

General Editor's Introduction

In its fourth issue, *Women's Health & Urban Life* journal, again brings four interesting studies on women's and girls varied health and well-being concerns from different parts of the world. Like we have seen in our previous publications, some health and well-being related problems which may not have been an issue in some populations before, may be increasingly becoming a health issue today (i.e., obesity). Again, some problems which may have existed but not necessarily problematized in remote parts of the world are now coming under the focus of a social and even global lens (i.e., hyperactivity). The link between occupations and women's health is transcending national boundaries, although it takes on unique manifestations in different parts of the world.

In the current issue, Nordin et al., address the relationship amongst work, physical activity and health prospects of women who are working in the Klang Valley, Malaysia. Nordin et al., first introduce a short but informative review of Malaysia's independence history and the dramatic change the shift to industrialization has engendered in the work process. The authors then focus on the increasing female workforce within such a change. Basically, rural women who once were physically active are increasingly being absorbed by burgeoning industries to do sedentary and tedious jobs. These industries offer attractive benefits to lure women. Amongst the numerous interesting findings of the study, what needs highlighting is the fact that the majority of the women workers are overweight or obese. What is also very interesting is that the benefits (free transportation, free or heavily subsidized meals, sweet condiments, etc.) that big corporations offer to lure new female workers into the workforce and/or to keep the already working women continue to work may be inadvertently contributing to their weight and health problems. Often, jobs in the developing world are an artifact of the first world's intense and unsatiable desire for electronic gadgets. What is interesting in the Malaysian case is populations from traditionally rural parts of the society where work involved heavy physical activity are now finding themselves in the production process that requires long periods of standing still or sitting down. Moreover, very few of these workers either find the time or energy to exercise. Counter-intuitively, the authors do not find too many statistically significant differences between those who exercise and those who do not. However, what needs to be stressed is that these workers are still relatively young women, already showing a high tendency for being over-weight/obese. They also report high anxiety levels. Their working

conditions most certainly pose a danger to their long-term health prospects while the capitalist process is only interested in luring them and usurping their labour.

Like Nordin et al., Barsky and Thorpe also explore the relationship between women's occupation and health. However, Barsky and Thorpe's primary focus is on menopausal life-cycle stages. Their sample consists of Registered Nurses (RNs) from a Western Canadian province. The authors start from a definition of health as a state of physical, emotional and social wellbeing, not simply a lack of disease. Then, they concentrate on how life-cycle stages of pre, peri and post menopause in this RN group correlate with their general health and with their organizational work experiences such as burnout, job involvement and hardiness. The results are intriguing. For example, a sizeable proportion (31%) of the respondents report chronic illnesses such as high blood pressure, arthritis, asthma, etc. The majority (84%) have undergone a surgical procedure such as tonsillectomy, appendectomy or hysterectomy, etc. In terms of their work experiences, 40.2% are classified as experiencing high burnout (reflected as lack of personal accomplishment, emotional exhaustion, etc.). Statically significant relationships were found between pre and post menopausal stages and health, while there were no significant findings relating to the peri menopausal group and their reported health. However, there were no statistically significant differences between menopausal life-cycle stages and burnout or job involvement or hardiness. It seems that respondents who had high job involvement or high hardiness (positive coping skills) managed to protect themselves from burnout. Yet, the authors point out that given the daily demands placed upon nurses' work settings, their constant coping efforts (hardiness) may be compromising their long-term health prospects. Authors also conclude that in order to understand women's health, we must listen to their own voices rather than subscribing to the negative connotations of women's life cycles perpetuated by biomedical models.

Al-Sharbati et al., are interested in teasing out the socio-cultural versus ecological factors behind expressions of hyperactivity in Omani schoolgirls. Originally situated in one of the poorest pockets of the middle-east, Oman has recently enjoyed a substantial boost in its standard of living due to its oil revenues. Girls have been a beneficiary of the rise in affluence and accompanying cultural and social shifts that have happened. As the authors suggest, currently, there is an unprecedented number of girls in the Omani school system. However, some scholars argue that every social change is accompanied by social costs. Authors

such as Melikian (1988) lament that education has replaced family ties, affluence has replaced frugality, and individualism has threatened father's supremacy within the home. Of course, these are nothing other than nostalgic yearnings for a purely patriarchal past. Nevertheless, there may indeed be social costs of the changes that are occurring in Oman, including an undesirable rise in hyperactivity levels of some girls (although these levels are still much lower than those observed in the west). However, given the fact that traditional and mostly patriarchal societies expect women/girls to be mild and docile, even the lower rates of observed hyperactivity may be detrimental in the Omani school system. Al-Sharbati et al., suggest that neither the school system nor the fabric of the Omani society may be ready for accommodating these girls' needs. Another way of interpreting what may be happening is that already existing, but originally socially hidden cases of hyperactivity (within homes) may now be displayed/observed in a much more public arena (schools). This may be particularly difficult for the girls, for their families and for the schools that are not prepared to accurately identify or effectively deal with hyperactivity. Therefore, the authors' concern is that hyperactive children who are not diagnosed early and who do not have access to treatment may be more likely to perform poorly at schools, drop out and/or erroneously get classified as mentally challenged. Although the percentage of hyperactivity seems to be lower amongst Omani girls than their U.S. or European counterparts, the fact that the expected behaviour from Muslim/Arab girls is much more rigidly defined brings an urgency to the matter. What Al-Sharbati et al., do not discuss is whether the rigid 'docility' expectations from Omani girls also need to be a little more relaxed to keep pace with the changing times.

Erkan's paper is about violence against women in a remote part of Turkey that seems not to have benefited from the secularization and modernization of the Turkish Republic at large. Where norms and traditions rigidly control women's choices, freedoms, movement and sexuality, what happens to women who experience abuse by their husbands and by their extended family members? A local, grass-roots level NGO (Ka-Mer), seems to provide women a glimpse of hope. Despite the strong taboos against publicizing family related issues, over 1000 local women have sought help from this NGO and 164 women have established links with Ka-Mer that are more continuous and permanent. These 164 women form Erkan's sample. They are mostly young, generally very poor and mostly illiterate. Despite their young ages, many already have numerous children. They report severe, systematic abuse from mostly their husbands, but also from numerous male extended family

members. Some of their female kin, like mothers-in-law and sisters-in-law, also abuse them. Many report repeated hospitalizations due to abuse. What is interesting in the study is Ka-Mer's attempt to approach the dilemmas these women face through concentrated efforts to make them economically self-sufficient and ideologically stronger. By providing a sheltered environment to introduce them to paid work and by providing child-care, Ka-Mer carves out a small path out of the suffocating conditions of poverty, patriarchal control and abuse. By learning new skills, by taking the first steps towards literacy, and by being exposed to other women who have experienced similar difficulties, helpless victims of abuse are slowly transformed into social agents of their own lives.

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