



## Menopausal women's experiences of husband's support: A negative view<sup>☆</sup>



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### KEYWORDS

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### Abstract

**Objective:** This study explores how menopausal women perceived supports provided by their husbands.

**Methodology:** Total of 13 menopausal women recruited using a combination of purposive and snowball techniques from two sources, tertiary hospital and local communities in the state of Kelantan, Malaysia. The in-depth semi-structured interview guided was used to explore how they perceived supports provided by their husbands. The data were then analysed using a thematic analysis.

**Results:** Five (5) themes have emerged which comprises of emotional, instrumental, appraisal, guidance, and sexual supports. One of which was a new theme (sexual intimacy support) that had not been existed previously in other literature reviews.

**Conclusion:** Majority of menopausal women perceived the supports provided by their husband were negative, rather than positive supports that they had hoped. These findings suggest that an education program tool for husbands as a support person is much needed to ensure women walk through the menopause phase in a more meaningful life.

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## Introduction

Menopause, also known as the change of life, is the time when menstruation permanently ceases due to the natural depletion of hormone production by the ovaries. Along with these hormonal changes, women might also experience a midlife crisis that involves personal and social changes.<sup>1</sup> Although the journey through the menopausal phases is a normal life transition, recent systematic studies on the menopause experience have discovered that biological changes that occur simultaneously with the midlife crisis may have a negative impact on women's quality of life.<sup>2,3</sup>

Nevertheless, these impacts during menopausal phase revolved not only around the women themselves but also by their husbands. Research findings suggested that husband's supports may ease the problem during their menopausal phase<sup>4</sup> and may also help healthcare providers to develop health interventions for these menopausal women.<sup>5</sup> However, several studies have also discovered that the majority of husbands in many countries exhibit a negative reaction toward their menopausal wives.<sup>4-7</sup> Previous research also claiming that existing studies of the husband's role were more concerned with women's reproductive phases and other diseases compared with menopausal phases.<sup>7,8</sup>

Unfortunately, husbands' support to menopausal women in Asian countries, particularly in Malaysia is still not well studied. Therefore, this study explores the experiences of menopausal women within the Malaysian culture.

## Method

### Research design

The qualitative method was used to explore the experiences of husband support among menopausal women. The in-depth semi-structured interview method was the most appropriate method for discussing the sensitive issues revolving the menopause that would normally be considered private or stressful event.<sup>9,10</sup>

### Research setting and participants

The participants were recruited from two sources; a tertiary government hospital and local communities in the state of Kelantan, Malaysia. Participants were restricted to perimenopausal and postmenopausal women as defined by World Health Organization (1996)<sup>11</sup> women who were not undergoing Hormonal Replacement Therapy (HRT), and women who were living with their spouse. Of the 18 menopausal women initially approached as participants, only 13 fulfilled the inclusion criteria for the current study. The repeated information used to generate the themes and subthemes were obtained from the interviews with nine participants. However, the researcher continued to the point of saturation by adding another four participants to confirm data saturation with maximum variances. Thus, 13 participants were included in this qualitative study.

## Data collection method

Participants were invited for interview sessions at the time, date and location that suited their convenience and preference. The semi-structured in-depth interview guidelines (IDG) was developed based on the research questions that addressed the types of support provided by the spouse, and the support needed by the menopausal women. To evaluate and enhance the rigour of the interview sessions, three pilot interviews were conducted to refine the IDG. Each interview session was conducted only once for each participant, and each session lasted between approximately 45 and 90 min. The data from the interviews were audio-recorded and transcribed verbatim. Three of the participants were randomly selected to verify that the information in the transcripts was compatible with their interpretation during the interviews. Finally, the verbatim transcripts were thematically analysed using computer-aided qualitative data analysis software (CAQDAS), namely, ATLAS.ti software version 11 (Scientific Software Development, GmbH, Berlin).

## Results

### Demographic characteristics of participants

Thirteen menopausal women between the ages of 49 and 60 years participated voluntarily in this study. Majority of these Muslim couples had been married more than 30 years and had secondary education.

### Menopausal women's experiences

Five themes were identified to explain the women's experience of support from their husband during menopausal phase which comprises of emotional, instrumental, appraisal, guidance, and sexual supports. The following present the details of some of the themes and quotations.

#### Theme 1: Emotional support

The findings indicated that this type of support related to indirect support to show care. However, there were women who did not like to express their problems to their respective spouses because they were used to not getting any responses from their respective spouses. One of the women commented:

*"I told him [husband] that I often felt tired nowadays, but he just kept quiet. He listened but he kept quiet, and it has always been like that."* (ID 03)

#### Theme 2: Instrumental support

Instrumental support relates to behaviours that provide direct assistance such as helping with housework, providing company and managing personal needs. Some of the spouses assisted the women in managing the household such as doing the laundry, folding the clothes and preparing meals without being asked. However, there were also cases when

the spouse never helped at all, even when requested. For example, a woman mentioned:

*If he stayed at home, there was a lot of work that he could have helped me with. But he left me to do all these house chores, clean the yard and plant trees. I already asked him to do them, to clear the drains, but even today, it has not been taken care of. He rarely is around because he likes to be at the coffee shop and have a long chat with his friends. (ID 08)*

### Theme 3: Esteem support

This type of support relates to validation and showing confidence in the women's abilities such as helping to ease discomfort, giving compliments, showing agreement, being consoling and expressing love. As expected, none of the spouses verbally expressed their love for these women. One of them expressed:

*"He does not say that he loves me. But I know that he loves me through his own ways, such as by gently caressing me when we are in [the privacy of] our room and speaking to me gently and affectionately." (ID 12)*

### Theme 4: Guidance support

The findings of the current study identified that this type of support related to providing knowledge and advice to show care. Only a small number of women said that their spouses gave them advice when they were facing problems. Meanwhile, nearly half of the women said that their partners did not give them any kind of advice, but rather chose to stay quiet. For example, a woman mentioned:

*"He was not giving any advice but rather he was just bragging about how he had managed to avoid facing similar issues that I was facing. He said to me that I had gained weight because I did not watch my diet... that I was drinking my drinks during my meals. [He told me that] I should drink my drinks 2 to 3 minutes after a meal. [He also told me that] I should not drink cold drinks with ice... so that [my] body would stay in shape and would not age quickly. [He also said that] Women [usually] age faster than men." (ID 13)*

### Theme 5: Sexual intimacy support

This was the first issue women raised that was the effect that the menopause had on their sexual relationship. As a result, the following subthemes emerged: discusses sexual issues, show intimacy openly, shows affection, satisfactory sex and respectful of my feelings. Most of the spouses could not compromise on issues involving sexual intercourse. Only a few women stated that their partners did not discuss their sexual relationship issues at all, which then led to misunderstandings. One of them expressed:

*"I felt some kind of burning pain when we were engaging in intimate [sexual] acts but I did not tell him about it. So, [for us women] if we feel pain... we would lose interest [in sex]. So, if I did not respond to his sexual*

*advances... [and] gave excuses that I was tired... or that I was having hot flushes, he would not say anything but appeared to sulk and turned his back toward me in bed." (ID 03)*

Towards the end of the interview, however, all menopausal women agreed affirmatively when asked whether they thought that their spouse should help them cope with the menopause phase. Nonetheless, all of these menopausal women hoped that their spouses would eventually express their love verbally to them.

## Discussion

This research was undertaken with menopausal women in order to explore their experience of husband's support during this phase. Four of the themes were found parallel with the findings from literature reviews while the fifth theme is a new theme emerge (sexual intimacy support) from this study. Notably, when asked about their experiences of the perceived support from their spouses, the sexual intimacy support theme was the first issue expressed by the menopausal women in this study. This result was comparable with the previous study among menopausal women in Kelantan, nearly two-thirds of menopausal women experienced reduced sexual desire following the menopause.<sup>9</sup> Napes (2013), who conducted a study among menopausal women in Malaysia, also noted that low sexual desire was a major complaint among these women.<sup>10</sup> Interestingly, this new emerged domain had not been included in any of the existing support model, measurements or any of the intimate studies reviewed.<sup>12,13</sup>

The findings also revealed that quite a number of menopausal women perceived the support provided were negative rather than positive types of support that they had hoped. Many previous studies have stated that a lack of knowledge among husbands is the major factor that determines their negative reactions towards their menopausal wives.<sup>6,7,14-16</sup> As described in a recent qualitative study conducted with men in Brazil revealed that the men believed that menopausal symptoms are a myth or excuses told by their wives.<sup>6</sup> This poor knowledge consequently leads to an underestimation or misunderstanding of the developing symptoms among their menopausal partners<sup>4</sup> and these men often feel powerless to offer support.<sup>7</sup> Similarly, a recent preliminary study among Malaysians found that male spouses reported that their lack of knowledge was the main barrier to providing menopausal support to their partners.<sup>16</sup> Besides, a recent review on men's perceptions revealed that negative reactions towards the menopause are mediated mainly by the sociocultural factors of a country.<sup>6</sup> In many Western communities, menopause is related to social stigmatisation and labelled as a taboo that cannot be discussed openly,<sup>17</sup> a private thing that is associated with sexual aspects<sup>18,19</sup> or an awkwardness that is inappropriate for public discussion.<sup>7,17,20</sup>

## Conclusion

The negative support that the menopausal women perceived from their husbands highlight the need to develop

an educational intervention as early as possible during the menopausal phases. As numerous studies have recommended, educational interventions that suited to cultural aspects of the population are needed to increase menopausal health awareness among husbands and overcoming social stigma in society.

### Conflict of interest

The authors declare no conflict of interest.

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