


# BMJ Open Women's understanding and experiences of menopause in low-income and middle-income countries in the Asia Pacific region: a scoping review protocol

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## ABSTRACT

**Introduction** Menopause denotes the end of a woman's reproductive life. A woman's experiences of menopause are shaped by her individual circumstances and may vary between social and cultural contexts. Evidence is needed to inform research and programme delivery that supports women's health and well-being throughout the menopausal transition. This scoping review will map evidence of women's experiences of menopause in Asia Pacific countries, where limited research exists.

**Methods and analysis** We will follow the five-stage framework of Arksey and O'Malley, further developed by Levac *et al* and the Joanna Briggs Institute. MEDLINE, CINAHL, PsycINFO and Scopus databases will be systematically searched between February 2022 and May 2022 using subject headings and keywords. The title–abstract and full text of retrieved studies will be assessed against eligibility criteria. The review will focus on studies with a qualitative research component. Citation searching of selected articles will supplement database searching. Data will be extracted, charted, synthesised and summarised. Findings will be presented in narrative format and implications for research and practice reported.

**Ethics and dissemination** Ethical approval is not required for this scoping review of selected studies from peer-reviewed journals. Ethical approval has been granted from relevant ethics committees for community consultation. Findings will be shared in peer-reviewed publications, presented at conferences and disseminated with communities, health workers and researchers.

## INTRODUCTION

Women's individual experiences of menopause vary, influenced by geographical, social and cultural factors as well as age at onset and health status.<sup>1,2</sup> Menopause is the permanent cessation of menstruation after the ovaries cease follicular activity.<sup>3</sup> Menopause signals the end of a woman's reproductive life. The natural process of reproductive ageing is anchored by the final menstrual period (FMP), with the menopausal transition stage

## STRENGTHS AND LIMITATIONS OF THIS STUDY

- ⇒ This review will follow the Joanna Briggs Institute scoping review manual for methodological rigour and reliability.
- ⇒ Results will be reported following the Preferred Reporting Items for Systematic Reviews and Meta-Analysis extension for Scoping Reviews for rigour and transparency.
- ⇒ Inclusion of research with qualitative components facilitates deep understanding of women's experiences of menopause.
- ⇒ The review will be limited to studies published in English.
- ⇒ Application of findings will be limited to the Solomon Islands context, hence translatability to other Asia Pacific contexts should be taken with care.

of perimenopause characterised by menstrual irregularity prior to the FMP. A woman is considered to have reached menopause after 12 consecutive months of amenorrhoea. The postmenopausal stage continues to the end of a woman's life.<sup>4</sup>

Many studies report on menopause from a biomedical perspective, with most undertaken in Western, high-income countries. In the medicalisation of menopause, symptoms are considered health concerns requiring medical intervention.<sup>5,6</sup> However menopause can also be viewed as a sociocultural construct, with symptoms considered a part of the ageing process concomitant with psychosocial factors and a woman's life stage circumstances.<sup>5,7,8</sup> In low-income and lower-to-upper-middle-income countries in Africa,<sup>9,10</sup> the Middle East<sup>11–15</sup> and South America,<sup>16</sup> studies report experiences of menopause are influenced by social structure, spiritual beliefs, cultural customs and language. While women experienced

similar symptoms across this myriad of contexts, some were unprepared for menopause.<sup>10 17</sup> Women described menopause variably, as a time when youthfulness, beauty, libido, fertility and good health are lost,<sup>12 15 16</sup> yet also as a time of gain that included cleanliness, no risk of pregnancy or need for contraception and increased social status.<sup>15</sup>

Globally, women are living longer and healthier lives,<sup>18</sup> thus it is important to understand women's experiences of menopause throughout the menopausal transition phase and beyond, to identify implications for women's health and well-being and to better inform health services. Reviews related to menopause have focused on: (i) symptoms,<sup>1 19–22</sup> (ii) the experiences of groups of women, including Indigenous women,<sup>23 24</sup> immigrant women,<sup>25</sup> working women,<sup>26</sup> women living in their country of origin,<sup>27</sup> Asian women living in Asia compared with those living in Western countries;<sup>28</sup> or have (iii) presented an international overview.<sup>29–31</sup> No known studies have compiled the literature on women's experiences of menopause from low-income countries (LIC) and middle-income countries (MIC) in the Asia Pacific region.

Our scoping review aims to identify and map the literature on women's experiences of menopause in LIC and MIC in this region to deepen our understanding of this life stage, identify gaps in the literature and inform research and health service delivery for women in the Pacific nation of Solomon Islands. Qualitative studies, or studies with a qualitative research component, will be included to gain insight into women's lived experiences of menopause. Our study team consists of researchers and women community leaders from Solomon Islands and Australia, both countries situated in the Asia Pacific region.

## METHODS AND ANALYSIS

A scoping review is a useful approach to examine key concepts and identify knowledge gaps in the existing literature.<sup>32</sup> Scoping review methods assist researchers to map evidence across broad areas including regional/country location and economic classification.<sup>33</sup> Scoping reviews are an effective tool to determine the nature of evidence that informs research and practice in a discipline area.<sup>34</sup> Our scoping review will follow guidelines established by Arksey and O'Malley,<sup>35</sup> and further developed by Levac *et al*<sup>36</sup> and the Joanna Briggs Institute (JBI).<sup>33</sup> Key components of the JBI scoping review guidelines include an outline of the review, inclusion criteria, search strategy, extraction, presenting and summarising the results and any potential implications of the findings for research and practice.<sup>34</sup> Reporting will follow the Preferred Reporting Items for Systematic Reviews and Meta-Analysis extension for Scoping Reviews (PRISMA-ScR) seven item checklist: (i) title; (ii) abstract; (iii) introduction; (iv) methods; (v) results; (vi) discussion and (vii) funding.<sup>32</sup>

## Stage 1: identifying the research question

The research question was identified as a result of our research on women's sexual and reproductive health in the Pacific.<sup>37–39</sup> Using an iterative process, our study team identified a broad research question defining the target population, concept and context to guide the focus, scope and intent of the review.<sup>33 36</sup> In conducting this scoping review, our research question is: What are women's experiences of menopause in LIC and MIC in the Asia Pacific?

## Stage 2: identifying relevant studies

The aim of the search is to identify papers using a qualitative approach that report on women's experiences of menopause in LIC and MIC settings in the Asia Pacific region. Initial searching of MEDLINE will be undertaken by an Australian researcher (KC) with access to a range of databases to identify papers on the topic of menopause. See online supplemental appendix 1, for example, MEDLINE search strategy. Subject headings and keywords describing the papers will be used to develop a full search strategy for MEDLINE, Cumulative Index for Nursing and Allied Health Literature (CINAHL), PsycINFO and Scopus, adapted for each database. The final search strategy will be reviewed by all authors. The search will not be restricted by time to include all relevant literature on the review topic. Searching commences in February 2022 with anticipated completion by May 2022. We will use the JBI population, concept, context (PCC) framework to guide inclusion criteria (table 1).

Papers that meet the following criteria will be included for full-text screening:

1. Be located in an LIC or MIC in the Asia Pacific region, as defined by the World Bank<sup>40</sup> and the Secretariat of the Pacific Community (SPC);<sup>41</sup>
2. Be related to women's experiences of menopause;
3. Have a qualitative research component, the research design most suited to telling lived experiences of individuals;<sup>42</sup> and
4. Be published in English in a peer-reviewed journal.

Due to the broad search strategy and anticipated number of retrievals, book reviews, commentaries, editorials, letters and grey literature will be excluded. However should findings be limited, research reports will be eligible and assessed for quality using the Critical Appraisal Skills Programme checklist.<sup>43</sup> Studies from Asia Pacific countries defined by the World Bank as having a high-income economy, studies on Asia Pacific women living in countries outside the region, and studies on non-Asia Pacific women living in Asia Pacific countries will also be excluded. A summary of inclusion and exclusion criteria is shown in table 2.

## Stage 3: study selection

Following the search, all identified citations will be collated and uploaded to EndNote 20 bibliographic software (Clarivate, USA). Duplicates will be removed. Identified citations will then be exported to a Microsoft Excel spreadsheet. Two independent reviewers, one from

**Table 1** Inclusion criteria using the Joanna Briggs Institute Population, Concept, Context framework

Population	Women experiencing at least one of the following stages of reproductive ageing: perimenopause, menopause or post menopause
Concept	Women's individual experiences or perspectives regarding menopause.
Context	Low-income and middle-income countries* in the Asia Pacific region: Afghanistan; American Samoa; Bangladesh; Bhutan; Cambodia; China; Cook Islands; Democratic People's Republic of Korea; Federated States of Micronesia; Fiji; India; Indonesia; Kazakhstan; Kiribati; Kyrgyz Republic; Lao PDR; Malaysia; Maldives; Marshall Islands; Mongolia; Myanmar; Nepal; Niue; Pakistan; Papua New Guinea; Philippines; Pitcairn Islands; Samoa; Solomon Islands; Sri Lanka; Tajikistan; Thailand; Tibet; Timor-Leste; Tokelau; Tonga; Turkmenistan; Tuvalu; Uzbekistan; Vanuatu; Vietnam; Wallis and Futuna.
Study type	Original and peer-reviewed research.

\*The World Bank classifies countries/economies by measuring gross national income per capita, in US dollars: low-income economies <US\$1045 or less; lower-middle income between US\$1046 and US\$4095; upper-middle income economies <US\$4096 and US\$12 695.<sup>53</sup>

Solomon Islands (RBH) and one from Australia (KC), will screen the title and abstract of citations against inclusion and exclusion criteria. Each study will be assessed as 'yes', 'no' or 'unclear'. The full text of papers assessed as potentially relevant with a 'yes' or 'unclear' will be retrieved and assessed against the inclusion criteria by two or more independent reviewers. Articles not available in full text will be noted. Reference lists of included papers will be screened for additional relevant studies. Disagreements between the reviewers at each stage of the selection process will be resolved through discussion, or with a third reviewer. The results of the search and the study inclusion process will be discussed by all authors

**Table 2** Inclusion and exclusion criteria

Inclusion criteria	Exclusion criteria
Studies located in an LIC and MIC in the Asia Pacific region	Studies on Asia Pacific women living in countries outside the region.
Studies related to women's experiences of menopause	Studies on non-Asia Pacific women living in Asia Pacific countries.
Studies with a qualitative research component	Studies from high-income Asia Pacific countries.
Studies published in English in peer-reviewed journals	Book reviews, commentaries, editorials, letters and grey literature.

LIC, low-income countries; MIC, middle-income countries.

**Box 1** Data extraction categories

1. Author(s).
2. Publication date.
3. Setting.
4. Aims.
5. Population/participants.
6. Methodology/methods.
7. Key findings related to the review question.

from Solomon Islands and Australia, reported in the final scoping review and presented in a PRISMA-ScR flow diagram.<sup>32</sup>

**Stage 4: charting the data**

Key bibliographic data including author, year of publication, location, study aims, participants, methodology/methods and key findings relevant to the research question will be extracted from the selected full-text papers and charted in an Excel spreadsheet. Charting will be an iterative activity with the spreadsheet refined by two or more team members to include additional data that best describes results relevant to the review question.<sup>33</sup> **Box 1** outlines categories for data extraction.

**Stage 5: collating, summarising and reporting the results**

Data from the selected studies will be collated and summarised in tabular format (see **box 1**). Scoping reviews aim to map existing evidence regardless of quality, therefore quality assessment will not be undertaken. Guided by the PCC framework, we will present findings as thematic narrative summaries related to the scoping review aim and question. Implications of the review findings for practice and future research will be discussed.

**Patient and public involvement**

No patient involved.

**ETHICS AND DISSEMINATION**

This scoping review reflects ethical principles of facilitating research in a Pacific setting, including respect for relationships, cultural protocols and processes,<sup>44</sup> reciprocity<sup>45-47</sup> and a holistic approach.<sup>48-49</sup> The research team comprises researchers from Solomon Islands, and researchers from Australia who have almost three decades of experience of living and working in the Pacific. Collaboration and community involvement are centred,<sup>50</sup> with a commitment to the principle of 'nothing about us without us'.<sup>51</sup>

Knowledge translation will initially be community-based where findings will be workshopped with women leaders and community members (women and men) in Solomon Islands. This will validate the scoping review findings in the local context and provide additional perspectives and insights. The locally-contextualised findings forming the review will be shared with health workers and researchers in Solomon Islands at local forums, regionally at Pacific



sexual and reproductive health forums and internationally at conferences and via a peer-reviewed publication. This approach will be supplemented with a plain language version of the findings in English and Kwaio languages, and through graphical representation using a local metaphor.<sup>52</sup>

This scoping review will identify gaps in the literature and provide a platform for further evidence-based research of women's experiences of menopause in Asia Pacific nations. The broader menopause study will provide local evidence to assist health service planning and delivery for women at all stages of the menopausal transition in Solomon Islands. Ethical approval for the study has been granted by Atoifi Adventist Hospital Ethics Committee, James Cook University Human Research Ethics Committee and submitted to the Solomon Islands Health Research and Ethics Review Board.

## LIMITATIONS

A limitation of this study is the application of findings in one context. Further investigation of the translatability of findings to other Asia Pacific contexts is needed.

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**Appendix 1:**Example MEDLINE search strategy

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1. Pacific Islands/
2. Melanesia/
3. Micronesia/
4. Polynesia/
5. Afghanistan/
6. American Samoa/
7. Bangladesh/
8. Bhutan/
9. Cambodia/
10. China/
11. "Democratic People's Republic of Korea"/
12. Fiji/
13. India/
14. Indonesia/
15. Kazakhstan/
16. Kyrgyzstan/
17. Laos/
18. Malaysia/
19. Mongolia/
20. Myanmar/
21. Nepal/
22. Pakistan/
23. Papua New Guinea/
24. Philippines/
25. Pitcairn Island/
26. Samoa/
27. "Independent State of Samoa"/
28. Sri Lanka/

29. Tajikistan/
  30. Thailand/
  31. Tibet/
  32. Timor-Leste/
  33. Tonga/
  34. Turkmenistan/
  35. Uzbekistan/
  36. Vanuatu/
  37. Vietnam/
  38. (afghanistan or "american samoa" or bangladesh or bhutan or cambodia or china or "cook islands" or "democratic people's republic of korea" or "north korea" or "federated states of micronesia" or fiji or india or indonesia or kazakhstan or kiribati or "kyrgyz republic" or kyrgyzstan or lao or malaysia or maldives or "marshall islands" or mongolia or myanmar or nepal or niue or pakistan or "papua new guinea" or philippines or "pitcairn island" or samoa or "solomon islands" or "sri lanka" or tajikistan or thailand or tibet or timor-leste or tokelau or tonga or turkmenistan or tuvalu or uzbekistan or vanuatu or vietnam or "wallis and futuna").mp
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  42. 1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22 or 23 or 24 or 25 or 26 or 27 or 28 or 29 or 30 or 31 or 32 or 33 or 34 or 35 or 36 or 37 or 38 or 39 or 40 or 41
  43. exp menopause/
  44. perimenopaus\*.mp
  45. postmenopaus\*.mp
  46. 43 or 44 or 45
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