

RESEARCH ARTICLE

Analysis of Discourses on “Divorce and Male-Related Infertility” in an Online Forum with Focus on Social Support: Women’s Club

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Abstract

The study aimed to investigate the types of social support provided by forum members in response to questions posed by women with infertile spouses on the Women’s Club forum, specifically within discussions centered on divorce due to infertility. Topics and comments on the subject of “divorce due to male-related infertility” in the Women’s Club forum between 2008 and 2023 were analyzed. Five topics and 487 comments were analyzed through inductive thematic analysis, and 458 different codes emerged. The codes were grouped into four themes: informational support, emotional support, intellectual and critical support, and relationship improvement support. Consequently, women considering divorce due to male-related infertility are provided informational, emotional, and relationship-focused, and querying social support through the forum. These types of social support indicate factors that may affect marital adjustment during the infertility process. Therefore, it is recommended that experts who provide professional support to these couples should pay attention to these factors and that the scope of psychosocial services currently provided in Turkey should be person-specific to cover the social support needs of these couples.

Keywords: infertility, marital adjustment, social support, divorce, online support groups, thematic analysis

Öz

Çalışmanın amacı, Kadınlar Kulübü forumunda eşi infertil olan kadınların infertilite sebebiyle boşanma odaklı sorularına forum üyelerinin verdikleri yanıtlar üzerinden sosyal destek türlerini incelemektir. 2008-2023 yılları arasında Kadınlar Kulübü forumunda “erkeğe bağlı infertilite nedeniyle boşanma” konusuyula ilgili başlıklar ve yorumlar analiz edilmiştir. Beş konu başlığı ve 487 yorum tümevarımsal tematik analiz yoluyla analiz edilmiş ve 458 farklı kod ortaya çıkmıştır. Kodlar dört tema altında toplanmıştır: bilgi desteği, duygusal destek, entellektüel-eleştirel destek ve ilişki geliştirme desteği. Sonuç olarak erkek kaynaklı infertilite nedeniyle boşanmayı düşünen kadınlara forum aracılığıyla bilgi, duygu, ilişki ve sorgulama odaklı sosyal destek sağlanmaktadır. Bu sosyal destek türleri, infertilite sürecinde evlilik uyumunu etkileyebilecek faktörlere işaret etmektedir. Bu nedenle, bu çiftlere profesyonel destek sağlayan uzmanların bu faktörlere dikkat etmesi ve Türkiye’de hâlihazırda sunulan psikososyal hizmetlerin kapsamının bu çiftlerin sosyal destek ihtiyaçlarını karşılayacak şekilde kişiye özel olması önerilmektedir.

Anahtar Kelimeler: infertilite, sosyal destek, evlilik uyumu, boşanma, çevrimiçi destek grupları, tematik analiz

Introduction

Despite social changes, fertility maintains its importance in the collective consciousness, and parenthood is perceived as an important part of social life. One of the primary factors strengthening the marital union is the presence of a child (Sezgin & Hoccoğlu, 2014). At the intersection between the desire to give birth to a child and the difficulties experienced in becoming a parent, infertility has always been perceived as an important problem that needs to be solved due to its undesirable consequences for couples.

Infertility is the failure to conceive within a year despite having sexual intercourse regularly without using a contraception method. It is estimated that approximately 48 million couples struggle with infertility worldwide, and it is reported that this number is increasing (Kiani et al., 2020; Akdeniz et al., 2021; World Health Organization (WHO), 2023). WHO recognizes infertility as a global public health problem and draws attention to its potential to threaten healthy relationships, and the well-being of individuals and societies (Boivin et al., 2007).

Approximately half of infertility cases are related to male reproduction, and it is estimated that at least 30 million men struggle with infertility all over the world (Agarwal et al., 2015; Jungwirth et al., 2019). However, most of the time, although the difficulty in reproduction may stem from either of the spouses, women are exposed to medical procedures more, spend more effort to adapt to the treatment process, and face more psychosocial difficulties of the infertility process (Cousineau & Domar, 2007; Öskan-Fırat & Hotun-Şahin, 2022). The fact that women are first held responsible for any problem experienced in reproduction within the socio-cultural context, that male infertility causes more social stigma since it contradicts the perception of ideal masculinity, and therefore male infertility cases are usually hidden, which intensifies the problem (Sylvest et al., 2018; Hanna & Gough, 2020).

Why Online Support Groups? Infertile, Social Support and Marital Adjustment

To understand the motivation that drives women with infertile spouses to seek advice from online support groups, it would be useful to describe the infertility process in which social support, stigmatization, concealment, social support, and marital adjustment mutually influence each other.

Infertility confronts individuals with many problems. In the literature, more attention is paid to the psychological and sexual problems that individuals are faced with during the infertility process, and social problems remain in the background. Psychological problems such as grief, depression, stress, anxiety, anger, shock/denial, disappointment, guilt, feeling of inadequacy, self-confidence anxiety and loss of control (Dhillon et al., 2000; Rosen, 2002; Hasanpoor-Azghdy et al., 2014), and sexual problems such as sexual inadequacy and sexual dissatisfaction encountered during this process have been frequently emphasized (Gümüşay et al., 2020; Yüksekol et al., 2023). In addition to these problems, weakening of family ties, domestic violence, insensitive questions asked by family members and friends, social isolation, and lifestyle changes are among other serious problems experienced in the social dimension (Cousineau & Domar, 2007; Mumtaz et al., 2013, Sternke & Abrahamson, 2015; Daibes et al., 2018; Naab et al., 2019). One of the most serious social problems is the lack of social support (Martins et al., 2014).

All these problems caused by infertility may affect marital adjustment. Marital adjustment is the satisfaction that couples get from their union and marriage (Chen et al., 2007). Deterioration of marital adjustment occurs due to negative changes in the basic dynamics of the relationship, making it difficult to cope with crises encountered in the marriage and to maintain the marriage (Şener & Terzioğlu, 2002). Ongoing incompatibility can trigger the divorce process. It has been reported that there is an inverse relationship between stressful life events and marital quality, and that the infertility process adversely affects marital adjustment (Monga et al., 2004; Ramezanzadeh et al., 2006; Gümüşay et al., 2020). For examples,

couples may unfairly blame each other or themselves during the infertility process (Egelioglu Cetişli et al., 2014). At this point, negative emotions can be directed towards the spouse who is the cause of infertility medically (Mumtaz et al., 2013). Such process makes it difficult for the couple to contact emotionally with each other, triggers communication problems, weakens family ties, and can cause disagreements, conflicts, and violence between them (Folkvord et al., 2005; Sarı & Erciyes, 2021).

In addition, the expectations, attitudes and pressures of the family and the environment can affect marital adjustment. In their study (2008), Taşçı et al. reported a significant difference between the scores obtained from the Marital Adjustment Test developed by Locke and Wallace by the participants and their being pressured by the environment to have children. Additionally, the social environment's pressure causes the fertile spouse to think of leaving the infertile spouse or, conversely, the infertile spouse to suffer from fear of abandonment (Özkan 2004:571). For example, in a study in which the effects of the infertility process were comparatively analyzed, it was reported that the intervention of others in the marriage, and their encouraging the fertile spouse to divorce the infertile spouse and remarry were more common in couples struggling with infertility (Amiri et al., 2016). Therefore, in this process, couples often need psychosocial support and guidance. Inadequate social support may lead to the end of marital union.

Social support is defined as resources provided by social networks to improve an individual's ability to cope with stress (Yalçın, 2015). In the literature, emotional, instrumental and informational dimensions of social support are generally emphasized (Lin & Shorey, 2023). The infertility process brings challenges and generates a need for coping with uncertainties and seeking social support (Unnithan, 2019). These needs extend beyond pursuing treatment or obtaining information about the treatment process, encompassing efforts to manage psychological and relational impacts as well (High & Steuber, 2014).

In several studies in the literature, it has been indicated that social support provided during the infertility process can protect individuals from the

negative effects of infertility (Peterson, 2002; Schmidt et al., 2005). However, couples can hide the infertility process and their problems from their families and social circles. Although this hiding provides a protected area, it also causes couples not to benefit from social support, makes it difficult for them to cope with the problems they are faced with, and affects the quality of the relationship between them (Slade et al., 2007; Pearce et al., 2024).

In this context, interacting with individuals who share similar experiences and accessing practical information about infertility treatments represent the most sought-after forms of social support for individuals experiencing infertility (Read et al., 2014). Support communities facilitate interactions among people with comparable backgrounds and experiences (Hughes et al., 2020). Today, these communities are easily accessible online (Sorumunen et al., 2020), taking the form of discussion forums, blogs, Facebook groups, and Instagram pages. These platforms, characterized by features such as anonymity and asynchronicity, simplify the process of seeking and accessing support. Many platforms allow users to create online pseudonyms separate from their real identities, enabling them to feel more comfortable discussing sensitive topics. This can serve as a vital form of support for users experiencing isolation, loneliness, or stigmatization (Boivin et al., 2022).

At this point, the fact that the need for psychosocial support and guidance is not sufficiently met by existing support resources may cause women with infertile husbands to seek advice and information from online support groups about two phenomena, namely "male infertility" and "divorce".

Current Study

The fact that primarily, women are held responsible for reproduction without diagnosis, that male infertility is stigmatized more because it contradicts the ideal perception of masculinity, and that it is therefore hidden more, increases the problems faced by women with infertile spouses. However, the search for studies in which life experiences of women who had infertile spouses were directly investigated revealed a gap in

Turkish literature, because in Turkey, male infertility is often hidden from the family and social circles. Therefore, scientific research should be conducted on the experiences, problems and coping processes of women who have infertile spouses. The present study aimed to investigate the types of social support provided by forum members in response to questions posed by women with infertile spouses on the Women's Club forum, specifically within discussions centered on divorce due to infertility.

To achieve this goal, the Women's Club, the most established one among the women's sharing and support forums in Turkey, was chosen due to its wide use and strong community interaction. Inductive content analysis was used to better understand, explore and explain women's experiences.

Method

In this qualitative study, the topics and comments regarding infertility and divorce included in the Women's Club, an important women's sharing and support forum in Turkey, from June¹ 2008 to November 2023 were investigated.

The Women's Club forum was founded in 2001 as stated in the "Who Are We?" tab and has 600,000 women members. Members use pseudonyms instead of their names. Members who share are aware of the online visibility of the forum. The forum includes posts such as women's, mothers' and children's health, aesthetics, healthy nutrition, beauty, care, cosmetics, sexuality, recipes, venue suggestions, product reviews that remain on women's agendas. Forum members share their questions and experiences by opening new topics or answering opened topics.

Procedure

Data Collection Process

In order to obtain the data, the following four keyword phrases were used: "infertility and

divorce", "childlessness and divorce", "infertility and separation", and "childlessness and separation". Eight topics on infertility and divorce were reached. Three of the topics were not included in the study because they were about female infertility. Five topics and comments on male infertility and divorce were recorded in a Word file. Information on the topics is provided in Table 1.

Ethical Issues

Since the posts shared on the message boards of the women's club forum site are open to the public, the study was conducted without obtaining permission from the forum owner or the participants. In accordance with ethical decision-making guidelines regarding internet research, none of the pseudonyms, names of individuals, and other identifying information were included in the study in order to protect the identities of forum members (Rodham & Gavin, 2006; Convery & Cox, 2012).

Data Analysis

To analyze the data, the MAXQDA program used in qualitative research was used. Five topics and 487 comments were analyzed through inductive thematic analysis. The aim in this analysis is to reduce and group the data in order to answer the research questions using categories and themes (Kyngäs, 2020). In the content analysis, first, the data set determined in line with the purpose of the study was read effectively. The ideas presented by the data and considered important by the researcher were coded in a data-oriented manner. The code list was reviewed repeatedly, and in the analysis, the focus was on at the theme level. Then, potential sub-themes were determined and the coded contents were collected under sub-themes. Non-functional coding was eliminated and removed from the data set. The themes formed by grouping the sub-themes were defined and named.

¹ The first post on the subject of divorce due to male-related infertility was made in 2008 in the women's club forum, which was established in 2001.

Table 1. Topics on male-related infertility and divorce

Topic	Content of the Topic	First Comment Date	Last Comment Date	Total comments
1. Childlessness and separation	"Hi girls, would you break up with your husband if you found out that you wouldn't have children because of a problem with him?"	June 9, 2008	June 14, 2008	38
2. My elder brother wants to divorce his wife.	"Hi, my elder brother loves children very much and it has been 4 years since they got married. Unfortunately, they can't have children. They underwent in vitro fertilization (IVF). He underwent testicular sperm aspiration. Four tubes of sperm were taken and four interventions were performed. Unfortunately, it didn't work. They didn't give up and changed hospitals and doctors. He did some research and went to the best doctor. He had another operation but this time his doctor said, "there is no live sperm, you can't have children". His psychology was completely damaged, he doesn't eat, doesn't drink, barely speaks. He told his wife, I am preventing you from becoming a mother. I have no right to take this away from you, let's get divorced. Although his wife says "no, medicine has advanced a lot, and we should never lose our hope and faith in God", my brother has lost all his hope and wants to get divorced. I am very sad; if you have any information on this subject, please share it."	August 15, 2008	August 19, 2008	28
3. Has your husband wanted to divorce you because he could not have a baby?	"Hi girls, We have been married for 9 years and we cannot have a baby because of my husband's sperm count. My husband's psychology has completely changed in the last 3-4 months. At first, he said, "let's get divorced." He said, "I don't want to prevent you from being a mother." When I said no, then he did everything he could to make me move away from him. Coming home late at night, not answering my calls, constant business trips, etc. He has probably made new girlfriends too because his phone is always in his pocket and on silent mode. Have your husbands had such problems?"	January 2, 2012	April 6, 2021	10
4. Is there anyone who got divorced because they could not have children?	"Hi, we have been married for 3 years and we cannot have children. My husband is azoospermic. He underwent Testicular Sperm Extraction (TESE) last year but the result was negative. What he told me was, let's try the Rosi technique, if it doesn't work we will get divorced."	July 18, 2020	March 25, 2023	92
5. Divorce due to infertility	"Hi, I have been married for 12 years and I am 35 years old. My husband has azoospermia. We tried IVF a few times but we did not get any results. Sperm cannot be found. Finally, we have given up hope. My egg reserves are weak. My husband is completely against the idea of adopting a child. We are not very good at sex either. I have been depressed for more than 2 years. I am scared, I cannot get divorced because I do not have a regular income. We have completely given up having the treatment again. If any of you says, "try again; don't lose your hope and faith in God", this is not possible. My husband is a good person; his income is good. I am ashamed to write this; my living conditions are very good. The problem is, I want to get divorced but I am scared. I do not know how to start from scratch. I will somehow hold on to life, but I'm not sure if I'm doing the right thing. I have no chance of adopting a child. I really, really want to be a mother. I will be completely unable to have children tomorrow, I am getting older. On the other hand, I think that there are no decent men to trust these days. I'm not a flirtatious type either, I cannot trust anyone. I wanted to pour my heart out to you. Thank you in advance for your giving me advice and sparing your time for me."	July 17, 2022	February 18, 2023	319

In the final stage, the sub-themes and themes agreed upon by the researchers were reported, which ensured the validity and reliability of the qualitative research (Creswell, 2013). The original form of the data was adhered to, the contents were presented with direct quotations when necessary, and at the end of the quotations, the codes were given in parentheses, which increased the validity of the authenticity.

Results

Five topics and 487 comments were analyzed, and 458 different codes emerged. The codes were grouped into four themes: informational support (92 codes), emotional support (114 codes), relationship improvement support (74 codes), and intellectual and critical support (178 codes). The social support provided by other members of the

Women's Club to women who opened topics on male-related infertility and divorce in the forum comprised three dimensions: information, emotion, relationship, and critical questioning. The MAXMAPP Graph containing the themes and sub-themes of the research is given in Figure 1.

faceted pressure for adoption”, “Do you think it is easy to adopt a child? There are many procedures”, “There are people who wait for years to adopt a child; not everyone has the right to adopt a child”. After they expressed their concerns, other forum members mentioned other alternatives such as new

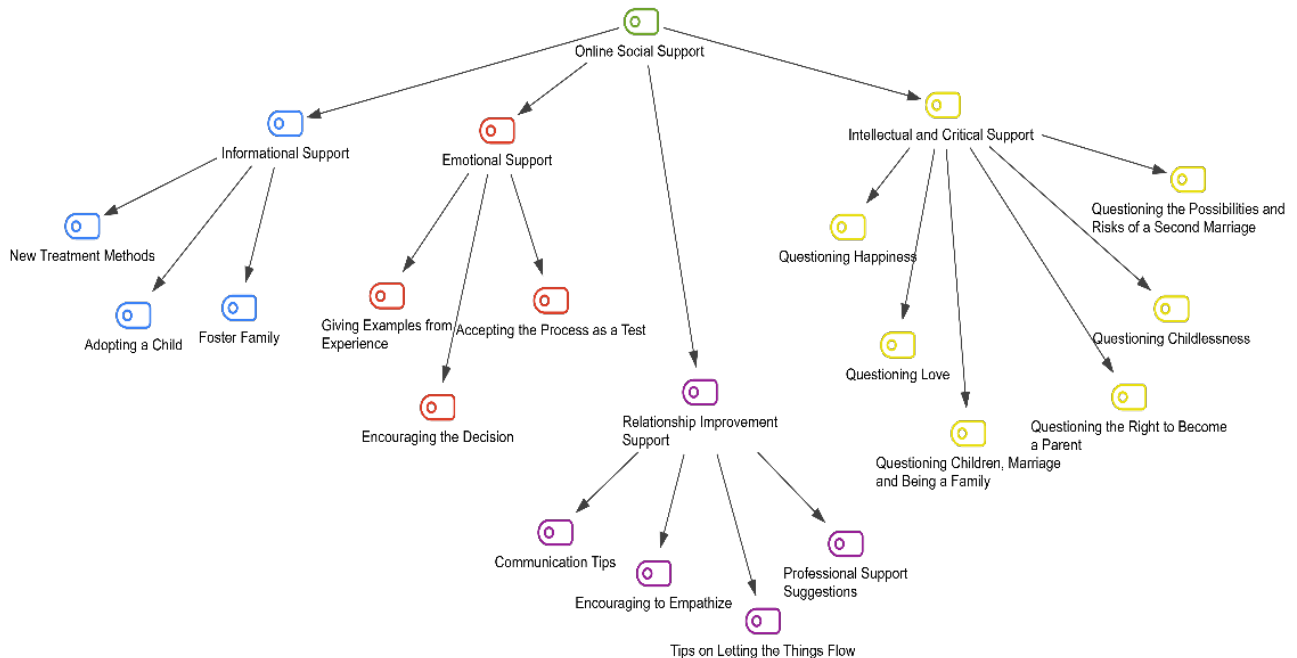


Figure 1. MAXMAPP Graph

Informational support

As presented in Figure 1, 20,1% of the social support provided by other members of the forum to couples considering divorce due to male-related infertility was informational support.

In this theme, forum members exhibited approaches aimed at offering information with alternative solutions to the member who opened the topic regarding having children, and making them accept that these solution suggestions would work out. For example;

If all methods have been tried, why shouldn't adopting a child be on the agenda? It is our human duty to adopt homeless children and it is a great good deed. Embracing an adopted baby will be good for you too (Adopting a child).

Among the alternative solution suggestions made by the members in their comments, the one with the highest rate in the coding was the suggestion to adopt a child. However, the members who opened the topic shared their concerns about adoption as follows: “There is multi-

treatment methods and being a foster family as solutions.

The doctor mentioned sperm donation. At first, we immediately opposed it, but our marriage was on the verge of ending. We hovered between adoption and donation. In adoption both the mother and father are strangers, but in donation at least the mother has the right to be a mother (New Treatment Methods).

In my opinion, adopting a child is difficult. However, you can be a foster family. Your husband is not a father; he is a brother. You can take care of the adopted child like a mother (Foster Family).

From the comments, it was determined that adoption, the first alternative way to have a child, caused anxiety due to psychosocial, cultural and procedural difficulties. In this sub-theme, members suggested the member who opened the topic to accept sperm donation or become a foster family, and the focus was on solving the childlessness problem concretely and reducing social stigma, thus improving well-being and/or marital quality of the member who opened the topic.

Emotional Support

As depicted in Figure 1, 24.9% of the social support provided by other members of the forum to couples considering divorce due to male-related infertility was emotional support. In the emotional support theme, codes determined were as follows: giving examples from experiences, encouraging the decision, and accepting the process as a test.

My aunt didn't have a child for 7 years but now she has two daughters aged 21 and 15. We should not lose hope in God. If God wishes, it will happen. (Giving Examples from Experience)

Once you make your decision, everything will fall into place, don't worry, of course you may experience a difficult process, but in the end, this will not last a lifetime, of course your life will be in order after the divorce. (Encouraging the Decision)

There are things that cannot be explained in life. God knows the reason, if He does not allow something to happen. Wouldn't it be more devastating if the child were undutiful, or if the child were disabled from birth? (Accepting the Process as a Test)

The forum members who provided emotional support focused on providing motivation for the couple to continue their process without losing hope, or encouraging them to implement the decision they made. In addition, their giving examples from experiences and accepting that God uses difficulties to test your faith draw attention to optimism and spirituality in coping with the infertility process.

Relationship Improvement Support

As presented in Figure 1, 16.1% of the social support provided by other members of the forum to couples considering divorce due to male-related infertility was relationship-centered supports. At this point, although informational support and emotional support affect the couple's relationship, the focus is not directly on the relationship. In the relationship improvement support theme, empathy promotion, communication tips, professional support suggestions and tips on letting the things flow were coded. For example;

When I put myself in the other person's shoes, if my spouse left me because I didn't have a child, I would be

very upset. I would feel inadequate and incomplete. (Encouraging to Empathize)

I am writing as someone who has the same problems. I think our problem is not being understood, so I recommend that you explain yourself clearly. Tell him "The problem between us is not your having azoospermia, but your creating a barrier. I'm worn out..." Maybe, such a healthy conversation may help (Communication Tips)

The issue of not having children is not a situation that can be easily accepted and digested by either a woman or a man. Expert help will be useful. (Professional Support Suggestions)

Encourage your elder brother and sister-in-law to take a vacation; it will help them. Tell them, "let the things flow." (Tips on Letting the Things Flow)

Intellectual and Critical Support

As presented in Figure 1, 38.9% of the social support provided by other members of the forum to couples considering divorce due to male-related infertility was intellectual and critical support.

In this theme, forum members exhibited approaches aimed at questioning the acceptances and attitudes of the member who opened the topic or sharing the possible advantages and disadvantages of different perspectives. For example;

I witness it in my social circle, and it makes me very sad. People are conditioned as `Marriage is equal to Baby`. Establishing a family does not necessarily mean having children... In my eyes, a family or home is formed when two people get married. (Questioning Children, Marriage and Being a Family)

There are several advantages of being childless. Being able to have unprotected sex freely, going to bed when you want, getting up when you want, and walking around when you want. (Questioning Childlessness)

Why is the member who opened the topic being lynched? It's easy to say, they've been trying for 12 years. Doesn't everyone say, "being a mother is every woman's right" as far as it concerns them? I think being a mother is also the right of the member who opened the topic and has been longing for a child for years. (Questioning the Right to Become a Parent)

Do you love him or is it really just a comfort zone and a habit? If it's the second option, your husband will

never be enough for you, and maybe the reason you want to be a mother so much is because of the void in your heart that your husband can't fill." (Questioning Love)

Do you believe that all your problems will be solved when you leave your spouse and somehow have a child from someone else? Do you think you will be happy then? (Questioning Happiness)

Let's say you divorced your husband, you may not have someone else in your life right away, or you may have someone else in your life but he may not be suitable for marriage, or you may get married and still not have children. Positive situations are possible but you need to think about everything. (Questioning the Possibilities and Risks of a Second Marriage)

As stated in the aforementioned quotations, in comments made by the members, childlessness, parenthood, marriage, being a family, second marriage, love and happiness are questioned. In these quotations, the focus is on the improvement of well-being, and/or quality of marriage by providing the member who opened the topic from a new and different perspective because the forum members wanted to provide significant support with their comments aimed at gaining a different perspective for individuals who wanted to end their marriage in terms of combating the pressures and stigmatization caused by equating marriage and being a family with having children.

The common point of these findings is to improve the marital adjustment of the couple with relationship-focused tips that will make it easier to cope with the psychological and relationship problems caused by the difficulties encountered in the infertility process.

Discussion

The findings of the present study, in which the aim was to determine the support provided by other forum members based on the responses they gave to divorce-related questions asked by women whose spouses were infertile during the infertility process, point to three main areas of discussion.

As reported in several studies, the infertility process can negatively affect marital adjustment and cause the couple to consider divorce (Monga et al., 2004; Gümüşay et al., 2020). Within this context, in a number of studies, it has been

reported that social support protects individuals from the negative psychosocial and interpersonal effects of the infertility process and helps them manage the process effectively (Slade et al., 2007; Schick et al., 2016). Online forums offer new social support on a sensitive issue such as divorce due to infertility. Indeed, many couples do not share their infertility process with their social circles due to social stigma (Kırca & Pasinlioğlu, 2013; Arya & Dibb, 2016; Babore et al., 2017). In such a situation where sufferers cannot access existing social support, the forum may help individuals considering divorce due to infertility to alleviate the feeling of social isolation they experience and to benefit from social support, which can also be explained by the theory of weak ties (Granovetter, 1982). Weak ties, which refer to relationships other than close relationships, are valuable in enabling couples to access to various sources of information and advice. It is thought that relationships established through the forum enable couples to make evaluations more objectively and encourage them to share sensitive issues more comfortably, because they do not have such relationships in their daily life (Walther & Boyd, 2002). In Turkey, the aforementioned forum, which strengthens weak ties resulting from the lack of professional support and peer groups during the infertility process and from the limited access and ensures the anonymity of members, fills the gap by allowing individuals to share their experiences without fear of stigmatization. In previous studies, it has been reported that weak ties and anonymity are at the center of online experiences (Malik & Coulson, 2008; Guthrie & Kunkel, 2016; O'Connell et al., 2021).

Secondly, through the online forum, forum members provide informational support, emotional support, intellectual-critical support, and direct relationship improvement support to individuals considering divorce due to infertility. In the present study, it was determined that in providing informational support, the focus was on gaining the person different perspectives about childlessness, being a parent and being a family etc., and offering her alternative solutions such as adoption, foster care etc. In similar studies, it was observed that online informational support was

provided in a wide range, including the treatment process (doctor's advice, medication, insurance...), lifestyle changes (nutrition, supplements, sports...), alternative options (adoption...) and private issues (sexuality...) (Steuber & Solomon, 2008; Lee, 2017; Chiew & Jan, 2018; Grunberg et al., 2023). The reason why some of the informational support types emphasized in these studies were different from the informational support types determined in the present study was that the scope and purpose of the present study was limited to divorce due to infertility.

In addition, the members of the online forum provided emotional support to the member who opened the topic regarding motivation, facilitating decision-making, and encouragement. Similarly, in several studies, it was reported that online support received from peers with similar experiences provided courage, better decision-making, and feelings of control (Malik & Coulson, 2008a; Beeder & Samplaski, 2019; Erčulj & Žiberna, 2022; Pearce et al., 2024). This emotional support is important because it provides individuals with motivation to continue their processes or facilitates coping.

In addition, the members of the online forum provided support to the member who opened the topic in terms of encouraging empathy, peer-to-peer communication, and professional support, which directly improves the relationship. As reported in several studies, online forums contribute to the development of their members' relationships with their partners by providing support to them (Malik & Coulson, 2008b). Although it is known that professional support is effective in terms of establishing healthy relationship during the infertility process (Frederiksen et al., 2015), it is emphasized that professional support is not a common support option (Read et al., 2014), which is also the case in Turkey. In their study conducted in 2021, Sarı and Erciyes reported that none of the participants received family counseling and that some couples considered divorce due to infertility. At this point, online support gains importance in an environment where there are barriers preventing individuals from accessing professional support for their problems during the infertility process.

The findings also highlight a distinct form of social support-termed intellectual and critical support-which extends beyond traditional categories such as informational or emotional support. This type of support enables online forum members to critically examine values and social norms, offering a deeper and more reflective form of assistance. Unlike the conventional types of social support discussed in the literature, this finding underscores the potential of social support to impact individuals at a more profound level. Intellectual and critical support helps individuals reassess social norms, personal values, and life choices. It encourages forum members to critically reflect on concepts such as children, family, childlessness, parenthood, second marriage, love, and happiness. By fostering this critical evaluation, it empowers forum members to reconsider dominant narratives, develop alternative and liberating perspectives, and reframe their decisions within a broader context of solidarity. This type of support thus provides women with opportunities to construct empowering narratives, and redefine their identities in a more inclusive and supportive framework.

Therefore, it can be concluded that the four types of social support provided to individuals empower them to take on a more active role in overcoming the psychosocial and interpersonal effects of infertility, which reflects Lazarus and Folkman's (1984) active problem-focused coping style. Hence, it can be concluded that the support provided in online support groups is not limited to informational, emotional and relationship-based support, but can also help members develop coping styles which are more functional.

Finally, in the findings of the present study, attention is drawn to issues that may affect marital adjustment during the infertility process through the support provided to the individual who opened the topic. First, in contexts where having a child is associated with female and male gender roles, childlessness can be equated with not fulfilling the roles of femininity/masculinity or not being able to be a family, causing childless couples to experience pressure (Küçükkaraca & Pekasıl, 2023), which can affect marital adjustment by exposing the couple, household and society to stigmatization. Secondly, the lack of consensus in

alternative solution suggestions can affect the relationship. Adoption, being a foster family, and sperm donation are among the issues which prevent couples from reaching consensus in many societies. The concerns created by these alternative solutions have been reported in a number of studies. In Fahami et al.'s study conducted in 2010, the anxiety about adoption was stated as follows: *"Many people, even my husband, suggested adopting a child, but I don't want to adopt a child. I am afraid that the child will reject us when he or she grows up, or his or her real parents suddenly show up and take him or her away from us, and then I will be upset even more. Moreover, even though we are the biological children of our parents, what have we done to help them? Thus, how someone else's child do anything to help us?"* In some studies, concerns about sperm donation have been reported as well (Kaya & Şahin, 2019). In addition, emotional reactions caused by the problems emerging during the infertility process affect marital adjustment by making it difficult for spouses to empathize with each other and causing communication problems, which is consistent with the findings of other studies in the literature (Özkan, 2004; Coşkuner Potur et al. 2019).

Conclusion

The infertility process deeply affects the relationship between couples and can cause some couples to consider divorce. Social isolation, stigma, hide the infertility process causes couples to distance themselves from their existing social support networks. When social support, coping, well-being and the well-being of the relationship are taken into account together, in Turkey, the women's club forum provide significant online social support to couples intending to divorce due to infertility. The individuals' sharing two difficult-to-share topics thanks to the anonymity provided by the internet, and their feeling that they belong to a group and receive informational, emotional, relationship-focused, and intellectual and critical social support from members are of great importance in the infertility process.

Based on the findings, the following recommendations can be made to those working in this field. First, online support networks where

individuals with similar experiences can share sensitive issues should be increased, issues shared here should be monitored by professional experts, and individuals should be provided with professional support when necessary. Second, the number of experts such as social workers, marriage and family therapists, psychologists, psychiatrists, psychiatric nurses who provide professional support and infertility counseling to couples during the infertility process should be increased, and access to them should be facilitated. It is important for these experts to provide different perspectives to the individual/couple, and to pave the way for the production of alternative discourses by eliminating the discourses that equate family or marriage with having children. In addition, while offering alternative solution suggestions to the couple, they should analyze the level of openness to adoption or foster care and the sociocultural factors affecting the level of openness, should be familiar with the adoption and foster care procedure, and should be able to respond to the couple's concerns about adoption or foster care. Finally, it is also recommended that the scope of the psychosocial services currently provided in Turkey should be patient-centered to cover the needs of couples struggling with infertility.

In light of the current findings, suggestions can be made for future research in terms of methodology and content. In terms of methodology, online support forums have the potential to provide significant data to researchers. Researchers can benefit from the anonymity of online support forums and can obtain comprehensive data on sensitive content in the field of social services more easily. They can also plan structured focus group studies in these forums. In terms of content, it should be investigated what the motivations are for individuals to use online support platforms, specifically for infertility, and whether disclosing themselves in online communities provide benefits or harms to individuals and community members.

Limitations

First, while the use and importance of online spaces in researching sensitive issues is increasing, the forum where the data obtained from the study does not represent all the experiences lived by individuals considering divorce due to male infertility in Turkey before diagnosis and during the treatment process. In addition, demographic information of women who opened topics or made comments, other than the gender variable, were not obtained. These two situations can be considered as limitations of the present study conducted online.

References

- Agarwal, A., Mulgund, A., Hamada, A., & Chyatte, M. (2015). A unique view on male infertility around the globe. *Reproductive biology and endocrinology*, 13(1), 1-9.
- Akdeniz, E., Açıkgöz, A. S., & Erdemir, F. (2021). Erkek infertilitesinin medikal yönetimi. *Androloji Bülteni*, 23(1), 37-46.
- Amiri, M., Khosravi, A., Chaman, R., Sadeghi, Z., Raei, M., Jahanitiji, M. A., & Mehrabian, F. (2016). Social consequences of infertility on families in Iran. *Global journal of health science*, 8(5), 89-95.
- Arya, S. T., & Dibb, B. (2016). The experience of infertility treatment: the male perspective. *Human Fertility*, 19(4), 242 – 248.
- Babore, A., Stuppia, L., Trumello, C., Candelori, C., & Antonucci, I. (2017). Male factor infertility and lack of openness about infertility as risk factors for depressive symptoms in males undergoing assisted reproductive technology treatment in Italy. *Fertility and Sterility*, 107(4), 1041-1047.
- Beeder, L., & Samplaski, M. K. (2019). Analysis of online discussion boards for male infertility. *Andrologia*, 51(1), e13422.
- Boivin, J., Bunting, L., Collins, J. A., & Nygren, K. G. (2007). International estimates of infertility prevalence and treatment-seeking: potential need and demand for infertility medical care. *Human reproduction*, 22(6), 1506-1512.
- Boivin, J., Vassena, R., Costa, M., Vegni, E., Dixon, M., Collura, B., ... & Domar, A. (2022). Tailored support may reduce mental and relational impact of infertility on infertile patients and partners. *Reproductive BioMedicine Online*, 44(6), 1045-1054.
- Chen, Z., Tanaka, N., Uji, M., Hiramura, H., Shikai, N., Fujihara, S., & Kitamura, T. (2007). The role of personalities in the marital adjustment of Japanese couples. *Social Behavior and Personality: An international journal*, 35(4), 561-572.
- Chiew, P. W., & Jan, J. M. (2018). In vitro fertilisation: Women's questions and concerns in a Malaysian online forum. *Pertanika J. Soc. Sci. & Hum*(26), 79-96.
- Convery, I., & Cox, D. (2012). A review of research ethics in internet-based research. *Practitioner Research in Higher Education*, 6(1), 50-57.
- Coşkuner Potur, D., Onat, G., & Doğan Merih, Y. (2019). An evaluation of the relationship between violence exposure status and personality characteristics among infertile women. *Health care for women international*, 40(11), 1135-1148.
- Cousineau, T. M., & Domar, A. D. (2007). Psychological impact of infertility. *Best Practice and Research Clinical Obstetrics and Gynaecology*, 21(2), 293 -308.
- Creswell, J. W. (2013). *Research design: Qualitative, quantitative, and mixed methods approaches*. Sage.
- Daibes, M. A., Safadi, R. R., Athamneh, T., Anees, I. F., & Constantino, R. E. (2018). 'Half a woman, half a man; that is how they make me feel': a qualitative study of rural Jordanian women's experience of infertility. *Culture, health & sexuality*, 20(5), 516-530.
- Dhillon, R., Cumming, C. E., & Cumming, D. C. (2000). Psychological well-being and coping patterns in infertile men. *Fertility and Sterility*, 74(4), 702-706.
- Erčulj, V. I., & Žiberna, A. (2022). The role of online social support in patients undergoing infertility treatment—A comparison of pregnant and non-pregnant members. *Health communication*, 37(14), 1724-1730.
- Fahami, F., Quchani, S. H., Ehsanpour, S., & Boroujeni, A. Z. (2010). Lived experience of infertile men with male infertility cause. *Iranian journal of nursing and midwifery research*, 15(1), 265-271.
- Folkvord, S., Odegaard, O. A., & Sundby, J. (2005). Male infertility in Zimbabwe. *Patient Education and Counseling*(59), 239–243.

- Frederiksen, Y., Farver-Vestergaard, I., Skovgård, N. G., Ingerslev, H. J., & Zachariae, R. (2015). Efficacy of psychosocial interventions for psychological and pregnancy outcomes in infertile women and men: a systematic review and meta-analysis. *BMJ open*, 5(1), e006592.
- Granovetter, M. S. (1982). The strength of weak ties: A network theory revisited. P. V. Marsden, & N. Lin içinde, *Social structure and network analysis* (s. 105-130). Sage.
- Grunberg, P. H., Costa, D., Dennis, C.-L., O'Connell, S., Lahuec, A., & Zelkowitz, P. (2023). 'How did you cope with such concerns?': insights from a monitored online infertility peer support forum. *Human Fertility*, 26(1), 69-83.
- Guthrie, J. A., & Kunkel, A. (2016). Communication in support groups. *The International Encyclopedia of Interpersonal Communication*, 1-5.
- Gümüşay, M., Sarı, E., & Güngör Satılmış, İ. (2020). İnfertil çiftlerde cinsel yaşam ile ilgili araştırmaların sistematik derlemesi. *Androloji Bülteni*, 22(2), 74-85.
- Hanna, E., & Gough, B. (2020). The social construction of male infertility: a qualitative questionnaire study of men with a male factor infertility diagnosis. *Sociology of health & illness*, 42(3), 465-480.
- Hasanpoor-Azghdy, S. B., Simbar, M., & Vedadhir, A. (2014). The emotional-psychological consequences of infertility among infertile women seeking treatment: Results of a qualitative study. *Iranian Journal of Reproductive Medicine*, 12(2), 131-138.
- High, A. C., & Steuber, K. R. (2014). An examination of support (in) adequacy: Types, sources, and consequences of social support among infertile women. *Communication Monographs*, 81(2), 157-178.
- Hughes, R., Fleming, P., & Henshall, L. (2020). Peer support groups after acquired brain injury: a systematic review. *Brain injury*, 34(7), 847-856.
- Jungwirth, A., Diemer, T., Kopa, Z., Krausz, C., Minhas, S., & Tournaye, H. (2019). *EAU Guidelines on Male Infertility*. European Association of Urology .
- Karaca, A., Özkan, F. S., & Gülen, H. S. (2017). Perceptions of infertility in Turkish nursing students. *Türkiye Klinikleri Journal of Nursing Sciences*, 9(1), 51-60.
- Kaya, Z., & Şahin, N. (2019). İnfertil Erkeklerin İnfertilite ve Tedavi Sürecine Yönelik Deneyimleri: Bir Sistematik Derleme. *Celal Bayar Üniversitesi Sağlık Bilimleri Enstitüsü Dergisi*, 6(4), 328-336.
- Kiani, Z., Simbar, M., Hajian, S., Zayeri, F., Shahidi, M., Naz, M. S., & Ghasemi, V. (2020). The prevalence of anxiety symptoms in infertile women: a systematic review and meta-analysis. *Fertility Research and Practice*, 6(7), 1-10.
- Kırca, N., & Pasinlioğlu, T. (2013). İnfertilite Tedavisinde Karşılaşılan Psikososyal Sorunlar. *Psikiyatride Güncel Yaklaşımlar*, 5(2), 162-178.
- Küçükkaraca, N., & Pekasıl, A. N. (2023, October 19-2). *İnfertiliteye yönelik tutum ve davranışlarda kültürel izler* . 25. Ulusal Sosyal Hizmet Sempozyumu "Cumhuriyetin 100. Yılında Sosyal Hizmetin Dünü, Bugünü ve Geleceği" (pp. 53-55). Tunceli : Sosyal Hizmet Uzmanları Derneği Genel Merkezi Yayını.
- Kyngäs, H. (2020). Inductive content analysis. H. Kyngäs, K. Mikkonen , & M. Kääriäinen içinde, *The Application of Content Analysis in Nursing Science Research* (pp. 13-25). Springer.
- Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping* . Springer Publishing Company.
- Lee, M. (2017). Don't give up! A cyber-ethnography and discourse analysis of an online infertility patient forum. *Culture, Medicine, and Psychiatry*, 41(3), 341-367.
- Lin, J. W., & Shorey, S. (2023). Online peer support communities in the infertility journey: A systematic mixed-studies review. *International journal of nursing studies*, 140, 104454.
- Malik, S. H., & Coulson, N. (2008). The male experience of infertility: a thematic analysis of an online infertility support group bulletin board. *Journal of Reproductive and Infant Psychology*, 26(1), 18 -30.
- Malik, S. H., & Coulson, N. S. (2008). Computer-mediated infertility support groups: An exploratory study of online experiences. *Patient education and counseling*, 73(1), 105-113.
- Martins, M. V., Peterson, B. D., Almeida, V., Mesquita-Guimarães, J., & Costa, M. E.

- (2014). Dyadic dynamics of perceived social support in couples facing infertility. *Human Reproduction*, 29(1), 83-89.
- Monga, M., Alexandrescu, B., Katz, S. E., Stein, M., & Ganiats, T. (2004). Impact of infertility on quality of life, marital adjustment, and sexual function. *Urology*, 63(1), 126-130.
- Mumtaz, Z., Shahid, U., & Levay, A. (2013). Understanding the impact of gendered roles on the experiences of infertility amongst men and women in Punjab. *Reproductive health*, 10(1), 1-10.
- Naab, F., Lawali, Y., & Ernestina, S. D. (2019). "My mother in-law forced my husband to divorce me": Experiences of women with infertility in Zamfara State of Nigeria. *PloS one*, 14(12), 1-13.
- O'Connell, S. B., Gelgoot, E. N., Grunberg, P. H., Schinazi, J., Costa, D., Dennis, C.-L., . . . Zelkowitz, P. (2021). 'I felt less alone knowing I could contribute to the forum': psychological distress and use of an online infertility peer support forum. *Health Psychology and Behavioral Medicine*, 9(1), 128-148.
- Öskan Fırat, B., & Hotun Şahin, N. (2022). Toplumsal Cinsiyet Rollerini Kapsamında İnfertilite ve Damgalanma: Bir Sistemik Derleme. *Ordu Üniversitesi Hemşirelik Çalışmaları Dergisi*, 5(1), 93-103.
- Özkan, M. (2004). İnfertil Hastaların Psikolojisi. In A. Kadioğlu, S. Çayan, B. Semerci, İ. Orhan, R. Aşçı, Ö. M. Yaman, . . . M. Kendirci (Eds), *Erkek Reprodüktif Sistem Hastalıkları ve Tedavisi* (pp. 567-575). Türk Androloji Derneği Yayınları.
- Pearce, K. E., Donohoe, D., Barta, K., & Vitak, J. (2024). Online social support for infertility in Azerbaijan. *New media & society*, 26(6), 3107-3126.
- Peterson, B. D. (2002). Examining the individual and dyadic coping processes of men and women in infertile couples and their relationship to infertility stress, marital adjustment, and depression. [Unpublished doctoral dissertation]. Faculty of the Virginia Polytechnic Institute and State University.
- Ramezanzadeh, F., Aghssa, M. M., Jafarabadi, M., & Zayeri, F. (2006). Alterations of sexual desire and satisfaction in male partners of infertile couples. *Fertility and Sterility*, 85(1), 139-143.
- Read, S. C., Marie-Eve, C., Boucher, M.-E., Whitley, R., Bond, S., & Zelkowitz, P. (2014). Psychosocial services for couples in infertility treatment: what do couples really want? *Patient education and counseling*, 84(3), 390-395.
- Rodham, K., & Gavin, J. (2006). The ethics of using the internet to collect qualitative research data. *Research Ethics*, 2(3), 92-97.
- Rosen, A. (2002). Binewski's Family: A Primer for the psychoanalytic treatment of infertility patients. *Contemporary Psychoanalysis*, 38(2), 345-370.
- Sarı, R., & Erciyes, C. J. (2021). İnfertil Çiftlerde Psikolojik, sosyal ve cinsel problemler. *İstanbul Kent Üniversitesi İnsan ve Toplum Bilimleri Dergisi*, 2(2), 79-94.
- Schick, M., Rösner, S., Toth, B., Strowitzki, T., & Wischmann, T. (2016). Exploring involuntary childlessness in men—a qualitative study assessing quality of life, role aspects and control beliefs in men's perception of the fertility treatment process. *Human Fertility*, 19(1), 32-42.
- Schmidt, L., Holstein, B. E., Christensen, U., & Boivin, J. (2005). Communication and coping as predictors of fertility problem stress: cohort study of 816 participants who did not achieve a delivery after 12 months of fertility treatment. *Human reproduction*, 20(11), 3248-3256.
- Sezgin, H., & Hocoğlu, Ç. (2014). İnfertilitenin psikiyatrik yönü. *Psikiyatride Güncel Yaklaşımlar*, 6(2), 165-184.
- Slade, P., O'Neill, C., Simpson, A. J., & Lashen, H. (2007). The relationship between perceived stigma, disclosure patterns, support and distress in new attendees at an infertility clinic. *Human reproduction*, 22(8), 2309-2317.
- Sormunen, T., Karlgren, K., Aanesen, A., Fossum, B., & Westerbotn, M. (2020). The role of social media for persons affected by infertility. *BMC women's health*, 20, 1-8.
- Sternke, E. A., & Abrahamson, K. (2015). Perceptions of women with infertility on stigma and disability. *Sexuality and Disability*, 33(1), 3-17.
- Steuber, K. R., & Solomon, D. H. (2008). Relational uncertainty, partner interference, and infertility: A qualitative study of discourse within online forums. *Journal of Social and Personal Relationships*, 25(5), 831-855.

- Sylvest, R., Fürbringer, J. K., Pinborg, A., Koert, E., Bogstad, J., Loessl, K., . . . Schmidt, L. (2018). Low semen quality and experiences of masculinity and family building. *Acta Obstetrica et Gynecologica Scandinavica*, 97(6), 727-733.
- Şener, A., & Terzioğlu, G. (2002). *Ailede Eşler Arası Uyum Etki Eden Faktörlerin Araştırılması*. T.C. Başbakanlık Aile Araştırma Kurumu Başkanlığı.
- Taşçı, E., Bolsoy, N., Kavlak, O., & Yücesoy, F. (2008). İnfertil kadınlarda evlilik uyumu. *Türk Jinekoloji ve Obstetrik Derneği Dergisi*, 5(2), 105-110.
- Unnithan, M. (2019). *Fertility, Health and Reproductive Politics: Re-Imagining Rights in India*. London, UK: Routledge.
- Walther, J. B., & Boyd, S. (2002). Attraction to computer-mediated social support. C. A. Lin, & D. Atkin içinde, *Communication technology and society: Audience adoption and uses* (pp. 153-188). Hampton Press.
- WHO. (2023). *World Health Organization*. Infertility: Retrieved February 2, 2023 from <https://www.who.int/news-room/fact-sheets/detail/infertility>
- Yalçın, İ. (2015). İyi Oluş ve Sosyal Destek Arasındaki İlişkiler: Türkiye'de Yapılmış Çalışmaların Meta Analizi. *Türk Psikiyatri Dergisi*, 26(1), 21-32.
- Yüksekol, Ö. D., Baltacı, N., Yılmaz, A. N., & Ulucan, M. (2023). Perception of genital self-image, sexual quality of life and marital adjustment in infertile women. *Sexual and Relationship Therapy*, 38(4), 834-847.