



## **EXPLORING WOMEN'S EXPERIENCE ON MENSTRUATION AT THE WORKPLACE: AN INTERPRETATIVE PHENOMENOLOGICAL VIEW**

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Menstruation, or period, is a natural and internal bodily experience in every woman's life. However, severe menstruation pain (dysmenorrhea) affects women's work lives, activities, and productivity. In this background, even though women showcase greater levels of potential and capability in education and the opportunities opened and engaging to the workforce, little evidence exists on how women with severe menstruation pain manage their pain at work and how organizations can improve the work life and self-management in the context of organizations in Sri Lanka. To fill the gap, this study aimed to understand how working women construct their experience of menstrual pain while involved in workplace routines and to explore what support they expect from the workplace. The study employed interpretative phenomenology, and in-depth, semi-structured interviews were conducted to capture the respondents' experiences and recollect them with the researcher's experience to get more insight into the phenomena. The sample consisted of seven working women in the early stages of their careers and suffering from severe menstruation pain. Thematic analysis was used to analyze the data. Three major themes were identified: discomfort, workplace environment, and coping strategies. The results implied the requirement of educational initiatives to change the social norms and associated stigma to make aware of this at the organizational level and consider menstruation in employee wellbeing policies, covering all managerial and non-managerial staff members.

Keywords: menstruation pain, dysmenorrhea, women, workplace, interpretative phenomenology

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### **INTRODUCTION**

Menstruation or period is an internal bodily experience and a natural phenomenon in every woman's life (Lu, 2001; Hemachandra & Manderson, 2009; Hawkey et al., 2016; Cook & Hoek, 2023). It refers to the periodic bleeding in the uterine lining of a female during her reproductive age (Cook & Hoek, 2023). Every month, around 2 billion women are experiencing their regular menstruation worldwide (UNPF, 2024). It is usually identified as a painful experience; however, some women experience severe pain and cramps in the lower abdomen before or during the menstruation period, along with the symptoms such as sweating, headache, nausea, vomiting, and diarrhea (Yesuf et al., 2018; Reinhardt & Eitzeb, 2023; Leon-Larios et al., 2024) limiting their daily activities (Lazlo et al., 2008; Hemachandra & Manderson, 2009; Cook & Hoek, 2023). Further, these symptoms, pain, and experiences during or before menstruation differ among women (Madampe et al., 2022; Cook & Hoek, 2023). For example, in the United States, it was found that 84 percent of females were having moderate to severe pain from their menstrual cramps (Statista, 2023), while it was more than 70 percent among the females in Ethiopia and Ghana (Yesuf et al., 2018), implying that the painful experience of menstruation is becoming more common among women (Cook & Hoek, 2023). In medical terms, this type of menstruation pain is identified as Dysmenorrhea (Madampe et al., 2022). Further, the severity of Dysmenorrhea can also lead to diseases, such as endometriosis or low in engaging reproductive activities and even infertility (Reinhardt & Eitzeb, 2023).

Moreover, menstruation pain can affect women's work and social functioning, but limited research studies on how women with severe pain manage it in their professional lives (Cook & Hoek, 2023). Existing evidence indicates that women with severe menstrual pain often engage with work despite experiencing symptoms and social stigma on menstruation, which can lead to other issues within the workplace, such as presentism (Cook & Hoek, 2023; Leon-Larios et al., 2024). The menstrual cycle has been neglected in explorations of public health and entirely remiss in occupational health literature despite being a problematic source of gendered inequalities at work (Sang et al., 2021). Moreover, Cook and Hoek (2023) pointed out that the discourse of menstruation, pain, and work were discussed outside of academic research. On the other hand, in the context of developed and developing countries, the menstruation pain experience at the workplace has been limited in exploring even in developed countries (e.g., Statista, 2023; Cook & Hoek, 2023) while addressing it more limited in developing countries (Chothe et al., 2014). Furthermore, in low- and middle-income countries, it was found that the lack of access to adequate water, sanitation, and hygiene facilities in the workplace further exacerbates the challenges faced by women in managing their menstrual health (Sommer et al., 2016). In this background, how women give meaning to menstruation experience, pain and how they manage it is influenced by context-specific factors such as sociocultural environment, awareness, and economic factors (Chothe et al., 2014; Hawkey et al., 2016; Cook & Hoek, 2023).



Additionally, menstruation is one of the taboo topics in society, and a constraint to women's careers (Grandey et al., 2019). In this context, several studies relating to health education in Sri Lanka have been conducted on menstrual pain and experience among women aged between 15-49 females in Rathnapura District during 2006- 2007 as a descriptive, cross-sectional study on gynaecological morbidity study (Hemachandra & Manderson, 2009), Prevalence of primary dysmenorrhea among the female undergraduates and its influence on their daily activities (Madampe et al., 2022). The study of Hemachandra and Manderson (2009) shows that women in Sri Lanka are also experiencing some extent of anxiety about noticing menstruation issues. Though education on menstruation has been introduced to the school curriculum, the culture of silence on women with menstrual problems is a barrier to resolving by getting treatments. Further, the psychological and emotional impact of menstrual problems should not be neglected since it significantly affects women's daily activities, mental well-being, and social life.

Further previous research in the context of Sri Lanka focused on limited women in general or school or university students (Hemachandra & Manderson, 2009; Madampe et al., 2022). This indicates the research gap in how severe menstruation pain influences working women's careers and how they manage menstruation-related pain at the workplace in the context of Sri Lanka. It is vital due to the great need for public health interventions aimed at the reduction of menstrual stigma to promote women's health and well-being and enhance awareness concerning menstrual health and disorders (Olson et al., 2022).

- To understand how working women, construct their experience of menstrual pain while involved in workplace routines.
- To explore what support from the workplace they expect to balance their menstrual health and work performance

## METHODOLOGY

The study utilized interpretative phenomenological analysis (IPA) methodology as phenomenology is a powerful research strategy that is well suited for exploring challenging problems in health professions education by conducting semi-structured interviews (e.g: Shallcross et al., 2019). Purposive sampling has been used to identify the participants of the study upon the confirmation of them experiencing sever pains during their monthlies. The sample size was seven (07).

### Respondents Profile

Pseudonym	Age	Working hours	Industry	Working experience	Education level	Civil status
P01	30	8.30 a.m. to 4.30 p.m.	Education	3 Years and Six months	Reading for an MSc	Single
P02	26	8.30 a.m. to 4.30 p.m.	Education	1 Years and four months	Reading for an MMB	Single
P03	24	9.00 a.m. to 5.00 p.m.	Banking	4 Years	Undergraduate	Single
P04	23	9.00 a.m. to 5.00 p.m.	Private firm	2 Years	Undergraduate	Single
P05	24	8.30 a.m. to 5.00 p.m.	Private firm	3 Years	Reading for an MBA	Single
P06	28	8.30 a.m. to 5.00p.m.	Education	4 Years and one month	Reading for an MBA	Engaged



P07	29	8.30 a.m. to 5.00p.m.	Education	3 Years	Reading for an MBA	Engaged
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## PROCEDURE

Interviews were conducted online via Zoom. They were conducted flexibly using the semi-structured in-depth interview schedule designed to share their experiences as stories. At the interview schedule design, a discussion was conducted with two medical officers. In the discussion with the two experts, mentioned that more young females are suffering from period pain than the older women. The systematic study conducted by Ju et al. (2014) found that most debilitated by pain were significantly more likely among young unmarried women and most likely to engage in work. Hence, the study focused on working women in the age range of 20 -30. The initial study was conducted to understand how working women construct and experience menstruation while working at the workplace. Interviews were conducted using the participants’ mother language (Sinhala) to get more insights and transcribed while removing all identifiable information from the transcriptions, and pseudonyms were used throughout the study. Researchers manually developed the codes by following the process adopted by Shallcross et al. (2019). Interpretive phenomenology enables researchers to reflect their experiences simultaneously on main themes of participant experience with the phenomenon (Neubauer et al., 2019). Hence, the researchers conducted manual coding and recoded their experiences on dysmenorrhea while coding the respondents’ experiences.

## RESULTS

The recordings of seven women's stories were analysed and interpreted into main themes, each with constituent sub-themes: discomforts (fluctuations in emotional sensitivity, physical discomfort), workplace environment (peer support out of kindness, supervisor support, and sanitary facilities), and coping strategies (mental and physical preparation by themselves, informal peer support, not disclosing menstrual issue to the supervisor and requesting sick leaves).

### Discomfort

Most of the participants were experiencing physical discomfort symptoms such as severe abdominal pain, vomiting, bloating, and headaches (e.g: Ju et al., 2014; Leon-Larios et al., 2024). Further, it was evident that respondents’ emotions were switching, and they felt moody while working during such times. Similarly, to this study, the respondents of previous studies also explained the physical and mental discomforts (Hemachandra & Manderson, 2009; Cook & Hoek, 2023). However, the respondents emphasized their mental discomfort to the extent of affecting it as mental stress. The mental stress is caused due to the effort of forgetting the physical discomfort and trying to fulfill the work as usual. The immediate supervisors’ perception of menstruation (it is a private matter) towards the pain impacts the participants' performance. Further, the level of stress is higher if immediate supervisors expect to get the work done and are not willing to ask for leave. While, most of the studies supported that the severity of pain and discomfort among the young women who are educated professionals affect their work performances (Cook & Hoek, 2023; Leon-Larios et al., 2024) and they perceive that requesting sick leaves for menstrual pain is as an obstacle for their career progression (Leon-Larios et al., 2024).

### Workplace Environment

The respondents expressed that they get support from their close friends at the workplace during those days. Expressing their feelings to them is the most considerable relief they have. The study by Cook and Hoek (2023) mentioned that employees seek trust and feel close to disclosing menstrual pain and related issues. Further, most respondents reported that they do not have sufficient facilities, such as a



place to rest when the symptoms occur, first aid, and access to sanitary materials. They have expressed that their immediate supervisor plays a vital role in their workplace, and if the supervisor understands their condition, it affects their mental relief.

Further, the gender of the immediate supervisor has a strong influence on revealing the fact that they have menstruation to the immediate supervisor. Most participants have expressed their experiences with their immediate supervisors, expressions, and attitudes towards their situation. Some have consciously decided not to tell their immediate supervisors, as they keep working first due to fear of humiliation if they express their pain. Employees reveal more if they have a good relationship with their leader and when their leader is not male (Cook & Hook, 2023).

### Coping Strategies

Most of the respondents expressed that they do self-preparation by keeping sanitary materials with them and using paracetamol pills as a remedy to relieve their pain. At the same time, some explain that they use Ayurvedic drinks. They have learned about traditional ayurvedic drinks from their parents and close friends who strictly recommend them. Expressing their pain to someone close to them at the workplace who can understand their situation is another coping strategy they use. The attitude towards pain and coping mechanisms was an important factor that encouraged and discouraged the participants from working during and even after their monthlies. It was evident that most participants consciously decided not to tell their immediate supervisors as a coping strategy; they bear the pain and work first since they fear humiliation (Cook & Hoek, 2023). If the immediate supervisor is a male, some are too shy to express it and tend to take leaves, informing them that they are sick. Further, they highlighted that women's perceptions of pain and coping mechanisms are influenced by their self-relatedness. After the interviews, the three researchers also discussed their experiences. They understood that menstruation symptoms were very diverse from one to another and that the brief assessment of pain used could not capture the complexity of the symptoms that can occur (Madampe et al., 2022; Cook & Hoek, 2023). Two of the researchers stated that they were also experiencing the dysmenorrhea condition and similar coping strategies that they were using in their workplace.

## DISCUSSION AND CONCLUSION

Severe menstrual pain (dysmenorrhea) is the suffering of millions of women in the world. However, there is a significant delay in identifying those who suffer in workplaces due to a lack of knowledge, the stigma associated with menstruation, and its painful experience (Reinhardt & Eitzeb, 2023). Hence, this study sheds light on the context by addressing how working women construct their menstrual pain or dysmenorrhea experience while involved in workplace routines and exploring what support is expected by such employees from the workplace; they expect to balance their menstrual health while working. The study intervened by making aware how young working women in Sri Lanka construct their experience of menstrual pain by identifying three themes: menstrual pain discomfort, experience in the workplace environment, and coping strategies the women adopt to get relief. This study implies that menstrual pain is an important issue among young women of reproductive age at the early stages of their careers in Sri Lanka. Most respondents perceive that revealing such issues to management may affect their future career progress, and they are mostly determined to work by bearing it. Severe menstruation pain may lead to negative impacts such as stress toward work and presenteeism in the workplace (Cook & Hoek, 2023).



Further, the study's findings highlighted that women at work are emotionally sensitive in such a time duration. In order to productively manage the fluctuations of emotional sensitivity, it is essential to ensure that the immediate supervisors enhance their level of emotional intelligence and encourage the timely completion of work by the participants with an improved positive attitude towards work during the menstrual period. Several studies pointed out that severe menstrual pain has a higher impact on the quality of life and productivity of female employees in the workplace (Chen et al., 2018; Grandey et al., 2020). Further to productively manage physical discomfort, a proper mechanism must be implemented by the work systems equipped with first aid, space to lie down and relax, and sanitary facilities (Hawkey et al., 2016; Cook & Hoek, 2023). As per respondents, it was revealed that there is a stigma of revealing menstruation pain of women at work with humiliation and bodily experience; however, it must be noted that such matters are biological and contribute to the primitive reproductive mechanisms of a nation, and that women must be safeguarded against the fluctuations of both physical and emotional sensitivity during menstrual times (e.g: Grandey et al., 2020). Regardless of gender, it is recommended to implement an openly speaking platform via awareness sessions at the organizational level, covering all managerial and non-managerial staff members. Accordingly, initiatives with widely disseminating knowledge on dysmenorrhea are required to highlight the prevalence of it and change the social norm toward menstruation in society. This study has implications for organizational policymakers on employee well-being and leave, such as leaders, immediate supervisors, and employees. It is important to pay attention to address unnecessary anxiety about disclosing menstrual problems, to support them in making health care decisions based on more accurate information, and to help and facilitate female employees to manage menstruation pain experiences at work to fit with their lifestyles. However, this study has several limitations. This study selected respondents who experienced severe menstrual pain, were unmarried, and were early in their careers. The severe experience may vary, and the respondents may not reveal all the information about their experiences. Hence, the study can be further expanded by interviewing the immediate supervisors and health care professionals.

## ACKNOWLEDGEMENT

Mrs. Dilani Wijesena (MBBS) University of Kelaniya, MSc (Epidemiology and Biostatistics), Brock University, Canada for guiding, advising and providing invaluable comments for improving the study. Dr. M. L. Kandage for helping and advising the researchers to carry out the study.

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