



The Lived Experiences of Married Women's Psychological Well-Being with Polycystic Ovarian Syndrome

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Abstract

This study explores the lived experiences of married women and their psychological well-being while navigating life with Polycystic Ovarian Syndrome (PCOS). PCOS is a chronic condition that affects many aspects of a woman's life, including physical health, emotional stability, and interpersonal relationships. Using a qualitative phenomenological approach, this research delves into the personal stories of five married women diagnosed with PCOS. Data were gathered through in-depth interviews, revealing themes of emotional distress, self-esteem challenges, marital dynamics, and coping mechanisms. The findings indicate that PCOS significantly impacts psychological well-being, often leading to feelings of frustration, anxiety, and self-doubt. Despite these challenges, participants shared various strategies for resilience, such as seeking social support, engaging in lifestyle modifications, and fostering open communication with their partners. This study highlights the need for holistic support systems and tailored interventions to improve the psychological health of women managing PCOS. These insights aim to guide healthcare providers in offering compassionate care and fostering awareness about the multifaceted effects of PCOS on women's lives.

Keywords: Polycystic Ovarian Syndrome, Married Women, Psychological Well-being, Mental Health, Emotional Support, Coping Mechanisms, Quality of Life

1. Introduction

Polycystic Ovarian Syndrome (PCOS) stands as a significant health concern affecting women worldwide, presenting a constellation of physical, emotional, and reproductive challenges. In the Philippines, there were an estimated 4.5 million Filipinas diagnosed with Polycystic Ovarian Syndrome (Plume, 2022) ^[8].

Polycystic Ovary Syndrome (PCOS) is a hormonal disorder. It is characterized by the presence of multiple cysts on the ovaries, irregular menstrual cycles, and elevated levels of male hormones (Witchel, 2019) ^[11].

In line with the article by John Hopkins Medicine (2023) ^[5], the exact cause of Polycystic Ovarian Syndrome (PCOS) remains unidentified, leading to the consideration of multiple contributing factors. Numerous factors influencing the prevalence of PCOS include hormonal imbalances, excess body weight, and lifestyle choices. The manifestations of PCOS are primarily due to alterations in hormone secretion. Specifically, insulin resistance leads to an overproduction of androgens, which are precursors to the reproductive hormones' estrogen and testosterone.

Additionally, excessive body weight exacerbates insulin dysregulation, further contributing to the symptoms. Besides, genetics and familial history play a significant role in the development of PCOS, as it often occurs in blood relatives such as mothers, aunts, sisters, and daughters. Symptoms of Polycystic Ovarian Syndrome (PCOS) encompass irregular menstrual cycles, alterations in hair growth and skin condition, and emotional fluctuations. Additionally, PCOS is often associated with other health issues, including poor sleep patterns and insulin-related disorders.

PCOS is a condition that affects more women of reproductive age than ever before and has lifetime implications. The imprecise diagnostic criteria and enormous intricacy of this syndrome's characteristics make it one of its most challenging elements. Future studies on the genetics and pathophysiology of PCOS will be necessary to identify effective prevention strategies and therapeutic approaches (Barthelmess *et al.*, 2014)^[1]. One of the many effects of PCOS that is frequently overlooked but has a significant impact on family dynamics and marriage dynamics is the condition. Intimate relationships, ambitions for conception, and social expectations collide with health issues in a complex landscape that married women with PCOS must navigate.

In a psychological context, the undesirable physical side effects of PCOS are mainly directed to the possibility of being labeled as infertile, causing the majority of their respondents to feel "stigmatized." They thought they were being robbed of their self-concept, the essence of being feminine and attractive (Chaudhari *et al.*, 2018)^[2].

Simon (2023) stated in his study that it focuses on psychological and psychosocial aspects of PCOS. Women diagnosed with PCOS often experience psychological concerns such as depression, anxiety, eating disorders, decrease in self-esteem and quality of life. Depression and anxiety are widespread in women with PCOS, and discuss how these mental health conditions are often ignored and, therefore, left untreated. PCOS is associated with several mental health issues in addition to its physical symptoms. Women who have PCOS experience severe challenges to their metabolic and psychological well-being, as well as difficulties with fertility as they age (Saddeeqa, 2018)^[9]. Married women struggling with PCOS find themselves navigating a complex terrain where health concerns intersect with intimate partnerships, fertility aspirations, and societal expectations affecting their psychological well-being.

Coping strategies play a critical role in how married women with PCOS manage the challenges posed by the condition. Emotional, social, and practical coping mechanisms can either lessen or increase the psychological toll of PCOS, making it essential to understand these strategies in the context of their lived experiences.

By analyzing the coping strategies and psychological well-being, this qualitative research aims to embark on a journey into the lived experiences of married women's psychological well-being with PCOS, seeking to unravel the intricate interplay between psychological well-being and the physical effect of PCOS within the context of marriage.

Currently, only a limited amount of research is being done regarding the psychological experiences of women with PCOS. Thus, the findings of this study will contribute to the existing literature by providing valuable insights into the personal and social dimensions of living with PCOS as a married woman.

It is of the utmost importance to examine marital satisfaction in relation to Polycystic Ovarian Syndrome (PCOS), given the substantial implications it has on the coping strategies and support networks accessible to women afflicted with the condition. Marital relationships frequently function as fundamental support systems, offering practical assistance, psychological support, and emotional support. Intimate

partnerships may be strained for married women with PCOS due to the condition's multifaceted effects on physical health, emotional well-being, and reproductive capabilities. Gaining insight into the reciprocal relationship between these challenges and marital satisfaction can shed light on potential avenues for developing more efficient support systems, thereby bolstering the overall coping capabilities of these women. Through an examination of the intricacies of marital dynamics impacted by polycystic ovary syndrome (PCOS), this study aims to discern pivotal elements that foster a robust and encouraging partnership, a condition that is critical for alleviating the detrimental consequences of the syndrome.

Additionally, an analysis of marital satisfaction provided valuable perspectives on the broader social and psychological aspects of PCOS living. Better mental health outcomes are frequently associated with marital fulfillment, which can be especially advantageous for women who are grappling with the anxiety, depression, and self-esteem challenges that are frequently linked to polycystic ovary syndrome. Examining how marital relationships can be cultivated and fortified while contending with this persistent ailment could unveil approaches that enhance the affected individuals' standard of living and fortify their psychological fortitude. The implications of these results extend to community support programs, marital counseling, and therapeutic approaches, all of which contribute to a greater comprehension of the relationship between psychological well-being and marital satisfaction in the context of PCOS.

2. Methodology

A. Research Design

A qualitative phenomenological approach was employed in the study. The research focused on the lived experiences of married women with polycystic ovarian syndrome (PCOS). Qualitative research explores individuals' perceptions, observations, and personal judgments on various issues. By addressing "how" and "what" research questions, it offers a profound understanding of experiences, phenomena, and context. This approach allows researchers to pose questions without straightforward numerical answers, aiding in a deeper comprehension of human experiences. Understanding the practical implications of social phenomena and studying real-life applications of significant issues are crucial to expanding knowledge in qualitative research (Cleland, 2017, cited by Ababneh, 2024)^[3].

The researchers employed a phenomenological approach to provide an in-depth understanding of a phenomenon experienced by a particular group. Phenomenology is valuable for understanding the subjective experiences of individuals, including the complex impacts of conditions like PCOS. It allows researchers to explore experiences from the women's perspectives, gaining insight into the challenges faced by married women diagnosed with PCOS. Phenomenology emphasizes understanding the personal meaning individuals attach to experiences, which is crucial in the context of PCOS, where women may experience a range of emotions. Overall, phenomenology provides a holistic understanding of individuals and their lived experiences, shedding light on their challenges and strengths in coping with PCOS (Creswell, 2013)^[4].

B. Research Locale

The research study was conducted in the City of Cabuyao, Laguna. Known as "The Enterprise City of the Philippines," Cabuyao offers abundant business opportunities. It is located approximately 54 kilometers from Santa Cruz, the provincial capital, and 9 kilometers from Calamba City, the regional center of Calabarzon. The city is also one of the wealthiest local government units in the country due to the large number of immigrants working there.

C. Population and Sampling

The researchers used the purposive sampling strategy in their data gathering methodology. This strategy relies on the researcher's expertise in selecting participants, situations, or events that provide significant information to achieve the study's objectives (Nikolopoulou, 2022) ^[7]. Upon analysis, this method was deemed appropriate for choosing participants who could make significant contributions. The researchers also used snowball sampling. Snowball sampling is useful for gathering data on people with specific characteristics who are hard to locate, such as those with rare health problems, which this study focused on (Nikolopoulou, 2022) ^[7]. The researchers sought the aid of participants to recommend others. They looked into five Filipino married women dealing with the challenges of polycystic ovarian syndrome while residing in Cabuyao, Laguna.

D. Research Participants

The researchers chose five married women with PCOS residing in Cabuyao, Laguna, as the primary participants for this study. According to Molero *et al.* (2016), as cited by Mongrandi, P. A. (2020), long-term marriage is a minimum of three to five years. In addition to their marital status, these participants had firsthand experience living with PCOS and navigating its physical, emotional, and social challenges within the context of their marriages. The study aimed to delve deeply into their daily lives, exploring the multifaceted impact of PCOS on their relationships with their spouses, their well-being, and their coping strategies.

The inclusion criteria are five participants who had been married for three to five years and resided in Cabuyao, Laguna. They had a confirmed diagnosis of PCOS with experience of treatment. They were willing to share their personal experiences related to living with PCOS, including its physical, emotional, and social aspects. Additionally, participants provided informed consent to participate in the study.

Exclusion criteria applied to women who were ineligible to participate in the study, women who were not married or had been married for less than two years, women who did not reside in Cabuyao, Laguna, women who did not have a confirmed diagnosis of PCOS, participants who were unwilling or unable to share their personal experiences related to PCOS, and participants who did not provide informed consent. By adhering to these inclusions and exclusions, the study aimed to ensure that the study focused specifically on the target population, thereby enhancing the validity and reliability of the findings.

E. Research Instrumentation

In-depth interviews were conducted with participants in a private and confidential setting, allowing them to share experiences openly. The interviews were semi-structured, guided by open-ended questionnaires comprising ten (10) questions designed to explore aspects of participants' lived experiences with PCOS, including lifestyle, challenges, and coping strategies. They were composed of five "what" and five "how" questions. Interviews were audio-recorded with participants' consent and transcribed verbatim for analysis.

The research instrument was subjected to a comprehensive validation process. Experts from the College of Arts and Sciences and outside the University of Cabuyao were recruited to verify the interview questions. These individuals had a comprehensive understanding of the subject matter, guaranteeing their capacity to evaluate the instrument. Their credentials and experiences enabled them to assess the queries in terms of clarity, pertinence, and suitability. The validators examined each interview question to ensure it covered the desired facets of the lived experiences of married women with PCOS.

Experts also identified potential biases, ambiguities, or cultural insensitivities that could compromise data reliability. Feedback was evaluated and integrated into the interview questions. This iterative procedure improved the instrument's precision, relevance, and alignment with the research goals. Ethical considerations, including confidentiality and informed consent, were maintained during validation.

Assessment of the instrument's authenticity by professors and experts guaranteed it depicted the realities faced by married women with PCOS, bolstering methodological rigor and validity. Data analysis followed a thematic approach involving multiple transcript readings, coding, and identifying recurring themes. Member checking ensured the accuracy and validity of findings. Results were interpreted within the context of relevant literature to provide insights and inform recommendations. Ethical considerations, such as informed consent and confidentiality, were carefully addressed.

F. Data Gathering Procedure

The research procedure involved several critical steps to ensure a thorough, ethical, and systematic method for collecting and analyzing qualitative data. The researchers began with the formulation of interview questions. The questions aligned with the research objectives and theoretical framework, specifically based on the Ryff Scales of Psychological Well-Being. Once the questions were formulated, the researchers proceeded to the validation of the instrument. The validation process involved verifying the questions were reliable and valid. Methods included expert reviews and revisions based on feedback.

Following validation, the researchers distributed the informed consent form to selected participants. The form explained the study's purpose, potential risks, and benefits, emphasizing the voluntary nature of participation. This step was foundational to ethical obligations, respecting participants' rights and ensuring informed decision-making. The researchers then collected the signed forms, confirming participants' agreement. With consent obtained, the researchers conducted interviews with each participant. This phase involved gathering qualitative data,

forming the core of the study.

The following step was the in-depth analysis of the data. This process involved systematically examining the data to identify patterns, themes, and insights. Coding and thematic analysis were employed. The researchers conducted data coding and theme formulation after the analysis. This step involved categorizing data into specific codes and themes based on recurring patterns and significant statements.

Finally, the researchers constructed narratives based on emerging themes. These narratives captured the essence of the themes identified during analysis, presenting the findings coherently. By organizing these steps, the researchers ensured the study was conducted systematically, ethically, and thoroughly. In doing so, they produced reliable and meaningful findings that contributed insights into the lived experiences of married women's psychological well-being with polycystic ovarian syndrome (PCOS).

H. Ethical Consideration

The research study adhered strictly to established ethical guidelines to ensure compliance with approved research ethics standards. The researchers followed the provisions of Republic Act No. 10173, also known as the Data Privacy Act of 2012 of the Philippines, which ensures the safety of individuals' personal information and mandates that data controllers, including researchers, adhere to principles of transparency, legitimate purpose, and proportionality in handling personal data. Informed consent was obtained from all participants, ensuring that they were fully aware of the research purpose, procedures, and benefits.

Participants were informed of their right to decline or withdraw from the study at any stage without penalty. To maintain confidentiality and anonymity, all data were securely stored and managed with safeguards to prevent unauthorized access, disclosure, or misuse. This included encryption, secure storage, and limiting data access to authorized personnel. Identities were anonymized in all reports and publications. Participants' personal information was shared with third parties only with explicit consent and in compliance with data protection laws. Throughout the research, the dignity, autonomy, and welfare of participants were respected, and participation was entirely voluntary.

3. Results and Discussions

This chapter presents the results, analysis, and interpretation of the data gathered by the statement of the problem presented in Chapter 1 of the study. The participants' statements were analyzed and categorized to uncover themes that reflect their

lived experiences. Additionally, this chapter provides insights into the psychological well-being of the participants as married women with PCOS.

The results and discussion of the findings are presented in three parts. The first part deals with the Demographic Profile of the Participants, highlighting their background and experiences with PCOS. The second part contains the superordinate themes and constituent subthemes, which were derived from the clustered responses of the participants. The third part focuses on the emerging implications of these themes and the overall contribution of this study to addressing the challenges faced by women with PCOS.

Table 1: Demographic Profile of Participants

Participant Code	Age	Years Married	Years of Living with PCOS
P1	28	5	10
P2	30	4	10
P3	22	3	6
P4	29	4	3
P5	33	5	5

Table 1 presents the demographic details of the five married women selected for the study, all living with polycystic ovary syndrome and residing in Cabuyao, Laguna. A unique code for anonymity identified each participant. The table provided their ages, ranging from twenty-two to thirty-three years, and the years each had been living with PCOS. The years of living with PCOS varied among participants, with durations from three to ten years. This selection helped focus on a range of experiences among married women with PCOS, enhancing the study's relevance and validity. This diverse range of ages and durations provided a comprehensive view of how PCOS impacted married women in this specific locality.

In this research, there are 10 clustered superordinate themes that discuss the overall lived experiences of married women's psychological well-being with polycystic ovarian syndrome, namely: (1) Emotional and Psychological Impact of PCOS; (2) Mental Health Challenges Related to PCOS in Marriage; (3) Impact of PCOS on Marital Satisfaction and Interpersonal Relationships; (4) Perceived Benefits of Professional Counseling for Women with PCOS; (5) Confidence and Self-Esteem Building Activities for Women with PCOS; (6) Lifestyle Modifications for Managing PCOS Symptoms; (7) Managing PCOS Symptoms While Maintaining Routine; (8) Importance of Education and Awareness for Empowering Women with PCOS; (9) Obstacles in Accessing Healthcare for PCOS; and (10) Influence of Societal Expectations and Familial Pressures on PCOS Management..

Table 2: Description of Emotional and Psychological Impact of PCOS

Superordinate Theme: Emotional and Psychological Impact of PCOS	
Subordinate Themes	Summary
Unpredictable Emotional States	Participants described experiencing unpredictable emotional states due to PCOS, such as mood swings and emotional instability.
Psychological Strain of Infertility Concerns	Participants expressed psychological strain due to infertility concerns related to PCOS, such as feelings of sadness, jealousy, and longing when seeing others pregnant.

Married women with PCOS are greatly influenced emotionally and psychologically by the symptoms and problems related to the condition. Due to hormonal fluctuations, they experienced highly unpredictable emotional states. Fluctuating moods, from irritability to deep sadness, were common. Another emotional

burden was the psychological strain of infertility concerns. Most women diagnosed with PCOS had difficulty conceiving, which was a major concern. They also reported feelings of jealousy and desire when seeing others pregnant, especially because children are culturally expected.

Table 3: Description for Mental Health Challenges Related to PCOS in Marriage

Superordinate Theme: Mental Health Challenges Related to PCOS in Marriage	
Subordinate Themes	Summary
Feelings of Inadequacy and Guilt	Participants felt inadequate and guilty about not being able to conceive, fearing rejection or abandonment by their partners.
Support and Understanding from Partner	Participants appreciated the support and understanding from their partners, which helped them cope better with their condition.

In marriage, PCOS may cause mental health issues for the couple. Reported effects included feelings of inadequacy and guilt for not meeting cultural mandates like childbearing. However, several participants found solace through caring and

accepting partners. Spousal support played a crucial role in handling the emotional and psychological demoralization caused by PCOS.

Table 4: Description for Impact of PCOS on Marital Satisfaction and Interpersonal Relationships

Superordinate Theme: Impact of PCOS on Marital Satisfaction and Interpersonal Relationships	
Subordinate Themes	Summary
Decreased Intimacy and Self-Worth	Participants reported a decrease in marital intimacy and a loss of self-worth, feeling inadequate for not being able to conceive, which strained their relationships.
Supportive Relationships	Some participants highlighted the importance of open communication and support from their spouses, which positively impacted their relationships despite the challenges of PCOS.

The psychological and emotional challenges of PCOS affect marriage and interactions with spouses and others. Pain impacts intimacy and reduces overall self-worth. Infertility is painful due to hormonal changes causing low libido. These intimacy issues can affect marital relationships. Some participants noted benefits from supportive relationships. Research shows women

with PCOS need open communication and emotional support from partners. Spousal support promotes emotional adaptation to PCOS, regardless of appearance. Emotional benefits from positive spousal support contribute to emotional strength and marital happiness.

Table 5: Perceived Benefits of Professional Counseling for Women with PCOS

Superordinate Theme: Perceived Benefits of Professional Counseling for Women with PCOS	
Subordinate Themes	Summary
Emotional Support and Guidance	Participants expressed that professional counseling provides emotional support and guidance, helping them manage the emotional challenges associated with PCOS.
Understanding and Information	Participants highlighted the benefit of receiving accurate information and understanding about PCOS from professionals, which aids in better managing their condition and emotional well-being.

Participants attributed professional counseling as a source of emotional support and guidance, enabling women to handle the emotional implications of PCOS. These responses emphasize the benefits of counseling in addressing psychological effects of PCOS by providing crucial advice and emotional assistance.

Participants also mentioned the availability of accurate information and better understanding of PCOS from professionals. Counseling improves patients' health by facilitating the management of their condition.

Table 6: Confidence and Self-Esteem Building Activities for Women with PCOS

Superordinate Theme: Confidence and Self-Esteem Building Activities for Women with PCOS	
Subordinate Themes	Summary
Physical Wellness and Self-Care	Participants mentioned that physical wellness activities such as regular exercise and self-care routines help in boosting their confidence and self-esteem.
Community and Spiritual Support	Participants emphasized the importance of community support groups and spiritual practices in enhancing their confidence and self-esteem, providing a sense of belonging and understanding.

Participants recognized physical wellness activities, such as exercising and self-care, as useful for increasing confidence and self-esteem. They also acknowledged the role of community

support systems and spirituality in improving their confidence and self-esteem.

Table 7: Description for Lifestyle Modifications for Managing PCOS Symptoms

Superordinate Theme: Lifestyle Modifications for Managing PCOS Symptoms	
Subordinate Themes	Summary
Dietary Changes	Participants mentioned dietary changes such as reducing inflammatory foods, less rice, and incorporating fasting to manage PCOS symptoms.
Stress Management and Physical Activity	Participants emphasized the importance of stress management techniques like breathing exercises and meditation, as well as regular physical activity to alleviate symptoms of PCOS.

Many participants made major diet and lifestyle changes to reduce the effects of PCOS, including avoiding inflammatory foods, rice, and fasting. One participant reduced dairy consumption because it aggravated inflammation and worsened her PCOS. These dietary changes were seen as crucial for regulating hormones and improving bodily conditions. Participants also emphasized stress control and physical activity

alongside nutrition for managing PCOS. Some found programs like deep breathing and meditation helpful in reducing emotional burden. Others noted that incorporating physical activity into daily routines improved mood and health. These activities helped decrease symptoms, improve outlook, and influence hormonal balance. Supporting studies also highlight stress management and exercise for PCOS symptoms.

Table 8: Description for Managing PCOS Symptoms While Maintaining Routine

Superordinate Theme: Managing PCOS Symptoms While Maintaining Routine	
Subordinate Themes	Summary
Dietary and Supplement Strategies	Participants managed PCOS symptoms by following dietary guidelines, avoiding inflammatory foods, taking prescribed medication, and prioritizing healthy eating habits.
Physical Activity and Emotional Management	Participants integrated physical activity into their daily routines and employed emotional management strategies to maintain their well-being and manage PCOS symptoms effectively.

Participants described several self-treatment strategies for PCOS symptoms through diet and supplements. Most identified maintaining a proper diet as a focal daily rehabilitative activity, avoiding foods causing discomfort. Many dietary strategies were informed by research on PCOS management. They also

emphasized that physical activity and emotional management are crucial for managing PCOS symptoms alongside work. Most participants continued practicing physical exercise despite tight schedules. Research shows physical exercise and emotional coping strategies promote better health for women with PCOS.

Table 9: Importance of Education and Awareness for Empowering Women with PCOS

Superordinate Theme: Importance of Education and Awareness for Empowering Women with PCOS	
Subordinate Themes	Summary
Reducing Stigma and Misconceptions	Participants believe that increased education and awareness about PCOS help reduce stigma and misconceptions, leading to a more supportive and understanding environment for women with PCOS.
Providing Support and Understanding	Participants indicated that education and awareness provide essential support and understanding, helping women with PCOS accept their condition and find the necessary resources and support systems.

Participants understood that raising education and awareness about this disease decreases stigma and misconceptions, which is important for the well-being of females with PCOS. By raising awareness, people's perceptions about PCOS change, and society becomes more understanding of women with this condition. Education interventions may decrease stigmatized attitudes that lead to poorer psychosocial functioning and less help-seeking in women with PCOS. They also noted advocacy

as the support and education umbrella; these help women with PCOS accept their condition and direct them where to find help. Education on issues such as AIDS tries to reduce isolation and ensures people gain accurate information, improving acceptance. Awareness campaigns might offer useful tools and knowledge focusing on proper PCOS management and enhance self-efficacy and overall health outcomes.

Table 10: Obstacles in Accessing Healthcare for PCOS

Superordinate Theme: Obstacles in Accessing Healthcare for PCOS	
Subordinate Themes	Summary
Financial Constraints	Participants highlighted financial constraints as a major obstacle in accessing healthcare services for managing PCOS, emphasizing the high cost of checkups, medication, and treatments.
Limited Coverage and Accessibility	Participants pointed out the limited coverage and accessibility of healthcare services for PCOS, mentioning the lack of specialized care in public hospitals and challenges with health card approvals for necessary procedures.

Much of the participants in this study identified financial constraints as a major issue hindering them from accessing health services to manage PCOS. According to the participants, costs of medical consultancies, treatment, medications, and diagnostic commodities such as transvaginal ultrasounds are unaffordable. The long-term costs of managing their health are continuing challenges, unaffordable by married women. Research has revealed that the extended burden of managing chronic disorders including PCOS delays women from seeking care. Further, there are few facilities offering cheap or free health care to women suffering from chronic diseases like PCOS. From the participants' narrative, the authors encourage

healthcare policies focused on making PCOS treatment cost-effective; prescribing contraceptives at favorable prices or making essential diagnostic techniques cheaper to avoid compromising women's financial status. The second challenge highlighted by participants is access to specialized treatment for PCOS in public health care networks. Most public hospitals do not provide treatment for PCOS, *let alone* specialized treatment. Services like blood tests are compensated under public health plans. Many women are forced to seek treatment in private facilities where charges are steep and unaffordable. The Philippines has failed to provide PCOS-specific care in the public health system, which many countries also have failed to offer.

Table 11: Influence of Societal Expectations and Familial Pressures on PCOS Management

Superordinate Theme: Influence of Societal Expectations and Familial Pressures on PCOS Management	
Subordinate Themes	Summary
Societal Expectations for Motherhood	Participants described the pressure from societal expectations for motherhood as a significant stressor, particularly the expectation to have children, which adds to their emotional burden.
Negative Impact of Familial and Social Comments	Participants shared the negative impact of familial and social comments, explaining that such remarks can lead to stress and depression, exacerbating their emotional struggles related to PCOS.

The participants' experience points to the fact that the societal expectation of motherhood is a severe stressor for many women with PCOS. In many cultures, Filipino culture puts significant emphasis on women to have children, most preferably within marriage, which puts more pressure on women diagnosed with PCOS. This expectation can worsen feelings of guilt, incompetence, and provocative emotions for women with factors such as infertility. Social expectations for women to conform to traditional gender roles such as motherhood act as a precursor to aggravating psychological disorders among women with reproductive health disorders like PCOS. The pressure to fit into these societal norms puts the patient in a position of ADS and reduced sexual self-esteem, making the management of the condition more challenging. Familial and social remarks about their capability to procreate also influence participants' psychological status. Participants spoke of situations where their families or their partners' families said insensitive or painful things regarding fertility. Stress may affect their physical health in ways that challenge efficient PCOS management. Research has shown that social rejection through scornful and embarrassing comments from family and friends causes emotional strain in women with chronic illnesses. This means family members and friends of women with PCOS should be taught about the condition to avoid worsening the situation by enforcing cultural behavior that discourages women with this condition from seeking proper medical care. Educational programs including the patient and her relatives could improve knowledge about PCOS since these individuals are most affected emotionally.

4. Discussion

The discussion of this research presents the developing themes based on the responses and narratives of married women with Polycystic Ovarian Syndrome (PCOS):

Emotional and Psychological Impact of PCOS

This research found that the participants experienced

unpredictable emotional states due to the hormonal imbalances associated with PCOS. Mood swings and emotional instability were shared experiences, which were often triggered by fluctuations in their hormones. Furthermore, infertility concerns contributed to significant psychological strain, with many participants expressing feelings of inadequacy, sadness, and distress related to their inability to conceive.

Mental Health Challenges Related to PCOS in Marriage

This research found that participants faced significant mental health challenges in their marriages, stemming from feelings of inadequacy and guilt, especially about the societal expectation of motherhood. The condition's impact on their self-esteem further exacerbated these emotional burdens. However, participants noted that emotional support from their spouses played a crucial role in helping them cope with these difficulties.

Impact of PCOS on Marital Satisfaction and Interpersonal Relationships

This research found that PCOS negatively impacted marital satisfaction, particularly in terms of intimacy. Participants reported feelings of unattractiveness and decreased self-esteem, which affected their sexual relationships. Despite these challenges, supportive relationships with their spouses helped maintain emotional closeness and marital satisfaction.

Perceived Benefits of Professional Counseling for Women with PCOS

This research found that professional counseling provided significant emotional support for the participants. Many of them expressed that counseling helped them process their emotional struggles, offering coping mechanisms for dealing with the psychological impact of PCOS. Additionally, counseling provided an opportunity for participants to learn more about their condition and the various ways to manage its effects on their well-being.

Confidence and Self-Esteem Building Activities for Women with PCOS

This research found that physical wellness activities, such as exercise and self-care routines, were necessary to rebuild participants' confidence and self-esteem. These activities not only improved physical health but also positively impacted their emotional well-being. Furthermore, participants mentioned that community and spiritual support significantly boosted their confidence and self-worth.

Lifestyle Modifications for Managing PCOS Symptoms This research found that participants implemented various lifestyle changes to manage the symptoms of PCOS. Dietary changes, stress management, and regular physical activity were key strategies identified by the participants for improving their physical and emotional health. These modifications helped them cope with the physical symptoms of PCOS, including weight gain and hormonal imbalances.

Managing Symptoms While Maintaining Routine

This research found that balancing daily routines with the management of PCOS symptoms was challenging for participants. Despite these challenges, participants found that structuring their routines, planning meals, and maintaining consistent physical activity helped them manage their symptoms while keeping up with daily responsibilities.

Importance of Education and Awareness for Empowering Women with PCOS

This research found that participants identified a significant need for education and awareness about PCOS for themselves and their communities. Many participants reported a lack of knowledge about the condition, which contributed to feelings of isolation and stigma. Raising awareness about PCOS in society and providing education about the condition could reduce misconceptions and support women in managing their health.

Obstacles in Accessing Healthcare for PCOS

This research found that financial constraints and limited access to healthcare services were significant barriers to managing PCOS. Participants expressed frustration with the high treatment costs, medications, and consultations. These financial and logistical challenges made it difficult for participants to seek their needed care.

Influence of Societal Expectations and Familial Pressures on PCOS Management

This research found that societal expectations, particularly regarding motherhood, contributed to significant emotional stress for the participants. Negative comments from family members about their condition further compounded feelings of inadequacy. Participants expressed a desire to challenge these societal pressures and shift attitudes towards PCOS.

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