Older Sikh women want to take charge of their bladder health, but cultural beliefs and silence can limit informed care.

Culturally sensitive, personalized UI support can bridge knowledge gaps and empower older Sikh women.

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www.ics.org/2026/abstract/367

UNIVERSITY OF ALBERTA

Background

Help-seeking and management for Urinary Incontinence (UI) can be influenced by social, cultural, and psychological factors. Despite research exploring culturally sensitive healthcare within Sikh communities, little is known about UI among older Sikh women. Understanding their perspectives is essential for developing culturally sensitive and relevant UI support.

Methods

Participants
Community-dwelling older Sikh women (≥55 years)

Recruitment
Convenience and snowball sampling

Interviews
Semi-structured – in-person – private – in Punjabi (translated to English)

Analysis
Conventional content analysis

Results

11 Sikh women Aged **55 – 75** All born in **India**

6 had UI - 10 lived in **multi-generational houses**

Diverse educations and occupations

Have agency over my health

"We can look at Facebook, there is the Goyle doctor, he tells us. We all look at Facebook.."

Perceptions of UI and its management

"I don't know how to fix this condition, I will say, my wish is for God to not make anyone experience this condition, it is very bad."

Lack of conversation

"With kids we don't mind so much, because we expect it. Like with kids there is also a smell if we don't keep them clean, but with older adults it's too much."

Discussion and next steps

Diverse perceptions of UI and its management were shaped by cultural beliefs and limited access to informed evidence.

These findings highlight an important opportunity to design culturally sensitive programs for UI, tailored to the specific needs of this community.