



Meanings of Being There as a Menopausal Woman: A qualitative Heideggerian Hermeneutic Phenomenology Approach

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Abstract

Objectives: Menopause experience is not only a biological experience and is affected by women's culture. Failure to identify the cultural needs of menopausal women can result in lower quality of care and patient dissatisfaction. The purpose of this study was to explore the meanings of menopause through women's lived experiences to identify how the meanings of menopause were infused by women's socio-cultural context.

Methods: Qualitative phenomenology research applying the Heidegger Hermeneutic approach was used. Data was collected from one focus group including 9 individuals and 9 individual in-depth interviews. Thematic analysis was performed, and the themes related to the meanings of menopause were identified.

Results: Two main themes were loss and stage. Subthemes for loss included femininity loss, loss of youth or aging, loss of health or disease, and loss of efficacy and competency. Subthemes related to the stage included the natural biophysiological stage and developmental womanhood stage. Menopause meanings were relative depending on losses and gains.

Conclusions: Menopausal women revealed how social norms could positively or negatively infuse meanings to their existence. The language used for menopause revealed the underlying cultural meanings. When negative sociocultural messages about menopause were deposited to menopausal women's beliefs, it was more likely that menopausal women link menopause to aging and a sense of loss. This study highlighted the importance of culturally competent care.

Keywords: Qualitative, Menopause, Lived experience, Heidegger, Hermeneutic Phenomenology

Introduction

Menopause is a global phenomenon that can affect women's quality of life through various symptom experiences. The number of postmenopausal women will be about 1.1 billion in 2025 worldwide (1). It is estimated that around 6000 American women reach menopause daily or more than 2 million annually (2). Menopause is defined as the final menstrual period that occurs due to the loss of ovarian follicular function. Natural menopause can occur between the ages of 40 and 58 years and is determined by amenorrhea which lasts for 12 months. Duration of menopausal symptoms can vary between 1 to 12 years (3). Although physiological hormonal changes are the responsible mechanism for symptom production, the menopause experience is not homogenous among women. Menopause experience has been linked to psychological, and sociocultural factors (4).

Culture affects women's menopause experiences in different ways (5). For example, talking about menopause in public was considered taboo among some Asian and African cultures (6,7), Similarly, menopause meant being

silent for Hispanic women in the US because menopause was culturally considered a private female issue (8). In Islamic traditions, women are avoided to participate in religious rituals during their menstruation (9). Therefore, among Muslim women, menopause is a time for increased religious activities (10,11), and a state of cleanliness (9). Culture intertwines with how subjects experience symptoms and the way they declare symptoms. Mayan women reported no hot flash symptom experiences because there is no word for hot flashes in their culture (4,12). For some Swedish women menopause was feeling of freedom due to relief from monthly menstruations, painful periods, mood changes, and concerns about pregnancy (13). Analysis of the Study of Women's Health Across the Nation (SWAN) dataset that included approximately 15 000 women from different ethnic backgrounds revealed that, in general, Asian women (including Chinese and Japanese women) experienced fewer symptoms whereas white women experienced more psychosomatic symptoms and African American women experienced more vasomotor symptoms (14). The divergence between menopause

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Key Messages

- ▶ Meanings of menopause are affected by individuals' perceived losses and gains.
- ▶ Menopausal women are inseparable from their sociocultural context. Therefore, culture can significantly contribute to positive or negative assigned meanings of menopause.
- ▶ Educating menopausal women and their sexual partners and highlighting positive aspects of menopause can lead to a more positive menopause experience.
- ▶ Improving menopausal women's quality of life requires culturally acceptable interventions.

symptom experiences in women from various countries can be related to the culturally shaped expectations of menopause, language used for menopause, religion, and culturally defined gender roles (4). Culturally competent care is highly emphasized in multicultural societies such as the United States (15). For instance, Muslim Americans revealed more attachment to their Islamic identity with low levels of adaptation to American social norms (16). Cultural competence empowers nurses to empathize, communicate better, and respond more deeply to patients' needs while avoiding being judgmental or disregarding patients' beliefs and religious backgrounds (15). This study aimed to explore the meanings of menopause as it is experienced by each individual and understand how those experiences may be infused by the socio-cultural context.

Methods

A qualitative, hermeneutic phenomenological approach, as described by Heidegger (1962), was used to understand the meanings of menopause as it is experienced by menopausal women. Heidegger phenomenology deals with the interpretation of experience with ontological focus elucidating "the meaning of being", what being means. The person exists as being in and of the world, and subject and objects are inseparable (17). A Heideggerian hermeneutic phenomenological approach was chosen because Heidegger views being, and the world as indissolubly integrated to cultural, social and historical contexts (18). Acknowledging gender, culture, history, and related life experiences, people experience shared practices and common meanings. Dasein in Heidegger terminology refers to a human being, being there, or man's existence. Being with refers to a Dasein's relationship with others in their common world of existence. Being in the world denotes inseparability from the world (one entity). Worldhood of the world relates to the interconnectivity of the subject and their common world. Existence is being inauthentic or "fallen" which is accepting without questioning the collective norms and values of the they (das Man, other Daseins and nature). Authentic existence is Dasein's authentic self "selfhood" or "self-understanding". According to Heidegger time was "the horizon for all understanding of being" (19). Thus it is required to

consider time to understand being (19). Dasein is the term referring to human being, being there, or man's existence in their everydayness or ordinary existence (17). Language is the house of being as it displays and veils the multiplicity of interpretations (17,20). It is impossible to bracket our assumptions of the world, but rather through authentic reflection, we become aware of many of our assumptions. The state of "thrownness" deals with the Dasein's present existence that they (which is a reference to other Daseins) are existing in a world that they were born into, which includes existing norms, values, and culture (17). Care structure refers to what is of greatest consequence or concern to the human being in three temporal primordial notions representing the future (being ahead of itself), past (already being in the world), and present (being alongside) aspects of Dasein's existence (17). According to Heidegger, time is us. Heidegger concluded that the nature of being is only possible to understand through means of 'Temporality' – that is, all Being is predicated on Time, or, all beings have an end time limit, which is death. Therefore, being depends on Time, and that Time defines every aspect of our Being. There are three major existing states; 'projection', 'thrownness', and 'fallenness' for Dasein. Projection refers to the understanding of the person's existence and their future potentiality. 'Thrownness' as the person is constantly thrown into the world which results in a person's state of mind of 'facticity' and understanding the fact of limitedness. 'Fallenness' depicts how a person is surrounded by things that are either Dasein or not Dasein which leads to understanding of falling in time and authenticity towards others ('the They'). These three aspects increase the level of 'anxiety' regarding our existence, as the person understands that she is a being advancing to Death. This realization causes both a sense of guilt, as well as our consciousness of the need to find a solution. This solution is to have 'anticipatory resoluteness' towards our impending death. Dasein is always already in a mood. Mood comes from always being in the world. To better visualize Heidegger's applied terminology a model was designed (Figure 1). The red circle presents Being in and of the world. Red color shows persons inseparability from the world and that there is no object and subject as they are considered one entity. Faces depicts Dasein's being in the world of existence in relationship with others. Three similar faces present Dasein's existence while being in three aspects of future, past and present.

Validity and Reliability/Rigour

The expressions of rigor proposed by De Witt and Ploeg was the applied framework for this research. The framework included five expressions: balanced integration, openness, concreteness, resonance, and actualization (21). Balanced integration was met by the way findings were fitted in the philosophical concepts. Openness was met by remaining orientated about menopause and choosing the philosophy, design, and a method that allowed exploration

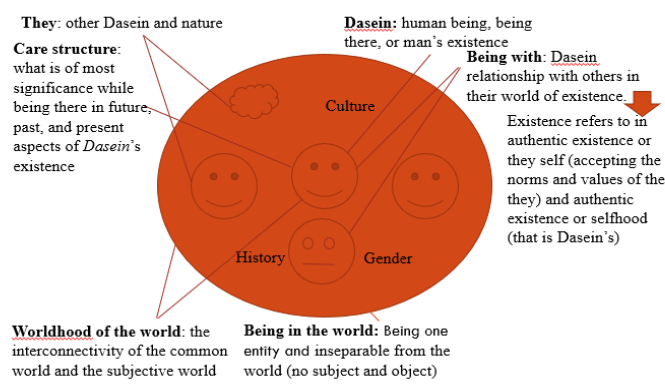


Figure 1. Being in Heidegger's Terminology.

of menopause (the phenomenon of the study). For example, the data collection method changed from focus group discussion to individual in-depth interviews due to menopausal women's privacy concerns. Concreteness was met by informing participants about the emergent themes and whether the identified themes represented what they meant. Resonance was addressed by asking two phenomenological research experts to review the study findings and determine if the findings represented the lived experience of menopause and what menopause meant for participants. Actualization acknowledges that the phenomenological interpretation of the lived experience such as menopause continues when a study is finished.

Reflexivity

The concept of 'insider' describes the position of the researcher as having some insight linked to the research topic, while 'outsider' refers no previous knowledge or experience regarding the research topic (22,23). Therefore, (as the first author of this article) in early stages, being a woman, living in the same society and culture, and working with menopausal women professionally, I had an insider role because I had some insight about menopause professionally and culturally. However, my knowledge in understanding their personal existence as a menopausal woman and the lived experience of menopause was limited and positioned me as an 'outsider' (22,24).

Participants

The study was conducted at Iran University of Medical Sciences in Tehran enrolling menopausal women older than 40 years and had experienced natural menopause. Women who had surgical menopause or premature menopause were excluded from the study. Participants were selected through purposeful convenience (flyer announcement) and snowball sampling methods (through key informants) from February to July 2013. Participants were chosen from Iranian University of Medical Sciences faculty, staff, and other services and were from diverse socioeconomic and educational backgrounds.

Data Collection

Data was collected from a total of 15 individuals: 9 participants in a focus group and 9 individual in-depth semi-structured interviews in Persian language. Three out of 9 women participated in the focus group participated in individual interviews. Privacy concerns were the main reason for shifting the data collection method from focus group to individual in-depth interviews. All interviews were audiotaped and transcribed verbatim. Data collection was stopped because of data saturation. To ensure accuracy all the written transcripts were compared with the audiotapes by the researcher. The interviewer also kept notes that included the nonverbal cues of the interviewees, including body language, and tone of voice. Interviews took place in a private room at the university where only the interviewer and the interviewee were present. The length of the focus group was approximately 2 hours and the average length of each interview was about 1 hour and 30 minutes. Focus group discussion was shifted to individual in-depth interview due to participants' confidentiality concerns. Individual in-depth interviews provided an environment that maintained their privacy to freely talk about their menopausal experiences. The interview guiding questions were aimed at capturing menopause lived experiences and the meanings of menopause. The interview was started by asking the main question, "What does menopause mean to you?" Further questions were asked depending on the participant's responses such as what has made this meaning? What is the reason for this meaning? Does this relate to menopause or something else? If you want to tell other people what menopause is how would you explain it? Please explain what happens at menopause.

Data Analysis

Data analysis was performed concurrently using the following six steps of thematic analysis created by Braun and Clarke (25). 1) Familiarization with data was accomplished via reading the transcribed data and listening to the recordings several times. Notes were taken regarding associations, similarities, and ideas. 2) Initial codes were generated in the second step. Numerous

preliminary codes that were meaningful, interesting, and relevant to the research question were identified. 3) In the third step, themes were searched using interpretive analysis of the original codes. Codes were examined and gathered to identify possible themes. The links between codes, subthemes, and themes were developed using tables, and mind-maps to support this process. 4) Themes were reviewed in order to find out whether there was a need to “combine, refine, separate, or discard” initial themes (25). Two phases were followed for reviewing the themes. Phase one involved checking themes for their relation to the coded extracts. Phase two dealt with checking themes for their relation to the overall context. A thematic ‘map’ was developed for this step. 5) Refining, defining and naming themes was performed through an ongoing reflection to characterize the identified themes. Themes were given names with clear definitions which could capture the essence of each theme. 6) A report was produced relaying the results of the data analysis (themes) to answer the research question.

Results

The mean age of participants was 45 years (age range: 40-57 years). Most of the participants were married (n= 13) and had children. One was divorced, and one had no child (married). All participants were Muslim. Participants’ lowest educational degree was high school diploma, and the highest educational degree was a Ph.D. Results of the data thematic data analysis provided two main themes addressing the meanings of menopause as loss and stage.

Loss

Menopause meant loss for many of the participants. Subthemes related to the meaning of menopause as loss encompassed loss of femininity capabilities, youth (aging), and health (disease). These meanings were interconnected.

Loss of Femininity Capabilities

Being there as menopausal woman was perceived as altering existence by changing femininity capabilities. *Being there* meant moving from being fertile to infertile and from being sexually active to sexually dysfunctional for some women. The value of these capabilities originated from being with others in the world of existence and through the culture that defined gender role expectations. In some women, losing femininity capabilities had another meaning of moving from being a useful member by fulfilling gender roles to a useless woman. Emptiness was a meaning and a consequence of being there as a menopausal woman (due to loss of femininity capabilities).

One woman said that “80 percent of menopausal women think that they became hollow because they have no more fertility, nor sexual desire to be able to respond to their husband’s requests, because I am no more a useful member, what the old Arabic culture was, woman is just for giving

birth and for working and handling life and be a mistress at nights, and it is still there.” (55 years old, mother of two children, and married)

Being there as menopausal woman, placed the woman in a state of thrownness as described by Heidegger (1927), which refers to a person’s presence in an existing world with already defined norms, values, and culture., The culture that deems infertility as a deficiency result in the meaning of deficiency for menopause. In other words, being there as menopausal woman was a crossing point for losing reproductive and sexual function capabilities and therefore was the state of becoming deficient. Being deficient because of loss of these capabilities could alter a person’s competency with a possible divorce as a consequence.

One respondent said that “*It is because of our culture, the culture has developed like this, that if you want to live with a (infertile) guy accept that he has this deficiency, but if a woman has this deficiency, unfortunately, our judicial system is like this too, now, recently they said if you prove a guy is infertile, you can get divorce, but for example if a woman is infertile this means her deficiency, if menopause happened, it’s a deficiency over other deficiencies because she is no more capable of being a perfect wife for her husband in bed.*”(52 years old, mother of two children, and married)

Menopause was identified as a gender-related condition and a femininity experience that involved physiological (hot flashes), psychological (crying), physical (feeling bored and tiredness), social (husband-wife interactions), and sexual (including infertility) experiences. Some women found several concurrent symptom experiences disabling. Tension was a consequence of being there as menopausal woman for those women who experienced a combination of alternations in their lives. A woman’s partner was recognized as having an important role in supporting her by enhancing her self-efficacy.

A woman said that “*They (men) do not realize in what a tension a lady is, in what condition she is, that this hot flashes, or sometimes crying, I don’t know, sometimes being bored that even not being ready to take a shower, her body smells, the guy says oh I am throwing up from this smell , well understand that you can be helpful, for example (he can say) I am gonna help you now, you go and take your shower or I help you, for example, because they do not have any perception of woman’s menopause condition, that she feels she cannot be childbearing anymore, cannot be a good feeling for her husband.*” (52 years old, mother of two children, and married)

Loss in Youth or Aging

Meanings of menopause and aging were intertwined. While menopause was equivalent to aging in some women, its equivalency to aging was not accepted in others. Menopause was parallel to aging and an age-dependent event in some women, and an independent and separate event from aging in some other women. In some

women, menopause was the initiation of aging and loss of youth. Some women experienced a decline in physical health because of hormone loss. While women referred to their age, having diseases, and having adult children as aging criteria, loss of physical health was strongly related to a feeling of aging in some women. Thus, menopause meant aging by putting women in a state of a decline in physical health. Since loss of hormones was the cause of the decline in physical health and therefore aging, the presence of hormones was related to youth and physical healthiness. In other words, being there meant moving from healthiness to unhealthiness, from youth to aging, and from having hormones to hormone loss.

One woman said that *"I continuously feel that when these hormones ceased, my physical health was affected a lot, I had the disease and I have a 22 year old son, but why now I am feeling effete (old), you know it is accurate that I am 55 years old but I do not think 55 years is an (old) age for women, because there are many people that are about 80 years old but still walk straighten (capable), I can't say that, I think loss of hormones, I told my gynecologist too that I feel the hormone (loss) has more undermined (weaken) my body."* (55 years old, mother of one child, and married)

Menopause and its decline in hormones were related to diseases including osteoporosis and arthritis as well as sexual dysfunction, and physical appearance changes such as the presence of wrinkles. The women felt that the presence of hormones had a preventive role for aging and getting diseases. Therefore, menopause was putting a woman in a state of accelerated aging and unhealthiness. In other words, loss of hormones in menopause meant accelerated aging and vulnerability towards diseases for some women. The combination of getting a hormone-related disease and aging made menopause an undesirable experience. A negative attitude towards aging appearance and unhealthiness resulted in a menopause experience that meant aging to be an undesirable experience.

One participant said that *"But when you are menopausal, one of the problems that happens to you is osteoporosis because due to the hormones that are not secreted one of the issues is osteoporosis that you should take calcium daily, that it depends on what your physician suggests, ... There is Arthritis, well hormone related diseases, hormone release, so all of these are effective too, it makes discomfort to the person, there is uterus dryness, vaginal dryness, then ovarian dysfunction, all of these are effective so, there is an early aging, eventually because in menopause there is no hormone release, it brings aging, wrinkles on the face (the face gets wrinkled), hormone secretion results in a bit prevention of facial wrinkles, eventually it undesirably affects the person's appearance, all of these exist so."* (52 years old, mother of two children, and married)

In addition, the presence of hormones was related to body functioning and higher energy levels. Therefore, loss of hormones was related to malfunctioning and lack of energy in some women. Presence of hormones was

perceived as a symbol of youth among these women.

One woman explained that *"You know when menopause happens, person's power and body strength decrease a lot, it decreases a lot, means while you are having periods I think because of hormone releases, your power and mobility is more than menopause, the person becomes a bit bored, working becomes hard, maybe it can be called laziness, but it is not laziness it is a type of lack of energy."* (48 years old, mother of a child, and divorced)

Menopause meant a life chapter (stage) or developmental stage that happens because of aging. In other words, menopause meant initiation of the aging stage for some women. Characteristic of this life stage was recognized as a relief from many life issues and an initiation of an ongoing decline in physical health due to aging. This confirms that aging meant physical health deterioration that affected the menopause meaning. Among these women, menopause was the sign and a marker of aging, which made menopausal women become conscious about their state of being, their existential status including, their bodies, their physical health, their capabilities, their self-efficacy, their values, their remaining time until death, and the future potentialities in terms of deteriorating condition and death. Increased self-consciousness resulted in enjoying life with available capabilities as an adaptive response and a coping strategy.

One participant said that *"A person at menopausal age thinks, it is the season that she is relieved from many (things) of her issues (life), she likes to go out and have more fun. Because from now on she is facing to an ongoing deterioration, till this foot exists, till this body exists which is capable of frequent traveling, endure the trip to have fun."* (52 years old, mother of two children, and married)

For some women the essence of menopause meanings was circling around a hypothetical man's (husband's) perspective towards menopause and its meanings. Some women were concealing menopause from their husbands. Concealment of menopause was related to the assumption that their partners would consider them old.

One respondent explained that *"Many women don't tell their husbands they don't have their periods, (and) are postmenopausal, because they think their husbands think they are old."* (42, mother of a child, and married)

Cultural meanings regarding menopause resulted in menopausal women's state of falling in the already existing cultural meanings about menopause as of aging and disability. In addition, menopause meaning of deficiency in femininity could threaten women's self-efficacy and competency as an ideal wife.

A woman said that *"It is just because of the older generation's quotes that (was saying) menopause means extreme aging that from now on you are a person who is completely disabled and you cannot do anything else at all, most importantly is that, if she assumed in her thoughts that if a guy understands I am menopausal (woman) he would say, you are deficient, from the femininity point of view,*

perhaps you cannot be an ideal woman for me." (52 years, childless, and married)

Loss of Health/Disease

Menopause meant disease and a health problem for some women. Menopause was considered similar to other diseases and malfunctioning health issues which have some causing factors and health consequences. Comparing menopause to major body malfunctions (diseases) such as heart and kidney problems (irreversible health conditions) illustrates that menopause was a type of disease process that has permanent side effects with health decline consequences. Thus, being there meant moving from being healthy to having a disease.

A participant said that *"This flow (process) is a cycle like all other issues happening in the body, like to the same amount their (women's) kidneys may mal function, or their hearts have problem, this is another thing along with that, as it is said, has factors, and some issues along with."* (45 years, mother of two children, and married)

In some women, involvement with medical treatment and the necessitation of taking care of themselves made menopause to mean a type of disease. The meaning of menopause as disease had a short term and long-term effects. Short term effects were related to the disease process of the menopause like other diseases which involved with health visits and medical treatments. One long-term effect of menopause was a sense of self loss that was expressed by feeling meaningless, *emptiness*, and *uselessness*. Loss of self was related to not fulfilling expected gender roles. Therefore, women's gender identity was threatened by menopause due to diminished health and femininity. These women required a type of support that emphasizes on their maintained capabilities that fulfills their gender roles.

A woman explained that *"It is the worst period because the person is continuously involved with doctor and physician, is involved with (taking care of) herself, she knows she is involved with medical work (treatment) like every other disease, you listen (you know), but it is afterwards that this feeling meaningless, emptiness, uselessness is coming to the person, it is the support that you are still useful, because you are still decorating the house, you are always decorous and fresh."* (52 years, mother of two children, and married)

Stage

Meaning of menopause as a stage had two sub-themes including developmental (womanhood) stage, and natural stage (biophysiological stage).

Developmental/Womanhood Life Stage

Menopause was recognized as a stage in women's life. Flashbacks and comparing menopause with previous developmental and womanhood stages revealed that menopause meant both a developmental and womanhood life stage by many women. Having no flashbacks and

comparisons prior to puberty can illustrate that women recognized their womanhood, and their gender identity from puberty and with the presence of female hormones. Some women were concerned that their menopausal status affect their partners' life due to end of reproductivity and hormones. In other words, *being there* changed women's existence by moving from previous stage to the new life stage. Partner support during women's life stages recognized to be effective.

A participant said that *"People around you should know that you are entering to a new period of your life, that this period, is another life course" ... "Now that you entered to a new stage, this stage is like puberty, now this is one of the life stages, you become fertile, become pregnant, I don't know (for example), give birth, it is a life stage, have periods, it is a life stage, these are all life stages that you have to pass, and I think, guys (husband's) have an effective role in women's sympathy."* (55 years old mother of two children married)

Lack of knowledge and experience while entering to a new developmental stage caused fear in some women. In some women, new physiologic condition and its related symptom experiences were the cause of fear.

Some participants discussed that *"1) It's like the first time I had my period."* (Focus group discussion, 40 years old woman, mother of two children, and married)

"2) It is a period of life." (Focus group discussion 44 years old mother of two children, married)

A woman explained that *"I just can say, menopause is exactly like having periods, like having period experience for the first time, when the person experiences the first period perhaps, she is frightened a bit that's again because of lack of knowledge, menopause also can make the same condition."* (52 years, childless, and married)

Some women were comparing their menopausal symptoms with other women to find out commonalities in symptom experiences and to figure out what symptoms were considered natural. Generalizability of menopausal symptoms caused women to feel they were compatible with other women at a similar developmental stage and resulted in decreased fear. Accepting menopause was positively linked to decreased fear. For these women, stereotyping developmental stages was due to homogeneity of the symptom experience among the female population. This acquired generalized meaning defined menopause as a natural process

A woman said that *"They (other women) said yes, we were the same, had hot flashes, depression, these are natural, it made me a bit calm, so my sister, my mom, my friend also had these, thus this is natural, this is how a person's fear gradually sheds (decreases) and accept it easier."* (52 years, childless, and married)

Previous lifeline pleasant or unpleasant female related experiences such as puberty, menstruation, pregnancy, and delivery experiences were affecting women's menopause meanings and its acceptability. Some of the unpleasant previous womanhood experiences

encompassed dysmenorrhea, difficult pregnancy and delivery experiences, and the necessitation for family planning which made menopause mean positively as a pleasant developmental and womanhood stage. For example, menopause was a good experience among women who were suffering from dysmenorrhea since it caused a sense of pain relief.

A participant explained that *"It was good for me, because I had a very severe pain (dysmenorrhea), since my puberty started, the pain was with me, when I got married, gave birth, until my menopause stopped (I became postmenopausal), I was relieved from the pain problem and discomfort."* (52 years, mother of two children, and married)

Menopause meanings were relative depending on losses and gains. Menopause meanings were derived from women's satisfaction with the presence or absence of menopausal symptoms, and previous menstruation experiences. For example, in a woman with a history of anemia, ceasing menstruation had the positive meaning of preserving blood. Comparing menopause with different life stages caused women finding the differences between life stages. Attaching or detaching symptoms such as tiredness to aging or menopause was affecting menopause meanings. Menopause was alongside with aging and a part of the aging process and therefore a new developmental stage which happens as a part of growing older and maturity.

A respondent explained that *"Because I do not feel any difference, only, during my monthly periods, because of the anemia that I had, maybe now that my monthly periods ceased, maybe it is even better, because I do not lose that blood anymore, the difference, means I see the hot flashes the difference between this time and my previous time, I do not see any other difference because if I want to relate this (menopause) to my tiredness, so I have gone through several ages (have become older), means my cells compared to 10 years ago are older, thus Can I relate tiredness to this issue? Maybe no, it is all aging issue only, that we are moving toward middle age and aging (getting older) so this was a period."* (52 years, childless, and married)

Severity of menopausal symptom experiences affected the meanings of menopause. Experiencing severe menopausal symptoms caused menopause to negatively mean as a bad and unpleasant process. In addition, severe menopausal symptoms such as heavy bleeding interfered with women's life in various ways such as inability to work, feeling of physical disability, and experiencing health issues such as anemia.

A participant explained that *"During my menopausal period, all of my colleagues know, there were days in regard to bleeding it was not controllable at all, during my menopause my colleagues know there were days that I took cab and left (gone), means really a complete year not to say continuously though, I had this situation but one whole year maybe a bit less 9 to 10 months but I am saying because one year I went through a very bad process, I was very*

physically disabled, very anemic." (48 years, mother of a child, and divorced)

Natural Bio-physiologic Stage

Menopause meant cessation of menstruation in some women. Hot flashes, night sweats, fluctuations in blood pressure, decreased sexual function, depression, anger, and lipid disorders were referred to menopause. Participants believed hormone deficiency was responsible for these symptoms. Environmental factors, outfit coverage (clothing), ambient temperature, stress and stressors were effective on the severity of the symptom experiences. Menopausal symptoms were bothersome in some women and required intervention. Physical and mental engagement with different activities and entertainments were a source of thought distraction, which had a supportive effect in reducing symptom experiences. Doing exercise, listening to cheerful music, watching comic movies, and increasing knowledge through reading books, were identified as supporting factors while coping with complications of menopause such as depression. In addition, biophysiological challenges made menopausal women refer to health professionals for their symptom management to better cope with menopausal symptoms. Biophysiological symptoms were considered abnormal condition which could be temporary. In addition, acceptance of menopause had a positive effect in reduction of menopausal symptoms.

A participant explained that *"Menopause means cessation of menstruation, ... My hot flashes were too much, my blood pressure was up repeatedly, I had terrible sweats, and it was so annoying, ... eventually, with hormone shortage sexual activity decreases, does not disappear though, ... of course my sexual relationship with my husband decreased, yes, well there are to some extent complaints from guys so, ... well, knowing that this is a women issue, a stage in women's life, he came along with me to some extent."* (52 years old mother of two children, married)

Although hormone deficiency following the biophysiological changes caused various symptoms during menopause, the manifestation of hormone deficiency and symptoms were not the same in all people. Individuals' bio-physiological differences caused different symptom experiences and affected the meanings of menopause. Menopause was compared to previous biophysiological stages which showed that women were considering menopause as a biophysiological stage. Women believed that indoctrination had an important role in symptom management. Being optimistic, having a positive attitude and accepting menopause as a natural phenomenon was a positive strategy in managing body and function performances.

A participant discussed that *"It does not affect everyone the same, hormone declines for everyone, ... it is like periods that one has horrible pain and is very uncomfortable, indeed all her life is disturbed (affected negatively), one*

does not even understand her periods,... Indoctrination, means that, if one is feeling that this phenomenon is natural phenomenon, and accept this, and thinks that it can't, that cant not be affective in many parameters of her life, and she herself has this thinking in her mind and her thought, this affects a lot on her body, her function, on everything.” (Focus group discussion 44 years old mother of two children, married)

Some factors influencing menopause meanings were the duration of the menopause transition and severity of menopausal symptoms that could be different among women. Women were more dissatisfied if the duration of involvement with menopausal symptoms was long. In addition, meanings of menopause were influenced by hormone related symptom experiences in previous life stages. This means that the severity of the problems associated with hormonal changes during other life stages influenced the formation of menopause meanings. In other words, menopause meanings were made during a time spectrum and influenced by woman's unique lifetime experiences. Comparison of symptoms in different biophysiological periods affected menopause meanings and women's level of satisfaction or dissatisfaction.

A participant said that *“Because this depends on different people that for example from the time it (menopause symptoms) wants to start till the time it stops ,there are some people that they do not have side effects at all, have a little hot flashes, little, depression, menopause side effects are very little , and very normal turn to (enter to) menopause, for some I think it depends on their body hormones, because when I was pregnant, my pregnancy was very horrible means during first four months, I had sever vomiting my hormones were too much, I had huge problems, after four months I returned to normal life , had lost 7 to 8 kg,... indeed for me that I had very painful periods, for me was very good from this point of view but because of its side effects was not good, ... since my puberty I had these stomach pain (dysmenorrhea)it was with me when I got married, became pregnant, gave birth, till my menses stopped, I got relief from this pain problem, and discomfort, in my view hot flashes are the hardest part of it.”* (52 years old mother of two children, married)

Discussion

The present study suggested various meanings of being there as menopausal women. Being there, as menopausal women often meant loss and being in a new stage. One reason for these different meanings was the constant comparison of losses and gains. For example, being there was a positive experience in women who had previously experienced severe dysmenorrhea or had anemia. In these women who were satisfied with persistent amenorrhea, menopause meant pain relief or blood preservation, respectively. These women were more likely to experience menopause as a new stage. Similarly, menopause was a relief from menses among Malaysian women (26).

However, if in women losses outweighed the gains, menopause had a negative meaning of loss. Having a non-supportive partner and desire for having pregnancy were significant factors in negative menopause experience and meant a loss.

Dasein refers to human beings' existence according to Heidegger (1927). In this study Dasein were menopausal women's being in the world and reflected their existence as a person within their culture and society. Menopausal women's subjectivity and the objectivity of the world were considered one entity (27). Thus, their sociocultural context and their being were inseparable. Shared meanings were co-constituted while being with others in the world (27). Menopausal women discovered themselves in a state of thrownness in a world with already defined norms, beliefs, and culture specific to menopause. This state exposed menopausal women sense of transitional existence moving from premenopausal women to post-menopausal women. This phenomenological study revealed two main themes including loss and stage which elucidates the transition from ability to loss and from previous stage to new stage. Being there as menopausal women changed women's existence moving from that of being sexually active to sexually dysfunctional, and from being young to aging, from being healthy to being unhealthy, from being with having hormones and periods to hormone deficiency and cessation of menstruation, and from being in previous developmental stage to being in a new developmental stage. While being in the world and being with others as a menopausal woman, menopausal women revealed how social norms regarding menopausal women shaped their existence. In some women, this shaped existence was uncovered in women's accounts of being femininity incapable and in also being old because they now existed as menopausal women. Some women concealed menopause as a consequence for these transitioned meanings of being. Concealment of menopause was due to women's concerns regarding future potentialities related to older age and femininity deficiency and the possibility that their sexual partners' might leave them for younger and sexually active women. Being there as menopausal women in some other cultures had similar meanings. Comparable to this study several Qatari women primarily concealed from their spouses that they were in menopause transition, being afraid they would leave them to marry with younger women (28). A qualitative study demonstrated that old Nigerian men were culturally allowed to engage in sex with younger women if they desired to have children (29). In a qualitative study exploring married men's perspective toward menopause in Turkey, men believed menopause was loss of fertility and therefore end of femininity, increased weight and loss of beauty (30). Another study in Iran also documented that menopause was a threat to feminine identity (31,32). In the Study of Women's Health Across the Nation (SWAN) around 75% of the middle-aged women reported the moderate to high importance

of sex (33,34). Sexual life was the most significant issue for men when they were describing menopause (30). Several studies in the literature documented menopausal women experience sexual dysfunction (35,36,37,38,39,40,41,42). Therefore, being there as menopausal woman had caused similar sexual dysfunction experiences. However, an increase in libido and sexual activity after menopause has been reported in some women due to freedom from fertility and pregnancy concerns (5,13,43). Transition from previous biophysiological and reproductive to the new biophysiological stage and from reproductive to post reproductive stage was along with comparing losses and gains as a part of natural developmental and aging process. Similar to our study, being there as menopausal woman in Swedish culture caused women to experience menopause as a natural process and as a developmental life stage (44). Also, menopause meant entering to a new stage for Sri Lankan women (45). In addition, literature confirms that menopause intertwined with aging (45-49). Being there as a menopausal woman could have similar meanings regarding aging and menopause in other cultures. Similar to our study findings, that while some menopausal women were concerned about getting old, others believed that getting older is not related to the menopause rather is a normal part of life, and the sign of maturity (50). Likewise, for Chilean women, menopause was perceived as the initiation of aging stage (51). Similar findings for the menopause meanings as aging (with concerns about future of aging and appearance), and loss of healthiness and wellbeing (due to diseases concerns) were found in the in a qualitative study exploring the lived experience of Iranian Azeri menopausal women (52). However, inability associated with loss of autonomy, performing religious rituals and housework, and memory loss and isolation related to irritable mood and urine malodor were other menopause concerns in their study (52). In addition, menopause has been the core concern of men's sexual life and menopause meant either a disease or not a disease in some Turkish men (30). Similar to our study, findings in a qualitative study with white and African American women menopause meant the loss of youth in some middle-class white women, while it was a normal phase of life in African American women (53). Also, Jordanian women considered menopause as a negative process due to loss of youth and fertility (54). Being there as a Native American Indian, menopause transition was a neutral or positive experience because post-menopausal women were viewed as 'women of wisdom' (4,26). Heidegger emphasized that the concept of being is only understood by considering the concept of time, and that time is "the horizon for all understanding of being" (19). Dasein is not limited to awareness of the present; it moves forward to the future and is affected by the past, while being is fundamentally temporal (19). Menopausal women in this study looked forward to their future as they began to focus

on being postmenopausal, and being older by considering consequences of being unhealthy, infertile, sexually dysfunctional, and mature. However, the past including their socio-cultural encounters, and reproductive, sexual, previous womanhood and lifeline experiences, and their associated previously creating meanings also had a substantial effect on how some of these women lived in the present time and shaped the meaning of their being as menopausal women. This study emphasizes on taking a holistic care approach that is informed by culturally competent care for menopausal women. Taking to account that there is wide variety of symptom experiences among women from different cultural, racial, and ethnic groups, meanings of being there as menopausal women is different. Results from this study highlights application of various types of strategies for clinical practice. These strategies include (a) educating menopausal women and their sexual partners could enhance their knowledge, make a positive vision towards menopause, improve women's self-efficacy, and provide support through contribution of women's sexual partners, (b) applying coping strategies that are culturally acceptable (encompassing medical and non-medical strategies) and therefore affecting the symptom reduction and promoting their quality of life, and (c) designing policies that reinforce culturally competent care. Further research exploring meanings of menopause from men's and partner's perspective is warranted.

Limitations

The sample used for this qualitative study was small and was determined by data saturation. The sample included no participants with less education than a high school diploma. In addition, the meanings of being there as menopausal women were infused by Iranian culture. One limitation about this study can be transferability of the findings to other contextual settings. However, this study enriches the literature about menopause because fewer studies have applied Heidegger's phenomenology as a guide to explore menopause in nursing research.

Conclusion

Examining public societal and cultural myths regarding menopause is significant because these socio-cultural messages can be infused into women's beliefs regarding menopause and be deposited in their internal cognitive schemas. The language and terms employed for menopause can illustrate the underlying cultural meanings. When negative societal and cultural messages regarding menopause become internalized, it is more likely that menopausal women negatively link menopause to aging and a sense of loss. Integrating culturally competent care into existing evidence-based practice is necessary as culturally competent care enables providing required education, eliminating health care disparities, and adapting care congruent with women's culture.

Authors' Contribution

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Conflict of Interests

Authors have no conflict of interest.

Ethical Issues

IRB approval was obtained from the Ethics Committee of Iran University of Medical Sciences prior to beginning the study. Women were informed about the planned interviews, study benefits, and possible risks, and that they could withdraw at any time during the study. Informed consent was obtained prior to the focus group and each individual interview. A name of a flower was chosen as a pseudonym on the audiotapes and transcriptions in order to maintain strict confidentiality.

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