ABSTRACT

HEALTH RELATED NEEDS OF WOMEN AT MID-LIFE AND THEIR IMPLICATION FOR PROGRAMME PLANNING

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The study investigates, analyses and comments on the health of 103 Jamaican women 45-49 years. These women are referred to as women at mid-life. This is the period when women experiences a lot of psychological and physiological changes. These women were chosen using a haphazard sampling method. Women were identified at the Norman Manley International Airport, Barbican Community, Maxfield, Old Harbour, Santa Cruz, Papine Market, University Hospital and Sovereign Plaza. The methods of investigation were focus group discussions and a questionnaire.

The study revealed that academic status had no bearing on the perception of health or the concept. Only 18.7% of those who responded to the concept of "good health" gave an appropriate response and 15.5% gave an appropriate response to the concept of "bad health". This is probably one of the reasons why most of the respondents focused only on the physical aspects of health when asked about how they rated their health and reasons for their responses. There was no significant difference between age, income, educational status and health seeking behaviours. However, there was a significant difference between age group and illness (p<0.01) and perception of one's health and present illness (p<0.001).

Respondents who said their health was bad were thirteen times more likely to indicate that they were presently suffering from an illness, 85% (11/13). Major illnesses were identified as hypertension and diabetes. A few women reported having some cardiac conditions.

Employment status was high, and income ranged from less than J$5,000 to over J$10,000. For those women who got check-ups, 51% did so at a private facility, whilst 33.8% did so at a public facility. Main reasons for choosing the particular facility were stated as convenience (59.9%), and quality of services (39.4%). Income was not a considering factor.

The women in this study identified some of their needs as education and counseling, affordable health care, a home, respect and money. They also felt that with an increase in salary and a decrease in the cost of living
they will be able to obtain and maintain an acceptable standard of health and well-being.

Of the 103 women interviewed only 14 persons has no form of savings. Nineteen per cent of them indicated that the future was good for them while the remaining 81% gave negative responses.

The focus groups discussions provided some valuable information as issues such as lack of personnel with communication skills to guide patients as well s the lack of recognition of their contribution to societies were indicated. The need for preparing women for menopause was strongly emphasized as well as the need for respect. Strong recommendations are made to equip women with the tools for self development. This tool is education.