# Health Awareness Among Lebanese Women

A Random Survey

Randa Abul-Husn

In an attempt to investigate health awareness among Lebanese women, we administered a random sample survey (see below). The size of the sample is 201 women of which the majority are in age bracket between 20 and 30 years old (39.3%), single (58.7%), with a university education (75.1%) and engaged in remunerated work or employment (57.7%).

The questionnaire was devised along four broad categories of health awareness and behavioral attitudes: 1) one part of questionnaire quired. notably, about health habits such as smoking, exercising, and undergoing medical examinations. 2) Another part probed into dependency on tranquilizers. It is important to note that mention of substance is reccurent throughout this file because of a hypothesis that the Lebanese war has increased dependency on tranquilizers among women. Our questions query whether the respondents consume tranquilizers, and where it applies, to identify the drug, the frequency of use and if by a doctor's prescription. 3] The questionnaire looked into perceived gender sensitivity in medical treatment by examining preference for a male or a female gynecologist. Respondents were also asked to indicate whether they have experienced or noticed any sexual discrimination by medical staff and doctors in their treatment of patients. 4) Respondents were also asked to specify health and medical issues they would like to know about more.

HEALTH HABITS: Smoking, Exercising and Regular Medical examinations

A majority of the sample are non-smokers (71.7%). The proportion of women who follow a fitness program through regular exercise is relatively high (47.8%). However, the number of women who do not exercise is still greater (49.7%), even if only by a small margin (1.9%).

If regular medical check-ups and visits to a

gynecologist indicate health conscious attitudes, practices and behaviors, the women in our sample seem to lack it. Hence, the majority do not uphold regular medical care. A majority of 108 women (53.7%), do not perform annual exams nor check-ups at their doctors' (see Table 1).

In a traditional society like Lebanon, gynecological examinations are limited to married women. In our sample which includes 78 married women (see Table 2), 71 said they visit their gynecologist regularly. Single women, however, do not perform regular gynecological exams, lest they are accused of being promiscuous and engaging in pre-marital sex. It is also highly possible that single women do perform gynecological exams but would not reveal them to us.

SUBSTANCE ABUSE: Tranquilizers

The majority of women in our sample (80.1%), do not take tranquilizers on a regular basis and in many cases do not take any. Lexotanil and Tranxen, popular muscle relaxants, are the common drugs used by the 33 (16.4%), women in our sample (see Table 3) who consume

tranquilizers. Still, majority of these 33 women cannot be definitely classified as addicts because they resort to tranquilizers only when needed. Nevertheless, "Only when needed" is relative to each woman and therefore a subjective indicator. To reduce the subjectivity. our multiple choice question specified a time pattern: "everyday, more than 3 times a week and less than 3 times a week" (see Table 4). Yet, by answering only when needed, the respondents imply that tranquilizers are taken only in cases of extreme stress and not in a systematic pattern. The number of women who take tranquilizers everyday amounts to 21.2% of our sample, and although they are not the majority of an already small group (12 out of 33) they are proportionately high and cannot be ignored.

Most of the sampled women use these tranquilizers without a doctor's prescription, 14 out of 33 women (42.4%), compared to the (36.4%) who follow a doctor's prescription, 21.2% who refrained from answering the question altogether. Comparative research and epidemiological reports in Lebanon state that females use illicit drugs less often than males and even more rarely abuse it(1).

#### PERCEIVED GENDER SENSITIVITY IN MED-ICAL TREATMENT

The women's preference, in our sample, is for a male rather than a female gynecologist, although many (34.8%), did not answer the question related to the subject. The pro-

Table 1 Frequency Summer -	of Regular Medica Fall 1994	l Check-ups
	Number of Respondents	Percentage
Have Regular Medical Check-ups	80	39.8
Do Not Have Regular Medical Check-ups	108	53.7
No Answer	13	6.5
Total	201	100.0

Table 2	Frequency ups Summer - 1	of Gynecological	Medical Check
		Number of Respondents	Percentage
Visit their Gy	necologist Regularly	71	35.3
Do Not Visi necologist	t their Gy- Regularly	108	53.7
I	No Answer	22	11
	Total	201	100.0

		of Use of Tranquili Fall 1994	izers
		Number of Respondents	Percentage
	Yes	33	16.4
	No	161	80.1
No Ans	wer	7	3.5
To	otal	201	100.0

portion who preferred a male doctor (33.9%), was slightly higher than those who stated an explicit preference for a female doctor (31.3%). Lebanese women seem to prefer male over female gynecologists, partly out of habit, and partly because of a cultural attitude that men are more competent

 E. Karam; Substance Abuse in Lebanon, Expert Report. WHO 1993. Lebanon.

than women medicine (see Table 5). Many women said the sex of the doctor made no difference to them, they looked for the doctor's competence (31.8%). or they had not thought about it in these terms before. Others already had a male doctor or were accustomed to Over him. 10% said that thev either trust or feel more comfortable with male doctors. Nevertheless, a good proportion of the women (19.4%),insisted on a female gynecologist. because being a woman herself, they feel she understands them better. One

respondent preferred a woman over the man because of a bad experience with the latter.

HEALTH ISSUES LEB-ANESE WOMEN WANT TO KNOW MORE ABOUT

The women in this sample wanted to know about more than one health issue, which had to be grouped together. Consequently, the number of responses exceeds the sample size of 201.

#### Table 4

Frequency at Which Tranquilizers are Taken Summer - Fall 1994

Relationship	Number of Respondents	Percentage
Everyday	7	21.2
Only When Needed	19	57.6
More Than 3 Times/Week	4	12.1
Less Than 3 Times/Week	1	3.0
No Answer	2	6.1
Total	33	100.0

### Table 5

Reasons Attributed to Perceived Preferences for Male or Female Gynecologist Summer - Fall 1994

Summer - Fan 1994

	Total Number of Respondents	Percentage
It Makes No Difference	64	31.8
Already Have a Male Doctor	9	4.5
Relax Better With Male Doctor	11	5.5
Trust Male More Than Female	10	4.9
Prefer Male Dr. Out of Habit	8	4.0
There Are More Male Drs.	1	0.5
Feels More Confortable With A Female Doctor Because She Understands Better	39	19.4
Other	3	1.5
No Answer	56	27.9
Total	134	100.0

Health Issues	Number of Resp	onses
Cancer		47
HIV/AIDS and other S	STD	38
General Health Issues	S	26
Nutrition and Health: Glands, Blood Count, Metabolism, Back pai		
Pollution, Head proble	ems, Ulcers, etc.	21
Heart Disease		9
Children's Health		9
Genetics, Rare Diseas	es and Medication	8
Women's Health		7
Diseases like Measles	, T.B., Asthma, Plague	4
Effects of Tranquilizer		3
Old Age issues		2
No Answer		35
TOTAL		209

Lebanese

#### CONCLUSION

Age:

Judging from the results of this survey, Lebanese women possess some degree of general awareness about health matters and issues, and are eager to know more. It seems, however, that they lack initiative in proper health practices and behaviors, such as exercising, getting regular medical exams, and not consuming antiseptic drugs without a doctor's prescription.

The sample in this survey screened Lebanese women from a variety of income brackets and regions in the country, in both rural and urban settings. The sample bias most probably lies in the fact that the majority are

university graduates and, consequently, possess minimal knowledge in public health issues.

However and if we were to generalize on the basis of this sample, Lebanese women seem to lack the discipline and the attitude needed to develop the practices and behaviors of a health-conscious person.

women seem to prefer male over female gynecologists, out of habit, and because of a cultural attitude that men are more competent than women in medicine.

## Questionnaire Health Awareness Among Lebanese Women

For Al-Raida / The Institute for Women Studies in the Arab World / LAU (formely BUC)

less than 20 \_\_\_ 20 - 30 \_\_\_ 30 - 40 \_\_\_

40 - 50 More than 50
Marital Status: Single Married Widowed Divorced
No. of children: None 1 - 2 3 - 4 More than 4
Education: Elementary Complementary Secondary
University Vocational Yearly family income level in L.L.:
Yearly family income level in L.L.:
below 3 million 3 to 6 million 6 to 10 million
10 to 20 million 20 to 40 million More than 40 million
Work status: Working Non-working More than 40 million More than 40 million Non-working
Do you smoke? Yes No
Do you exercise? Yes No
Do you take any medication for nervous tension? Yes No
If yes, what kind?
How often and how many pills? (specify number that applies to you)
Everyday More than three times/week Only when needed less than three times/week
less than three times/week
Is this medication prescribed by a doctor? Yes No
Do you go to your doctor for a general overall check-up regularly? Yes No_
D. A.
Do you see your gynecologist regularly? Yes No
Do you prefer to see a male gynecologist or a female gynecologist?
Male Female Why?
Do you feel that doctors differ in their treatment and attention between male
and female patients? Yes No
Explain
Do you feel that hospitals staff differ in their treatment and attention between
male and female patients? Yes No
Explain
What health issues would you like to know more about?
mat heard issues would you like to know more about.