

Menopausal women need better health care and community support in rural areas

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Good social support and reliable information are essential for women who find menopause an intense and life-altering experience, especially if they live in rural areas where health services are patchy or inaccessible. That's the key finding from research published in the latest issue of the *Journal of Advanced Nursing*.

Researchers from a major health provider in Nova Scotia, a predominantly rural Canadian province where a large proportion of the population live in remote areas, found that menopausal women often had to look outside formal healthcare systems for information and support.

The researchers are suggesting that specially trained nurses and female community leaders could play a key role in building up local support networks and providing good quality information on menopause.

“Women living in rural areas described a need to fully understand the often surprising intensity of menopause-related symptoms, including changes to their physical and mental well-being” says Sheri L Price, a nurse researcher who specialises in women's health at the IWK Health Centre in Halifax.

“The women we interviewed described struggling to sift through excessive and conflicting medical information from a number of Internet and media sources and said they needed to receive accurate information from sources they trusted.

“They said that menopause had a significant impact on their personal relationships and that the main way they coped with these changes was by having good peer support and a sense of humour.”

Price, who led the research, points out that living in a rural environment can add extra pressures to coping with menopause. “These can include geographical isolation, lack of confidentiality and anonymity, stress from multiple roles (including caring for ageing relatives), poverty and limited health care and support services” she says.

When the researchers interviewed the 25 women, ranging from 43 years-old to their late 60s, they found that their findings fell into four main themes:

-- Intensity of the experience. Women were often surprised by the intensity of the psychological, physical and social consequences of menopause. Memory loss caused considerable concern and many women were scared that it was due to the early onset of Alzheimer’s. Participants suddenly became aware of their age and mortality and they were surprised at how intense symptoms like hot flashes/flushes, loss of sex drive and mood swings could be.

-- Seeking understanding. Many women had problems accessing local health services, as rural areas often have difficulties recruiting and retaining staff, and women found it hard to build up trusting relationships with their health providers. The women often looked elsewhere for details on menopause, but found that the Internet, books, magazines and television programmes gave them an overwhelming amount of conflicting information.

-- Accepting the unacceptable. Women who took part in the survey drew heavily on shared experiences and humour and saw menopause as a bonding experience with other women. Humour was viewed as part of a

new-found freedom stemming from communication and openness about menopause and its related symptoms. The women expressed concern that previous generations had not had that freedom of expression and they were keen to make things easier for future generations.

-- Supportive social networks. Women spoke of a strong need for a female perspective and lamented the lack of female rural doctors. They wanted better medical expertise on menopause and formalised healthcare support. But because they couldn't access that, they sought validation from other women that their experiences were normal and that they were not alone in their confusion and distress.

“Scarce healthcare resources are a problem in rural areas and many of the women we spoke to struggled to get the medical information and support they needed, especially if they preferred to talk to a female doctor.

“One solution may be for advanced practice nurses or nurse practitioners - who have received additional training in women's health - to offer holistic care and comprehensive support to rural women going through the menopause” says Sheri Price. “This would enhance the women's well-being as they go through menopause and enable them to optimise their health as they age.

“Another option may be to train female community leaders to deliver local information sessions and help to set up support groups. Community leaders with personal menopausal experiences would also be able to offer further validation and support to women.”

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