

A close-up photograph of a person's torso and hands. They are wearing a vibrant, multi-colored plaid shirt with shades of red, blue, green, yellow, and purple. Their hands are clasped together in their lap, resting on blue denim jeans. The person is also wearing a grey knit sweater underneath the shirt. The background is slightly blurred, showing what appears to be a concrete surface.

repr**o**med

# Mental health and wellbeing toolkit



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# Introduction

## Repromed mental health toolkit

The fertility treatment journey is often likened to a rollercoaster ride; one filled with excitement, hope, fear, worry, and everything else in between.

Most patients going through their fertility treatment often find it difficult to manage these emotions. As such, the Repromed counselling team have put together a toolkit to help patients if, and when, they may need it.

This guide has some general information and practical, self-guided activities you can try to help you manage some of the emotions you might be experiencing.

Information or advice provided here should not replace the advice or information given by a medical practitioner or other members of your healthcare team. This resource is not a substitute for individualised or tailored counselling, or formal psychological support. This resource has been created as a supplementary tool with the hope to give you self-paced practices to help navigate any emotions you experience.

If you require professional assistance at any time during your treatment, please arrange a time to meet with your Repromed counsellor or your local GP.

If you are experiencing a mental health crisis, Lifeline can be contacted 24 hours a day on **13 11 14**.

In the case of a medical emergency, please call **000** for emergency services.

Further helplines and external support options can be found on **page 27** under 'Helplines, Mental Health Support, and Support Plans'.

# The emotions that come with ART treatment

## Grief and loss

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Going through the Assisted Reproductive Technology (ART) process can come with many different types of losses which can evoke a sense of grief for many. Some include:

- Loss of the imagined family;
- Loss of intimacy in a relationship;
- Loss of achieving a family “the natural way” or without intervention;
- Loss of control over your body (i.e., having poor responses to medication);
- Loss of a biological link if donor egg, sperm, or embryos are used;
- Loss of embryos and
- Loss of pregnancy

Because so many of these losses are not always obvious to an outsider, the emotion of grief can be dismissed or overlooked by others. We call this disenfranchised grief.

## Feelings of Envy

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Experiencing envy or jealousy is a natural part of the journey through ART treatment, often central to the emotional landscape of fertility and trying to conceive (TTC). When the desired outcome feels so challenging to achieve, and the path through ART is emotionally demanding, witnessing others achieve what we long for can be deeply hurtful. During IVF treatment, seeing pregnancy announcements from friends or family members can specifically trigger feelings of envy, potentially leading to emotional distress, as the apparent ease of conception for others contrasts sharply with our own struggles.

Envy can be triggered by many things, it could be a family member or friend who has announced their pregnancy, or it could even be an unknown person pushing a pram on the street or an online ad about maternity wear.

Acknowledging jealousy and envy is an important component of managing these difficult feelings, as they are very normal to experience. Guilt is also a common emotion which sits alongside feelings of envy, and this often stems from feeling conflicted about experiencing envy in the first place. Recognizing and accepting these feelings without judgment, though challenging, is crucial for effectively managing them and preventing them from becoming overwhelming.

## Feeling overwhelmed by information and decision-making

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The world of ART can be unfamiliar and overwhelming, especially when you are trying to process new medical information, medical terminology, and treatment regimes. There’s lots of decision-making involved, including the choice of a fertility specialist, timing of appointments, deciding whether you take any time off work, who to inform about your treatment, deciding whether to proceed with donor or surrogacy arrangements, etc.

In this toolkit, we discuss general ways to help you navigate some of these common feelings which often arise during ART treatment.





# The stress of ART treatment

Requiring fertility support inevitably will come with a dose of stress. It is, however, the experience of prolonged stress, or the fear of the future, which can be quite uncomfortable for us.

When we come to the decision of commencing ART treatment, we may feel stressed or anxious, as the world of ART can feel foreign. We may have been going through bouts of fertility testing, and possibly even years of trying to conceive. The journey may already feel quite hard and overwhelming. Perhaps we have heard success stories from other people, or perhaps we have heard of ART yielding unsuccessful outcomes for others. The world of ART can conjure up lots of different emotions in different people, but often, 'overwhelm' is a hallmark emotion. But what is overwhelm? Let's tease this out by looking at what we call the 'Window of Tolerance'."

## **The Window of Tolerance**

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The window of tolerance is a term used to describe a zone of arousal where a person is able to function effectively and within a relatively calm state. When we are within the zone of tolerance, we are usually able to:

- Readily receive, process, and integrate information;
- Respond to daily life events without much difficulty or distress;
- Make decisions calmly without feelings of overwhelm; and
- Think rationally and have the ability to calmly reflect.

During times of heightened stress, we can exit our comfortable window, and enter a state of hypo-arousal, or hyper-arousal. This is termed a 'dysregulated state'.

Hyper-arousal is known as the flight-or-fight response, and can be characterised by racing thoughts, anxiety, and feeling hypervigilant.

Hypo-arousal is known as the freeze response, which is characterized by a sense of emptiness or feeling emotionally numb. (See Figure 1)

## **Integrating back into our window of tolerance**

Decades of research into psychology and psychological treatments have shown us that people who are emotionally dysregulated can learn strategies to return to their comfortable window of tolerance. There are several strategies and techniques which we will discuss in this toolkit, that we hope you are able to draw from when you feel you need to. These strategies have demonstrated efficacy in respect to helping you create a greater sense of calm and develop a greater ability to deal with stress in more adaptive ways.

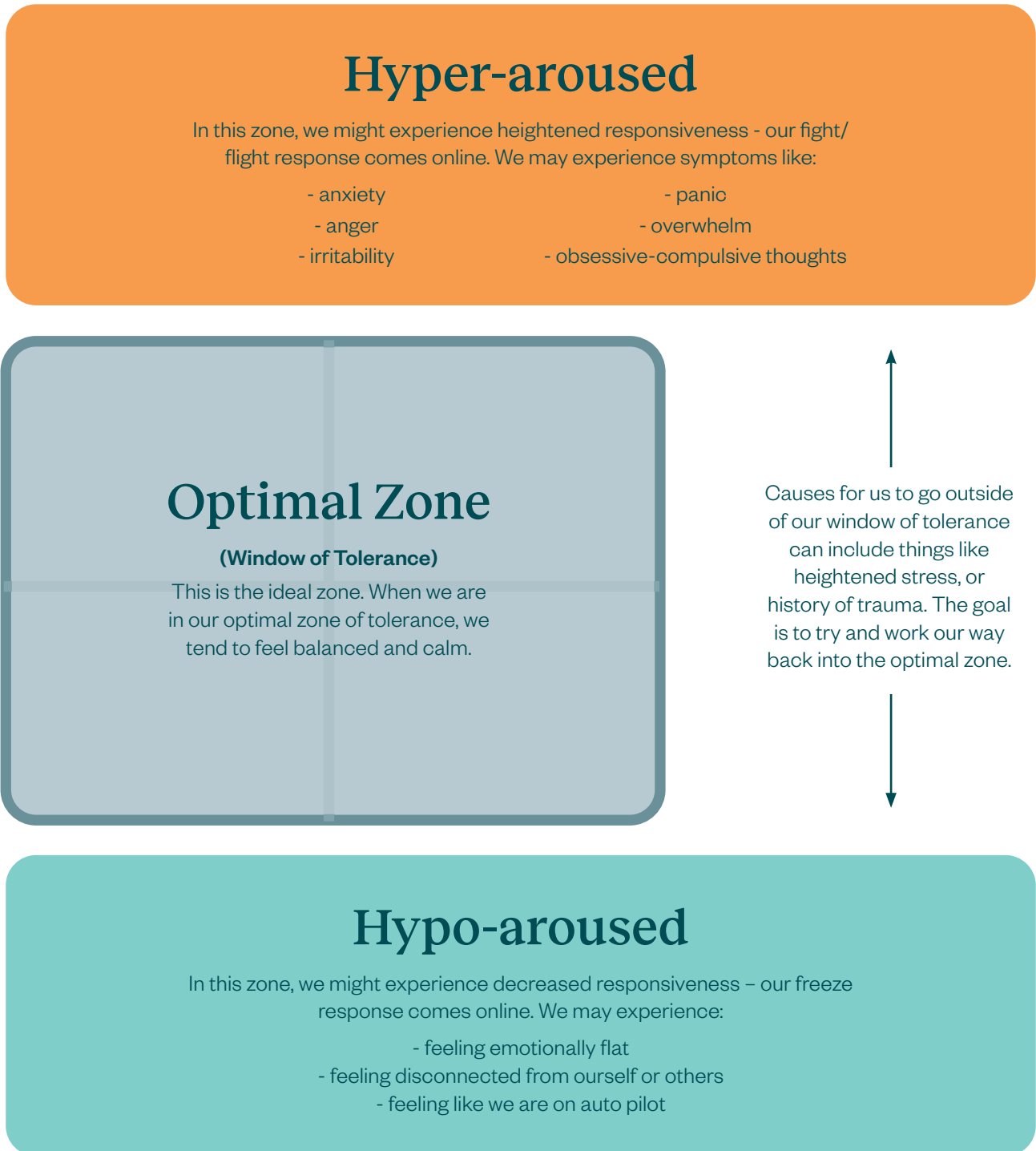
Some individuals are able to engage in these techniques on their own and will find that they not only integrate back into their window of tolerance, but they can actually widen it.

Other individuals may need extra support from therapy, which can be an incredibly helpful step.

Many of us may also have a trauma-history or complex mental-health background, which means integrating back into the tolerance window by ourselves may not be as easy or straightforward. As such, support from a qualified counsellor is advised in order to do this safely and to prevent further dysregulation. Please contact your clinic to discuss support options.



Figure 1: Window of Tolerance



# The relationship between thoughts, feelings, and behaviours

In order for us to learn how to regulate our emotions, it is important to understand how our emotions are influenced and how they fit into the cognitive-behavioural model.

Lots of people think that there is an event, or series of events, that influences our emotions. However, there is an additional step that occurs, and this is the 'cognitive process' or the 'thought process'. Our 'thought processes' are essentially what drive our emotions, and it's these emotions that then drive our behaviours.

What decades of research has shown us, is that if we can change our thoughts, or 're-frame' them, we can improve our emotional response.

**Figure 2: The Cognitive Model**

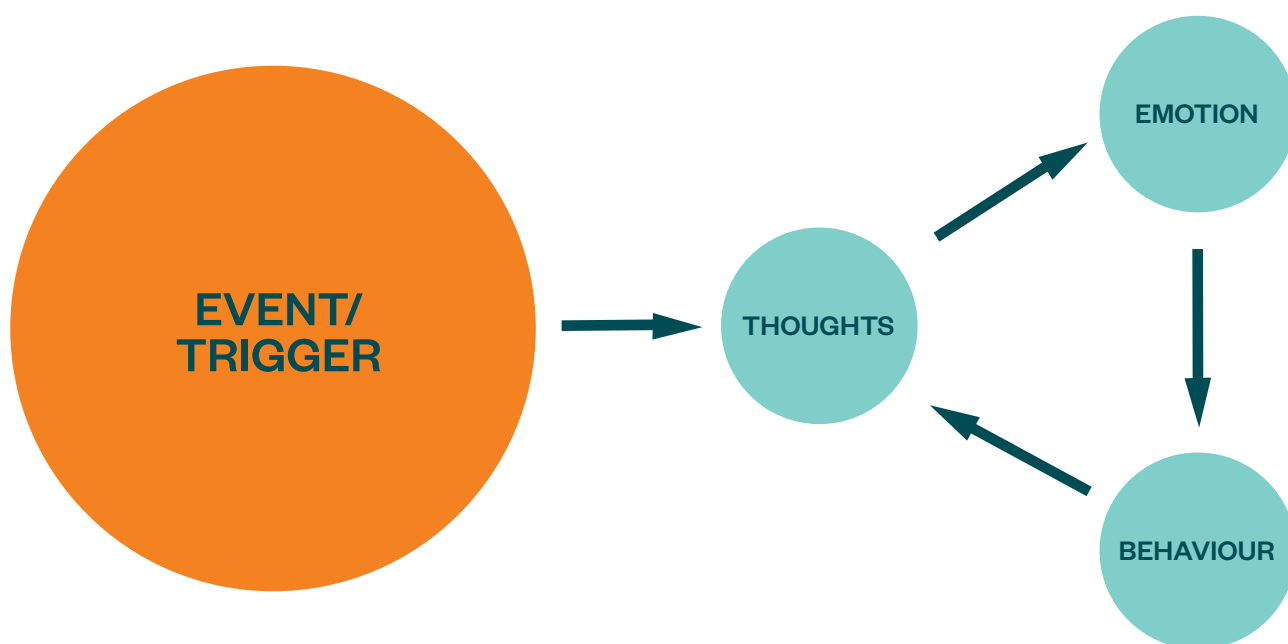


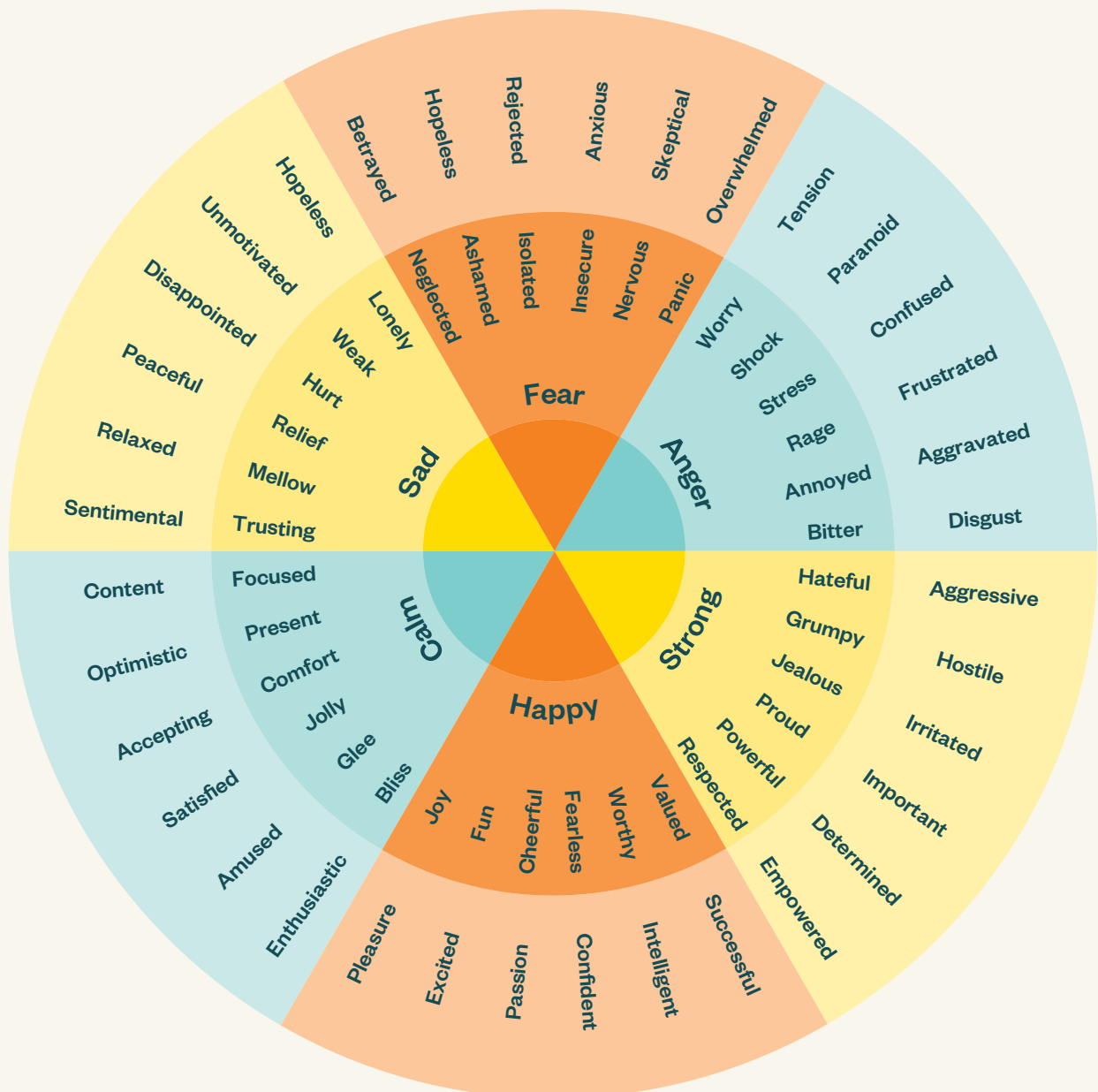
Image Source: "Cognitive Behavioural Therapy Triangle – Aaron T. Beck 1967".



# Recognising and labelling emotions

It is important to reflect and notice which emotions you are experiencing, so that you have a greater ability to notice when you wish to implement change. You may be experiencing several emotions at the same time, which isn't unusual either; this is colloquially termed as having "mixed feelings".

The below wheel explores various types of emotions:



# Understanding anxiety

The experience of anxiety is uncomfortable for many, and that is because it's the body's reaction to a stressful event, or unfamiliar situation. Experiencing anxiety can bring a sense of unease, distress, or even dread. We must mention though, that having a certain degree of anxiety and stress is normal – it's what keeps us alert and aware of what's going on.

For us to learn different regulation strategies, we first need to have a good understanding of how anxiety can present itself. There are several types of anxiety:

1. Psychological or cognitive
2. Physical or somatic
3. Behavioural

## 1. Psychological

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Psychological or cognitive anxiety is when we are experiencing anxious thoughts and unhelpful thinking patterns such as excessive worry, catastrophising or obsessive thoughts. This is particularly distressing because we often identify *with* our thoughts, but it is very important to remember that our **thoughts are not facts**.

Here are some of the most common unhelpful thinking patterns:

### All-or-nothing thinking (black-and-white thinking)

e.g. "if we can't conceive on our first IVF attempt, it means we're not meant to be parents at all"

### Overgeneralisation

e.g. "This cycle didn't work out well. This must mean that any future cycles will be the same."

### Catastrophising

e.g. "If this IVF cycle doesn't work, we'll never be able to have a baby."

### Mind reading

e.g. "My family must think I'm a failure because we need to do IVF"

## 2. Physical

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Physical or somatic anxiety is when anxiety symptoms physically manifest in the body. This happens because when we feel threatened in some way, our fight-or-flight system is activated. This is an evolutionary mechanism where our body braces us to either fight (confront) a stressor, or run from it (withdraw). This is a useful tool if we are faced with a lion (and need to either run or fight!) but not so much when we are facing fertility-related stress. Our mind often can't decipher a real and serious threat from an imagined threat. We therefore may sometimes notice anxiety coming up in several parts of the body, including symptoms like:

- sweating;
- racing thoughts;
- a rapid heart rate;
- a dry mouth;
- difficulty breathing; or
- feeling sick in the stomach.

## 3. Behavioural

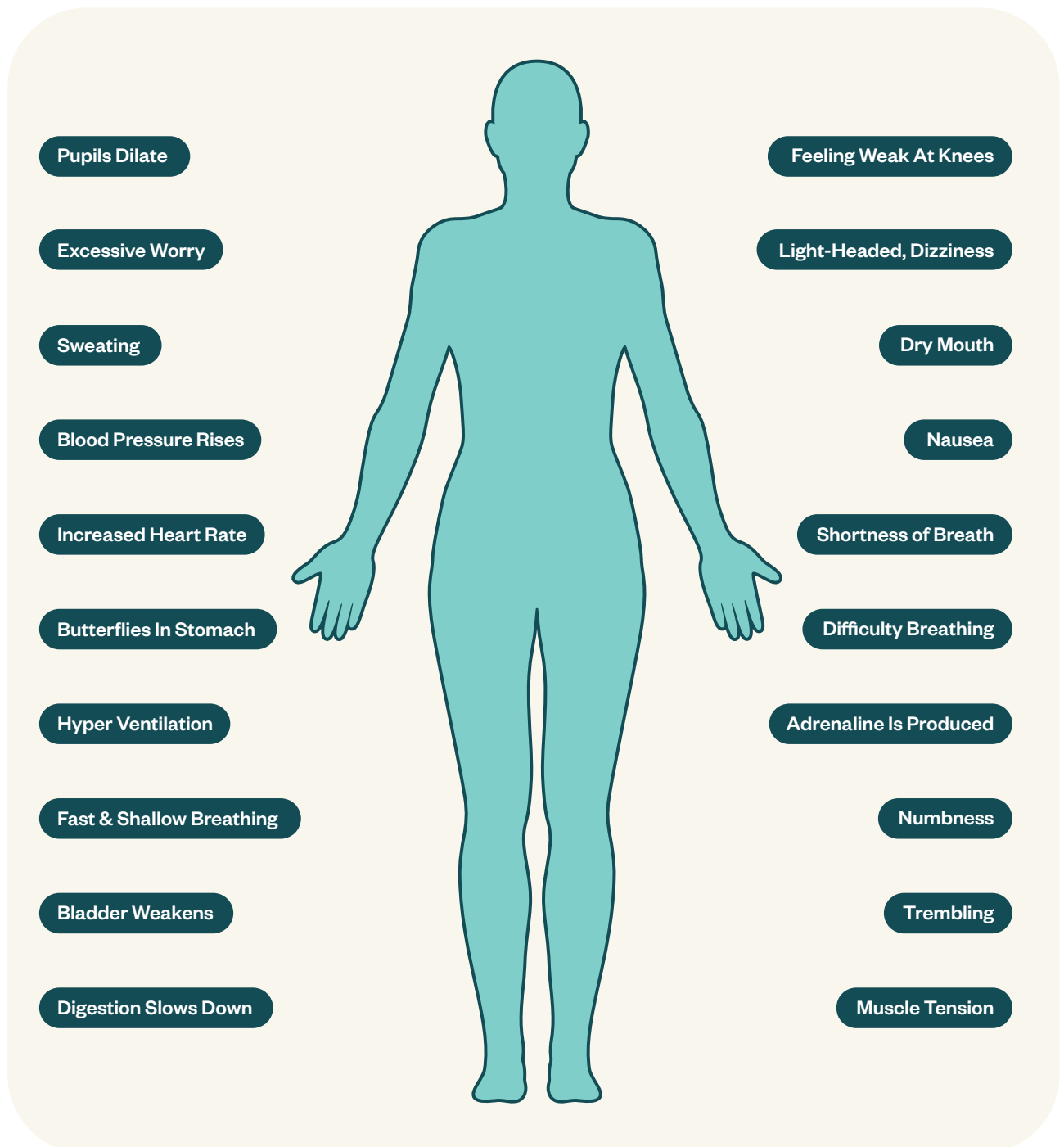
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As a result of cognitive or somatic anxiety, our behaviours can often be impacted. For example, you might:

- avoid situations where you might feel judged;
- avoid situations where you feel like your anxiety could be made worse;
- struggle to meet work and/or personal commitments; or
- find it hard to sleep and wind down.



**Figure 3: Physical symptoms of anxiety**



# Regulation strategies for anxiety and stress

Planning your coping strategies to help deal with the emotional overwhelm of treatment is important. This might mean both refining those strategies you already use as well as developing new ones. There are many effective strategies to help you reduce and tolerate the various areas of treatment-related stress.

## Breathwork

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Breathwork is a truly underrated form of emotional regulation. One of our favourites is 'Box breathing'.

Box breathing, or 'square breathing' involves breathing in for a count of 4, holding the breath briefly to the count of 4, breathing out to a count of 4, and again holding briefly for a count of 4. You would usually look to repeat this a few times. Sometimes it can even be helpful to draw out the image of a box on the palm of your hand as you're breathing. It's very simple to learn and to practice and can be used virtually anywhere and anytime.

Decades of research on breathwork has demonstrated benefits in emotional regulation and helping to reduce physical symptoms of anxiety, such as calming the heart rate and reducing blood pressure.

## Breathwork Tips

- **Nose vs Mouth** - Breathe in through the nose, and out through the mouth.
- **Diaphragmatic or 'Belly' Breathing** - Breathing through the chest can activate our body's sympathetic nervous system, which in turn can activate our fight or flight response. Conversely, breathing through the diaphragm activates the body's parasympathetic nervous system, which is our restful state. On the inhale, you should notice your belly expand outwards, and on the exhale, your belly should deflate inwards. Place one hand on your chest while you breathe in and one hand on your stomach for a simple reminder to breathe through your belly. It can be helpful to practice this with a counsellor if you haven't tried it before, because it can be tricky!
- **Slow breaths** - Focus on breathing in slowly, not necessarily too deeply. The slowness of the breath is what helps to regulate our anxiety.



## Plan worry time

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The act of worrying can come up at any moment during our day, even when we aren't necessarily triggered by something. As such, worrying can feel quite interfering when you are just going about your daily life. A strategy that can be useful here is to 'postpone your worry' to a particular time – plan it out, or schedule it in. It can feel particularly refreshing to be able to give yourself permission to ruminate in your thoughts, in a productive and adaptive way. By learning to postpone or plan your worry into your day or week, it can feel less intrusive, and you will feel like you are managing your worry effectively, therefore giving you a greater sense of overall control. We've outlined the steps for you below, but remember, it takes practice.

Typically, many people predict that they won't be successful at postponing their worrying, but often they are surprised that they are able to engage in the task, and as such, experience a greater sense of control.



### **1. Create a worry period**

Choose a time, place, and length of time for worrying. If it can be at the same time each day, that would be helpful from a consistency perspective i.e. 6pm, lounge room, for 20 minutes.

The time and place should be convenient enough for you to regularly follow through with the practice. Make it cosy if possible, so that you can feel comfortable in this naturally uncomfortable task – you are sitting with your worries after all. Think along the lines of a nice beanbag, a soft throw, and maybe a warm cup of tea.

Some people schedule worry time before their evening shower, so that the shower can serve as a time to unwind from the act of worrying and sitting with the thoughts and feelings. You could even engage in an imagery task in the shower where you visualise your worries and stress getting washed away down the drain.

### **2. Postpone your worry**

As soon as you notice a thought float by which turns into a worry spiral, postpone it to your worry period. Do this by noting the worry/thought down either on a sticky note, or even in the 'Notes' app on your phone. It might seem like there's a lot of effort involved when you need to jot-down your worries as they come up throughout the day. However, it is an important thing to do especially when you're at the start of building this new habit and you're trying to develop this new skill of postponing your worries. It can feel reassuring to your brain to know that you aren't ignoring the thoughts, you're just scheduling them to be pondered-on later during the day. If we don't write the thoughts down, our brain sometimes will push the thought more and more because it's fearful of you forgetting what the thought/worry is.

Remind yourself that you will (a) have time to think about this later on during worry time, (b) you will be in a better position to deal with the worry then, and (c) that there are more important or more pleasant things you can tend to in the current moment.

Turn your focus to the present moment and the activities of the day to help let go of the worry for the time being. Bring the other tasks of the day back into

your attention – let's get re-focused.

If you're finding it hard to re-focus, after you note the worry down, take a 5-minute break to change your scenery. Stretch at the desk, get up and make a coffee, or go for a 5-minute walk. When you return, you should be better able to focus in on the other tasks you need to get through.

### **3. Come back to your worries during your scheduled worry-time**

When the scheduled time comes around, settle yourself at the place you had planned and take some time to reflect on the worries you experienced that day.

It may be helpful to write your thoughts down in a journal, so that you can really tease out what's coming up for you on paper. However, if you feel that thinking about the worries in your head is comfortable, then it's fine to do just that. Do whatever feels right for you.

Only worry about the things you've noted down, if you feel that you must. If some, or all, of the worries you wrote down are no longer bothering you, no further action is required.

Ask yourself, is your worry something that you are in control of? If yes, then ask yourself: what can I do about it? Perhaps you need to schedule a phone call to your specialist, or maybe you need to allocate time this weekend to see your friends or family. Whatever the case, if the core of your worry is something you have control over, put some plans into action to help defuse the worry.

If the worry is *not* something you are in control of, it will be important to practice the art of emotional regulation and letting the worry go. Take this as an example; if we are on an airplane and there is turbulence, it unfortunately is not in our control. We need to just stick it through. In these circumstances we must refocus to our emotions and learn to tolerate the distress and acknowledge that it will pass.

## **Letting a Thought Go – Relaxation Practice**

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To begin the practice, sit down in a chair and adopt a relaxed and alert posture, then ask yourself:

- What am I experiencing right now?
- What thoughts are coming up for me?
- What do I feel emotionally?
- What bodily sensations do I feel or notice?

Allow yourself to simply acknowledge, observe and describe these experiences to yourself, without attempting to change them or answer the thoughts back. Spend 30 seconds to 1 minute doing this.

Now bring your focus of awareness to your breath, focusing on the sensations of your breath as it moves back and forth in your belly. Bind your awareness to the back-and-forth movements of the sensations in your belly from moment to moment and allow all thoughts to pass with each breath. You could say words to yourself such as 'relax' or 'let go' on each outward breath. Spend about 30 seconds to 1 minute doing this.

Now expand your awareness to your entire body. Notice how the breath feels in all parts of your body. If there are any strong feelings around, you could say to yourself "whatever it is, it is OK to feel it." Allowing yourself to breathe with these feelings, and if your mind wanders to worried thoughts, simply acknowledge, and gently return your focus back to the breath. Imagine the worried thoughts as a fly in the room – they will come, and they will go. Continue with this practice for about 1 minute.

As you become more and more familiar with this skill, you can increase the time if you wish.

## **Cognitive Defusion**

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Our mind and thinking patterns often have a way of totally consuming our attention, particularly when the thoughts are upsetting or distressing. We can sometimes feel 'trapped' or 'stuck' inside of a thought spiral, and unable to think about anything else clearly.

Being 'fused' with your thoughts means that 'you are one' with them, and when the thought is problematic, this can feel quite exhausting and emotionally

burdensome. A great technique to help 'de-fuse' from your thoughts comes from Acceptance & Commitment Therapy, called "Cognitive Defusion". This strategy can help you disentangle from your thoughts.

A hugely important step is to recognise that you are the observer of your thoughts. You are not the thoughts themselves.

## **Journalling**

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Journalling can help to release your emotions or any emotional tension that you have, so that you can connect with your true experience. It also has the capacity to help us with thought disputation and challenging unhelpful thoughts or beliefs, especially as we can see them written in black-and-white on paper.

Journalling can help you explore the things that you're feeling ready to let go of, and the things that you find you fixate on.

The fertility journey comes with lots of challenges, lots of information, and lots of decision making. It's easy to feel stuck, overwhelmed, and that your thinking is clouded. Journalling can help untangle some of these thoughts on paper. The process of journalling is an effective means of digesting your emotions and bringing a sense of calm and clarity into your fertility journey.

Reach out to the Repromed Counselling team if you would like some guidance around journalling, or discussing some specific journal prompts.

## **Gentle Exercise**

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We know from decades of research that moving our bodies can have positive impacts on our mood. Consider low-impact exercises, such as gentle yoga or Pilates, or going for a walk. The main rule of thumb is to avoid very high intensity workouts as we don't want to over-work ourselves.

Always follow your doctor's guidance around physical activity.



When you have an upsetting thought put the phrase “I’m having the thought that…” in front of it. This creates distance between you and the thought, loosening its grip on you.



“This isn’t going to work”



“I’m having the thought that this isn’t going to work”





## Sleep Hygiene

During an ART cycle, you might notice that your sleep is thrown off. This may be attributed to the hormonal changes in your body, medications you are taking, and the stress that is associated with fertility treatment and the experience of infertility. When our sleep is thrown off, biologically what this means is that our circadian rhythm is likely thrown off too. Our circadian rhythm is the biological process whereby our body receives signals from the brain (in the form of hormones) telling us when to be sleepy and when to be alert.

To try and fix our sleep schedule and circadian rhythm, we can try to reset our sleep cycle. It can take time, however with consistent habits, your body will have a chance to catch up to your new routine and begin producing the sleep and wake hormones at the right times.

Here are some tips and tricks:

### 1. Stick to a Routine

Having a bedtime routine can help signal to your body that it is time for bed. Your routine might incorporate washing your face, brushing your teeth, putting your phone away, and even doing some stretches in bed with dim lighting. You might also wish to listen to soothing music and read a gentle book in bed. Do your best to go to bed at the same or similar time each night. Then plan to wake up at the same or similar time each day. These behaviours essentially signal to your body that the sleepy hormones need to be released.

### 2. Avoid light disruption

Excess light exposure can throw off your sleep and circadian rhythm. Use block-out curtains over your windows or a sleeping eye-mask to block light and prevent it from interfering with your rest. Limiting screen-related activities such as using your phone 60-90 minutes before bedtime gives your brain a chance to wind down and signals to your body that it's time to sleep.

### 3. Move your body

Moving your body daily has demonstrated impacts in improving sleep. Avoid exercise too close to bedtime as this can interfere with your body's ability to effectively settle down.

### 4. Reduce Caffeine

We all have different sensitivities to caffeine, however it is advisable that you avoid caffeine from around 2-3pm as it can often take a while to exit your body. If you are unsure of how much coffee you should be drinking during your treatment cycle, always consult with your doctor or nurse.





## **Anxiety & Sleeplessness**

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Letting go of your worried thoughts before bedtime isn't the easiest thing to do. When we are busy and there are distractions, we might notice that our thoughts aren't as 'loud'. However, once there is silence and fewer distractions, you might find that your mind is buzzing and quietening your thoughts can be challenging.

Here are some practices you can try if your mind is racing:

### **Meditate**

Set a timer for 5 minutes, making sure that the alarm is not too loud and is set to a soothing sound. During this time, you may wish to use some cognitive defusion techniques, or you may wish to sit still and simply focus on your breathing. It is important to acknowledge that your thoughts won't automatically stop – simply try to notice the thoughts without any judgement.

Meditation is difficult to master, so sometimes using apps like Headspace or Calm can be helpful as they do have timed-meditations prebuilt in the app which are easy to use.

### **Body scan**

This is a mindfulness practice which requires you to turn your attention to specific parts of the body. If you need help with the mind-body connection, you can engage that body part (e.g. wriggle your toes to feel that connection). Start by noticing the tips of your toes, then move up through your feet and eventually all the way up to the top of your head and the tips of your fingers. As you move through each part of your body, in your mind say, "My [body part/s, i.e. toes] are completely relaxed."

### **Journal**

Write down your thoughts before bed. They might be worries, or they might be reminders popping up (i.e. needing to schedule your car for a service). Get your thoughts out onto paper and give yourself permission to address them tomorrow.



### **If you can't stay asleep, get out of bed**

If you suddenly wake up during the night, rather than tossing and turning in bed for hours, if you notice that you are not in a drowsy state within 15 minutes of waking up, then get out of bed. You don't want to cause an association of wakefulness with your bed. Get up and do something relaxing, like reading a book in the lounge room. Avoid using harsh lights and opt for warm lights or a candle (just remember to blow it out before you head back to sleep). Wait for yourself to get drowsy, and then head back into bed.

## Mindfulness

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Our mind often wanders around, experiencing thousands of thoughts every single day. Whether it's wandering into the past, or perhaps wandering into what the future may hold, we often find that most of us aren't thinking about the present, or the 'here and now'. Usually, we are thinking about anything and everything when we are completing familiar tasks, such as driving a car, making food, working, etc. This is known as the 'auto-pilot' mode.

Mindfulness is essentially where we are truly being in the present moment and noticing our world in the 'here and now'. Commonly referred to as the 'being mode', mindfulness can help us free from our automatic unhelpful thoughts and can help ground us when we need it most.

Mindfulness does not aim to control, get rid of, or 'fix' a problem. Instead, it is designed to teach you a skill which will place you in a better position to not buy into the negative thoughts. Mindfulness can help create a little bit of space in your mind to recognise any negative thought patterns as just thoughts, which as a result can reduce the distress they may have previously caused. The core features of mindfulness are **observation** and **description**.

**Observation** requires us to observe the experience that we are currently having, which is in line with our senses, as opposed to in line with our thoughts. For example, mindfulness is not interested about 'how the rain makes you feel', or 'what the rain represents', it is just interested that 'it is raining'. Mindfulness wants us to focus on observing what is happening around us (i.e. seeing, touching, smelling, tasting, hearing). Consistently practicing mindfulness over time will allow you to notice a thought without adding meaning or further analysis to it. It's an ongoing practice for many without an end point, and can be a very useful skill in all aspects of life.

**Description** requires us to be specific with what we are observing; if you are looking at an apple, notice whether it is round, smooth, shiny, bright, or dull. Over time, we are able to generalise the same skill when describing our emotions, i.e. heavy, light, tense.

## Thought Disputation

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With all these practices, we want to learn and have the ability to challenge and tease-out our automatic, unhelpful thoughts. Let's say that you are experiencing an intolerance of uncertainty. Perhaps you are thinking "I know many people who have had successful outcomes with IVF, but what if I don't have success? What if there's no baby at the end of this?"

Ask yourself the following questions and write down your responses.

- Is it possible to be certain about everything in life?
- How is needing certainty in life helpful and unhelpful?
- Am I 'predicting' that an undesirable outcome will occur, simply because the outcome is uncertain? Is this a reasonable thing to do? What is the likelihood of a positive or neutral outcome?
- How likely is it that things I predict will happen?
- Can I live with some of the uncertainties of life?

It can be worthwhile booking a counselling appointment to help learn the skill of thought disputation. Sometimes we can really struggle to see different perspectives, especially when we are fixating on only one possible scenario or outcome. A safe, non-judgemental and non-biased counsellor can help you consider these other perspectives more readily. Counsellors can also help teach you more tangible skills with learning to challenge some of your unhelpful thoughts, based off your individual circumstances.







# Coping with the anxiety of waiting for a pregnancy test

Many patients report that one of the most stressful periods is the time between insemination/embryo transfer and the pregnancy test. That 2-week waiting period can feel like a lifetime.

Due to the intense nature of the ART treatment process, most people find that they are very tuned in to their bodies and any subtle changes that may occur. During that waiting period you may become conscious of every possible ache, twinge or sensation. You may find that your thoughts will be racing, and you will worry about all sorts of things. As a result, it can be very difficult, despite what others may advise you, to relax and 'not think about it'.

How can you possibly switch off and not think about one of the most important things of your life, right? Well, we can't switch off our thoughts, and it's really important to accept that anxiety during this time is normal and to be expected.

During what can be a highly stressful time, a lot of people put their lives on hold, waiting until the pregnancy result comes before making plans to do one thing or another. As you are already aware, the treatment process is a long and arduous one, lasting several weeks from beginning to end. Often by the time people reach the stage of waiting for the pregnancy result, many are already emotionally exhausted.

As well as planning and preparing for how you might deal with stress or anxiety it can also be helpful to have positive activities planned to coincide with these difficult periods. A good way to keep anxiety contained is to keep busy. Firstly, this gives you something pleasant to look forward to, and secondly, if it is planned in advance, you are more likely to follow through with it. Examples of positive activities include going for a massage, seeing a movie, visiting friends, going away for a weekend or night with your partner to a lovely location, dinner with friends at your favourite restaurant, etc.

If you are feeling overwhelmed by worrying thoughts, try working on one thing at a time. It is physically and mentally impossible to deal with 20 problems at the same time, so work out what is the most prominent issue and concentrate on dealing with that. Come back to some of the strategies listed earlier in this toolkit, and consider scheduling in a supportive counselling appointment during your 2-week wait if you're finding it difficult to manage.





## Managing difficult situations with others who are pregnant or have children

There may be some difficult situations which arise for you as you are going through your ART treatment. For example, you might encounter a significant date associated with your experience of infertility or your reproductive loss (like a past miscarriage) coinciding with a friend's fertility event (such as a sudden pregnancy announcement or baby shower). These situations can be emotionally challenging as they bring up your grief while also balancing the delicate task of expressing happiness for those close to you. These sorts of experiences can feel heartbreaking to go through.

You are allowed to give yourself permission to avoid certain events, situations, or even people, when you are feeling vulnerable. Within the world of ART, there are so many uncontrollable and unforeseeable factors, and it can make emotional regulation hard. Sometimes

the last thing we need is to balance all this while in the company of a triggering event or person. It can be helpful to allow yourself the control over what you do and who you see or engage with.

If you do decide to attend an event like a baby shower, then consider attending with a support person such as a partner, or trusted friend or family member. This way, you can create a signal that you might use to alert each other when it is time to leave.

Of course, avoiding all of your friends, family and events can lead to feelings of isolation and loneliness. Whilst some avoidance can be helpful, this needs to be balanced with ensuring that you remain connected to your support network. Sometimes the right balance is hard to achieve, but it is important to aim for a healthy level of avoidance.

# Dealing with insensitive comments

One of the pitfalls of infertility is dealing with less than sensitive comments from well-meaning friends, family, and strangers. Often, we hear things that are well intentioned however come across as insensitive and can leave us lost for words.

Below we have listed some common remarks patients may encounter, along with some suggested responses.

Remember, everyone responds to hurtful comments differently and these generic responses are designed for you to reframe to what feels right for you. If you'd like more tailored suggestions, be sure to schedule an individual counselling appointment so that you can identify some more personalised script ideas dependent on your individual situation. Please contact your clinic to discuss support options or book in to see your local GP.

## Comment #2

**“You are so lucky to be childless; you can sleep in, take spontaneous vacations, and buy nice things for yourself.”**

“While I understand you're trying to be supportive, I yearn to have a child more than anything else. The benefits of childlessness don't compare to my desire for a baby.”

“It's challenging to hear comments about the positives of childlessness when I'm struggling with infertility.”

## Comment #3

**“I'm sure that God has a plan for all of this”**

“While I appreciate your perspective, it doesn't lessen the emotional toll of facing infertility.”

“Suggesting that God has a plan for my infertility doesn't ease the pain of unanswered prayers. It's a complex issue with no easy answers.”

## Comment #1

**You should just relax/go on a cruise/go on vacation/have a drink. You'll get pregnant for sure.”**

“Infertility is a physical issue, not a mental failing. My partner and I have a physical condition preventing us from falling pregnant. Unfortunately for us, it's not as simple as 'just going on a holiday.'”

“My fertility issue isn't related to stress. There is a biological reason why I'm having trouble falling pregnant, so that's why I'm exploring some other options.”

“I appreciate your suggestions. We do our best to relax however due to our circumstances, we need to explore other ways to fall pregnant.”

“I know you mean well, but I'd rather not discuss this topic right now.”

## Comment #4

**“So, when are you two going to have kids?” OR “Why don't you have kids?”**

“That's a personal question. We'd rather not discuss it.”

“We're doing our best to navigate this journey. Your understanding and support mean a lot.”

“I prefer not to talk about our family planning right now. Let's change the subject.”

“I/we decided to share that I/we are about to embark on IVF treatment. We want you to know, but we would prefer if you don't ask me/us questions; instead, I/we will update you when I/we feel that I/we need to.”



**Comment # 5**

**“Why don’t you just adopt?”**

“Adoption is a wonderful option. But, it’s an expensive and lengthy process, and we aren’t quite ready to take that step at this time.”

“Adoption is a significant decision. While it’s an option, it’s a complex process that we’re not ready for at this time.”

**Comment # 6**

**“So when are you two planning on starting a family?”**

“We consider ourselves a family already.”

“We’re hopeful for the future and taking steps towards expanding our family.”

“I know you mean well, but that’s a really personal question. Some people have a hard time getting pregnant.”

**Comment # 7**

**“What do want a baby for anyway?”**

“It’s a personal decision that holds deep meaning for us.”

“This is something that I/we want, and I hope you can respect our/my decision on this.”

**Comment # 8**

**“You want kids? You can take mine!”**

“That’s an interesting offer!”  
(Then add a gentle smile and redirect the conversation to another topic.)

**Comment # 9**

**“Well, I know it’s none of my business, but are you sure you are doing everything right?”**

“We understand and appreciate your concern, but our fertility journey is private. We are confident in the steps we are taking, and we are doing everything we can to make this happen”.

**Comment # 10**

**“You’re too young to be worrying about this”**

“Fertility issues don’t discriminate based on age. It’s a challenging situation regardless.”

**Comment # 11**

**“How was the FET... PGT... Have you got your results back yet?”**

“Thanks for checking in and asking about treatment. I would really prefer to not talk about it at the moment.”

“Thanks for checking in, but as this is a really delicate time, I would prefer to be the one to update you when there is news to share.”

“Thanks for your concern. I’ll share updates when I’m ready.”

As you can see, we can gently shut down comments or redirect the conversation in productive ways. What can also be helpful is educating friends and family about infertility or ART whether that is sharing information with them and asking they read it or having a conversation if you are feeling up to it.

**Here are some thought starters:**

**“Did you know that 1 in 6 Australian couples, struggle with infertility?”**

- “Infertility is caused by a range of factors and circumstances; sometimes it’s male-factor, sometimes it’s female-factor, and sometimes the cause is unknown”
- “If you are interested in understanding more about fertility challenges, I can share some useful resources that I have come across lately.”

It’s hard to quickly respond to comments which are hurtful or insensitive. Hopefully these suggested responses will help with any uncomfortable situation that comes your way, and remember, for tailored individual advice on responding to challenging situations it may be worthwhile seeing a counsellor for a one-on-one appointment. Reach out to your clinic to understand your support options or alternatively speak to your GP about linking in with a qualified counsellor.

# Common reasons counselling support is useful during ART treatment

Counsellors, psychologists, and social workers who have expertise and further training in fertility can offer tailored coping strategies and emotional support, serving as an invaluable resource throughout your treatment journey. Here are some common reasons for accessing counselling support:

- You may be struggling to emotionally regulate and cope with the feelings that come with repeated cycles.
- You may be struggling with friends and family who struggle to empathise and show compassion, and as a result you're seeking help navigating these relationships as you go through treatment.
- You may wish to develop strategies for coping with other people's fertility or pregnancy.
- You may be struggling with negative thoughts relating to your fertility experience.
- You may be referred or encouraged by your doctor or nurse, following some disappointing news.
- You may have existing anxiety or depression and find that your regular psychologist 'doesn't understand the 'ins and outs' of fertility, and you need some additional space to discuss the pressures of ART treatment.
- You may have fallen pregnant following several losses or unsuccessful cycles and be overwhelmed with emotion.
- You may want to continue trying, however your partner may not, and you may benefit from support in navigating these discussions.
- You may simply want to chat and 'vent' with someone outside of your circle who understands the challenges that can come with the different fertility treatments, processes and realities.

**Please remember to contact your clinic to enquire about support options, or see your local GP to discuss a referral to an appropriately-trained mental-health professional.**









# Helplines, mental health support, and support plans

Throughout ART it is common for people to experience a range of emotional reactions including anxiety, worry, depression and uncertainty. Counsellors can help create a tailored stress-management plan to help you cope with the layers of stress which come with fertility treatment. If you wish to access tailored advice to suit your individual needs, please contact your clinic to discuss support options or speak with your local GP.

Please keep in mind that there may be times when you need support after hours or on weekends, when your counsellor might not be available.

Attached is a list of Helpline numbers you may wish to call during these times.

Please remember, if you are in an emergency and need immediate care, to call 000.

Please note, these numbers are all free to call.



**Triple Zero/Emergency Services**  
000

If you or someone you care about is in crisis and you think that immediate help is needed, call triple zero (000) or go to your local hospital emergency department.

**Lifeline**  
13 11 14

Provides 24 hour access to crisis support, suicide prevention and mental health support services.

**Suicide callback service**  
1300 659 467

Provides 24 hour crisis counselling to people at risk of suicide, carers for someone who is suicidal and those bereaved by suicide. They also offer online chat and video chat

**Red Nose Grief and Loss**  
1300 308 307

Red Nose Grief and Loss (previously 'SANDS') provides information and confidential 24/7 support by a trained parent supporters who have a personal understanding of the grief and confusion that may be experienced following miscarriage, stillbirth or the death of a baby.

**Pink Elephants**  
Online web-chat only (phone calls can be scheduled)

Provides information and support for women through miscarriage, pregnancy loss and beyond. The group supports women through their grief, nurtures them as they heal and empowers them as they move into the future. This is not a crisis helpline.

**Butterfly National Helpline**  
1800 33 4673

Available for anyone in Australia concerned about eating disorders or body image issues, either for themselves or someone they care about. Available 7 days a week between 8am – midnight AEST.

**Safe Steps**  
1800 015 188

24/7 Crisis Support Line for individuals experiencing family violence

### **External mental health professionals with fertility experience**

While we are able to support you throughout your ART journey, we know that some patients wish to link in with external psychologists and counsellors who have expertise in fertility and perinatal presentations.

#### **Australia and New Zealand Infertility Counsellors' Association (ANZICA)**

ANZICA members are psychologists and social workers with specialist knowledge and experience in helping patients cope with the emotional aspects of fertility treatment. Please contact the Repromed Counselling Team if you would like the current updated Private Practice ANZICA List of Practitioners.

#### **Centre for Perinatal Excellence (COPE).**

COPE is a not-for-profit organisation focussed on reducing the impacts of emotional and mental health problems in the pre and postnatal periods, including pre-conception and experiences of infertility. The e-COPE Directory has been developed to support people to identify services with expertise in perinatal emotional and mental health. You can find the e-COPE directory by searching: <https://directory.cope.org.au> and ensure to filter the directory by selecting what you are seeking help for (e.g. Infertility Support').

