



## DESCRIPTIVE STUDY TO ASSESS THE KNOWLEDGE REGARDING MENOPAUSE AMONG MENOPAUSAL WOMEN IN SELECTED AREAS OF NURPUR, DISTT. KANGRA.

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**ABSTRACT**

The flower that blooms today will fall off tomorrow, the leaf that looks green today will get dried off, so with the humans. Human beings experience various turning points in their life cycle which may be developmental or transitional. Menopause is the physiologic cessation of menses associated with declining ovarian function. For this study Descriptive research design was used. The study was conducted on conveniently 80 perimenopausal women in selected areas, Nurpur. Data was collected by socio-demographic variables and self-structured knowledge questionnaire. Collected data was analyzed by inferential and descriptive statistics. Tables and bar diagrams were used to depict the findings. The findings depicted that 52(65%) had good knowledge followed by 16(20%) subjects had average knowledge, 11(13.75%) had excellent knowledge and only 01 (01.25%) had poor knowledge. There was statistically significant association of education and source of information with knowledge of perimenopausal women regarding menopause depicts that it had impact on knowledge of perimenopausal women regarding menopause. There was statistically non-significant association of age, religion, occupation, family income, marital status and type of family with knowledge of perimenopausal women regarding menopause at  $p < 0.05$  level.

**KEYWORDS :** Knowledge, Menopause, Perimenopausal women.**INTRODUCTION:**

**“The Journey of a thousand miles begins with but a single step.”**

Every living thing in nature is susceptible to changes. The flower that blooms today will fall off tomorrow, the leaf that looks green today will get dried off, so with the humans. Human beings experience various turning points in their life cycle which may be developmental or transitional.

Women have been intimately connected with the natural ebb and flow of human life and that of the natural world around them since primordial times. By tradition, most of the life cycle from birth to death, has been in their caring hands, as bearers of life, as nurturers of the children, and as everyday caregivers of the sick and dying. Women's individual bio-physiological and developmental changes occur simultaneously to that of the life cycle of the community. Whether women have been conscious or not of their individual biological processes, there were and there are natural changes constantly occurring within their body throughout their life time.<sup>1</sup>

Menopause is a natural process that occurs in women's lives as part of normal aging. Many women go through the menopausal transition with few or no symptoms, wholesome have significant or even disabling symptoms.<sup>2</sup>

A North American Menopause Society survey (2010) found that United States midlife women are divided in their opinions of menopause. Some consider it a medical condition requiring treatment, while others view it as a natural transition that should be managed by natural means. Another survey found that women want more information about menopause, but that their major source of information is consumer magazines, not their healthcare providers. This survey also found that women have serious misunderstandings about their health risks after menopause.<sup>3</sup>

In India, there is no current health program that caters the specific reproductive health needs of aging women. Moreover, recently launched reproductive and child health II and National rural health mission programs only addresses women in the reproductive age group, ignoring those who have passed the reproductive stage. At one level, there is low awareness on menopausal syndrome and at the other women rush into all available modes of treatment. Majority of women were not aware of therapy of menopause and fewer had heard of hormonal therapy<sup>26</sup>. Another interesting finding is that women worldwide are looking toward complementary and alternative medicine therapies to relieve menopause symptoms.<sup>4</sup> So researcher selected this study to assess whether the women are aware about menopause and their effects on health and to develop a information booklet about the therapies to reduce the effects on health.<sup>5</sup>

**OBJECTIVES**

1. To assess the knowledge of perimenopausal women regarding menopause..

2. To find out association of knowledge of perimenopausal women regarding menopause with their selected socio demographic variables.
3. To develop an information booklet on menopause.

**ASSUMPTIONS:**

All perimenopausal women had higher knowledge regarding menopause.

**MATERIAL AND METHODS:**

**Research Design:** Non Experimental, Descriptive research design.

**Research Settings:** Village Ganoh, Bassa Waziran of Nurpur.

**Population:** All Perimenopausal women (35-55yrs) of Nurpur.

**Target Population:** Perimenopausal women of age group 35-55 yrs of Ganoh, Bassa Waziran of Nurpur.

Sample Size and sampling Technique: 80 perimenopausal women (35-55yrs) and convenient sampling.

Tool and Method of Data Collection:

**Part A:** Socio demographic variables

**Part B:** Self Structured Knowledge Questionnaire

**Part C:** Booklet on menopause

**CRITERIA FOR SAMPLE SELECTION****Inclusion criteria:**

1. Women of reproductive age 35-55 years.
2. Women who was able to read and write Hindi.

**Exclusion criteria:**

1. Women who was NOT willing to participate in the study.
2. Women who was NOT available at the time of data collection.

**Variables: Socio Demographic variables:**

These were age (35-55years), religion, education, marital status, occupation, type of family, family income per month (in rupees) and source of information regarding menopause.

**Research variable-**

Knowledge regarding menopause among perimenopausal women.

**Selection and development of the tool**

A tool is a vehicle that could obtain data pertinent to the study and at the same time as to the body of general knowledge in the discipline. Selection and development of tool was done, based on the objectives of the study. Self-structured knowledge questionnaire related to menopause was prepared for data collection. Content matter for booklet regarding menopause was prepared on the basis of internet, searching books and guidance of the experts. The content for the self-structured knowledge questionnaire and booklet was translated into Hindi as per the convenience of sample.

**DESCRIPTION OF TOOL**

Part (A) – This includes demographic data of study subject and

includes eight items that was age(35-55years), religion, education, occupation, family income, marital status, type of family and source of information regarding menopause.

Part (B) – This includes self- structured questionnaire to assess the knowledge of perimenopausal women regarding menopause.

Part (C) –This include booklet on menopause to provide knowledge among perimenopausal women.

**Table – 1 Criterion measure for level of knowledge**

Level	Score	Percentage (%)
Excellent	>23	>76.60
Good	15-23	50 – 76.66
Average	08-14	26.66-46.66
Poor	<08	<26.66

**Maximum knowledge score =30**

**Minimum knowledge score =00**

#### PILOT STUDY:

Prior to commencing the task of data collection written permission was taken from Principal of Kamakshi Institute of Nursing and formal permission was obtained from the Pradhan of the Village Tund (Nurpur). The pilot study was conducted on perimenopausal women of village Tund, Ganoh, having knowledge regarding menopause, to identify reliability of the tool and feasibility of the study. The pilot study was conducted in the month of January on 8 perimenopausal women. The researcher had taken written informed consent from each perimenopausal women in the study. The researcher introduced her to the respondents and explains the purpose of gathering information. They were assured that their information would be kept confidential and used only for research purpose. A booklet and self-structured knowledge questionnaire was developed.

#### RELIABILITY OF TOOL:

Reliability was calculated by Spearsman Coefficient Correlation (splitting half method) and then by Karl Pearson's coefficient. The reliability of self-structured knowledge questionnaire was 0.9. Hence, the tool was reliable Data collection procedure: The data collection procedure of the study was carried out in February, 2017. The investigator, prior to commencing the task of data collection formal permission was taken from the Pradhan of the Ganoh, Bassa-Waziran of Nurpur. Data was collected from 80 perimenopausal women. The data was collected by using self-structured knowledge questionnaire related to menopause among perimenopausal women of selected areas of Nurpur. The written consent was taken from each study sample. The researcher introduced herself to respondents and explained the purpose of gathering information. They were assured that their responses would be kept confidential and used only for research purpose.

#### Ethical consideration:

1. Written permission was taken from the Principal of Kamakshi Institute of Nursing, Bassa-Waziran, Nurpur.
2. Ethical clearance was taken from the Ethical Clearance Committee of Kamakshi Institute of Nursing, Bassa-Waziran, Nurpur.
3. Written permission was taken from Pradhan of selected areas of Nurpur.
4. Written informed consent was taken from each study sample.
5. Confidentiality and anonymity of each sample was maintained throughout the study.

Plan of Data Analysis: Data analysis and interpretation of the data was done according to the objectives of the study. Analysis was done by using descriptive and inferential statistics. Descriptive statistics was used for frequency, mean, percentage and standard deviation. Inferential statistics were calculated by Z- test and ANOVA test. Pie chart was used to depict the findings. The level of significance chosen was  $p < 0.05$ .

#### MAJOR FINDINGS:

- According to age, majority of subjects i.e. 46 (57.50%) were in age group 41-50 years and minority 00(00%) of subjects were belong to 21-30years of age group.
- In accordance to religion, majority of respondent 71(88.75%) were Hindu and minority of respondent 00 (00%) were Christian.

- According to education, majority of the subjects i.e. 36(45.00%) were educated up to secondary level and minority of subjects i.e. 01(01.25%) were educated up to graduated & above level of education.
- According to occupation, majority of women i.e. 63(78.75%) were unskilled and minority of women 17(21.25%) were skilled.
- As per family income, majority of subjects i.e. 26(32.50%) had family income more than & equal to 15,000 per month and minority of subjects i.e. 16(20.00%) had family income between 10,000-15,000 & 5,000- 10,000 per month.
- As per marital status, majority of women i.e. 79(98.75%) were married and minority of women i.e. 01(01.25%) was unmarried.
- According to type of family, majority of subjects i.e. 70(87.50%) were from nuclear family and minority of subjects i.e. 10(12.50%) were from joint family.
- According to source of information, majority of subjects i.e. 43(53.75%) had family and parents and minority of subjects i.e. 07(08.75%) had mass media.
- Majority of subjects i.e. 52(65%) had good knowledge followed by 16(20%) subjects had average knowledge, 11(13.75%) had excellent knowledge and only 01 (01.25%) had poor knowledge.

#### ASSOCIATION:

- There was statistically significant association of education and source of information with knowledge of perimenopausal women regarding menopause depicts that it had impact on knowledge of perimenopausal women regarding menopause.
- There was statistically non-significant association of age, religion, occupation, family income, marital status and type of family with knowledge of perimenopausal women regarding menopause.

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