

The perception of parental and familial structure among sterile woman with psychological origin

النسق الاسري الوالدي المدرك لدى المرأة في وضعية عقم ذو منشأ نفسي

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Received: 22/11/2024 Accepted: 15/01/2025 Published:01/02/2025

Abstract:

The present study aimed at knowing the nature of a woman's perception in sterility situation based on a psychological origin to her familial structure. Consequently, we adapted the clinical pattern based on case study. We applied the manual of semi directive clinical interview and Familial Apperception Test on one case. After categorising the data in a table and analysing them, the results revealed that the non-achievement of the baby project among the case hides behind it a psychological fragility which did not allow her the motherhood maturity as a result to paternal perceptions fragility which were revealed by the FAT through the bad familial functioning reaching (n=78) where it was reflected in the high rate of the perceived conflict with internal and external negative solutions in addition to relations characterised with pressure, unlimitation and miscommunication among parents themselves or children themselves or both.

Keywords: familial structure, psychological sterility.

ملخص:

حاولت الدراسة الحالية معرفة طبيعة إدراك المرأة في وضعية العقم ذو المنشأ النفسي لدينامية نسقها الأسري. وفي سبيل ذلك اعتمدنا على المنهج العيادي القائم على دراسة حالة، حيث طبقنا دليل المقابلة العيادية نصف الموجهة واختبار الإدراك الأسري FAT على حالة واحدة. و بعد تفريغ البيانات وتبويبها في جدول وكذا تحليل نتائج المقابلة، أسفرت النتائج على أن عدم تحقيق

مشروع الطفل عند الحالة والذي يخفي وراءه هشاشة نفسية لم تسمح لها بالنضج الأمومي نتيجة لهشاشة التصورات الوالدية التي كشف عنها في اختبار FAT من خلال سوء التوظيف الأسري الذي بلغ درجته (n=78) حيث انعكس جليا في ارتفاع معدل الصراع الظاهر المبني على حله بطريقة سلبية وتذبذب النهايات ضمنيا وإجرائيا، إضافة الى اتسام العلاقات بالضغط و تفشي الحدود وسوء تواصل الأفراد بينهم سواء في النسق العلوي أو التحتي أو بين العلوي والتحتي.

كلمات مفتاحية: النسق الأسري، العقم ذو المنشأ النفسي.

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1. Introduction

The world in general and Algeria in particular witness in recent days the phenomenon of delayed childbirth among couples even if they are still young. This phenomenon has attracted research makers in many research areas to get closer from its many corners and above them who tried to explain sterility from a scientific view despite reproductive system safety of the couple. However, its destination remained obscure. This pushed clinical psychology to deepen its existence by studying the depth of a woman in situation of sterility based on psychological origin's psychology and that the feminine being is matured through its familial dynamics since its early childhood systemic reference focuses on looking for the nature of resources and relational principles which participated in shaping its primary and secondary reincarnations. The safety of their structure leads to the Oedipal mourning and then the maternal maturity which precedes the physical one and which its landmarks make the fantasy child.

2. The problematic:

The concept of familial dynamics aims at the interactional context which take a place where the upper context meaning the couple which results from deep relations. These last are gathered by lower brotherly context. The sub-contexts interact within a series of rules which define the roles and the relations basis and the nature of communication among the members of the global context which turn around a vertical and horizontal framework going along with every member in his developmental stage to finally make a series of perceptions which are like raw-materials to the human personality in

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general and the woman in particular. Her present psychological profile is only the result of her perceptions in relations exposing her to her father and mother as a child who represent the primary subject of investment. These relations draw the way of the primary and secondary reincarnations which happened within a relational context. On the light of this claim, a researcher named Pichon Rivière (1971) confirms that there is no function out of relations with the other since it allows everyone to influence the other. In addition, it implies on narcissism and the subject investment (Doubert, 2000).

The motherhood function in a woman is only the conclusion the girl interactions with her parents. Her state reflects their good treatment to her and then shaping good static perceptions illustrated in different events. Leaving behind her installations within chains permitting the psychological power to move inside. This fact will allow the woman later to leave parental subject and achieve independence.

On the other side, the deviation from the natural way of the motherhood maturity hides the difficulty in achieving the independence. For this claim, Bowen claims that the transmission of emotional immaturity from parents to children results in an over investment or a parental fusion with the child subject of projection which makes it hard to differentiate from the parent or to separate from the family (Bartlett, 2004).

And to clarify the difficulty of giving up the parental subjects which means differentiation unachievement, Nagy points that the relational disorders inside the family are reflected in the justice balance which registers all the debts and entitlements focusing in that on the concept of loyalty and its division and destructive legitimacy (Ducommun Nagy, 2017).

On this basis, the child project achievement represents the woman's loyalty to the family dynamics which was created through her reactions with her parents. If she leans to balance after mourning, she will introduce her nature unconsciously within a mature psychological account allowing her to continue her developmental process later.

On the light of what has been said, the present study aims at knowing the nature of a woman in sterility situation based on a psychological origin's perception to the dynamics of her parental and familial structure and which

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led to the changing of the motherhood maturity pattern by asking the question:

How does a woman in sterility situation base on a psychological origin perceive her parental and familial structure dynamics?

2.1 The hypothesis of the study:

A woman in a situation of sterility base on a psychological origin perceives her parental and familial structure dynamins as bad.

2.2 Hilighting the concepts :

- **The familial structure :**

Idiomatically: It is a set of communication an interaction patterns inside an identical family and for a long time relatively (Bavelas and Segal, 1982, p32).

Procedurally: It is a set of interactions and reactions which govern the members of the upper parental pattern and the lower brotherly pattern which both belong to the pattern where the woman in a sterility situation based on a psychological origin was raise in before her marriage and which we reveal the nature of their perception through the test of family Apperception test FAT.

- **The sterility based on psychological origins:**

Idiomatically: Faure and Pragier define it as a psychosomatic sterility which is a kind of unconscious rejection in the body (Faure et Pragier, 1997, p16).

Procedurally: It is a three-years married woman who could not achieve the child pregnancy despite the availability of couple intimacy and not taking pills and the safety of her reproductive system.

2.3 The importance of the study:

The present study inspires its importance from the importance of the presented problem in medical settings which is woman sterility. Her feminine features are not enough to achieve pregnancy and labour if she does not reach the motherhood maturity which its dimensions go back to the Oedipal mourning related to shaping positive parental perceptions resulted from enough friendly relations and good parental treatment to the little girl.

2.4 The objectives of the study:

The present study aims at revealing the parental and familial structure

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dynamics where the woman in situation of sterility based on a psychological origin used to live before marriage.

2.5 The pattern of the study:

We will rely in our study on the clinical pattern which is the most adequate to the case study.

Hadli 1958 argues that the case study gathered a lot of information about the individual because they tackle the case past and present and what can be predicted as future projects. And according to Odem, the study pattern is a way in which an individual factor is analysed according to a certain circle whether was in a group or a mere chain in the individual's life or the group as a whole (Hadj Slimane, 2021, p9).

2.6 Study limitations:

This study has been done in one of the obstetrics and gynecology clinics in Algiers in November, 2024.

2.7 study population and its features:

A 26 years' woman, married 3 years ago lives a sterility situation based on psychological origins from Algiers.

2.8 study tools:

The present study adapted the semi guide of clinical interview for which Korchin argues that the interview is a means permitting interaction between the patient and the therapist aiming at helping him overcoming his sufferance and easing the problems solution effectively (Zeghidi, 2014, p53).

This clinical interview is built on five chapters through which we tackled the personal information of the case, her familial structure, her sexual life, the child project and her future view in addition to applying the family apperception test FAT which is a projective test made of 21 white and black planks, each plank shows drawings portraying situations, relations and daily family activities reflecting projections on familial operations. It is applied on adults and children aged from 6 years and on. This test was created to combine individual assessment and familial assessment in clinical appliance in mental health domain to make treatment programs for the sake of making therapeutic programs made by a group of researchers, among them we cite Henry and M. Sotile.

3 The practical side:

3.1 The results of the clinical interview data:

The case (A) married 03years ago, she is 26years old in a family composed of her parents, an older sister and a younger brother. She carries a university level and she works as a doctor's assistant. She belongs to the middle social class before and after her marriage.

After interviewing the case (A) and the provided answers to the semi guide of clinical interview, we concluded with a disbalance of her upper and lower patterns dynamics through the unclarity of limits and much of avoidance which were clearly shown in the fusion, the non- compliance, the bad treatments and the parental bossing in her saying : « **Maa mama kanet aadi ka ay om wa bintaha bissah papa ta rassou mayahdarch bizaf ki tasshaki hadja wla nkol l mama hiya tkolo w yadal habssou el hass matakhabtouch w hna amnini mandiro walo** » this quote means that the case A was normal with her mother like any other one but her father was resigned, he does not talkative and if she needs anything, she tells her mother and the mother tells him, he keeps saying be quite although we are calm at home, and in another quote she said : « **papa w mama koltalek alihoum la hayata limen tonadi, okhti lakbira kabiha chewiya tohibou rohaha ama khouya wallah ma allabalou win rahi sada el mouhim akel kima takoul mama** », the quote means that her father and mother are hopeless and my older sister is rude and arrogant and my brother is indefferent the most important thing is that he is well educated like my mother said. When dealing with the other chapters'questions, we noticed the inability of case (A) to transit to the motherhood maturity stage which was a result to the nature of her parental and familial structure dynamics. The results are shown after applying the FAT.

3.2 the results of applying the family apperception test FAT:

Dimensions	Degree
The clear conflict	13
Familial conflict	11
Marital conflict	02
Another kind of conflicts	05

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Conflict resolution	14
Positive resolution	1
Negative/ Absent resolution	14
Finalities identification	13
Non-adequate/ Participant	11
Non- adequate/ Non- participant	02
Relations quality	13
Mother/ Alien	03
Brother / Alien	
Mother/ Pressing factor	02
Father / Pressing factor	07
Brother /pressing factor	05
Other / Pressing factor	01
	03
Limits regulation	21
Fusion	10
Non- compliance	08
Alliance father/child	01
Open pattern	06
Closed pattern	02
Non- functional circle	03
Bad treatments	05
Emotional treatment	/
Sadness/ depression	05
Anger/ enmity	01
Fear/ anxiety	02
Happiness/ satisfaction	02

Figure1: the table of FAT results of case (A)

3.3 The analysis of the familial apperception test of the case:

To analyse the test qualitatively, there must be an answer to the eight questions provided in the correction guide and the quantitative analysis presented in the table above. This is an important step which allows us to

adapt the case to be studied and analysed or to reject it and it is as follows:

The qualitative analysis :

1- Is the protocol content enough to test the study hypotheses?

The speech of the case is clear when perceiving its protocol, she described a story with a beginning and an end for each plank. In addition, she did not provide abnormal answers and did not refuse to answer to the planks of the test. On this basis, the case protocol can be reliable to test our study hypothesis.

2- Do conflicts emerge in the familial structure of the case?

With reference to the table results, it seems that the case structure resembles to many conflicts whether are familial, marital and even disturb her dynamics even conflicts with grandparents (plank11) and the neighbours (plank 16)

3- In which aspect does the conflict emerge?

The degree of clear conflict was ($n= 13$) split between familial (11) which was illustrated in the planks (1-2-3-4-5-6-7-8-9-17-19-21) and marital between the father and the mother degree($n=2$) which was illustrated in planks (1-18)

4- What is the case family functional pattern characterised of?

The conflicts revealed in the case speech require solutions, but with reference to the table results, implementing solutions in the family case dynamics can be probably negative or absent and this dimension was with the degree ($n=14$) which was illustrated with planks (1-3-4-5-6-7-9-17-19-21) against one positive solution illustrated in plank (2)

5- Is it possible to make hypotheses about the quality of relations inside the case family?

After checking the quality of relations, we conclude that it is pressing more than supportive. All the family members participate in the pressure starting with the mother ($n=7$) then the father ($n=5$) and the brothers among them ($n=1$) against the parents' alliance with the case with a high degree among the mother ($n= 3$) followed by the father ($n=2$).

We felt the father's pressure in the case statements during the clinical interview which turn about his search for calm without considering the sons' psychological needs of the life stage they go through which made the mother

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as a pressure factor to achieve her husband's intention in comfort and calm.

6- What are the hypotheses that can be made about the relational and structural aspect of this family?

The relational qualitative indicators reflect fears and depression (n= 5) mixed with anger and enmity feelings (n=1) resulted from bad treatment (n= 3) which were illustrated in planks (1-3- 9), as the relational structure of the case illustrates that the limits among the inside and the outside are not clear (n= 21) and the fusion was highly clear at the degree (n=10) which reflect the individuals' differentiation and which we felt in the non-compliance degree (n=3) too. The fact which reveals the roles bad distribution in addition to the over opening of the structure on the outside world. This fact will lead the structure not to keep even its basic aspects.

7- Are there any indicators showing the lack of adaptation?

Going back to the case protocol, we find that she declared that the bad treatment reaches the terror in plank (n=9) and beating in both planks (1-3). All that led to negative feelings creation in every story speech like fear, depression and anger In planks (3-4-6-9-14.....) and on these facts, we can say that there are indicators showing the non-adaptation in the case protocol.

8- Are there any subjects participating in shaping important clinical hypotheses in this protocol?

The case protocol reflects the reactions especially the ones of the father then the mother whom all the family dynamics turns around and leads to the disbalance. So, the case remaining without childbearing despite being married for 3years and her young age is an evidence of the non-contribution of the structure elements especially the parents in the motherhood maturity of the case. The fact that the child project is connected with an unconscious power emitted from what she kept from her relation with her family.

Quantitative analysis:

When reading the table's results, we notice that the overall evidence of the bad functioning reached a high degree (n=78) and accordingly the hypothesis claiming that a woman in sterility situation based on a psychological origin perceives the dynamics of her parental and familial

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structure is achieved in the studied case.

The bad familial dynamics are illustrated in the following dimensions:

- The clear conflict that reached the degree (n= 13) which is split among familial (n=11) and marital (n=2). What increased the degree of this dimension is the participation of all the familial structure in producing the pressure inside its dynamics starting with the father (n=7) then the mother (n=5) followed by the brothers among them (n=1). In addition, the invested solutions to solve it were globally negative or absent (n=14) against one positive solution. The fact that made the finalities non effective was the contradictions of the implicit participation with the procedural one and made them disordered (non-adequate/ participant) by (n=11) against implicit and real reluctance in the dimension non-adequate/ non-participant by (n=2)

To apply these solutions inspite of their non-effectiveness, upper and lower structures turn to non-mature procedures showing non-differentiation among individuals. The family seeks help with fusible relations(n=10), non-compliance (n=8) in addition to personal limits violation (n=1) which was illustrated in implying the case with an alliance with the father against another opposite power by (n= 1) despite the familial tendency to protect its principles by closeness on the outside structures by (n=4) but the openness on the outside world with emotional venting as objective by (n=6) was not in the benefit of the relational dynamics of the family. We noticed the participation of outside structures in the case protocol which led to the disappearance of the structure identity.

- The already mentioned factors participated in reproducing the conflicts especially in the absence of positive solutions and the over permeability of the familial envelop (open pattern) against the tendency of the personal envelop to disappear (fusion/ non-compliance) the fact reflected with the degree of the non-functional circle (n= 5).

- We notice the structure tendency to a disorder in the emotional reaction which the case demonstrated and which balance between anxiety, fear, depression and anger. In addition to her declarations in her speech with the presence of physical offenses (beating) in the planks (1-3-9).

Accordingly, we can say that a woman in a situation of sterility based

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on a psychological origin perceives her structure dynamics as badly employed, it is clear in the high rate of the clear conflict, employing negative solutions, finalities disorder, relations disorder, limits disappearance, conflict reproduction, in addition to bad treatments.

3.4 Results explanations:

The family is considered as the first social womb which receives the child after his maternal birth. For the sake of communicating with him in the different developmental stages, it seeks help from a chain of interactions which ensure the obtaining or reactions aim at achieving the needs of the age stage needs which comprise the individualisation, reincarnation, narcissistic appreciation etc.

The nature of the relation child-parents determines his profile once he gets old. The little girl will be a woman with her feminine features, but she can have failures and problems regarding the child project which can lead to failing in achieving it despite her womanhood. The fact that her motherhood inspires its maturity from the Oedipal rests which reflect the nature of the trinity relation (father- mother- child).

The girl's reincarnation of her mother sex, allows her to get attracted to her father who must deal with her with a kind of softness, tenderness and interest. This will make her feeling the importance of her sex as a female and will help her overcoming the Oedipal conflict through having the experience of mourning by creating the imaginary child. Accordingly, the child project reflects the maternal maturity which turns around the nature of parental perceptions which emerge within structural dynamics. This later gathers the upper parental pattern and the lower sons patter. Its achievements through pregnancy and labour means the paying of Oedipal debts and through the real child which ensures the transmission of the grandparents' heritage to the coming generations. According to the study results of Roman (2008), the familial links allow establishing and spreading the narcissistic investment and even the relation with the subject (Roman, 2008).

The researcher Duquette (2015) adds that this link must be full of physical, emotional and economic support which is reflected within a familial dynamics tends to balance or sickness (Duquette, 2015).

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A woman in sterility situation based on a psychological factor's preservation of familial links expresses her loyalty to her family tending to disbalance. This is what her projective production expressed through FAT test which reflected a high bad familial functioning (n=78). It reflected clear conflicts (familial and marital) and other implicit ones we noticed during her speech in the interview guide.

If the familial dynamics does not allow the case to create positive perceptions helping her motherhood to get mature as a result to the disbalance of this dynamics with conflicts and pressures deriving from feeding feminine reincarnations and the maternal maturity which are turned into the strict, dry and opposite relation of the parents with the case, it will not allow the case to build correct perceptions of the parental subjects and this the difficulty in leaving them and their mourning.

What increased the dynamics disbalance is the unclarity of limits and their over overcoming whether at the level of the personal envelop or (which was shown in the fusion and the non- compliance and the bad treatment and the alliance father/child) and the familial envelop (openness) which allowed the individual offenses at the level of the family and the unclarity of its rules as a result of giving the strangers like the grandparents the opportunity of intervention in the familial dynamics progress. The more the marital system was a refuge to external pressures, the more the negative sides among the other half were active and thus the marital borders are sharp then the system is stressful and the more their marital structure borders are influential, the easier the subsystems like children and families in law invade them (Minuchin, 1979, p 83).

The borders according to Baguette and others (2012) are set of rules which specify how and who participates in the subsystem because they make a difference in among these systems in roles and functions and clarify the distinguishing aspects between the family and the outside world which lead to a sense of belonging in the individual (Baguette and All, 2012).

Accordingly, the openness at the outside world did not allow the emotional venting to the case family. Surprisingly, it increased its substructures (parental and sons) feeling of pressure which made the relations pathological

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and did not allow to achieve the woman's psychological needs when she was a little girl concerning the paternal perceptions. These later, make her perceptions negative and do not participate in achieving the pregnancy project.

This claim is supported by Bowen who argues that the parents 'projection of their immaturity on children and their disbalanced familial dynamics lead to over investment or familial fusion with the child subject of projection which make it difficult for the child to differentiate from or to get separated from his family (Bartelett, 2004) and thus unachieving the independence since that the parental treatment has the anti-independence ego tendency which is illustrated in the case through fusion, non-compliance, bad treatment, conflicts and negative solutions.

4. conclusion:

The familial structure straight dynamics is considered as important in building the psychological life of the woman since it participates in her individualisation, her womanhood and motherhood maturity. The more treatment are characterised with emotional exchange, the softness and the sufficient parental presence, the more they participate in building positive parental perceptions which will participate later in achieving the child project in the woman and the more the dynamics goes towards the bad functioning as the fact is with the case study reaching (n=78) degree, the more will lead to the deviation of the motherhood maturity which was disbalanced through a set of pathological interactions reflected by the FAT portrayed in the over clear conflicts and targeting negative solutions to solve them, the fact which participated in the increasing of the non-functioning circle degree. The disappearance of limits which is perceives in the increasing of the fusion and the non-compliance of roles rates. The bad treatments which is characterised by the pressure generated from the whole family members especially the upper pattern in addition to the over permeability of the familial envelop which is illustrated in the increasing of the openness on the outsider world. Accordingly, the failure in the child project is considered as a loyalty to the disbalanced familial dynamics which did not take a part in self-satisfaction of the Oedipal conflict in the woman in situation of sterility based on a

psychological origin.

To avoid the problematic of sterility based on a psychological origin in the woman, there must be a consideration to the good treatment of the girl from her familial environment especially her parents to ensure the normal femininity progress in the pre-genital stage and the motherhood maturity which are reflected in the psychological elaboration of the Oedipal mourning and fantasy child creation.

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