

Psychology and Human Reproduction

James W. Selby
Lawrence G. Calhoun
Albert V. Vogel
and
H. Elizabeth King

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THE FREE PRESS

A Division of Macmillan Publishing Co., Inc.

NEW YORK

Collier Macmillan Publishers

LONDON

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The Free Press

A Division of Macmillan Publishing Co., Inc.

866 Third Avenue, New York, N. Y. 10022

Collier Macmillan Canada, Ltd.

Library of Congress Catalog Card Number: 80-1641

Printed in the United States of America

printing number

1 2 3 4 5 6 7 8 9 10

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REPRODUCTION**

CONTRIBUTORS

Lawrence G. Calhoun, Ph.D.

Clinical psychologist and Associate Professor of Psychology at the University of North Carolina at Charlotte.

Mary Lynne Calhoun, Ph.D.

Director of Interdisciplinary Training at the Human Development Center at Winthrop College.

Edith Saparago Irons, Ed.D.

In private practice in Charlotte, North Carolina.

Joanne M. Jones

Student in the Department of Psychology, University of North Carolina at Charlotte.

H. Elizabeth King, Ph.D.

Clinical psychologist and Associate Professor of Psychiatry at Emory University School of Medicine, Atlanta, Georgia.

James W. Selby, Ph.D.

Clinical psychologist and Associate Professor of Psychology at the University of North Carolina at Charlotte.

Ignatius J. Toner, Ph.D.

Associate Professor of Psychology at the University of North Carolina at Charlotte.

Albert V. Vogel, M. D.

Assistant Professor of Psychiatry at the University of New Mexico Medical School.

James W. Selby: *To Susan, Sara, and Jacob Selby*
Lawrence G. Calhoun: *To Roberto Coimbra, Antônio Quinan, Alvin
Smith, and Abraham Tesser—outstanding
teachers and good friends*
Albert V. Vogel: *To my father, Victor Hugh Vogel*
H. Elizabeth King: *To Abraham Tesser, Jacob Christ, and
Sarah Brogden*

Preface

PROFESSIONAL INTEREST IN HUMAN SEXUALITY has burgeoned in recent years, with numerous books and journals being devoted to the subject. Much of this work has focused on levels of sexual satisfaction, patterns of sexual gratification, sexual identity, and associated role behavior. Within this rapidly expanding literature, a dimension receiving far less concerted attention has been reproduction.

Events fundamental to the reproductive life cycle (e.g., pregnancy, labor, and delivery) have been the target of medical advances and yet have attracted relatively little systematic attention from behavioral scientists. Psychological, psychiatric, and social aspects of such events have often been overlooked or minimized. The research and theory that have emerged tend to focus on a particular event, such as pregnancy, without a context of the reproductive cycle as a whole. Consequently, there has been minimal integration into an overall framework. Within the present volume, psychosocial aspects of a number of major events within human reproduction are discussed.

The introduction provides a conceptual structure and orientation. Major reproductive events are presented as issues in living encountered by most people. These events are viewed as potential hazards for personal and social adjustment, which some people negotiate with relative ease; others experience mild, moderate, or severe distress when confronting them. Subsequent chapters each focus on a particular event such as pregnancy, delivery, or the postpartum period and examine the available data and professional thinking concerning the psychological and social dimensions of that event. In every chapter an attempt is made to provide a review and a critical analysis of empirical findings. Directions for future research are

often indicated and, where appropriate, recommendations for clinical practice are made.

In developing this volume, we have attempted to combine some of the strengths of an authored book with those of an edited one. Most of the chapters were written by a combination of editors, often with an additional outside person contributing to the chapter. By using this strategy we hoped to provide a concentrated treatment of each topic while maintaining stylistic consistency from one chapter to the next.

Several guidelines were used in selecting topics for the present work. First, we identified the events that seem most central to reproduction and thus likely to be experienced by many persons. Second, we wanted topics for which a significant amount of work on the psychological and social aspects had been done. Even with these guidelines, the list of possible topics went beyond the scope of the present work. Consequently, rather than to strive for comprehensiveness, we attempted to provide in-depth examination of certain key events in human reproduction.

Initially we wanted a balanced coverage of topics for both men and women; however, it soon became apparent that neither had there been much work done concerning reproductive events of men nor had the psychological response of men to reproductive events of their wives or female partners received much attention. So the chapters are oriented strongly to the reproductive events of women with a discussion of the psychological and social aspects of these events for men presented wherever possible.

We hope this book will serve as a text and resource volume for workers in human reproduction, sexuality, mental health, and medicine. Furthermore, we hope it advances the development of an overall orientation to the psychology of the reproductive life cycle.

ACKNOWLEDGMENTS

We wish to thank a variety of persons, all of whom contributed significantly to the process of preparing this book. The reference department of the Atkins Library of the University of North Carolina at Charlotte deserves special mention for their continued professional assistance in obtaining the relevant literature: Dawn Hubbs, Marcia Duncan, Jay Whaley, Mozelle Scherger, Judy O'Dell, Carol Iglauer, Lorraine Penninger, Barbara Lisenby, and Carl Clark. We thank Jacob Christ and Barry McGough for reading drafts and for making helpful critical comments. Ronnie Moon and Moira Jack provided capable clerical and editorial assistance. Helen Brayce, Dee Malcolon, Patricia Tyson, and Theresa Guitierrez deserve our thanks for typing. We thank also Laura Moore, Deb Dellinger, Rene Pearce, Melody Wilder, and Michael Mulvaney for their capable help, and Patricia L. Cato and Douglas P. Warren for their patient assistance with the typed manuscript.

An Introduction to the Critical Life Problem Approach to Human Reproduction

EVENTS IN THE REPRODUCTIVE CYCLE are part of adult life for most people. Conception, pregnancy, childbirth, and relating to a newborn are events that sometimes enrich, sometimes frustrate, and sometimes distress those experiencing them. Certainly they change the pattern of life for most people. Examining the psychological and social aspects of some of these events is the purpose of the present volume.

The reproductive dimension of human sexuality has received little attention from behavioral scientists. Instances of severe psychopathology occurring in relation to a particular reproductive event (e.g., childbirth) have been the major focus of discussions on psychosocial factors in this area. Often, discussion has centered on whether disturbances associated in time with a major reproductive event represent forms of psychopathology different from disturbances occurring at other times. At issue is whether the onset of major psychiatric disturbance is more likely at times of major reproductive transition, whether psychosocial or hormonal variables are primary causal factors since both sets are undergoing obvious changes, and whether treatment effectiveness parallels treatment effectiveness of disturbances occurring at other times.

Emphasis on cases of extreme disturbance has led to several conceptual and methodological limitations. Many of the often cited papers are based on series of cases of severely disturbed individuals. The data often consist

of retrospective accounts or of the clinical record, including psychiatric observations and discussion of physical aspects of the case. Both of these sources are subject to significant biases either in terms of the recollection of patients and those around them or in terms of the interpretive biases of the clinician working with the patient.

This emphasis on cases of extreme psychiatric disturbance occurring in relation to a reproductive event also focuses attention on the individual in terms of potential biochemical factors, internal psychological conflicts, or perception of new role demands. The reproductive event (e.g., pregnancy) is thought of as a global occurrence. Psychiatric disturbance is seen, in part, as a response to this global event. Aspects of the behavioral responses of the people are not generally examined as a function of the range of specific variables subsumed under the global heading.

In the present volume, we have adopted a different perspective. Instead of focusing on cases of severe psychiatric disturbance occurring in relation to some reproductive event, we begin with an emphasis on the reproductive events themselves. We view them as critical life problems (Calhoun, Selby, & King, 1976) confronted by most people. Events like pregnancy and childbirth are seen as significant transitions for women and men. Some master the transitions with relative ease while others experience mild, moderate, or severe disturbance. The degree and duration of such disturbance would be expected to vary with the characteristics of the changes in physical functioning (e.g., a disabling pregnancy symptom), the nature and extent of new demands, as well as the psychological and social resources available to meet such demands.

Discussing pregnancy and childbirth in particular may help to clarify the critical life problem approach to understanding the psychology of reproductive events generally. Pregnancy and childbirth are, of course, actually comprised of a whole set of specific components, including the objective physical changes associated with conception, gestation, and parturition, the perception of these bodily changes by the pregnant woman and her husband or partner, the affective responses of both, and the thoughts, beliefs, and expectations of each concerning these events. Social changes encompass the relationship between the pregnant woman and her partner, as well as their relationships with friends and other family members, relationships with the health care professionals concerned with reproduction, and the demands and characteristics of the neonate. There are measurable differences in the extent to which each of these factors occurs in the pregnancy of a given individual or couple. Thus, the challenge posed to personal and social adjustment differs with each pregnancy. For example, a couple who strongly hold the cultural expectation of a glowing maternalism with a cuddly baby, if faced with a baby who is physically defective, may feel considerable disappointment, worry, or depression.

A person's responses to events like pregnancy and childbirth are in part determined by personal and social resources available when problems oc-

cur. Those with more meager resources or those in whom existing resources were already taxed by nonpregnancy demands would be expected to show greater dysfunction associated with comparable pregnancy events than persons having greater resources or persons whose existing resources were not so taxed.

The characteristics of the particular reproductive event, along with the availability of personal and social resources, affect the kind or degree of distress. For instance, for a woman who has a poor relationship with her husband and whose pregnancy is marked by severe nausea and vomiting, sexual distress and general dissatisfaction during pregnancy may be especially severe.

The critical life problems approach has several important implications for understanding the psychological aspects of reproductive events. The approach recognizes a continuum of distress. It begins with the assumption that the variables involved in the more common mild and moderate distress would be the same factors likely to be involved in more infrequent but extreme distress. Furthermore, the present approach encourages prospective studies, including normative descriptions of the psychological responses correlated with the different phases of each event within the reproductive life cycle. Such prospective studies can be more methodologically sound than the typical retrospective case study. The present framework, through the development of predictive indices of future distress, is also congruent with identification of high-risk groups. A basis for the development and evaluation of both preventive and treatment measures for psychological distress associated with the events is also suggested herein. Finally, the present framework extends the kind of theorizing and work begun on the psychological aspects of pregnancy (Bibring, 1959; Bibring et al., 1961; Bibring & Valenstein, 1976) to reproductive events generally. Such extension would encourage the integration of findings and hypotheses into a psychology of human reproduction.

In this book we have attempted to use the critical life problems approach to reproductive events. Existing work on the issues in pregnancy are discussed, including psychological changes in pregnancy, the value of prepared childbirth, and psychological responses to terminated pregnancy. Major events in the postdelivery period are examined, among them the psychological factors in postpartum reactions, implications of early parent-neonate interactions, reactions to preterm birth, and psychological impact of having a handicapped baby. Finally, changes in the reproductive system are discussed. These changes involve the psychological dimensions in controlling conception, as well as the psychological correlates of menopause and climacteric.

These events were selected because they seem central and because a reasonable amount of theory and research on each exists. Across all of these events, several trends emerge. Most of the work has been devoted to the psychological, psychiatric, and social functioning of women in relation

to reproductive events, with limited discussion of their impact on men. As Parlee (1976) noted, most theorizing on childbirth emphasizes either the intrapsychic conflicts or the hormonal changes thought to occur within women at that time. Cognitive and interpersonal dimensions have received far less attention. Likewise, research on the psychology of men during these transitional periods is almost nonexistent. Each chapter attempts to reflect the current knowledge of the psychology of women and of men during reproductive events.

Through these chapters we present up-to-date information concerning the psychological changes associated with some events in the reproductive life cycle. An understanding of available knowledge is fundamental to providing good psychological assistance. As pointed out by Selby and Calhoun (1980), conveying accurate, personally relevant information about the problem situation to persons experiencing that situation can reduce uncertainty and facilitate a more positive approach. Though traditional therapies have not emphasized the role of factual information in treatment, the potential value of sound cognitive understanding has been highlighted with respect to sexual dysfunctions (Annon, 1974; Cherwick & Cherwick, 1971; Masters & Johnson, 1970), coping with surgery (Auerbach & Kilmann, 1977; Egbert et al., 1964; Schmitt & Woolridge, 1973), and coping with a handicapped child (Ehlers, 1966; Grossman, 1972; Stone, 1967). Within the realm of reproduction, the value of factual information has been stressed in prepared childbirth programs (Klusman, 1975). We believe the value extends to all of the events within the reproductive cycle.

Bringing together current knowledge concerning the psychological changes during particular reproductive events also allows for the formulation of treatment procedures specific to each event. Medical and psychological procedures and specialized resources can be better tailored to the problems and pitfalls associated with each major event, and particular recommendations are made within the book.

Traditional therapies for psychological disturbances associated with reproduction have been oriented to treatment rather than prevention. Psychoanalytically oriented therapists and theorists have long hoped that the dissemination of knowledge concerning intrapsychical events to individuals and care-giving institutions would assist in both preventing and treating psychological pathology, particularly that associated with child-bearing and child-rearing. The authors noted above have demonstrated that in specific areas cognitive information can have a salutary effect on psychological response to reproductive events. We, however, suggest caution in predicting the demise of distress related to human reproduction even if massive programs of individual, public, and institutional education concerning reproduction are implemented. Indeed the critical life problem approach espoused in this volume suggests that just as individual responses to reproductive events are extremely variable and represent probabilities and not certainties, so treatment and prevention strategies which are based on

probable responses must be individually variable to be most effective. Thus for one woman appropriate prevention of peripartum psychological distress may rest on the transmission of cognitive information concerning pregnancy, whereas for another, prevention may be best accomplished by an examination of that woman's relationship with her own mother.

We believe the present volume will advance the psychology of human reproduction as a field of study. Certainly, this area of living is vitally important to the psychological adjustment of most adults. Examining theory and research related to reproductive events would seem fundamental to the development of an overall understanding of the psychological adjustment of adults.

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PART I

PREGNANCY

