Sigma's 30th International Nursing Research Congress
Roles and Responsibilities of Women in the Society and Their Effects on Midlife
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Purpose:
My doctoral research study aimed to explore Pakistani, urban, Muslim midlife women’s experiences of menopause and to acquire a deeper understanding of menopause and associated management strategies. Knowledge generated through this study, will inform nurses and allied healthcare providers to better care and advocate for Pakistani Muslim women experiencing menopause.

Methods:
Focused ethnography research methodology was used for this study as it guides and informs an understanding of the experiential knowledge of midlife women in a specific cultural context. 20 Pakistani, Muslim midlife women were recruited through purposive and snowball sampling between December 2017 and March 2018. All participants were residents of urban Karachi. In-depth, semi-structured interviews were conducted in order to develop a deeper understanding of women’s perception of menopause, their experiences related to the management of menopausal symptoms, use of biomedical interventions, and self-care practices, and the various socio-cultural, religious, familial and other factors that influence their decision. Mandatory ethical considerations were followed in the study. The data were managed using Quirkos qualitative data management software. I have conducted thematic content analysis.

Results:
My presentation will focus on the roles and responsibilities of women in the society and their effects on midlife, as well as the cultural understanding of menopause in the Pakistani context. Although each woman is unique and so are their experiences, I found similarities and some differences in the way participants perceived and experienced menopause. Throughout the data gathering process, it was clearly noted that women’s beliefs, perceptions and actions were mainly driven by the robust socio-cultural, religious and familial ties that are strongly ingrained in the Pakistani setting. It is a common practice in Karachi, Pakistan that a man in the house is the head of the family, who is the primary bread earner and is responsible for working and earning outside of home; while the woman’s chief responsibility revolves around child bearing and child rearing. She is expected to take care of the house and the family. In Pakistani culture, family ties are greatly valued, which also reflect the teachings of Islam. Taking care of the family i.e. husband, children, in-laws and at times own parents and siblings too, are the primary responsibility of a woman. If she works due to her own decision or household need, that would be her additional responsibility; and she may or may not get any support. However, there are servants and helpers in most middle to upper socio-economic class houses; like: ‘masi’ (cleaner), maid, cook and driver, primarily depending on people’s affordability, need and willingness. In addition, educated working women have high expectations of themselves as well as from society.

It was a huge challenge for midlife women to cope with the challenges that they naturally got with menopause and the challenges of gender discrimination and extraordinary expectations for women set by the society. They had to simultaneously,
control their emotions, keep calm and continue working if they wanted to maintain peace at home, and keep their career to develop. Women argued that it was not easy for them to keep up with everything that was going on in their midlife. There were instances where women shared that they were careless about themselves, and least bothered with what was happening in their lives and around them. They experienced feelings of blame, guilt and repentance considering whatever happening was possibly because of their own faults and sins. In addition to having high expectations for self as well as from their family, coworkers, and superiors at workplace, women expressed mixed feelings about their work outside of home. They sometimes thought that it helped them to cope with the trepidations of menopause, while at other times they believed that their busyness at workplace masks their feelings and emotions related to menopause. Moreover, women expressed their frustration with the menopause symptoms that directly affected their personality and work. Women talked about least support and societal biasness during the transition phase of menopause. They claimed that people were least concerned with what was happening with them; they rather made fun of them when they were acting unusually. Women also felt that their society was prejudiced towards them, especially when they were not younger looking and beautiful. Some women felt that work keeps them active and engaged, and gives them courage, self-confidence and the ability to face their menopause challenges. It also provides a means of socialization; they sometimes found support from their colleagues they could share their problems with and shared ideas to help resolve or deal with menopause in a better way and to maintain a balanced life. Women also shared experiences regarding their age at menopause and its challenges; and how they think their age at menarche may be related to their age at menopause. They talked about the common practice of females hiding their age in Pakistani culture, and the reasons for that in their opinion. They hide their age to portray themselves as younger, since menopause in the culture is highly associated with old age/ageing. With that, the woman is thought to be physically weak and inactive, mentally instable and compromised, unable to reproduce and overall less productive for the society. They shared their views, understandings, satisfaction and disappointments of menopause in relation to age. Most of the study participants shared that they experienced menopause earlier in their lives i.e. in their forties. Participants expressed great annoyance and frustration while sharing their personal experience with menopause at an early age. It was sometimes hard for them to accept their menopause at such a young age. In addition, it was challenging for them to convince their husband and family that they were experiencing menopause. For some women, it was too disturbing to manage their responsibilities with the menstrual cycles; they didn't have the physical and mental energy and motivation to carry out their activities of daily living, which they felt they had after menopause. Additionally, women shared their thoughts, beliefs and experiences of menopause and how it was in some way related to their financial status. Besides time and other fundamental priorities in life, they believed that women generally did not seek help for menopause related issues mainly due to financial reasons. This includes consulting a healthcare provider locally. Some of the participants mentioned that the problems related to the diagnosis and treatment of menopause symptoms may be because menopause is generally not considered significant, and women rarely talk about it, or
reach out for healthcare advise; hence, certain treatments and proper diagnostics are not available within the country even at the top-notch hospitals and healthcare facilities. If women care and need help, they have to travel abroad to address their menopause related issues, which is has a high cost implication. Pakistan is a developing country with an overall low literacy, meagre socioeconomic stability, and a patriarchy system. Not many women can afford to travel abroad for caring for their menopausal symptoms. Participants said that most people in Pakistan are ill-informed and not economically sound, not only to pursue healthcare for their menopause but to simply take care of themselves through proper nutrition and other basic interventions during this important phase of their life. They informed that most women in Pakistan are poorly fed due to financial instability, and due to reasons including women’s oppression, high birth rate, illiteracy and lack of health awareness. However, despite spending a considerable amount of resources including time and money for their menopause related issues, some women were dissatisfied with the inappropriate services. As a result, they and their family either keep suffering or if they can afford, they would travel abroad for their menopause concerns.

**Conclusion:**
My presentation will focus on the roles and responsibilities of women in the society and their effects on midlife, as well as the cultural understanding of menopause in the Pakistani context. Although each woman is unique and so are their experiences, I found similarities and some differences in the way participants perceived and experienced menopause. Throughout the data gathering process, it was clearly noted that women’s beliefs, perceptions and actions were mainly driven by the robust socio-cultural, religious and familial ties that are strongly ingrained in the Pakistani setting. It was a huge challenge for midlife women to cope with the challenges that they naturally got with menopause and the challenges of gender discrimination and extraordinary expectations for women set by the society. Women shared experiences regarding their age at menopause and its challenges; and how they think their age at menarche may be related to their age at menopause. They shared their views, understandings, satisfaction and disappointments of menopause in relation to age. Women talked about the common practice of females hiding their age in Pakistani culture, and the reasons for that in their opinion. Besides time and other fundamental priorities in life, women believed that they generally did not seek help for menopause related issues mainly due to financial reasons.

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**Title:**
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**Keywords:**
Focused ethnography/Pakistan, Menopause experience and Midlife/middle-age women

**References:**
My doctoral research aimed to explore Pakistani, urban, Muslim midlife women’s experiences of menopause and to acquire a deeper understanding of menopause and associated management strategies. Focused ethnography methodology was used as it guides and informs an understanding of the experiential knowledge of midlife women in a specific cultural context.

Content Outline:
Midlife women often experience a number of physiological changes. These are mainly related to the pre-, peri- and post-menopausal symptoms that have an impact on their physical and psychological well-being, as well as general quality of life. Midlife women from diverse cultures differ in behaviors, values and beliefs related to their life experiences, as well as ways to manage menopausal symptoms. Along with accessing modern healthcare services, Pakistani urban women commonly use natural ingredients such as honey, garlic, and ginger, and practice mind and body therapies such as yoga, aerobics and meditation to manage their menopausal symptoms. A combination of modern medicine and self-care practices tend to be used to promote health and prevent disease. There is limited research in the Pakistani context (Anwar, Green, Norris & Bukhari, 2015) of midlife women and the menopause symptoms and strategies used to manage menopause (Baig & Karim, 2006; Nisar & Sohoo, 2010).

My doctoral research study aimed to explore Pakistani, urban, Muslim midlife women’s experiences of menopause and to acquire a deeper understanding of menopause and associated management strategies. Focused ethnography research methodology was used for this study as it guides and informs an understanding of the experiential knowledge of midlife women in a specific cultural context. My presentation will focus on the roles and responsibilities of women in the society and their effects on midlife, as well as the cultural understanding of menopause in the Pakistani context.

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