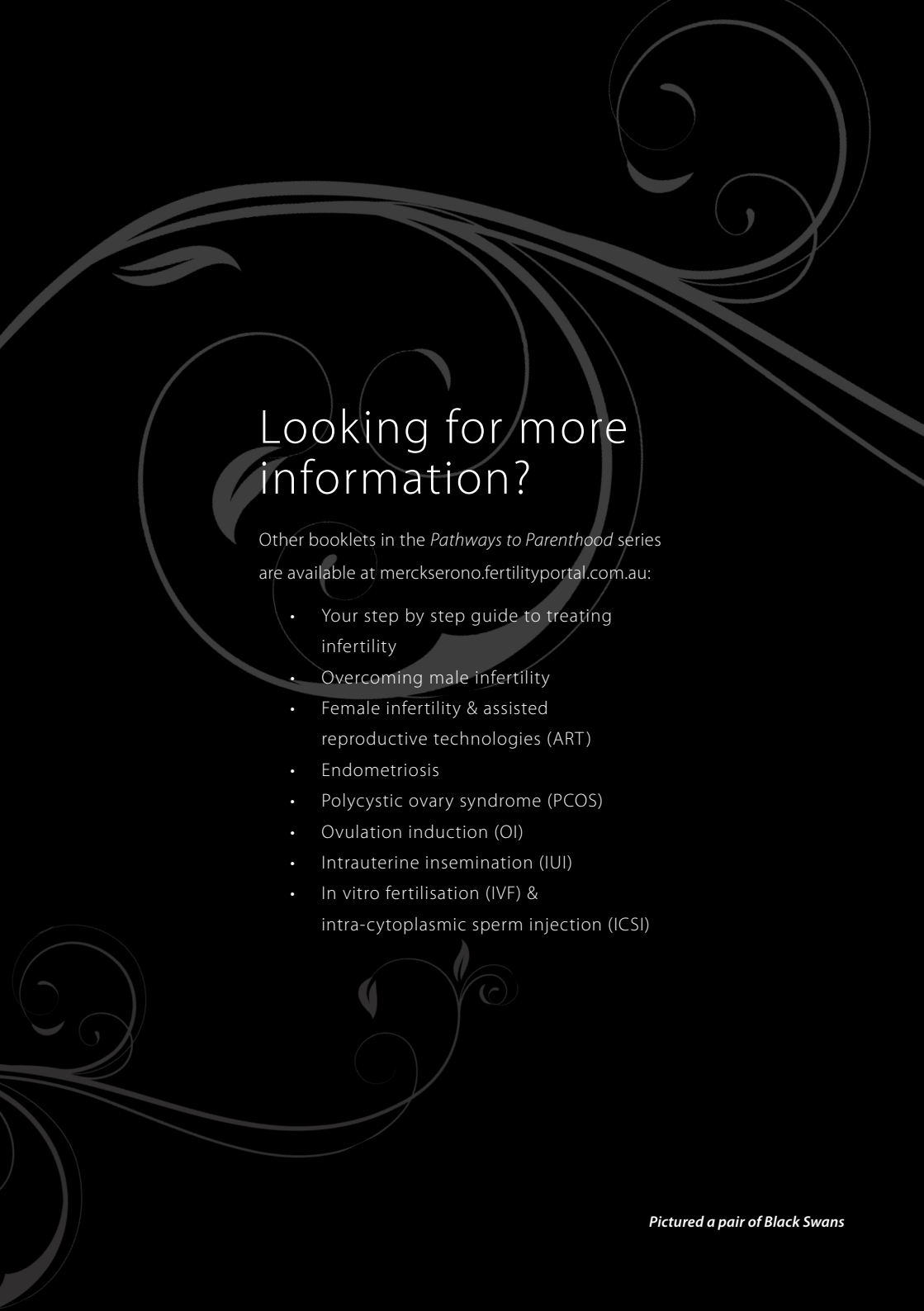
EMOTIONAL RESCUE

AUSTRALIA

- The Australian Counselling Association:
(07) 3356 4255 or 1300 784 333;
www.theaca.net.au/
- The Australian Psychological Society:
1800 333 497;
Email: contactus@psychology.org.au
- Lifeline (24 hour telephone counselling):
13 11 14
- Black Dog Institute:
www.blackdoginstitute.org.au
- Beyond Blue: www.beyondblue.org.au

NEW ZEALAND

- New Zealand Association of Counsellors:
Phone: (04) 471 0307
Email: admin@nzac.org.nz
- New Zealand Psychological Society:
(04) 473 4884;
www.psychology.org.nz
- Lifeline (24 hour telephone counselling):
0800 543 354

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Looking for more information?

Other booklets in the *Pathways to Parenthood* series are available at merckserono.fertilityportal.com.au:

- Your step by step guide to treating infertility
- Overcoming male infertility
- Female infertility & assisted reproductive technologies (ART)
- Endometriosis
- Polycystic ovary syndrome (PCOS)
- Ovulation induction (OI)
- Intrauterine insemination (IUI)
- In vitro fertilisation (IVF) & intra-cytoplasmic sperm injection (ICSI)