

Stress and Coping: Reproduction and Pregnancy
Issues for Women

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Abstract

This presentation, based upon a literature analysis discusses women's issues surrounding reproduction and pregnancy, associated risks, coping skills, and resources required to manage the stressors using the Richard Lazarus' primary and secondary appraisal methodology and adaptive and maladaptive strategies. The purpose is to discuss how women of child bearing years may appraise various situations. The topics presented include the pressure on women to conceive, infertility stresses, miscarriage stresses, and stresses endured during pregnancy.

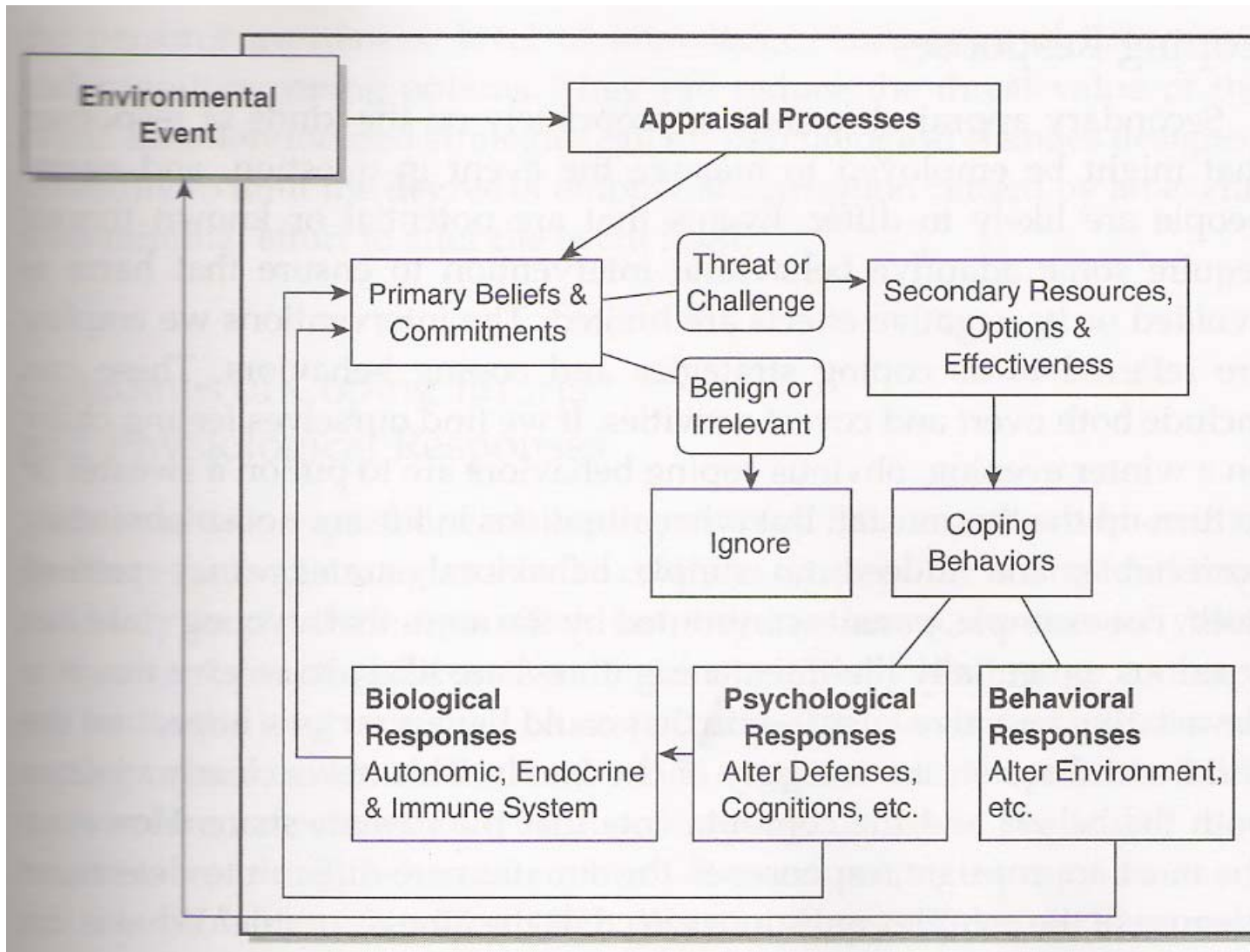


Objectives & Purpose

At the end of this presentation, colleagues should be able to:

- Describe the appraisal model of psychological stress
- Discuss the stresses associated with women's reproductive issues
- Assess stress and coping mechanisms associated with these stressors
- Identify gaps in research

Appraisal Model of Psychological Stress



Appraisal Model of Psychological Stress

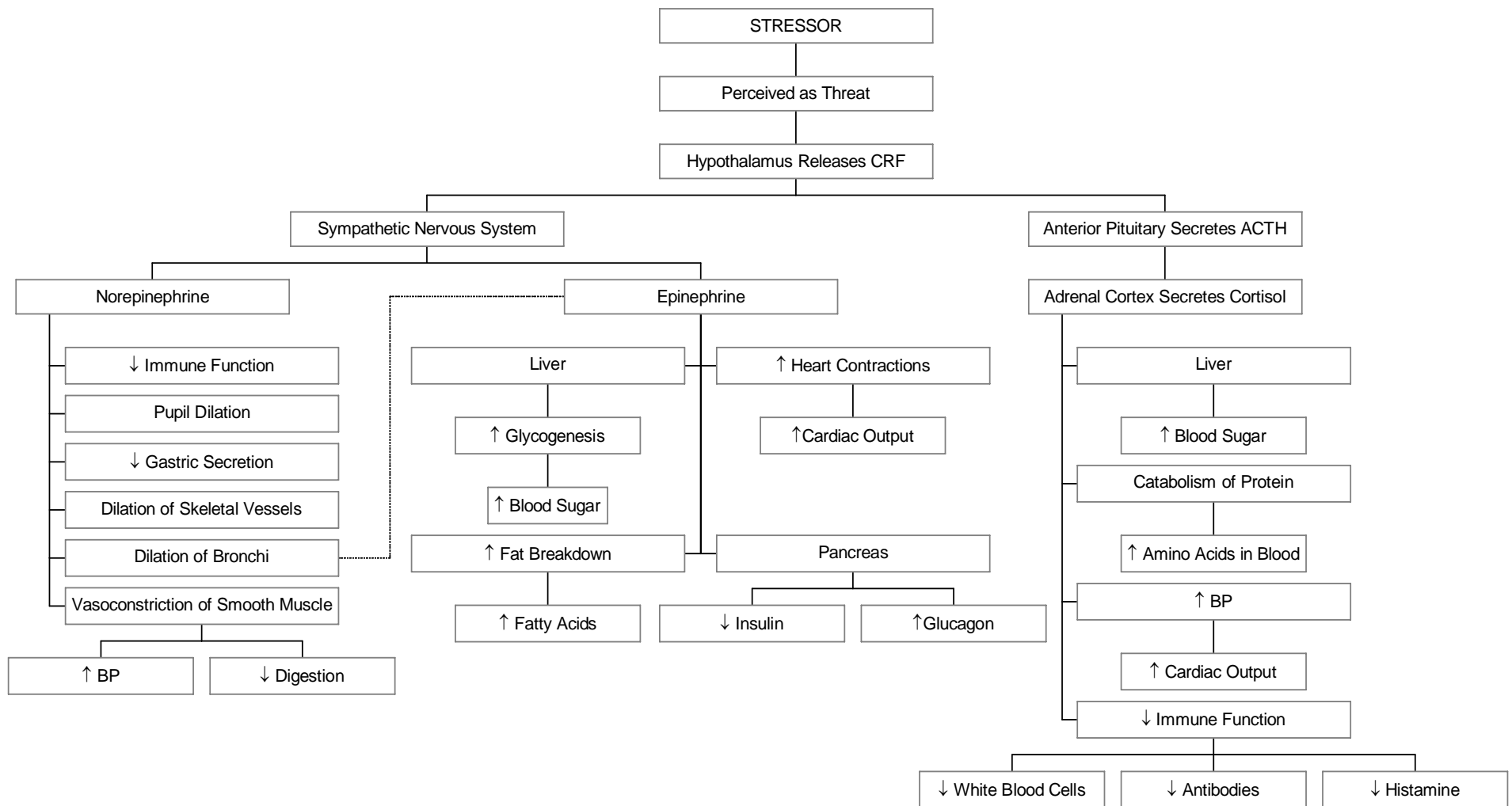
Primary appraisal process

- Beliefs and commitments
- Threat or a challenge, benign or irrelevant

Secondary appraisal process

- Reflective response to primary appraisal process
- Coping behavior is selected

Biological Response to Stress



Biological Response to Stress

- The body and the mind are connected
- Responses to stress are individualized
- The body deviates from homeostasis during stress
- The hypothalamus triggers autonomic and endocrine responses
- Cortisone is released and coping response (secondary appraisal process) is chosen

Conception and Pregnancy Pressures

Social pressures

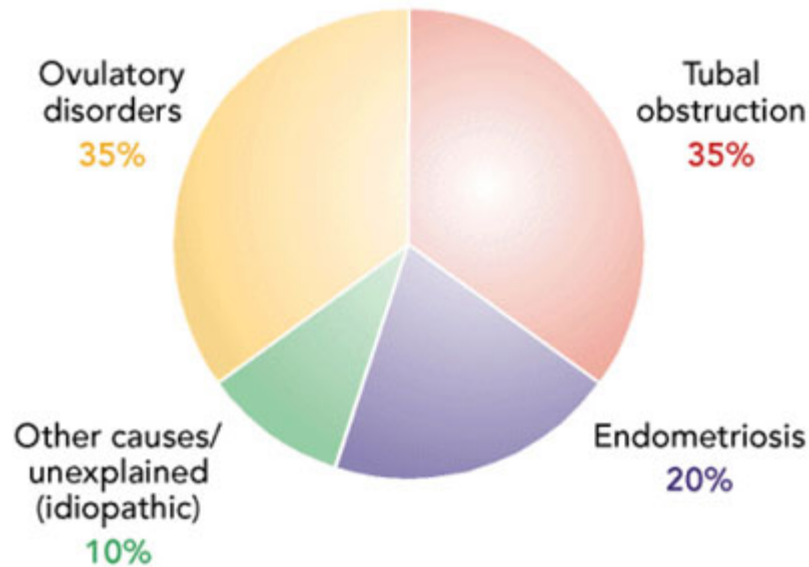
- Women are supposed to want to have babies
- Women often do not seek out counsel when the experiencing stress related to reproductive issues

Distress about ability to conceive

- Infertility and miscarriage causes long-term stress
- Contraceptives (IUDs) also are associated with some levels of stress



Infertility



- One in six couples experience infertility
- Unsuccessfully trying to conceive causes further stress which adds to the cycle of infertility
- Stress may stop the menstrual cycle

Infertility Treatment

- Treatments may further stress
- Social networks are beneficial
- Possible reduction in self-esteem and possible decrease in overall health may be associated with unsuccessful in vitro fertilizations
- Increased stress for women versus men as women during infertility treatment process

Miscarriage



- 10-25% of pregnancies end in miscarriage
- Primary beliefs and commitments about pregnancy may change
- Risks and stress are both physical and psychological
- Depression and loss may change appraisal process for future pregnancies

Pregnancy

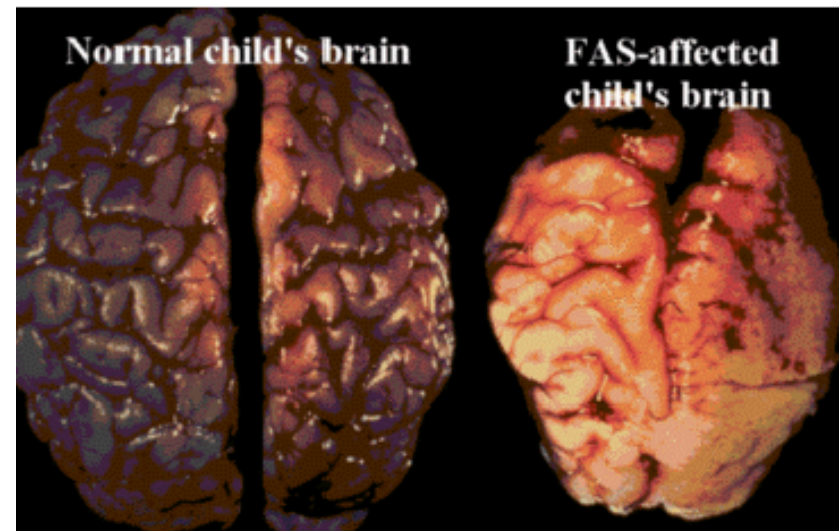
Depression and stress related issues

- Depression and fatigue are common
- The symptoms often escalate during pregnancy
- Biomedical treatment is usually not provided due to risk of birth defect
- Psychological support is often not sought out due to shame
- Poverty and lack of social support are related to depression
- Depression and stress related disorders in pregnant women can have a effect on the mental health of the child

External and Environmental Stressors During Pregnancy

Alcohol abuse

- Fetal Alcohol Syndrome – children born with birth defects resulting from alcohol abuse by their mother during pregnancy
- 15-25% of women drink excessively during pregnancy
- Intervention and alternate coping strategies should be pursued immediately



External and Environmental Stressors During Pregnancy

Drug abuse

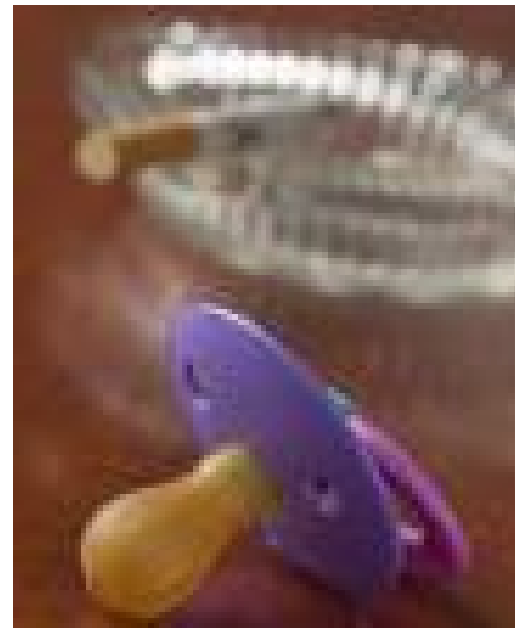
- Substance abuse disrupts the ability for the mother and unborn child to have proper nutrition
- Fetal tissue can not metabolize the drugs and therefore damage easier
- Mothers are often prosecuted for harming their unborn child
- Early identification and the introduction of new coping skills would benefit these mothers



External and Environmental Stressors During Pregnancy

Tobacco abuse

- The severe effects on the fetus are not highly publicized, smoking is not an effective coping strategy
- 20.4% of women smoke during pregnancy
- Smoking is associated with SIDS – 4,800 average deaths per year due to maternal smoking
- Smoking is associated with low birth rate – 26,000 infants per year born to mothers who smoke need neonatal care



External and Environmental Stressors During Pregnancy

Physical abuse

- Pregnant women are abused more often than non-pregnant women
- Abused women, who do not lose their child from violence, have lower birth weights on average
- Abuse deteriorates a woman's coping skills
- Depression, anxiety, or post traumatic stress disorders replace healthy coping behaviors



Maladaptive Strategies

- Feeling helpless or hopeless with reproductive and pregnancy issues
- Loss of self-esteem or self-image
- Loss of gratification in role as a mother and woman
- Blending emotions from the past with the present, such as forecasting inability to conceive, having a miscarriage, or depression and poor coping skills from previous situation onto a new pregnancy
- Focusing on a desire to give up from the past rather than using adaptive coping strategies

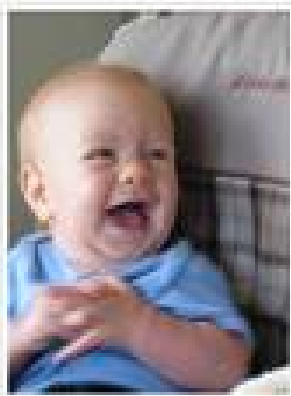
Adaptive Strategy Recommendations

- Relaxation therapy
- Exercising
- Accepting physical changes
- Risk analysis of reproductive process
- Education
Use education to determine if stress is a normative transition or unexpected
- Report any unexpected stressors to social support system, physician, or psychologist



Recommendations for Further Research

- Gaps exist in peer-reviewed literature regarding stress, coping, and women's reproductive issues
- Evidence exists in other bodies of knowledge that negative emotions are associated with psychopathology but this has not been effectively proven for this topic
- Coping strategies to assist women during the reproductive phase of life is not well documented or made readily available to those who could benefit most from it



References

- Aranda, M. P., Castaneda, I., Lee, P., & Sobel, E. (2001). Stress, Social Support, and Coping as Predictors of Depressive Symptoms: Gender Differences among Mexican Americans. *Social Work Research, 25*(1), 37
- Bancroft, J., Loftus, J., & Long, J. S. (2003). Distress about Sex: A National Survey of Women in Heterosexual Relationships. *Archives of Sexual Behavior, 32*(3), 193
- Baum, A., & Posluszny, D. M. (1999). Health psychology: Mapping biobehavioral contributions to health and illness. *Journal of Health Psychology, 137*, 89-96
- Brannon, L. & Feist, J. (2004). *Health psychology: An introduction to behavior and health (5th ed.)*. Belmont, CA: Wadsworth/Thomson
- Calves, A., & Meekers, D. (1999). The Advantages of Having Many Children for Women in Formal and Informal Unions in Cameroon. *Journal of Comparative Family Studies, 30*(4), 617
- Campbell, N. D. (2006). The Construction of Pregnant Drug-Using Women as Criminal Perpetrators. *Fordham Urban Law Journal, 33*(2), 463-66
- Chang, G., Mcnamara, T. K., Orav, E. J., & Wilkins-Haug, L. (2006). Alcohol Use by Pregnant Women: Partners, Knowledge, and Other Predictors. *Journal of Studies on Alcohol, 67*(2), 245-56
- Cohen, S., Kessler, R. C., & Gordon, L. U. (1997). *Measuring Stress: A Guide for Health and Social Scientists*. NY: Oxford University Press
- Cornelius, M. D. (2000). The Effects of Tobacco Use during and after Pregnancy on Exposed Children. *Alcohol Research & Health, 24*(4), 242
- Cunningham, M., & Zayas, L. H. (2002). Reducing Depression in Pregnancy: Designing Multimodal Interventions. *Social Work, 47*(2), 114+. Retrieved July 8, 2007, from Questia database: <http://www.questia.com/PM.qst?a=o&d=5000759587>
- East, P. L. (1998). Impact of Adolescent Childbearing on Families and Younger Siblings: Effects That Increase Younger Siblings' Risk for Early Pregnancy. *Personality and Social Psychology Review, 2*(2), 62-74

References

- Engel, G. (1968). A life setting conducive to illness: The giving-up—given-up complex. *Annals of Internal Medicine*, 69(2).
- Finkelstein, N. (1994). Treatment Issues for Alcohol- and Drug-Dependent Pregnant and Parenting Women. *Health and Social Work*, 19(1), 7-9
- Goldberger, M. (1991). Pregnancy during analysis help or hindrance? *Psychoanalytic Quarterly*, 60(2), 207-226
- Gorman, J. M. & Sullivan, G. (2000). Noradrenergic approaches to antidepressant therapy. *Journal of Clinical Psychiatry*, 61(1), 13-6
- Herrald, M. M. & Tomaka, J. (2002). Patterns of emotion-specific appraisal, coping, and cardiovascular reactivity during an ongoing emotional episode. *Journal of Personality and Social Psychology*, 83(2), 434-450
- Lazarus, R. S. (1985). Stress and adaptational outcomes: The problem of confounded measures. *The American Psychologist*, 40(7), 770-85
- Lovallo, W. (2004). *Stress & Health: Biological and Psychological Interactions*. Thousand Oaks, CA: Sage Publications
- Layne, L. L. (1997). Breaking the Silence: an Agenda for a Feminist Discourse of Pregnancy Loss. *Feminist Studies*, 23(2), 289-316
- Leichtentritt, R. D., Blumenthal, N., Elyassi, A., & Rotmensch, S. (2005). High-risk pregnancy and hospitalization: The women's voices. *Health and Social Work*, 30(1), 39+.
- Levendosky, A. A., Bogat, G. A., Theran, S. A., Trotter, J. S., Von Eye, A., & Davidson, W. S. (2004). The social networks of women experiencing domestic violence. *American Journal of Community Psychology*, 34(1-2), 95
- Martin, S. L., Clark, K. A., Lynch, S. R., Kupper, L. L., & Cilenti, D. (1999). Violence in the lives of pregnant teenage women: Associations with multiple substance use. *American Journal of Drug and Alcohol Abuse*, 25(3), 425

References

- Moraes, C. L., Viellas, E. F., & Reichenheim, M. E. (2005). Assessing alcohol misuse during pregnancy: Evaluating psychometric properties of the cage, t-ace and tweak in a brazilian setting. *Journal of Studies on Alcohol*, 66(2), 165+
- Orcutt, H. K., & Cooper, M. L. (1997). The effects of pregnancy experience on contraceptive practice. *Journal of Youth and Adolescence*, 26(6), 763+
- Parry, D. C. (2005). Work, leisure, and support groups: An examination of the ways women with infertility respond to pronatalist ideology. *Sex Roles: A Journal of Research*, 53(5), 337-349
- Pinel, John P. J. (2006). *Biopsychology with "beyond the brain and behavior"* (6th ed.). Boston: Allyn and Bacon.
- Randall, C. L. (2001). Alcohol and pregnancy: Highlights from three decades of research. *Journal of Studies on Alcohol*, 62(5), 554+
- Sagrestano, L. M., Feldman, P., Rini, C. K., Woo, G., & Dunkel-Schetter, C. (1999). Ethnicity and social support during pregnancy. *American Journal of Community Psychology*, 27(6), 869.
- Schneider, M. G., & Forthofer, M. S. (2005). Associations of psychosocial factors with the stress of infertility treatment. *Health and Social Work*, 30(3), 183-89
- Sun, A. (2004). principles for practice with substance-abusing pregnant women: A framework based on the five social work intervention roles. *Social Work*, 49(3), 383-89
- Sydow, K. V. (1996). Female sexuality and historical time: A comparison of sexual biographies of german women born between 1895 and 1936. *Archives of Sexual Behavior*, 25(5), 473+
- Tilley, D. S. (2004). Violent lives of women: Critical points for intervention- phase 1 focus groups. *Perspectives in Psychiatric Care*, 40(4), 157-169
- Walters, V., & Denton, M. (1997). Stress, depression and tiredness among women: The social production and social construction of health. *Canadian Review of Sociology and Anthropology*, 34(1), 53-69
- Wilson, D. (2007). Theories and types of stress. *Walden University Milestone 2 Presentation*, 5