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Sunu C. Thomas

Sree Chitra Tirunal Institute for Medical Sciences and Technology, sunusarathomas@gmail.com

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Abstract

Fathering a child is an important aspect of the identity of a man as motherhood is for a woman. Male factor infertility is one reason for the inability to father a child and this can contribute to many issues for a man at a personal or societal level. Although male infertility is a major contributing factor for the overall infertility for couples, our understanding of it is minimal. The objective of this exercise is to describe the meanings that men attach to their inability to reproduce and the conceptualisations of male infertility. A phenomenological approach has been used to analyse texts and available scholarly material. The phenomenological approach used to understand the conceptualisation of male infertility enabled the identification of stages of the infertility experience for men. The analysis also reveals that male infertility mostly centers around sexuality and masculinity of a man and thus the inability to reproduce questions their manhood.

Keywords

Male Infertility, Masculinity, Sexuality, Phenomenology, Manhood, Conceptualisations

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Exploring Literature for Conceptualisations of Male Infertility: A Phenomenological Analysis

Sunu C. Thomas

Sree Chitra Tirunal Institute for Medical Sciences and Technology
Thiruvananthapuram, Kerala, India

Fathering a child is an important aspect of the identity of a man as motherhood is for a woman. Male factor infertility is one reason for the inability to father a child and this can contribute to many issues for a man at a personal or societal level. Although male infertility is a major contributing factor for the overall infertility for couples, our understanding of it is minimal. The objective of this exercise is to describe the meanings that men attach to their inability to reproduce and the conceptualisations of male infertility. A phenomenological approach has been used to analyse texts and available scholarly material. The phenomenological approach used to understand the conceptualisation of male infertility enabled the identification of stages of the infertility experience for men. The analysis also reveals that male infertility mostly centers around sexuality and masculinity of a man and thus the inability to reproduce questions their manhood. Keywords: Male Infertility, Masculinity, Sexuality, Phenomenology, Manhood, Conceptualisations

Introduction

Infertility is defined as the inability to achieve a clinical pregnancy, and this can be caused by fertility issues for the woman or man or both (National Collaborating Centre for Women's and Children's Health [UK], 2013). A significant proportion of couples are affected by infertility globally and the estimated prevalence of infertility is 1.9 percent among women aged 20-44 years (Mascarenhas, Flaxman, Boerma, Vanderpoel, & Stevens, 2012). Male related factors are responsible for 20-30 percent of the cases of infertility globally (Agarwal, Mulgund, Hamada, & Chyatte, 2015).

Male factor infertility is defined by the presence of abnormal semen parameters but may exist even when the semen analysis is normal (Pfeifer et al., 2015). Male infertility may be caused by a range of factors from abnormal spermatogenesis, abnormalities in sperm transport or problems in the accessory gland functions (de Kretser, 1997; Hoffman, 2012).

Although male infertility is a major contributing factor for the overall infertility among couples, an accurate estimate of its exact extent is not available. This may be partly due to the difficulties in the diagnosis of male infertility (Irvine, 1998) or could be due to cultural reasons that in certain societies male infertility is not talked about and its estimation becomes difficult (Agarwal et al., 2015). However, literature on the prevalence of male infertility suggest that around 30 million men globally suffer from male factor infertility (Agarwal et al., 2015). A recent analysis (calculated) shows that the percentage of infertility attributable to male factors ranged between 20-70% (Agarwal et al., 2015). In another estimate, the male partner contributed to approximately 40 percent of the causes for infertility (American Society for Reproductive Medicine (ASRM), 2017).

Literature is replete with discussions of women's experiences of infertility (Batool & de Visser, 2016; Hampshire, Blell, & Simpson, 2012; Nahar & Richters, 2011; Todorova & Kotzeva, 2003; Unnithan, 2010; Vanderlinden, 2009). It is possible that this literature focuses mainly on women because reproduction is seen as women's responsibility. Women are

stigmatized in the community due to their inability to have a child, since a “true” woman is one who is able to fulfil the “motherhood mandate” (Todorova & Kotzeva, 2003). Thus, female infertility is almost always equated with motherhood. On the other hand, our understanding of male infertility is minimal (Culley, Hudson, & Lohan, 2013). Male infertility is not widely discussed unlike female infertility, possibly due to the potential for stigma linked to its association with sexual disorders. There is a tendency to hide the diagnosis of male infertility due to the associated stigma. Sometimes the female partner tends to shoulder the responsibility of the infertility even when the cause is male factor (Todorova & Kotzeva, 2003). The understanding of male infertility is limited since the diagnosis and treatment of infertility is mainly centred on women’s bodies (Culley et al., 2013) and thus there is significant invisibility in acknowledging men in this realm.

As male factor contributes to the overall pool of infertility we need to understand how male infertility is constructed and how it is conceptualised in the community. This has relevance because these conceptualisations have implications for the methods they adopt to resolve the couples’ infertility (Culley et al., 2013). Clearly male infertility is of significance but there is limited literature that captures the experiences of men living with infertility. Fathering a child is as important as motherhood since as much as the latter is associated with the gender identity of a woman, equally fathering a child is essential to the gender identity of a man. However, the procreative body function of men is always associated with sexuality unlike that of women where procreation is associated with motherhood (Humphrey, 1977). Therefore, for men, failure in this function threatens their sexuality.

The literature on lived experiences of male infertility was minimal. I therefore used, the narratives of male infertility in the English translation of “One Part Woman” (Murugan & Vasudevan, 2013) by Aniruddhan Vasudevan of the Tamil novel “Madhorubhagan,” by Perumal Murugan (Murugan, 2010). Even though it largely talks about lives lived in a specific context of Kongu Nadu in central western Tamil Nadu, it provides extensive insights in first person narratives into how male infertility is experienced and conceptualised.

I prefer a phenomenological approach to understand the experiences of and meanings attached to male infertility since this approach does “describe the common meaning of several individuals of their lived experience of a concept or a phenomenon” (Creswell & Creswell, 2013).

The emerging understandings of male infertility from the narratives in the novel are bolstered using narratives from available literature on the lived experience of male infertility. It enables validation of the existing notions and identification of newly emerging conceptualisations at the same time (Daivadanam, Wahlström, Ravindran, Thankappan, & Ramanathan, 2014). This form of hybrid method of synthesis of emerging conceptualisations is not unusual (Dixon-Woods, 2011; Fereday & Muir-Cochrane, 2008).

Objective

The objective of this exercise is to describe the meanings that men attach to their inability to reproduce and the conceptualisations of male infertility using a phenomenological approach to analysis of texts and available scholarly material.

“Phenomenology is a philosophical approach to human experience, a systematic approach to describing the internal meaning structures of experience” (Van Manen, 1990), with a fresh and unbiased description of the phenomena of interest.

Fiction has been cited as a source frequently used by phenomenologists, particularly for increasing practical insights (Van Manen, 1990). The specific narratives on the experience of living with male infertility from the novel and the scholarly articles were selected for the analysis. This work is “phenomenological” in the sense that it focuses directly on the lived

experience of the protagonist (of the novel) and his inability to produce a child and the scholarly articles describe the ways in which male infertility is experienced. This kind of selective reading is seen as relevant by Van Manen, to capture the phenomenological meaning. He suggests that we should see “What statement(s) or phrase(s) seem particularly essential or revealing about the phenomenon or experience being described?” (Van Manen, 1990, p. 93).

As a phenomenological exercise is incomplete without situating the researcher, a process of self-description is necessary, to either enable identification of potential subjectivities or to enable a bracketing out of the self. I am a female public health researcher, and a trained nurse, pursuing my doctoral work in understanding the pathways to infertility treatment-seeking in the state of Kerala, India. The interest in this particular work happened during the literature search as part of my study where I was unable to find ample scholarly work on male infertility and the experience of male infertility, particularly in my context (i.e., in India). This led me to look for other arenas where I could find narratives of male infertility and the book “One Part Woman,” published originally in Tamil language as “Madorubhagan,” was identified. This particular book was selected since it was more context specific and gave a first-person narrative of the inability to beget a child. As a medically trained woman and a researcher, I have sufficient interest in the experience, but do not have the means to experience it myself.

The Institutional Ethics Committee of SCTIMST under its SOP (April 2017) exempted the work from ethics review as it only involved use of data or records which were publicly available. The IEC clearance form no. SCT/IEC/1056/ MAY-2017 dated 29.05.2017.

Methods

I chose a qualitative study using phenomenological approach to describe the meanings that men attach to their inability to reproduce and develop conceptualisations of male infertility that capture its essence to men. The phenomenological approach does help to portray the lived experience and the common meanings that emerges of a particular concept or phenomena and has been used for this purpose by others (Imeson & McMurray, 1996; Ranjbar, Akhondi, Borimnejad, Ghaffari, & Behboodi-Moghadam, 2015).

The lack of scholarly articles to understand the experience of male infertility, especially within the local context, highlighted the need to seek an understanding of this. This led to finding of fiction on the subject and this book was particularly selected because “One Part Woman” was replete with personalized experience and was more context specific. This area was also difficult to research because of cultural barriers within the particular Kerala context, where women may not be acceptable interviewers of male infertility experiences.

I selected the first-person narratives and third-party descriptions of male infertility from Perumal Murugan’s text “One Part Woman” and this was coded to elicit the descriptions of experiences. These emerging descriptions were validated and updated using published scholarly work on male perceptions of infertility. The book alone was insufficient as it gave the voice to only one man and did not look at medical means of resolving infertility. Therefore, scholarly articles complemented the reading and analysis of the fictional text.

Analysis of the Text “One Part Woman” and the Five Scholarly Articles (Van Manen, 1990)

The book “One Part Woman” and the five scholarly articles were read separately and the themes/meaning units were formed independent of each other. Comparing across emerging themes, I could group them into stages in the experience of male infertility. The work towards this analysis are described in four steps and graphically represented in figure 2.

Step 1: Organizing the texts and identifying significant statements/passages

This involved reading of the book “One Part Woman” to select passages that are narratives of how the protagonist thinks about his inability to reproduce and how others viz., family, friends and community reinforced these perceptions.

The other supplementary materials were identified using “google scholar” and “pubmed” search engines. Google scholar and pub med searches using the search terms “living with male infertility,” “male infertility and lived experience” yielded a total of 3163 articles. Scanning the titles and the abstracts of these, only 11 articles were identified as looking into lived experiences of male infertility. Out of the 11 articles only 5 contained narratives of such experiences. Only qualitative studies that looked into the experience of male infertility were selected. This process is illustrated in figure 1. The five articles were carefully reviewed to elicit particular statements where the author(s) had discussed the experience of male infertility. These statements were listed.

Step 2: Forming codes by grouping the identified statements/passages

Reading through these selected passages, the emerging meaning or implication of the passage was summarized as a code. Thus, the “code” here represented a single concept pertaining to the experience of infertility. While developing new codes, a comparison was made with the existing codes to ensure that it captured minor separations in meaning with respect to what was experienced and how it was experienced.

The statements from the scholarly articles were summarized as codes independent of the codes formed from the text of “One Part Woman.”

Step 3: Developing themes

Separately, for the text from “One Part Woman” and from the five scholarly articles, the codes that were similar or indicative of a single notion were then merged to create themes or meaning units. These meaning units or themes were used to explain the experience of infertility and the meanings attached to this experience by men. Five themes were identified from the text of “One Part Woman” and independently five themes were identified from the five articles. Across these two sources, three themes overlapped. Thus, in total, seven distinct themes were identified from these two sources.

Step 4: Identifying the stages of experiencing the male infertility

These emerging unique themes from both the text and the scholarly articles were seen in the light of stages of grief described by Kübler Ross (Kübler-Ross, Wessler, & Avioli, 1972) to identify the stages of experiencing male infertility. Seven stages were identified to describe the essence of the experience of male infertility.

Figure 1. Flow Chart of Search Strategy and Selection of Articles

Figure 2. Illustration of the Steps of Analysis

From the text “One Part Woman”

From the five scholarly articles

The themes identified from analysis of the text “One Part Woman” and the five scholarly articles were examined to describe the stages of experiencing male infertility.

Results

Conceptualisation of male infertility from “One Part Woman”

Five major themes were identified by grouping the primary codes. These major themes explained how male infertility is constructed by individuals experiencing it and by other members in the community. The themes identified were the urgency to father a child due to the everyday ridicule within the community, externalizing the cause for male infertility, suggestions to resolve childlessness, disruptions in family and sexual life and threatened masculinity due to the inability to produce a child. The actual exercise of identifying passages/statements, coding them, merging codes to form themes or meaning units for both sets of documents have been illustrated in the Appendix.

The urgency to father a child due to everyday ridicule within the community. The protagonist is mentally engaged with the urgency to produce a child. Childlessness does not worry him greatly but the everyday engagements with the community and the taunts that were forthcoming make him worry about his inability to produce a child. This is reflected in the emotions that underscore his sexual relations with his wife.

...now even when he took his face close to hers, his mind starts worrying, will it happen this time? (Murugan & Vasudevan, 2013, p. 10)

“God, please bless us this time. Make it happen somehow,” he kept repeating (Murugan & Vasudevan, 2013, p. 10)

There is a tinge of hope and also worry in the mind of the protagonist (Kali) each time the couple engage in sexual act. Simultaneously, it also reflects his apprehensions regarding the inability to produce the child.

Externalizing the cause for male infertility. The means to make a determination of who (the protagonist or his wife) has the problem (the inability to produce a child) were not available at that time historically. A curse his family had inherited-a readymade family myth, was identified as the possible reason for the inability to produce a child.

Kali's (the protagonist) mother believed that it is due to some wrongdoing that the great grandfather had done, i.e., he swore falsely in front of God.

“Kali's grandfather was his only child. His father, too, had been his grandfather's only child. They both died young.” Amma narrated all this and started crying. (Murugan & Vasudevan, 2013, p. 22)

Kali's grandmother, however, had a different story to explain the infertility. She believed it was due to another curse and said that long back four young Gounder men had raped and killed a young tribal girl and that this curse still continues among all the Gounders of the lineage and they will not have girl children and the male children will grow up to be impotent and die young.

Pavatha, our goddess who resides up in that hill, will seek justice from those who did this to me. No girl child will ever be born in their families. Even the male children shall grow up to be impotent and die young.

This curse of the tribal girl persisted till today. That was why no girl child had been born in this lineage. Even those that were born had died in a day or two.

The men, too, had truncated lives. Kali's grandmother narrated all this and launched into a dirge. (Murugan & Vasudevan, 2013, p. 27)

Suggestions to resolve childlessness. Community, friends and family offered suggestions for resolving the problem of infertility for the couple. These included Kali marrying another woman, Kali and Ponna (Wife of the protagonist) performing some rituals since the family believed it could be due to some curse that they have inherited, and, Kali send his wife to the chariot festival due to the insistence of the family.

There were suggestions from friends to get married to another woman, and this could be a solution for his problem.

... Mapillai! Shall I find a new cow for you? (Murugan & Vasudevan, 2013, p. 11)

... He shouted from where he stood, "Do you have children?" Kali went pale. (Murugan & Vasudevan, 2013, p. 19)

... Embarrassed, he gestured a no. Mani smacked himself on the head to express his sympathy with Kali's fate and said, "Get married again." Kali had to smile it away and vanish into the crowd. (Murugan & Vasudevan, 2013, p. 19)

The protagonist was not in favour of a second marriage due to many reasons. Firstly, he could not imagine another woman in his wife's place. Secondly, he would have to learn how to deal with two women. Lastly, he was afraid if the second woman also failed to get pregnant, it would sabotage his life and everyone would ridicule and question his manhood.

...also, if the second woman too could not get pregnant, his reputation as an impotent man would be engraved in stone. (Murugan & Vasudevan, 2013, p. 84)

The family believed that there was some curse they have inherited which was causing the protagonist not to have children.

...There is some curse that you have inherited. Everything will be alright if we find out what that is and make offerings for appeasement. (Murugan & Vasudevan, 2013, p. 20)

The only solution was to make the Gods happy through various forms of worship and appeasement.

Kali's grandmother once said, "Pavatha still resides in the hill in Tiruchengode. It is enough if you make offerings of new clothes and pray to her. Gods cannot be angry with people for too long." (Murugan & Vasudevan, 2013, p. 29)

Kali's mother explains that the fourteenth day of the chariot festival is very important and added that his wife had to be sent to the chariot festival that year. The fourteenth day of the festival, all rules are relaxed and any consenting man and woman could have sexual relations. On this day all men who come there are considered God and if a woman has sexual intercourse with a man on that day, it is believed that it is God who is giving her a child. It was expected

that by sending Ponna (the protagonist's wife) there, she might get pregnant with some man and this would be considered God given.

...this year we need to send Ponna there. And you must agree to this. (Murugan & Vasudevan, 2013, p. 95)

All men who set their foot in Tiruchengode on the fourteenth day are gods. It is god who is giving this. (Murugan & Vasudevan, 2013, p. 96)

Disruptions in family and sexual life. The couple had a happy marital and sexual life even though they were childless. They were constantly ridiculed for their inability to produce a child by friends, family and the community. However, this did not harm their relationship with each other. But, since there were talks about sending the wife to the chariot festival, the protagonist expected his wife to refuse to go to the festival and relieve him of the decision making in this regard. However, Ponna, the protagonist's wife was not forthcoming with the expected answer to his question on whether she will go for the chariot festival. This resulted in disruptions in the harmony in their everyday and sexual life.

"...will you listen to your mother and mine and go on the day when the gods retreat?" he continued." (Murugan & Vasudevan, 2013, p. 108)

She murmured: "if you want me to go for the sake of this wretched child, I will." (Murugan & Vasudevan, 2013, p. 108)

This refusal by the wife causes the protagonist to get very angry and he begins to behave badly with his wife. His implicit trust in her waned and he began to doubt her fidelity.

Whenever he crushed her underneath him, she begged, "Maama, please don't show your anger on me this way. It is unbearable..." (Murugan & Vasudevan, 2013, p. 119)

...Ironically, it made him happy on the inside whenever she got her periods on time and came crying to him. The way his mind worked she was trustworthy as long as she was menstruating regularly (Murugan & Vasudevan, 2013, p. 119)

Threatened masculinity. The protagonist was constantly being put down by his friends and family for his inability to bear a child. They questioned his manhood and also ridiculed his inability to impregnate his wife. This taunts from friends upset him. But, though his masculinity was constantly challenged by his friends for not having a child, the last blow to his masculinity came from his wife's acquiescing to go to the chariot festival. The thought of his wife having sexual intercourse with a stranger to overcome the burden of childlessness caused the harshest blow to his masculinity.

...work is not about this. Work is about this, and he made a lewd gesture, lifting two fingers of his left hand and inserting the index finger of his right between them. Tell me, now, who looks like a doll and works like a corpse? (Murugan & Vasudevan, 2013, p. 82)

when the girl looks unchanged in over a year and a half, it simply meant the husband's "work" was not up to mark. And the entire bunch of Kali's friends had insinuated this several times. (Murugan & Vasudevan, 2013, p. 82)

...it is not enough that the water you take in is great, the water you send out should be top-class too. (Murugan & Vasudevan, 2013, p. 83)

...Also, if Kali did intervene, the woman might say, "look at this! The impotent one has come to fight!" (Murugan & Vasudevan, 2013, p. 178)

Conceptualisation from published scholarly work on infertility

The five studies that were included for the analysis were qualitative papers that aimed at understanding the lived experience of infertility from men's perspective. Four out of the five studies used descriptive phenomenological method to study the lived experience of male infertility and the last one content analysis of an online help group to deal with male infertility. These studies were from Canada, Sweden, Iran, Taiwan and UK. From these sites, it is possible that the constructions that emerge may not match those in an Indian setting. But the lack of alternative materials and the possible universality of the experience of infertility among men, led to persist in the effort to expand the scope of the emerging conceptualisations using this material.

The major themes that were identified were resistance to undergo test, infertility diagnosis, externalizing the cause for male infertility, distress to the diagnosis affecting everyday life and threatened masculinity.

Resistance to undergo the test. There is resistance to undergo the test to determine infertility because infertility is never perceived as part of the men's world, it is mainly related to women (Johansson, Hellström, & Berg, 2011). Men were unwilling to get tested since they consider themselves to not be the cause for infertility in the couple (Lee & Chu, 2001). It was pressure from the spouse/partner that got them to agree to be tested. More often, men tend to not accept that they are the cause for infertility (Lee & Chu, 2001).

Denial of infertility diagnosis. On learning of the possibility of low sperm count or complete absence of sperm in the ejaculate, men seem to go into denial (Fahami, Quchani, Ehsanpour, & Boroujeni, 2010). There seems to be surprise and disbelief, possibly because of the initial unexpectedness of the diagnosis (Fahami et al., 2010). The diagnosis comes as a blow to their perception of themselves and leads to frustrations that result in possible somatic symptoms (Johansson et al., 2011).

Externalizing the cause for male infertility. Men tend to accept the diagnosis of infertility by ascribing myriad reasons for its cause. This could include religious reasons, other medical or personal reasons (Fahami et al., 2010; Lee & Chu, 2001). The current predicament of infertility could be a punishment for the past sins, or a divine test and as such is beyond their control (Fahami et al., 2010; Lee & Chu, 2001). Another explanation that men tend to locate for infertility was that it was a consequence of their past sexual behaviours/transgressions (Lee & Chu, 2001).

Distress to diagnosis affecting everyday life. Men's reactions to male infertility can be noted at physical, emotional/psychological levels and bodily reactions including sexual problems (Fahami et al., 2010). Physical responses include nausea, general weakness, chronic headache, fatigue, anorexia, and insomnia. These were thought to have been caused by their infertility (Fahami et al., 2010). Men also tended to display bad temperament and yelled at their wives, friends and employers on learning their diagnosis. They are also reported to have felt miserable, denial, anger, guilt, fear, loneliness and frustration. Some men claimed it was

something harder to bear than death (Lee & Chu, 2001; Richard, Badillo-Amberg, & Zelkowitz, 2016). Men also experienced decreased libido, decrease in orgasm quality, reduction in the frequency of sex, negative attitude towards sexual relationship, premature ejaculation and even sexual impotence (Fahami et al., 2010).

Threatened masculinity. Men feared rejection from their partners and were afraid that the desire to have sex would be reduced if the wife learnt that they are the cause for infertility (Lee & Chu, 2001; Richard et al., 2016). This may lead to divorce. There is embarrassment that they have fertility issues. They tended to avoid any discussions on the matter, and even the process of avoiding discussions could in itself lead to stress (Richard et al., 2016).

Stigma was internalised by men who were infertile, they believed that others will hold this against them and had strong aversion in disclosing their struggle towards demonstrated fertility (Arya & Dibb, 2016).

Infertility was a strong blow to their perception of masculinity, and the man seems to feel less of a man due to his inability to impregnate his wife (Arya & Dibb, 2016; Fahami et al., 2010; Johansson et al., 2011). This unfulfilled societal expectation causes them to think that others would view them in very much the same way as they view themselves – as somewhat less of a man than others (Arya & Dibb, 2016). The resolution seems to be – becoming a father. Male fertility is seen as associated with male sexual power, and its lack is associated with imperfect manhood.

The phenomenological analysis of the selected novel and five scholarly articles provided us with the description of the essence of male infertility experience. Seven stages of this process of being labelled as infertile and learning to live with it or overcome it have been identified by this exercise. It should be remembered that these seven stages are not necessarily chronological, and some stages co-exist with others.

Stage I - The urgency of having to produce a child: The want of a child may or may not be inherent but the experience of being ridiculed by significant others for their inability to produce a child or fear of being stigmatized puts pressure on the man to have a child.

Stage II - Resistance to being tested: Even if the couple wants to have children there is resistance from the male partner to undergo any diagnostic tests. This resistance emerges because they do not want to be identified as the defective person or the cause for infertility in the couple.

Stage III - Denial: The next stage of experiencing male infertility starts when the male partner comes out of the resistance stage and undergoes the diagnostic test. This can happen due to significant pressure from the partner. Sometimes men have tended to undergo the test to establish that they are not the cause for infertility. Once the diagnostic test is done and they are found to be having male factor infertility men go through the phase of denial. They tend to deny the diagnosis followed by frustrated acceptance of the fact that they are having the problem. This may be due to the internalisation of the notion of sexuality being at stake if infertility is diagnosed in them.

Stage IV - Distress regarding diagnosis affecting everyday life: The acceptance of the diagnosis is accompanied by distress in everyday life. This manifests in the physical body and also presents as emotional ups and downs. There are also issues in the sexual life following a diagnosis of infertility.

Stage V - Externalizing the cause for male infertility: Once the diagnosis of male infertility is made, the effort is to situate the problem outside the male body. Men resort to a range of explanations for infertility as do their near and dear ones. Each of these explanations serve to associate the problem to actions or deeds in the distant past, all external to the concerned man. In certain cases, the wives of the infertile husbands also tend to mask their partners' inability by letting themselves be blamed.

Stage VI - Means to resolve male infertility- centres outside the male body: The resolution of male infertility happens outside the male body. In very much the same way that causes for male infertility are externalized, the means to resolve it is also situated outside the male body. These seem to either involve some form of rituals or call for action by the female counterpart for medical reasons.

Stage VII - Threatened Masculinity: Male infertility is associated with threatened masculinity. Men identify themselves as "less of a man" if they are diagnosed with male infertility. This stage is not the final stage but it co-exists with all the other stages and all the stages are underscored by the fear of threatened masculinity.

Discussion

A majority of the work on infertility centers around the woman and there is a general under representation of men in this area of research. A literature review on the experience of infertility identified articles where females were the focus leaving the male perspective unclear (Greil, Slauson-Blevins, & McQuillan, 2010).

I seek to develop an understanding of male infertility by looking at available narratives of male infertility and the perceptions it evokes amongst men. While the literature providing insights into male perceptions is sparse, the fictionalised depictions provided a rich resource with which to tease out the implications of a label of infertility for a man. This understanding finds an echo in the available scholarly publications on perceptions of male infertility.

The phenomenological approach helped to capture as closely as possible the lived experience of male infertility. The fictional literature helped in understanding the lived realities of men living with infertility. This narration would be close to the reality for there were close overlaps in the themes identified from the fictional text and that of scholarly works. This analysis enabled me to cull out the various stages in the experience of being identified as infertile for a man. The analysis of the textual narration of male infertility gives important insights into how male infertility is perceived by a man living in a traditional community which values fatherhood. The hybrid approach to identifying themes, from a reading of "One Part Woman" and the other scholarly material was useful as the latter provided insights into dealing with male infertility that were not available in the fictionalised work.

Associating male infertility to impotency is clearly evident from the narration (P, Murugan, Personal communication, April 30, 2017¹). This strong linkage of male infertility and sexuality of a man, creates tensions in the mind of the protagonist who otherwise is happy in his married life even in the absence of a child. The aspersions on sexuality create a need for a child in the protagonist. The immediate family tends to situate the problem of not having

¹ The authorized English translation of the Tamil novel "Maadhorubhagan" uses the word "impotent" in this context. However, the original Tamil version uses the word "ori" which means "single or lone man." I consulted the author, Perumal Murugan as to the exact meaning of the word "ori" and he said that he used it as it was in Tamil. Nevertheless, I have continued to review the book on the basis of the English translation.

children to external factors like “curse.” This notion of situating male infertility outside the male body is reinforced by the suggestions put forth by family for the resolution of the problem. The blame of being infertile is taken away from his body and is situated to someone or something that happened historically. By doing so the man is absolved of his embodied limitation of being unable to produce a child.

A similar pattern emerges from the analysis of the available literature on lived experiences of male infertility. The biomedical treatment available for infertility has added a layer to our understanding from the narratives of the text. There is enormous amount of resistance to undergo the diagnostic tests for male infertility. Men do not see themselves as the cause for the fertility problems leading to childlessness. Men go into denial when a diagnosis of infertility is presented to them and thereafter there is tendency to relate it to external factors. There is tension in the physical body, and also in the married and sexual life due to male factor being the cause of infertility. That male infertility is seen as a lack of masculinity also emerges from the analysis of the literature.

The stages of experiencing male infertility can be compared with the stages of experiencing grief described by Elisabeth Kubler Ross in her book *On Death and Dying* (Kübler-Ross et al., 1972). On learning that one has a serious terminal illness, a patient goes through 5 stages of grief viz., denial, anger, bargaining, depression and acceptance. A similar pattern can be seen in the diagnosis of male infertility, where men first go through the denial phase, followed by anger and frustration, and the stage of bargaining can be compared with the stage where they situate external means to resolve the condition like prayers. Followed by the bargaining stage is the depression stage in grief which in male infertility diagnosis happens following the anger stage. The final stage is the acceptance of the male infertility diagnosis. The similarity of experiences of dealing with grief provides us with some means of external validation of our identified stages.

The main understanding that emerges from the analysis is that the construction of male infertility mainly centres around sexuality and masculinity of a man. Hence, the inability to produce a child is always seen as questioning notions of manhood. This could be perhaps why there is a societal tendency to describe the male infertility being caused by something outside the male body over which he has no control. The association of male infertility with impaired masculinity could be reason why it is not discussed in society. This may be a reason for the limited insights into the lived experiences of male infertility in scholarly works.

The themes that emerged from the analysis of the text and the scholarly articles were mostly similar. This was particularly surprising since the different contexts and cultures in which men experienced their reproductive inadequacy did not alter the meanings men attach to their experience of it. Rather than attempting to look for generalizability of findings, it is trustworthiness through the potential for transferability referred to by Guba (Lincoln & Guba, 1985) that I seek to achieve through this analysis. This exercise is entirely based on published work. These emerging patterns of the experience however, need to be verified by actual field understandings to strengthen the conceptualisation of the male infertility. The actual trustworthiness can only be verified in field settings.

This exercise has demonstrated the utility of fiction for a phenomenological analysis when for cultural reasons an inquiry on a particular topic by a researcher is rendered difficult. For health care providers, it is the important to understand the tremendous stress for men (and their partners) due to the diagnosis of male infertility which need to be addressed as part of the treatment process. This is particularly relevant as diagnosis seems to trigger violence and distress and a part of it is borne also by the partner.

Limitations

The conceptualisation of the experience of male infertility may be incomplete due to the limitation in the number of published scholarly work on the same. It was also not easy to find if all those conceptualisations that emerged from my analysis were really being experienced by men at all. This is primarily due to the constraint of getting men to talk to a female researcher about their experiences, which was culturally difficult. Since the data was approached with a particular objective, the understanding that emerged could be biased. The text “One Part Woman” used for the analysis gave the narrative of man who was unable to impregnate his wife, at a time when diagnosis and treatment were inconceivable. Thus, the lack of such a narrative in the text was complemented by the five scholarly articles which gave the narrative of diagnosis and treatment for male infertility. These two sets of data complemented each other in identifying the stages of experiencing male infertility. By bringing together both of these materials, to identify the stages in this experience which was comparable to the stages of experiencing grief, I was able to recognize that the literature enabled me to identify the range of experiences in the process.

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Appendix

Conceptualisation from Scholarly Articles

Finding	Excerpt	Analysis
<p>Resistance to undergo test for infertility diagnosis</p> <p>Men have exhibited reluctance to undergo diagnostic tests for infertility and do not acknowledged infertility as a male problem. If men do undergo tests, it is due to pressure from the partner.</p>	<p>“The men were at first unwilling to be examined. Later, they accepted checkups in the hope that such an examination could prove that they were not the cause of the infertility” (Lee and Chu, 2001).</p> <p>“This would allow the men to escape from their wives’ constant complaints” (Lee and Chu, 2001).</p>	<p>A common understanding that emerged was that testing for male infertility was not viewed positively by the male partner. Men were unwilling to be tested. They felt pressurized to undergo the test and did so to rule out their role in the infertility problem experienced by the couple. This indicates that there is a general resistance to undergo the tests to determine the cause of infertility among men as part of the infertility treatment process</p>

<p>Denial of the diagnosis of male infertility</p> <p>The diagnosis of male factor infertility was shocking for men. The diagnosis is received with shock, men exhibited emotional and physical reaction to the diagnosis.</p>	<p>“Some of the participants of this study had talked about ‘denial and disbelief’ as their first emotional reaction” (Fahami et al., 2010).</p> <p>“When these men were told that they were the cause of the infertility, all expressed emotional reactions of surprise and disbelief” (Lee and Chu, 2001).</p> <p>Some of the men had physical responses, such as dizziness, nausea, and general weakness when they heard the physician’s announcement. (Lee and Chu, 2001)</p> <p>“...many men had difficulty accepting their diagnosis” (Richard, Badillo-Amberg, & Zelkowitz, 2016).</p>	<p>The diagnosis of male factor infertility was not received well by men. They were expecting to be ruled out as the cause for infertility. Therefore, the diagnosis hit them and they were unable to cope with it. This put them in a denial phase and they exhibited physical and emotional reactions. This reiterates to me a denial of the diagnosis of male infertility by the men who get such a diagnosis.</p>
<p>Externalizing the cause for male infertility</p> <p>Men tend to draw spiritual reasons, sins they have done in the past or their past sexual behavior as the cause for their current infertility.</p>	<p>“some of the men in this study attributed the reason for infertility to what they did in their past lives” (Lee and Chu, 2001).</p> <p>“Other men, upon hearing the physician’s explanation that infertility might have to do with previous sexually transmitted diseases or other infectious diseases, began to scrutinize their past medical history. Some of the men believed in reincarnation and attributed their infertility to the previous life...” (Lee and Chu, 2001).</p> <p>“Some of the participants of the study considered infertility as a Divine test. They believed that infertility was something beyond their control and if God's Providence requires, they would absolutely have child” (Fahami et al., 2010).</p> <p>“Furthermore, there were some of the participants who believed it was due to retaliation of their past sins and infertility was the</p>	<p>There was a tendency to find out reasons for their inadequacy and these reasons were always situated outside the male body. The problem in the male body was always related to some past events or things beyond their control thereby situating the faulty bodily function as something that is not within. So, men tend to externalize the cause for male infertility.</p>

	penalty of their previous sins...” (Fahami et al., 2010).	
<p>Distress regarding diagnosis affecting everyday life</p> <p>The diagnosis of infertility was followed by different physical and psychological reactions. The diagnosis of male infertility also had an effect on the sexual lives of the men and had a fear of rejection due to their diagnosis.</p>	<p>“Many of the participants of the study had complained about several physical problems they experienced due to neural infertility crisis. Problems such as chronic headaches, fatigue, anorexia and insomnia all were the problems which infertile men believed they were due to infertility” (Fahami et al., 2010).</p> <p>“Problems such as decrease in libido, decrease in orgasm quality, reduce in the frequency of sex, negative attitude towards sexual relationship, premature ejaculation and even sexual impotence were related to the participants of the study” (Fahami et al., 2010).</p> <p>“One of the other problems they were faced with was sexual dysfunction of their wives that aside from reducing the sexual relationship quality of the couples had also negative emotional consequences for the infertile person” (Fahami et al., 2010).</p> <p>“Two thirds of the participants stated that their emotions were negatively influenced by the infertility diagnosis. They experienced bad temperament and yelled at their wives, friends, and employers” (Lee and Chu, 2001).</p> <p>“Some of the men even felt that if their wives were not satisfied with their barren marriage, they might divorce them” (Lee and Chu, 2001).</p> <p>“This idea of depression was a common theme found within the responses of the participants... participant felt suicidal during his infertility experience. This may well be an extension of the</p>	<p>There seems to be a great deal of distress among men due to the diagnosis. These are expressed as physical and psychological symptoms in their everyday lives. The diagnosis also has a negative effect on their overall sexual life. These reactions are exacerbated by their fear of rejection due to their inability to reproduce.</p>

	depression experienced” (Arya & Dibb, 2016).	
Threatened masculinity The diagnosis was received with a sense of embarrassment. Men had also experience stigma due to their diagnosis since they felt less of a man due to the diagnosis of male infertility. The diagnosis was considered as a challenge to their masculinity.	<p>“A feeling of inadequacy was a prominent part of the experience. Being informed about the absence of sperm in the ejaculate was described as the harshest blow in men’s lives and the worst news they had ever received. The possibility of biological fatherhood was perceived as non-existent and feelings of powerlessness and of being different emerged. The masculinity was threatened and it felt like their identity was questioned” (Johansson, Hellström, & Berg, 2011).</p> <p>“The other unpleasant feeling they were confronted with was the change in their self-concept...” (Fahami et al., 2010)</p> <p>“...feeling less of a man for not being able to impregnate his partner” (Arya & Dibb, 2016).</p> <p>“the inability to conceive is being depicted as a ‘dirty secret’...” (Arya & Dibb, 2016).</p> <p>“Some participants also reported feeling a sense of stigma...” (Arya & Dibb, 2016).</p>	The absence of sperm in the ejaculate or any semen abnormalities which gave the diagnosis of male factor infertility was seen as a blow to the masculinity of the man. The diagnosis of the reproductive inability is equated to the masculinity and this tends to create a feeling of being less of a man. There is clear evidence indicating that the diagnosis of male infertility tends to threaten the masculinity of the affected.

Conceptualisation from Text “One Part Woman”

Finding	Excerpt	Analysis
The urgency to father a child due to everyday ridicule within the community There is an apprehension of being childless and there is a need to have a child. This is intensified by the continuous questioning of the community.	<p>“...now even when he took his face close to hers, his mind starts worrying, will it happen this time?” (Murugan & Vasudevan, 2013, p. 10).</p> <p>“God, please bless us this time. Make it happen somehow,” he kept repeating (Murugan & Vasudevan, 2013, p. 10).</p> <p>He shouted from where he stood, "Do you have children?" Kali went pale. Even though the</p>	The protagonist exhibited a desire to have a child each time he had a sexual intercourse and this mostly seem to stem from the frequent reminding by the community about not having a child. This points out that there is an urgency to father a child due to everyday ridicule he faced at the hands of the community.

	<p>crowd carried on as before, he felt as if everyone had turned to look at him. Thankfully, Ponna was inside the bangle shop (Murugan & Vasudevan, 2013, p. 19).</p> <p>Some one or the other always appeared to remind him of it "I may or may not have children, what is it to you? Shut up and leave, he felt yelling. But he never could (Murugan & Vasudevan, 2013, p. 20).</p>	
<p>Externalizing the cause for male infertility</p> <p>Some curse is reiterated as the cause for the inability to have child. This is exemplified by the family lineage.</p>	<p>"Kali's grandfather was his only child. His father, too, had been his grandfather's only child. They both died young." Amma narrated all this and started crying (Murugan & Vasudevan, 2013, p. 22).</p> <p>"Pavatha, our goddess who resides up in that hill, will seek justice from those who did this to me. No girl child will ever be born in their families. Even the male children shall grow up to be impotent and die young" (Murugan & Vasudevan, 2013, p. 27).</p> <p>"This curse of the tribal girl persisted till today. That was why no girl child had been born in this lineage. Even those that were born had died in a day or two. The men, too, had truncated lives. Kali's grandmother narrated all this and launched into a dirge" (Murugan & Vasudevan, 2013, p. 27).</p>	<p>The cause for inability to beget a child is related to a curse which was caused by the transgression of the protagonist's forefathers. This means that the inability to reproduce in the present day is normalized or the blame is taken away from the male body is situated in an external cause on which the man has no control over.</p>
<p>Suggestions to resolve childlessness</p> <p>Remarriage was suggested as one of the solutions to have a child. Undergoing some ritual that was prevailing in the community was also</p>	<p>... "Mapillai! Shall I find a new cow for you?" (Murugan & Vasudevan, 2013, p. 11).</p> <p>"... He shouted from where he stood, 'Do you have children?' Kali went pale" (Murugan & Vasudevan, 2013, p. 19).</p>	<p>The common custom prevailing in the community to have a child was suggested as a solution to the problem. A friend of the protagonist insisted that he get married to another woman to get a child. These seem to be the</p>

<p>suggested as a means to have a child.</p>	<p>“... Embarrassed, he gestured a no. Mani smacked himself on the head to express his sympathy with Kali’s fate and said, ‘Get married again.’ Kali had to smile it away and vanish into the crowd” (Murugan & Vasudevan, 2013, p. 19).</p> <p>“...also, if the second woman too could not get pregnant, his reputation as an impotent man would be engraved in stone” (Murugan & Vasudevan, 2013, p. 84).</p> <p>“...There is some curse that you have inherited. Everything will be alright if we find out what that is and make offerings for appeasement” (Murugan & Vasudevan, 2013, p. 20).</p> <p>“Kali's grandmother once said, 'Pavatha still resides in the hill in Tiruchengode. It is enough if you make offerings of new clothes and pray to her. Gods cannot be angry with people for too long’” (Murugan & Vasudevan, 2013, p. 29).</p> <p>“...this year we need to send Ponna there. And you must agree to this” (Murugan & Vasudevan, 2013, p. 95).</p> <p>“All men who set their foot in Tiruchengode on the fourteenth day are gods. It is god who is giving this” (Murugan & Vasudevan, 2013, p. 96).</p>	<p>suggestions to resolve the problem of not having a child that was prevailing in the community in that time. So these can be labelled as the suggestions to resolve childlessness.</p>
<p>Disruptions in family and sexual life The couple had a happy marital and sexual life even though they were childless, although they were ridiculed by the</p>	<p>“...will you listen to your mother and mine and go on the day when the gods retreat?’ he continued” (Murugan & Vasudevan, 2013, p. 108).</p> <p>“She murmured: ‘if you want me to go for the sake of this</p>	<p>The wife’s (of the protagonist) decision to go for the ritual created problems in their marital and sexual life.</p>

<p>family and friends. The decision by the wife to go for the chariot festival caused disruptions in the harmony in their everyday and sexual life.</p>	<p>wretched child, I will” (Murugan & Vasudevan, 2013, p. 108).</p> <p>“whenever he crushed her underneath him, she begged, ‘Maama, please don’t show your anger on me this way. It is unbearable...’” (Murugan & Vasudevan, 2013, p. 119).</p> <p>“...Ironically, it made him happy on the inside whenever she got her periods on time and came crying to him. The way his mind worked she was trustworthy as long as she was menstruating regularly” (Murugan & Vasudevan, 2013, p. 119).</p>	
<p>Threatened masculinity The protagonist’s manhood was constantly questioned when he was unable to impregnate his wife. The blow to his masculinity came from his wife agreeing to go for the chariot festival. The thought of his wife having sexual intercourse with a stranger to overcome the burden of childlessness caused the harshest blow to his masculinity.</p>	<p>“...work is not about this. Work is about this, and he made a lewd gesture, lifting two fingers of his left hand and inserting the index finger of his right between them. Tell me, now, who looks like a doll and works like a corpse?” (Murugan & Vasudevan, 2013, p. 82).</p> <p>“when the girl looks unchanged in over a year and a half, it simply meant the husband’s ‘work’ was not up to mark. And the entire bunch of Kali’s friends had insinuated this several times” (Murugan & Vasudevan, 2013, p. 82).</p> <p>“...it is not enough that the water you take in is great, the water you send out should be top-class too” (Murugan & Vasudevan, 2013, p. 83).</p> <p>“...Also, if Kali did intervene, the woman might say, ‘look at this! The impotent one has come to fight!’” (Murugan & Vasudevan, 2013, p. 178).</p>	<p>A major understanding that stemmed from the excerpts were that the protagonist was constantly questioned about his ability to impregnate his wife and this inability to produce a child was equated to being “less of a man”. This means that the sense of masculinity is at stake due to the inability to beget a child.</p>

Author Note

Ms. Sunu C Thomas is a PhD scholar at Achutha Menon Centre for Health Science Studies, SCTIMST, Trivandrum (Southern India/Kerala). Her work focuses on identifying the various pathways that couples with infertility take to resolve infertility. Her research interests are gender and reproductive health. Correspondence regarding this article can be addressed directly to: sunusarathomas@gmail.com.

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