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## Exploring the Nexus of Social Stigma, Perceived Social Support, and Life Satisfaction among Women Facing Delayed Conception

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**Abstract:** *In recent research, a fascinating exploration delved into the intricate relationship between social stigma, perceived social support, and life satisfaction among women who experienced delayed conception. The study included a diverse sample of 105 females drawn from various regions of Sialkot. To assess these critical dimensions, the researchers employed the Stigma Scale and Discrimination (DISC), the Multidimensional Scale of Perceived Social Support (MSPSS), and the Satisfaction with Life Scale (SWLS). Employing a cross-sectional research design with a quantitative approach, the data was meticulously collected and analyzed. Notably, the results demonstrated a negative correlation between social stigma and perceived social support ( $r = -.303^{**}$ ,  $p < .01$ ), underlining the profound impact of social support in alleviating the stigma associated with delayed conception. Furthermore, the study revealed a significant negative correlation between social stigma and life satisfaction ( $r = .415^{**}$ ,  $p < .01$ ), highlighting the detrimental influence of stigma on overall life satisfaction. Conversely, there was a positive correlation between life satisfaction and perceived social support ( $r = .312^{**}$ ,  $p < .01$ ), emphasizing the beneficial role of social support in promoting a greater sense of life satisfaction among these women. The findings of this study unveiled an intriguing role for social support as a mediator in mitigating the adverse effects of stigma while simultaneously enhancing life satisfaction in women who faced challenges in conceiving.*

**Key Words:** Social Stigma, Social Support, Life Satisfaction, Delayed Conception

### Introduction

Many studies consistently reveal that society tends to associate womanhood primarily with motherhood. This perception portrays a girl as being helpless and incomplete without children. A woman without offspring is often perceived as weakened, sad, lacking hope, and lacking inspiration. This view extends to the world at large, where a world without children is seen as barren and incomplete.

A childless woman is sometimes likened to an empty schoolyard, facing numerous societal challenges and stigmatization. She may struggle to find her place both within her family and in society. In contrast, a woman with children is seen not only as a symbol of hope for the future but also as a source of optimism that the world can continue to evolve and grow.

The emphasis on early and delayed conception can have a profound impact, particularly since parenthood is often regarded as a significant step into adulthood—a vital part of the transition to mature status in society. (Greil et al., 1991). According to feminist experts, it's important to distinguish between the social and natural aspects of motherhood because assigning motherhood to a woman's nature ignores the effort she puts into fulfilling that role. Failure to be a mother may be seen as resistance against those systems by certain radical feminists who have linked motherhood to colonialism, capitalism and patriarchy as means of production (Neyer & Bernadi et al., 2011).

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The cultural attitude of motherhood and womanhood may be deleterious to girls who choose to be pregnant. However absolutely now no longer, with early and behind schedule concept as an useable shape of stigma that influences approximately one 6th of the U.S. population, with implications for long-time period poor mental consequences which include depression, low delight of existence and social isolation (Miles et al., [2009](#)).

Delayed idea is a state of affairs that impact approximately 20% of ladies (Fassino et al., 2002). It has been supply a cause of as a stressor in lifestyles and as a life catastrophe for plenty, women further to couples. There are many fundamental motives of delayed idea that includes ovarian failure (21%), tubal blockage (14%), unexplained (28%), and others (13%; Jose

-Miller et al., 2007). Other factors embody social factors, together with delaying parenthood for sake of career goals and financial sturdy and robust, obesity, sexually transmitted infections, and stress (European Society of Human Reproduction and Embryology et al., 2008).

Factors that have an impact at the opportunities of conceiving: Quantities of things have an effect on your possibilities of idea. They consist of the age, the timing and frequency of sex relative to ovulation, the duration of time looking to conceive, whether or now no longer you've got been pregnant before, getting good enough nutrition, maintaining a wholesome frame weight, avoiding consumption of drugs and leisure drugs, avoiding capacity occupational exposures (Baird and Strassman 2000; Taylor 2003).

The negative impact can also include dating difficulties with others, being competitive being closer to couples with children, grief, denial, melancholy, nervousness, embarrassment, anxiety, lack of control, self-blame, incompetence, low self-esteem (e.g., feeling dysfunctional, marital distress, and sexual dysfunction) (Choudhary & Halder et al., [2019](#)). The perception of women who like having a bad idea about how they view the world and themselves may also become distorted. Women who believe “not in time” idea may also severe cognitive distortions and negative automatic thoughts about becoming pregnant, such as “I will never get pregnant” my marriage goes to fall to portions if I have not a child” (Masoumi et al., 2018).

Research has shown that during most countries, many couples not having kids revel in various quantities of social stigma (Chachamovich et al., [2009](#)).

Accordingly, the process of stigma production and restoration depends on the use of social and political power. For stigma to function, it must have negative or discriminatory effects on the individuals who process the stigmatized “marks”(Link & Phelan, 2001; Yang et al, [2007](#)). Goffman’s 3 styles of stigmatizing metaphors correspond with 3 guiding metaphors of interacting with stigmatised peoples; the metaphors are: 1) “illness-disease”, 2) “the kid amongst adults,” and 3) “the ethical deviate,” as mentioned through (Walton et al., [1988](#)). Role congruency principle indicates that prejudice can arise whilst there is a perceived discrepancy among the real conduct and the anticipated conduct of participants of a social organization (Eagly & Karou et al., [2002](#)). Gender roles can characteristic as a form of social function that embody typically held ideals approximately the applicable attributes in guys and girls. These gender roles bring each descriptive norms, that are expectancies approximately the real conduct of institution individuals and injunctive norms, which might be expectancies approximately the proper conduct of institution individuals (Eagly & Karou et al., [2002](#))

Marital pride in behind schedule concept couples mentioned the significance of mental and circle of relatives helps which includes counseling for the partner and partner’s circle of relatives, instructing households approximately a way to have interaction with infertile couples, and monetary protection throughout remedy (Zeinab et al., [2015](#)). First, social aid become divided into marital delight and perceived social aid, as from own family 18 and buddies. While the maximum essential supply of assist is the partner, any help from buddies and circle of relatives served as a buffer among unsuccessful remedies and the emotional reaction for infertile girls (Verhaak et al., [2005](#)). Secondly, amongst couples, people with better familial pressures confronted substantially better quotes of depression, however counseling and training of each the couple and circle of relatives became discovered to growth tiers of marital pride and higher mental health. Thirdly, couples with better socioeconomic fame have been capable of fight low ranges of marital delight through presenting the monetary assist for scientific remedy. Highest stages of strain,

depression, and tension have been determined in girls six months after their first failure (Samadaee-Gelehkolaee et al., 2015).

Life satisfaction consists of people lives and all factors in their lives. Happiness, morale and so forth expresses the nation of being desirable from exclusive angles (Neugarten et al., 1961). According to a study on lifestyles pride is the cognitive issue of subjective health and it's far the appraisal of one's lifestyles because of comparisons among the people notion of dwelling situations and the standards he imposes on himself (Chohen et al., 2007).

A research study was conducted on women in Lahore, Pakistan, who experienced delayed conception and sought treatment at six hospitals. The primary aim of this study was to investigate the relationship between self-esteem, coping strategies, and psychological distress in Pakistani women facing delayed conception.

In summary, the research focused on Pakistani women with delayed conception in Lahore and aimed to understand how self-esteem, coping strategies, and psychological distress are interconnected. The study highlights the importance of bolstering social support and self-esteem to alleviate the emotional challenges these women face, according to prior international study, delayed conception and its treatment can have a negative impact on a person's quality of life and result in psychological problems as well. A person's low quality of life and psychiatric problems may result from withdrawing from therapy while receiving treatment. (Khalid & Dawood, 2020).

## Literature Review

The World Health Organization (WHO) characterizes delayed conception as a condition within the female reproductive system, denoting the inability to achieve pregnancy after a span of 12 months or more. In contrast, cultural theories regarding delayed conception often seek to elucidate this phenomenon by examining the psychological mindset of women, which is, in turn, shaped by the prevailing cultural context. Culture, in this context, encompasses a wide range of elements, whether material or non-material. Cultural theories of delayed conception endeavor to identify specific cultural factors that are believed to impact a woman's psychological perspectives on reproduction. These theories aim to pinpoint elements within a culture that influence a woman's attitude toward the idea of becoming a mother. (Stuart Henry McPhail Hall FBA et al., 2013).

## Theories of Conception

Caldwell's Theory of conceiving flows explains that females decline their conceiving ability as a rational choice through mother and father primarily based on the direction of high-Fertility contexts social support. This theory proposes that produce more than they consume provides net wealth to parents (Caldwell et al., 2006).

## Gary Becker's Conceiving Theory

This perspective suggests that as people earn more income, they are inclined to have more children and experience less stress, akin to the way they might shop for durable consumer goods. However, in reality, higher-income households often tend to have fewer children. Becker's theory posits that wealthier families prioritize having exceptional, often more costly, children over having a larger number of offspring. (M Doepke et al., 2014).

Davis and Blake's (1956) explains late conceiving theory, two types of factors direct or proximate determinants and indirect determinants or background factors are the key influences on late conception. The biological and behavioral factors that directly affect conception are referred to as the proximal determinants of late conception. Three studies of late-conceiving females led to the development of a theory on how late-conceiving moms adjust to motherhood. The theory is based on the experiences of late-conceiving mothers, and it conceptually situates these experiences in the context of the transition to parenthood of typically early-conceiving mothers as well as in the areas of life transitions and sickness work. Additionally, there were intragroup variations in the late conceiving women between birthing and



adoptive mothers, biometrically assisted and spontaneous conception, and mother conceiving with own or donor gametes.

A psychological theory of identity related to delayed conception highlights that women facing challenges in conceiving may encounter a diminished sense of self-identity. This can manifest through feelings of emptiness, hopelessness, and a sense of worthlessness. (Olshansky et al., 1987).

Orem's Theory of Self-care and Bandura's Concept on late conception describes that stress is the main factor causing late conception and nursing consultation has been shown to be beneficial in decreasing perceived stress and increased self-efficacy for infertile couples undergoing medication for conception (Orem et al., 2011).

David Haig, an evolutionary biologist at Harvard has brought attention to a perplexing issue concerning conception. He remarked, "Conception is absolutely central to reproduction, and yet it doesn't seem to work very well." In contrast, when we consider organs like the heart or kidney, they exhibit remarkable engineering and function reliably for many years. The question arises: Why is conception fraught with so many challenges? The key difference lies in the fact that the heart and kidney operate within a single individual's body, whereas conception involves the complex interaction of two individuals. This process doesn't always function seamlessly. Dr. Haig argues that during conception, a mother and her unborn child engage in an unconscious struggle for the nutrients she can provide to support the growing fetus. This underlying conflict can lead to various medical complications and challenges. (David et al., 1993).

The Unexplained Late Conception Theory is a recent explanation that highlights a phenomenon where, despite the apparent perfect biological conditions for conception, it doesn't always occur. This can happen when a man's sperm is normal, and a woman's reproductive factors, such as eggs, ovulation, fallopian tubes, and the uterus, are all in optimal health. In such cases, the reason for the failure to conceive remains unidentified, as there are no apparent issues or known factors hindering conception. Interestingly, these unexplained cases of late conception tend to be more successful in women under the age of 35. (Cindy Farquhar et al., 2018). For example, in the United States, in vitro medication results in the following:

- In women under 35: Live births resulted from about 30% of the procedure.
- In women aged 41 to 42: Live births resulted from only about 11% of the procedures.
- For women over 42, using eggs from another woman (donor) is recommended.

Delayed child-bearing theory presents that chances of conception declines with increasing maternal age, especially after the mid-30s. For this reason, not on time childbearing is historically described as being pregnant taking place in girls aged  $\geq 35$  years. This population has been referred to as advanced maternal age or late maternal age (J Balash et al., 2012).

## Life Satisfaction

According to theory of life satisfaction when people feel happy about every aspect of their lives where they are satisfied with how their lives have become. According to social cognitive theory, your well-being and satisfaction in terms of future happiness and wellbeing. People need to take the steps to realize it. The state of one's satisfaction and well-being is determined in long runs that are how they find happiness. Social support is the main factor in this procedure (Bandura et al., 1977).

Maslow's concept contends that, as we people try to fulfill our maximum primary needs, we additionally are seeking to fulfill a better set of needs, till we develop to become "self-actualized" or "all that we are able to be." At work, this could mean discovering a deep purpose and passion in our role, and delivering true excellence (Maslow et al., 1977).

The top-down theory perspectives basic existence delight or unique regions of lifestyles pride because of persona and different strong characteristics To evaluate hedonic well-being, most psychology researchers have used the construct of subjective well-being. SWB consist of three components: life satisfaction, positive affect, and negative affect (Lucas, Diener, & Suh, 1996; Diener et al., 1999).

## Social Stigma

The Biopsychosocial theory of late conception describes late conception as both a life crisis and a non-event that affects individual in various stressful ways (body, mind and emotions, sense of self and relationships) (Briggs et al., 2013).



According to the stigma reduction theory by Corrigan and Penn (1999) education provides factual information about mental illnesses issues specially females who suffers with late conception. According to scapegoat theory put forth an analysis of violence and aggression in which females face late conception undergoing negative experiences (such as violent or abuse by others) and also blame them for causing the experience (Durkheim et al., 1895). Stigma involves negative attitudes or discrimination towards a person primarily based on a distinguishing feature such as a mental illness, fitness condition, or disability. Social stigma is usually related to being childless. According to World Health Organization (WHO) around 15% of the couples are tormented by infertility globally

Most of the couples don't prefer any treatment or diagnosis as there is a great social stigma. Married adolescent women are vulnerable to risky sexual and reproductive health outcomes. Married adolescent girls in Pakistan live in a gender inequitable context facing fertility pressure from their in laws and extended family rooted in social norms normally it is associated the best age to conceive is above 20s and early 30s age and similarly late marriages make difficulty to conceive because when there is menopause the conception is difficult. There are several factors that may impact a woman's ability to conceive (M Taebi et al., 2021). Social stigma mentioned a state of affairs wherein infertile girls might face discrimination from others; a one-of-a-kind and compassionate appearance which turned into torturous to them. Women perceived extra stigma than guys and that being stigmatized became extra painful than being infertile. Furthermore, maximum of the individuals did now no longer just like the term "infertile". Psychologists consider that for such people, titles and labels have to be used that don't mean a flaw; like the usage of toddler loose in place of childless The World Health Organization defines delayed conception as a disease of the male or female reproductive system defined by the failure to achieve a pregnancy after 12 months or more of regular unprotected sexual intercourse Globally, as much as 16.7% of couples of reproductive age revel in problems in conceiving and in India, it varies among 39 to 16.8% . Delayed Conception on time theory has vital effect on mental, emotional bodily and sexual health, especially in settings in which bearing a toddler holds excessive value. In those settings, the cap potential to undergo an organic toddler is taken into consideration a demonstration of a woman's health, and her role in society. Social support plays a key role in how an individual adjusts to a life crisis. Social support is typically perceived as having an available confidant or experiencing caring attitudes from a specific source. One of the key theoretical models related to social support is the stress buffering hypothesis. This model states that in the event of a stressful experience those who have social support will suffer less from the potentially harmful effects of that particular occurrence, thus facilitating adaptations. One member of the couple can influence the other's psychosocial adjustment or fertility stress through perceptions of controllability or of the likelihood of becoming pregnant . (Gardner et al., 2003)

### Delayed Conception in Pakistani Context

In the cultural context of Pakistan, it is widely acknowledged that infertility places a significant burden on women. Infertile women often face threats of divorce, eviction from their homes, and the possibility of their husbands remarrying. Women are frequently held responsible for delayed conception, and they may even be threatened with their husbands pursuing second marriages. However, it is worth noting that this negative mindset tends to diminish for women who have at least one living son. The extent of these cultural beliefs and practices is evident in the experience of a woman who had suffered three stillbirths. She mentioned that during wedding events, she is kept away from the bride because she is believed to bring "bad luck" to the bride's future. Furthermore, most women experiencing delayed conception and having only one live child, while grateful for this blessing, still feel that within Pakistani society, having just one child is equally distressing and stigmatized. (L.White, McQuillan, Greil, & Johnson et al., 2006).

To gain a better understanding of delayed conception, researchers gathered data through comprehensive interviews with gynecologists. In the context of Pakistani culture, Dr. Ayesha's perspective suggests that after one year of marriage, it is considered a delayed conception.

Dr. Musarat Azeem, on the other hand, highlights the natural decline in a woman's conception abilities after her late 30s. She notes that women in their early 20s have the highest likelihood of conceiving, with a better chance of conception during each cycle. She also mentions that in both rural and less educated urban areas, people tend to consider 5-6 months after marriage as a delayed conception. However,



according to Dr. Musarat Azeem, the overall period to consider as a normal conception duration, if all tests for both partners are accurate, should be one year. Beyond this timeframe, it would be categorized as delayed conception. This diverse range of opinions underlines the complexity of understanding and defining delayed conception in the cultural and medical context. Dr. Shama's insights emphasize the importance of age when it comes to the matter of conception. She notes that females who marry at an early age often encounter difficulties when trying to conceive. From a medical perspective, she suggests that after two years of marriage without a successful conception, it can be considered a delayed conception. Furthermore, Dr. Shama points out that conception is influenced by a multitude of factors, including age, nutrition, emotional well-being, sexual satisfaction, marital adjustment, marital satisfaction, socioeconomic status, and more. These factors collectively contribute to a person's ability to conceive, highlighting the complexity of the conception process.

## Hypothesis

**H1:** It is hypothesized that there exists a negative relationship between social stigma and perceived social support.

**H2:** It is hypothesized that there exists a positive relationship between life satisfaction and perceived social support. This means that as the level of perceived social support increases, individuals are expected to report higher levels of life satisfaction.

**H3:** It is hypothesized that there exists a negative relationship between social stigma and life satisfaction

## Objectives of Study

1. To investigate the relationship between delayed conception and the experience of social stigma among women who married early and those who married later.
2. To examine the association between life satisfaction and marital timing, comparing early and late married women.
3. To explore the link between delayed conception and the perception of social support among married women.

## Methodology

Methodology is based on two sections. Phase-II and I. Phase-I was based on formal data collection through participants and Phase-II was comprised of Interviews conducted by the researcher from obstetricians.

### Phase-I

#### Participants

During Phase I of this study, a purposive sampling technique was employed to recruit participants. The sample consisted of 105 individuals, comprising both early and late married females, with an age range starting from 18 and above. Data collection was carried out using questionnaires based on standardized tools. The participants came from various socioeconomic backgrounds and habitats, ensuring a diverse representation in the study.

### Phase-II

During Phase II of the study, the criteria for delayed conception were extensively examined, considering the cultural context of the community. In-depth interviews were conducted with three obstetricians from clinics in Sialkot, Pakistan. These experts provided valuable insights into the definition of delayed conception within the local culture.

## Medical Practitioners

Dr. Ayesha, a prominent figure in Pakistani culture, expressed the view that a period of one year after marriage is considered as delayed conception.

Dr. Azeem, on the other hand, emphasized the natural decline in a woman's conception abilities after her late 30s. She also highlighted that women in their early 20s have the highest chance of conceiving,

especially when considering each menstrual cycle. In contrast, in areas where in-laws are less educated, a delayed conception is often perceived as occurring after 5-6 months of marriage. However, Dr. Azeem recommended that the overall standard for normal conception should be one year if all tests for both partners are accurate.

Dr. Shama emphasized the significant role of age in this context and noted that women who marry at a young age often face difficulties in conception. From a medical standpoint, she suggested that after two years of marriage, conception is considered delayed. Dr. Shama further pointed out that conception is influenced by various factors, including age, nutrition, psychological well-being, sexual satisfaction, marital adjustment, marital satisfaction, and socioeconomic status.

### **Mental Health Professionals**

Ms. Marwa Tahir, a clinical psychologist, stressed the importance of psychological well-being in the context of conception. She mentioned that managing emotions and accepting changes in the body is crucial. Stress was identified as a major factor affecting conception, with women experiencing anxiety, depression, or other psychological issues being more susceptible to delayed conception.

Dr. Rana, an addiction practitioner, pointed out that addiction plays a significant role in delayed conception. Women who smoke cigarettes, use sheesha, or engage in other substance abuse are at a higher risk of experiencing delayed conception or miscarriages compared to non-addicted individuals.

These insights from various experts shed light on the multifaceted nature of delayed conception, taking into account cultural, medical, psychological, and lifestyle factors.

WHO: The World Health Organization defines delayed conception as a disease of the male or female reproductive system defined by the failure to achieve a pregnancy after 12 months or more of regular unprotected sexual intercourse Globally, as much as 16.7% of couples of reproductive age revel in problems in conceiving and in India, it varies among 39 to 16.8% .

### **Research Design**

In this study, a cross-sectional research design was employed to investigate the relationship between social stigma associated with delayed conception, depression, and life satisfaction among women experiencing delayed conception. Data was gathered using a random sampling technique, involving married females aged 18 years and above. The analysis of the collected numerical data was conducted through quantitative research methods.

### **Demographic Information**

For the collection of the data development, demographic sheet was created. It was self administered and consists of items concerning participant's gender, age, education, birth order, marital status, years of delayed or late conception, family system, socioeconomic status, household income and religion.

### **Ethical Considerations**

All moral guidelines have been practiced all through the research course and progression. For this purpose, concerned authorities have been approached to request authorization to conduct studies. Through a signed consent form, people willingness to became received to take part with inside via required age range. They had been confident that their records may be stored private and could be used best for academic purpose.

### **Procedure**

Proper written and verbal consent was obtained from the institutions, authors of the scales and the participants. Informed consent was obtained from the participants. For more clarity translated version of the scales were used to measure the constructs. Continuous availability of the researcher helped the participants to clear their queries and present elaborative judgments.



## Measures

### The Multidimensional Scale of Perceived Social Support ( Zimet et al.,1988)

The Multidimensional Scale of Perceived Social Support (MSPSS) was developed by (Zimet, Dalhem, Zimet, & Farley in 1988) . It is a short, simple-to-use self-report questionnaire which contains twelve items rated on a seven-point Likert-type scale in which scores ranges from ‘very strongly disagree’ (1) to ‘very strongly agree’ (7). It was translated by Dr. Tahira Jibeen and also permitted to use this scale.

### Satisfaction with Life (SWLS) (Diener et al., 1985).

The Satisfaction with Life Scale (SWLS) was designed by the researchers Diener, Emmons, Larsen, and Griffin in 1985 and published an article in journal of personality assessment. It has a short 5-item self-report instrument which is used to assess the respondent’s overall life satisfaction.

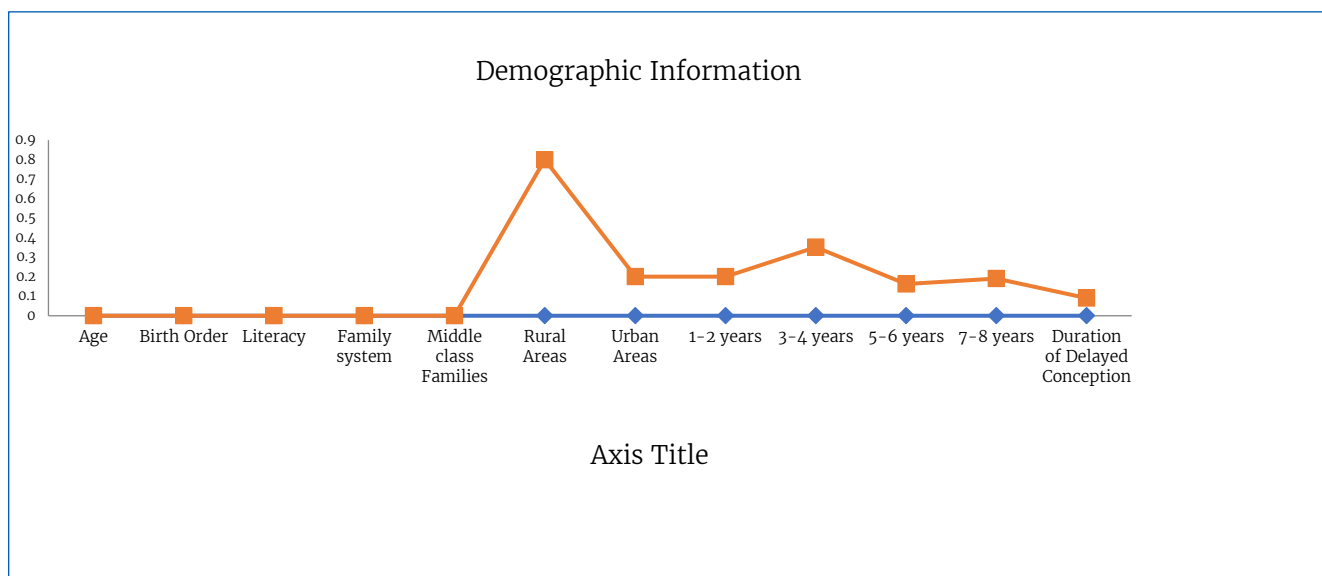
It is very simple, reliable, valid and most appropriate for use in non-clinical population.

### Stigma and Discrimination Scale (DISC)

Researchers with inside the Section of Community Mental Health (CMH) at King’s College London have evolved seven measures referring to distinct factors of stigma and discrimination. The DISC is a 34-item, interview-based, measure. All gadgets are scored on a 4factor Likert scale ranging from “0” never to “3” a lot. The 4 subscales are: (1) Unfair treatment (2) Stopping self (3) Overcoming stigma (4) Positive treatment. It was translated by Nashi Khan, PhD, Rukhsana Kausar, PhD & Hira Fatima in 2011.

## Results

Line chart: frequencies and percentage of demographic variables



**Table 1**

Pearson’s Correlation of social stigma, perceived social support and life satisfaction in females with delayed conception (N=105).

Variables	Mean	Std. Deviation	1	2	3
Social Stigma	81.6667	20.68	-	-.415**	-.303**
Life Satisfaction	18.2476	6.146	-.415**	-	.312**
Perceived Social Support	48.3810	13.678	-.303**	.312**	-

\*\* $p < 0.01$ ,  $p < 0.05$ ,  $N = 105$

Table 1 depicts significant findings about social stigma which is negatively correlated with life satisfaction ( $r = -.415^{**}$ ,  $p < .01$ ) as well as life satisfaction which is positively correlated with social stigma ( $r = .312^{**}$ ,  $p < .01$ ) and perceived social support is negatively correlated with social stigma ( $r = -.303^{**}$ ,  $p < .01$ ).



**Table 2**

Multiple linear regression of life satisfaction where social stigma and perceived social support are acting as a predictors (N=105)

Variables	B	SE	t	P	95% CI
Constant	14.13	3.474	4.06	.000	7.242, 21.02
Social Stigma	.104	.027	3.82	.000	.051, .159
Perceived Social Support	-.092	.041	-2.218	.029	-.174, -.010

$p < 0.05, df = 104$

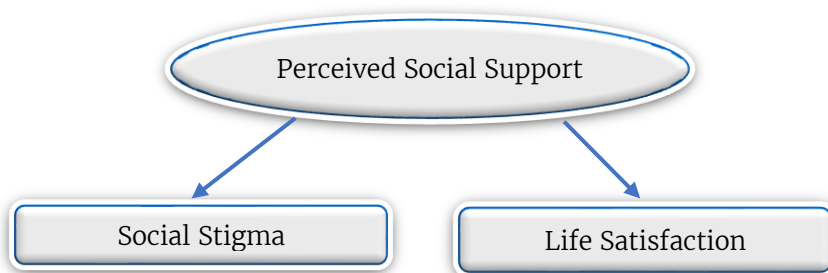
The findings of the multiple linear regression analysis on life satisfaction in females with delayed conception, with social stigma and perceived social support as predictors, indicate that these two factors jointly contribute to the variance in life satisfaction. The regression table shows the extent to which social stigma and perceived social support explain the variability in life satisfaction among women facing delayed conception

### Discussion

In this section, research delved into the relevant studies that support our findings of a negative relationship between social stigma and life satisfaction among a sample of 105 females with delayed conception. Current study uncovered a statistically significant relationship between these constructs using Pearson correlation. Furthermore, we observed that social stigma and perceived social support act as mediators for life satisfaction in females experiencing delayed conception, as predicted in our regression analysis. The initial hypothesis posited that there would be a negative relationship between social stigma and perceived social support. Findings suggest that females with delayed conception who perceive higher levels of social support tend to experience lower levels of social stigma. This aligns with similar results obtained in a study by Schmidt and Peterson, which highlighted the challenges women with delayed conception face in maintaining social relationships. These challenges can induce anxiety and stress, as these women often grapple with discussing their issues with others. Those who face social stigma may be more prone to psychological issues and may tend to isolate themselves, further complicating their lives. (Peterson et al., 2006). Furthermore, current research also revealed a positive relationship between perceived social support and life satisfaction. We assessed this relationship using Pearson correlation, which demonstrated that females who perceive more social support tend to have a higher quality of life. It is apparent that women experiencing delayed conception reported greater life satisfaction when they receive substantial social support from their families, peers, and others. Social Stigma has negative relationship with life satisfaction. Those who face social stigma against delayed conception have low life satisfaction which is associated with depression and acute anxiety. Those whose this expectation is not fulfilling can lead women to experience greater distress and a feeling of complete womanish (McQuillan et al., 2003).

**Figure 1**

Social stigma and perceived social support predicting life satisfaction



In current study, it was observed that females with delayed conception often grapple with feelings of inferiority and low self-esteem, which further emphasizes the significance of social support in fostering their overall mental health and well-being.



## Conclusion

In summary, our study's findings suggest that an increase in social support can lead to greater life satisfaction, while a higher degree of social stigma can negatively impact life satisfaction among females experiencing delayed conception. These insights offer valuable guidance for improving the well-being and support systems for this particular population.

## Implications of Study

The findings from this study will serve as a valuable resource for investigating the intricate relationship among social stigma, social support, and life satisfaction in females experiencing delayed conception. This research is significant as it offers insights into the psychological, physical, and emotional health challenges faced by women dealing with delayed conception. Furthermore, the study's significance extends globally, as social stigma related to delayed conception is a common experience for women worldwide. The societal expectation for women to conceive soon after marriage is universal, and this research provides a platform for understanding the difficulties these women encounter and for developing potential solutions to address the issues associated with delayed conception. The study underscores the importance of health education and raising awareness about social support and life satisfaction for women facing delayed conception. By doing so, it can help prevent the vulnerability and psychological distress that often accompanies this situation. Moreover, psycho-education and medical care aimed at addressing social stigma can contribute to an increased sense of life satisfaction among these women. The implications of this research have the potential to enhance the overall well-being and support systems for females dealing with delayed conception.

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