

Educated Working Women's Menopause Experience in an Islamic State

Dr. Aynah S. Mevawala & Dr. Solina Richter
Faculty of Nursing, University of Alberta

Introduction

- In midlife, women experience some physiological changes
 - mainly pre-, peri- and post-menopausal symptoms.
- Cultural influence:
 - behaviors,
 - values and beliefs related to menopause.
- Pakistani women often use:
 - natural ingredients,
 - practice mind and body therapies, and
 - modern medicineto promote health and manage their menopausal symptoms.
- There is limited research in the Pakistani context (Anwar, Green, Norris, & Bukhari, 2015; Baig & Karim, 2006; Nisar & Sohoo, 2010).

Purpose

To explore Pakistani, urban, Muslim midlife women's experiences of menopause.

This presentation focuses on the educated working women's menopause experience in an Islamic state, and the cultural understanding of menopause in the Pakistani context.

Methods

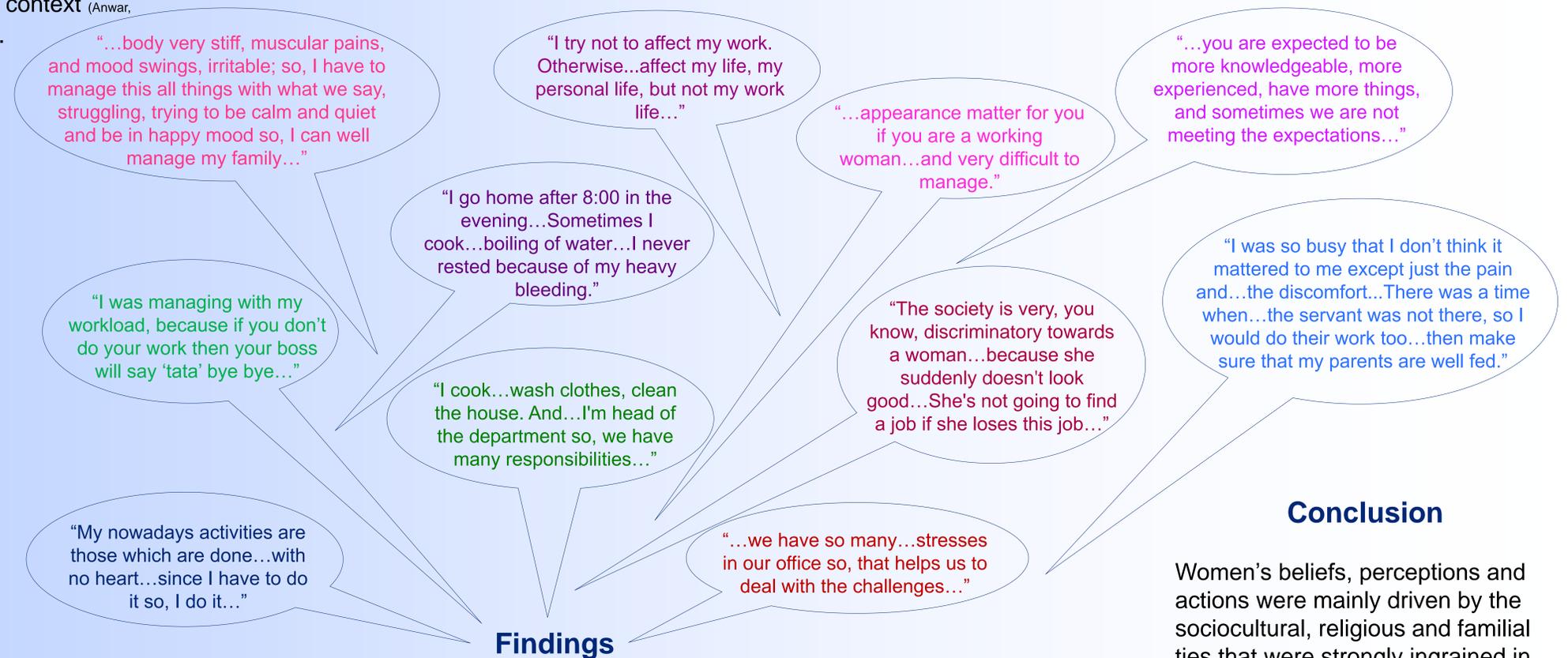
- Methodology: Focused ethnography
- Participants: 20 Pakistani, Muslim midlife women
- Sampling: purposive and snowball
- All participants were residents of urban Karachi
- Data collection: demographic information, in-depth semi-structured interviews, field notes
- Ethical considerations followed
- Data management: Quirkos qualitative data management software
- Data analysis: Thematic content analysis

Significance

Knowledge generated through this study, will inform nurses and allied healthcare providers to better care and advocate for Pakistani Muslim women experiencing menopause



- Women had to control their emotions, keep calm and continue working.
- Women experienced feelings of blame, guilt and repentance.
- Women expressed their frustration with menopausal symptoms that directly affected their personality and work.
- Women said that people were least concerned with their experiences.
- Women felt that their society was prejudiced towards them, especially when they were not younger looking and beautiful anymore.
- Women expressed both positive and negative feelings about their work outside of home..



Conclusion

Women's beliefs, perceptions and actions were mainly driven by the sociocultural, religious and familial ties that were strongly ingrained in the Pakistani setting.

References

- Anwar, M., Green, J. A., Norris, P., & Bukhari, N. I. (2015). Self-medication, home remedies, and spiritual healing: Common responses to everyday symptoms in Pakistan. *Health Psychology and Behavioral Medicine*, 3(1), 281-295. <http://dx.doi.org/10.1080/21642850.2015.1088387>
- Baig, L. A., & Karim, S. A. (2006). Age at menopause, and knowledge of and attitudes to menopause, of women in Karachi, Pakistan. *The Journal of the British Menopause Society*, 12(2), 71-74.
- Nisar, N., & Sohoo, N. A. (2010). Severity of Menopausal symptoms and the quality of life at different status of Menopause: A community based survey from rural Sindh, Pakistan. *International Journal of Collaborative Research on Internal Medicine & Public Health*, 2(5), 118-130.

- Men are the head of the family, primary bread winner and responsible for working outside of home.
- Women mainly responsible for child bearing and rearing, and taking care of the family.
- If women worked outside of home it was an additional responsibility; and they may or may not get support from the family.
- Most middle and high income families have servants and helpers in their homes.
- Educated working women had high self- and societal expectations.
- It was challenging for midlife women to cope with menopause.
- Gender discrimination and expectations exists in the Pakistani society.