



## Lebanese women and sexuality: A qualitative inquiry

Mathilde Azar <sup>a,\*</sup>, Thilo Kroll <sup>b</sup>, Caroline Bradbury-Jones <sup>c</sup>



<sup>a</sup> Faculty of Health Sciences, University of Balamand, St. George Health Complex, Youssef Sursok St., P.O. Box 166378, Ashrafieh, Beirut 1100-2807, Lebanon

<sup>b</sup> Social Dimensions of Health Institute (SDHI), Universities of Dundee and St Andrews, City Campus, 11 Airlie Place, Dundee DD1 4HJ, UK

<sup>c</sup> School of Health and Population Sciences, College of Medical and Dental Sciences, University of Birmingham, Edgbaston, Birmingham B15 2TT, UK

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### ABSTRACT

**Objectives:** This study explores the meanings middle-aged Lebanese women attribute to sexuality and sexual life and how these constructs are shaped socially, culturally, and politically.

**Study design:** Using a qualitative design, data generation comprised semistructured individual interviews (n = 18) and one focus group (n = 5) with Lebanese women aged 40–55 years. Framework analysis was used for data analysis.

**Results:** Inductive analysis identified four themes: Sexuality as imposed by sociocultural and gender norms; sexuality as a symbol of youthful femininity; sexual life as a fundamental human need; and sexual life as a marital unifier and family stabiliser. Findings show that women's sexual self is largely defined based on men's needs. Women sacrifice themselves to maintain family cohesiveness, which they regard as the core of society. However, some women challenged social norms and therefore bringing new meanings to their sexuality.

**Conclusion:** This study offers new contextual information about the understanding of sexuality of middle-aged women within a Lebanese context, where the topic is not openly discussed. New insights are important to provide women with professional support that is culturally sensitive and appropriate.

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### Introduction

Research on female sexuality has largely neglected women's own construction of their sexuality [1]. This is particularly true for non-Western contexts such as the Middle East. This view emphasises gender differences that maintain men's power and silence women's voice, rendering them with little power to negotiate their sexual concerns and preferences [2,3]. The biased representation of female sexuality has been the foundation for mental and sexual health problems and has negatively affected women's self-image and expression of their sexual needs [3].

Social researchers and feminist scholars have attempted to shift female sexuality from biological determinism and conventional social script that determine what is natural/good or unnatural/bad to a legitimate right [2]. They have heeded the call for more qualitative research that captures the diversity of meanings and nuances that characterise women's sexuality [4]. Women's own voice gives the opportunity to gain new insights into the reality of their sexual emotions and experiences and the different forces that regulate their sexual-self.

Sexuality is a multidimensional and complex phenomenon that is influenced by the interplay of many physiological, emotional and sociocultural factors [5]. It is an individual experience that is expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships [6]. In this paper, we use the term sexuality broadly to encompass sexual identity, sexual health and sexual activity. We use sexual life to mean sexual relationships and activity.

Among middle-aged women, sexual life may change as a result of hormonal changes [7], psychosocial factors [8] and cultural influences [9]. Researcher has shown that with increased age, some women seem less interested in the sexual aspects of life, placing greater emphasis on other priorities that are socially valued like caring for a child or a sick person [10,11]. Other women report a positive view of their sexual life and reject the asexual cultural representation of older people [12].

In Middle Eastern countries including Lebanon, sexuality is highly politicised and affected by gender inequality, social traditions and ignorance ([11], Khalaf as cited in [13]). This is despite the advocacy for women's sexual rights [14,15]. Control over women's bodies and sexuality reflects one of the strongest indicators of patriarchal societies [14]. In Lebanon, the rise of feminist and social movements, globalisation and socioeconomic changes have contributed to new sexual discourses characterised by openness. Yet, sexuality is still regulated by patriarchal and religious beliefs [16,17] and these tend to reinforce female sexual modesty, passiveness and

\* Corresponding author. Faculty of Health Sciences, University of Balamand, St. George Health Complex, Youssef Sursok St., P.O. Box 166378, Ashrafieh, Beirut 1100-2807, Lebanon. Tel.: +961 (0)1 562 108/9.

E-mail address: [mathilde.azar@balamand.edu.lb](mailto:mathilde.azar@balamand.edu.lb) (M. Azar).

submissiveness. Sexual research is scarce particularly among middle-aged women. With the ageing population and the increasing recognition of the importance of sexuality throughout the lifespan, studies that explore women's own sexual reality are crucial to guide professional policies and interventions in promoting a healthy sexual life.

This study explores middle-aged Lebanese women's understanding of sexuality and how this is shaped by the personal, sociocultural and religious context.

## Methods

This paper is based on an exploratory qualitative study that focuses broadly on the issue of the sexuality of middle-aged Lebanese women.

### Participants

The sample comprised 23 women aged 40–55 years. Eighteen women participated in individual interviews and five in a confirmatory focus group to verify and expand findings generated through the individual interviews [18]. Women of various sociodemographic characteristics and menopausal status were recruited from mammography units in two university hospitals in Beirut [18]. The aim of the heterogeneous sample was to capture a range of women's perspectives and generate rich data that reflected the different meanings of their sexuality. We used snowball sampling to reach women whose characteristics mirrored those of the main sample.

All Lebanese women 40–55 years, irrespective of their sexual orientation or marital status, were eligible to participate in the study. We excluded women who had acute or chronic health conditions at the time of the interviews as their health condition interfere with the perception and experience of sexuality, thus adding another layer of complexity to the interpretation of findings [19].

The primary researcher (MA), a Lebanese midwife, carried out the recruitment of participants. She met women in the mammography unit, informed them about the study and invited them to participate. Recruitment was a long and difficult process as most women were reluctant to talk about sexuality; a sensitive topic in Lebanese society. Many who consented to participate at the time of recruitment, later declined at the time of the interview. Only one single woman participated which may reflect social sanctioning in Lebanon of sexual activity out of marriage. As a clinician, MA's experience in dealing with sensitive topics in a confidential, professional and supportive manner helped her overcome these difficulties, balancing her interest as a researcher with the women's interests and preferences.

### Data generation

Individual, face-to-face interviews were conducted in Arabic, the official Lebanese language. In view of the sensitive nature of sexuality and the lack of information available about the topic, this method has the advantage of being confidential and allows the generation of in-depth and rich descriptions [20,21]. Women were interviewed for 30–90 minutes in a private place of their choice. They were asked to respond to and expand on one broad question: "What is the meaning you ascribe to sexuality?" and were probed to get a deep understanding of the topic. Women were free to reflect on their sexual perceptions, feelings and experiences.

A two hour focus group was conducted by MA. It was based on a semistructured interview that emerged from findings. MA explained the purpose of the session which is to discuss and expand on findings of the individual interviews. She introduced women to one another in an environment that helped them openly talk and exchange their views. The interviews and focus group were oppor-

tunities for most of the women to articulate their sexual concerns for the first time. Data were digitally-recorded and transcribed verbatim.

MA carried out the process of translation and back-translation between Arabic and English. Initial data analysis was undertaken by MA in the language of the participants. This was deemed important for preserving the meaning that is inherent to the culture. However, so that the analysis and interpretation were not singular activities, to enhance analytic rigour, all three researchers (one Lebanese and two from the UK) were involved in data analysis. The confirmatory focus group was another strategy to ensure credibility of findings.

### Data analysis

Framework analysis [22] was used to analyse data. This method uses a systematic approach to identify and organise codes, categories and themes. The preliminary transcripts were read repeatedly before a list of codes based on recurrence and relevance to the research questions was identified and assigned to the transcribed data. A flexible conceptual framework of themes and subthemes was iteratively developed involving back-and-forth reflection within and across transcripts. Extracts from transcripts were then summarised and classified into charts containing the key themes. A thematic chart was created where the different categories were compared within and across participants, then collapsed and refined taking into consideration commonalities and deviant cases to avoid over-generalisation. The three authors separately analysed two transcripts that had been translated from Arabic to English. These analyses were then compared among the team. Four central themes emerged from consensus discussions among the authors.

### Ethical considerations

Institutional research board approval was obtained from the University of Balamand, Faculty of Medicine and Saint George Hospital University Medical Centre. Prior to participation, all women signed a consent form and their permission was sought for tape-recording the interviews. Confidentiality was guaranteed and pseudonyms were used.

## Results

All interviewed women were married but two were widowed, one divorced and one single. Their mean age was 47 years. Three had a university degree, nine had reached secondary education, six intermediate education and the others had elementary or no formal education. Eleven women had entered the perimenopause or menopause. Ten were Christian and 13 were Muslim. Ten participants were employed.

Table 1 shows the four principal themes and their description. The themes illustrate women's perception of sexuality as an essential component of the personal and marital life that is regulated by gender-based social rules.

### *Sexuality as imposed by sociocultural and gender norms*

The majority of the participants criticised the double standards and gender discrimination that support men's sexual rights and freedom and confine women to chastity and fidelity. The distinction between men's and women's sexuality was clearly reflected in their narratives in terms of perception, needs, outlooks, and expectations. Women perceived men's sexuality as physically oriented with the most important aspect being to have their desires met without caring about the feelings of their partners or the presence of suitable conditions for sex. While women equated men's

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