The relationship between the level of knowledge and attitudes of premenopause women toward readiness to face the menopause phase at Curug Community Health Center

La relación entre el nivel de conocimientos y las actitudes de las mujeres premenopáusicas hacia la preparación para afrontar la fase de menopausia en el Centro de Salud Comunitario de Curug

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SUMMARY

Introduction: According to the Indonesian Ministry of Health, in 2017, 14 million people in Indonesia, or 7.4 % of the total population, experienced menopause. It is estimated that 60 million women will experience menopause in Indonesia by 2025. Preliminary data on ten premenopausal women at the Curug Community Health Center, Tangerang Regency, show that most women do not know well about menopause. This study aims to identify the

DOI: https://doi.org/10.47307/GMC.2024.132.s2.10

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Recibido: 29 de septiembre 2024 Aceptado: 26 de octubre 2024

relationship between the knowledge and attitudes of premenopausal mothers toward readiness to face the menopause phase. Methods: This research used quantitative correlational analysis, a cross-sectional approach, and univariate and bivariate analysis. The results of the univariate analysis are presented in the descriptive statistics table, and the bivariate analysis using Chi-Square. The sample for this research was 50 women aged 40 - 45 in the Curug Community Health Center, using the accidental sampling technique from January to June 2024. Results: Most respondents are 42 years old, high school graduates, and housewives. They experienced their first menstruation at 11-14 and had at least two children. The Chi-Square test (p-value = 0.069 and 0.131) shows no relationship between knowledge and attitudes of premenopausal mothers toward readiness to face the menopause phase. Conclusion: Most premenopausal respondents' knowledge level was categorized as sufficient, their attitude toward preparedness to face the menopause phase was negative, and most premenopausal mothers' readiness to face the menopause phase was ready.

Keywords: *Attitude*, *knowledge*, *premenopause*, *readiness*.

RESUMEN

Introducción: Según el Ministerio de Salud de Indonesia, en 2017, 14 millones de personas

en Indonesia, o el 7,4 % de la población total, experimentaron menopausia. Se estima que 60 millones de mujeres experimentarán la menopausia en Indonesia en 2025. Los datos preliminares sobre 10 mujeres premenopáusicas en el Centro de Salud Comunitario de Curug, Tangerang Regency, muestran que la mayoría de las mujeres no conocen bien la menopausia. Este estudio tiene como objetivo identificar la relación entre los conocimientos y actitudes de madres premenopáusicas hacia la preparación para afrontar la fase de menopausia. Métodos: Esta investigación utilizó un enfoque cuantitativo correlacional con un enfoque transversal con análisis univariado y bivariado. Los resultados del análisis univariado se presentan en la tabla de estadística descriptiva y el bivariado utilizó el Chi-Cuadrado. La muestra para esta investigación fue de 50 mujeres de 40 a 45 años en el Centro de Salud Comunitario de Curug mediante la técnica de muestreo accidental de enero a junio de 2024. Resultados: La mayoría de las encuestadas tienen 42 años, bachilleres y amas de casa. Experimentaron su primera menstruación entre los 11 y 14 años y tuvieron al menos 2 hijos. No existe relación entre el conocimiento y las actitudes de las madres premenopáusicas hacia la preparación para afrontar la fase de menopausia como lo demuestra la prueba de Chi-Cuadrado (valor p = 0.069 y 0,131). Conclusión: El nivel de conocimiento de la mayoría de las encuestadas premenopáusicas se clasificó como suficiente, y su actitud hacia la preparación para afrontar la fase de la menopausia fue negativa y la preparación de la mayoría de las madres premenopáusicas para afrontar la fase de la menopausia estaba preparada.

Palabrasclave: *Actitud*, *conocimiento*, *Premenopausia*, *Preparación*

INTRODUCTION

Based on data from the World Health Organization (WHO), in 2022, 894 million women worldwide have reached menopause, and it is estimated that by 2030, the number of women over 50 years of age who will experience menopause will increase to 1.2 billion (1). This number has increased threefold compared to 2000. According to the Ministry of Health RI, in 2017, 14 million people in Indonesia, or 7.4 % of the total population, experienced menopause (2). It is estimated that 60 million women will experience menopause in Indonesia by 2025. Women who enter the premenopausal stage will usually feel changes in physical and psychological aspects. According to Duralde et al. (2023), these symptoms include hot flashes, night sweats, disrupted sleep, and genitourinary discomfort (3). Other common symptoms and conditions are mood fluctuations, cognitive changes, low sexual desire, bone loss, an increase in abdominal fat, and adverse changes in metabolic health (3). Ministry of Health RI (2022) said that treatment that can be done to reduce menopausal symptoms is avoiding certain foods and drinks, wearing light clothing to reduce hot flushes, applying relaxation techniques, and using water-based vaginal lubricants (4).

According to Holloway (2022), menopause can manifest through a wide range of signs and symptoms, including vasomotor, psychological, and genitourinary symptoms. Menopause can be an unsettling and distressing time, affecting women's well-being, mental sexuality, relationships, and work (5). Women with less education experience more serious complaints and women with higher education tend to have a better quality of life. This lack of knowledge leads to inadequate preparation for the current situation and weakens women's self-confidence. Fadhilla et al. (2023) state that involvement in various activities can increase self-confidence and a declining self-image through the feeling that one is still useful and can benefit others (6).

Nagda et al. (2023) indicates that there are moderate levels of anxiety, clinical depression, and mild cognitive impairment. The presence of psychosocial stressors had a significant impact on anxiety, depression, and cognitive impairment (7). Decreased reproductive function brings discomfort in life. For some women, menopause causes anxiety and worry. Anxiety is not only emotional pain but also because there has been an error in knowledge. The more knowledge you have, the easier it will be to overcome anxiety. Tariq et al. (2023) state that most women had limited knowledge and negative attitudes toward menopause, leaving them unprepared to cope with the physical and psychological changes associated with this stage of life. Improved menopause education is required to improve the quality of life during the menopausal transition (8). Researchers conducted an initial survey with ten women on 30 October and 25 November 2023 at the

Curug Community Health Center. The survey results showed that one of them knew well about menopause, having experience as a cadre for two years, and the other nine women did not know well about menopause. The phenomenon that occurs becomes a problem for premenopausal women with insufficient knowledge and response attitudes in dealing with the menopause phase they are experiencing. Based on this phenomenon, research is needed to determine the relationship between the level of knowledge and attitudes of premenopausal mothers and their readiness to face the menopause phase at Curug Community Health Center, Tangerang.

METHODS

This research used a cross-sectional study using quantitative correlational research methods to determine the relationship between knowledge and attitudes of premenopausal mothers at the Curug Community Health Center in the menopause phase. The population studied was premenopausal women aged 40 - 45 years registered at the Curug Community Health Center. This research collected samples using an accidental sampling technique with exclusion criteria of menopausal women. This study sample was 50 respondents from January until June 2024. Three questionnaires were applied. The knowledge questionnaire regarding menopause consisted of 25 statements; the attitude questionnaire comprised 13 questions; and the readiness questionnaire comprised 16 questions. Cronbach's alpha was 0.942 for the knowledge questionnaire and 0.941 for the readiness questionnaire. The Cronbach's alpha reliability test results from the attitude questionnaire for 13 statements were all reliable with a Cronbach's alpha (α) value of 0.932>0.6. The data collection procedure starts with licensing.

The researcher submitted a request for a research ethics review to the FON Research Ethics Committee and was declared passed with number 020/KEPFON/I/2024. The researcher then applied permission for validity and reliability (VR) testing and research at the Tangerang District Health Service, Banten

Province. The researchers visited the research area health center after obtaining a permission letter from the Health Service. Researchers were directed to contact cadres to collaborate in collecting data. The researcher accompanied the respondent while filling out the questionnaire so that the researcher could immediately explain what was not understood. In the final stage, the data was processed and analyzed after all the data had been collected. This research used univariate and bivariate analysis. The univariate analysis aimed to describe the characteristics, level of knowledge, attitudes, and readiness of premenopausal mothers. The bivariate analysis seeks to determine whether there is a relationship between the independent variable, the level of knowledge and attitudes of premenopausal mothers, and the dependent variable, the readiness to face the menopause phase. With nominal and ordinal measuring scales, it was assessed whether there is a relationship between variables and other variables using the Chi-Square test to evaluate the significance of the relationship between two nominal variables.

RESULTS

As shown in Table 1, most respondents were 42 years old, 14 people (28 %), while four were premenopausal mothers aged 44 years (8 %). Forty-eight people are Muslim (96 %), while two are Christian (4%). Most respondents were high school graduates, namely 27 (54 %), while one person had elementary school education (2%). Most respondents are housewives, namely 43 people (86 %); one person works as a civil servant (2%), five people work as entrepreneurs (10 %), and one person works in another field (2%). Most respondents experienced their first menstruation at the age of 11 - 14 years (normal menstruation), namely, 35 people (70 %), while the remainder experienced menstruation at the age of ≤ 10 years (early menstruation), there was one person (2%) who experienced menstruation at the age of ≥ 15 years and 14 people (28 %) had late menstruation. Thirty-four respondents had ≤ 2 children (68 %), while 16 respondents (32 %) had more than two children.

Table	1
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Distribution of characteristics of premenopausal mothers regarding readiness to face the menopause phase at Curug Community Health Center (n = 50)

Characteristic	n	%	
Age			
40	9	18	
41	5	10	
42	14	28	
43	12	24	
44	4	8	
45	6	12	
Religion			
Muslim	48	96	
Christian	2	4	
Background Education			
Elementary School	1	86	
Junior High School	20	2	
Senior High School	27	10	
Bachelor	2	12	
Employment			
Housewife	43	86	
Government employee	1	2	
Self-employed	5	10	
Others	1	2	
Age of the first-time			
menstruation/menarche			
≤ 10 years (Early menarche)	1	2	
11-14 years (Normal)	35	70	
\geq 15 years (Late menarche)	14	28	
Children			
≤ 2 children	34	68	
≥ 2 children	16	32	

Table 2 shows that 27 respondents have sufficient knowledge regarding readiness to face the menopause phase (54 %), and 18 respondents (36%) have insufficient knowledgea about the menopause phase. The remaining five respondents (10 %) have a good level of knowledge about the phases of menopause. Most respondents have a negative attitude toward readiness to face the menopause phase, namely 36 respondents (72 %), while 14 respondents (28 %) have a positive attitude toward readiness to face the menopause phase. Most respondents are ready to face the menopause phase, namely 35 respondents (70 %), while 15 respondents (30 %) are not prepared to face the menopause phase.

Distribution of knowledge level, attitudes and readiness
of premenopausal mothers at Curug Community Health
Center $(n=50)$

Variable	n	%
Knowledge level		
Good	5	10
Adequate	27	54
Low	18	36
Attitudes		
Positive	14	28
Negative	36	72
Readiness		
Ready	35	70
Not ready	15	30
Total	50	100

Table 3 shows that of the 50 respondents, 22 premenopausal mothers have adequate knowledge about the menopause phase and are ready to face it. Chi-Square tests show the p-value $(0.069) > \alpha$ (0.05), which means H0 is accepted and H1 is rejected. This shows no relationship between premenopausal mothers' knowledge level and their readiness to face the menopause phase at the Curug Community Health Center in 2024.

As shown in Table 4, of the 50 respondents, 23 premenopausal mothers have a negative attitude. Still, they are ready to face the menopause phase. Chi-Square analysis indicates a p-value of 0.131 > α (0.05), which means H0 is accepted and H1 is rejected. This shows that there is no relationship between the attitudes of premenopausal mothers and their readiness to face the menopause phase at the Curug Community Health Center in 2024.

DISCUSSION

The results show that most respondents with adequate knowledge are ready to face the menopause phase and that most respondents had a background education, with 54 % being high school graduates. There is no relationship between premenopausal mothers' knowledge

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Table	3
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Relationship between knowledge level of premenopausal mothers and readiness to face the menopause phase at the Curug Community Health Center (n = 50)

Knowledge level	Readiness				Total		p – Value
	Ready		Not ready				
	f	%	f	%	f	%	
Good	4	80	1	20	5	100	
Adequate	22	81.5	5	18.5	27	100	0.060
Low	9	50	9	50	18	100	0.069
Total	35	70	15	30	50	100	

Table 4	ŀ
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Relationship between attitudes of premenopausal mothers and their readiness to face the menopause phase at the Curug Community Health Center (n = 50)

No Attitude		Readiness				Tot	p - Value	
		Ready		Not ready				
		f	%	f	%	f	%	
1	Negative	23	63.9	13	36.1	36	100	
2	Positive	12	85.7	2	14.3	14	100	0.131
	Total	35	7.0	15	30.0	50	100	

level and their readiness to face the menopause phase at the Curug Community Health Center in 2024. 63.9 % of respondents had negative attitudes and were ready to face the menopause phase at the Curug Community Health Center.

This research is in line with Purba (2024), who demonstrated that there is a relationship between knowledge of menopause and readiness to face menopause in premenopausal mothers with a strong level of equality (9), and Ratnaningsih (2021) who showed that most women's education levels from high school to university are quite ready to face menopause (10).

Our results show that most respondents were housewives (86 %). This is in line with Ratnaningsih (2021), who indicates that most of the respondents worked as housewives, so it is concluded that women's readiness to face menopause is not only influenced by their level of education but can also be due by occupation, age, and environment (10).

This research also found that most respondents were 42 years old (28 %), which is in line with Kusumawati (2019), who states that the level of knowledge is also influenced by age. The older a person gets, the more experience they have to increase their knowledge of an object, which can affect their thinking patterns and understanding ability (11). This is supported by Maharani, Isfentiani, and Kasiati (2022), who indicated that maternal factors include knowledge, attitudes, and anxiety, which can influence the readiness of women of childbearing age to face menopause (12). We also show that one respondent had good knowledge but was not ready to face the menopause phase. This is supported by Ratnaningsih (2021), who established that not all highly educated women are prepared to face menopause (10). Women's ignorance can make women less prepared physically, psychologically, and spiritually. A lack of information about menopause, environmental conditions, and inadequate family roles can influence this.

This study aims to identify the relationship between the knowledge and attitudes of premenopausal mothers regarding readiness to face the menopause phase. It was found that 54 % of respondents had adequate knowledge, 72 % had negative attitudes, and 70 % were ready to face the menopause phase.

The results show that the level of knowledge of premenopausal mothers does not significantly correlate with readiness to face menopause. In effect, some respondents had good knowledge but were not ready to face menopause. The results of this study show that women's readiness to face the menopause phase is not only influenced by their level of education but can also be due to work, age, experience, and environment.

It was found that most respondents had a negative attitude (72%), while 28% had a positive attitude. According to Norisa et al. (2022), negative attitudes arise due to a lack of knowledge and complaints that are not understood (13). There is needed information regarding changes in signs and symptoms experienced and how to deal with them to increase knowledge and change mothers' attitudes to be better prepared to face menopause. This research has proven that most respondents with adequate knowledge have negative attitudes. The results of this research also show that most respondents had a negative attitude and were ready to face the menopause phase, with 23 respondents and respondents with a negative attitude not prepared to face the menopause phase as many as 13. Meanwhile, there were 12 respondents with a positive attitude and ready to face the menopause phase, and two respondents with a positive attitude but not ready to face the menopause phase (13).

The results of this study are not in line with Wulan (2020), who states that the more positive the premenopausal mother's attitude, the more prepared the mother is to face the menopause phase, while for mothers with a negative attitude,

the lower the premenopausal mother's readiness to face the menopause phase (14). However, these results are in line with Sartika et al. (2023), who explained that attitudes can change positively if they are balanced with sufficient knowledge, information, and readiness, both physically, mentally, and spiritually (15). According to Riza (2018), a person is not born with attitudes and views, but attitudes can form and change throughout their development. So that each person has a different perspective when dealing with certain situations or conditions. Riza states that certain attitudes do not always end in behavior that matches the attitude (16).

Sukmawati et al. (2023) stated that there is no relationship between a mother's knowledge and a mother's readiness to face menopause. A woman's readiness to face menopause is characterized by a balanced nutritional diet, regular exercise, and avoiding bad habits such as smoking and drinking alcoholic beverages (17). A person's age also affects the readiness of perimenopausal women to face menopause. A person's age is associated with their knowledge and readiness to solve problems that arise in life. In this study, although the age of the respondents was almost the same, each individual's knowledge differed. Another study indicated that there is a relationship between knowledge of menopause and readiness to face menopause in premenopausal mothers with a strong level of equality (18). Purba stated that preparedness is not only influenced by knowledge, but a person's age also influences the readiness of premenopausal mothers to face menopause (18). The crucial role of educational programs is to equip women with the knowledge needed to navigate menopause effectively. Most women had limited knowledge and negative attitudes toward menopause, leaving them unprepared to cope with the physical and psychological changes associated with this stage of life. Tariget al. (2023) indicated that improved menopause education is required to improve the quality of life during the menopausal transition and a most positive narrative of life postmenopause (19). Our data align with Afriani and Fatmawati (2020) at the Kenali Besar Health Center in Jambi City, who found that most respondents have good knowledge and negative attitudes (20). In their research at Padangan District of Winong, Agustiawati and Sulistiyaningsih (2017) found that most mothers

had a good knowledge level and attitude and were ready to face menopause (21). This is not in line with our results because Agustiawati and Sulistiyaningsih's (2017) results show there is a correlation between the level of knowledge of preparedness in the face of menopause (p-value = 0.003); and there is a correlation between the mother's attitude premenopausal toward readiness to face the menopause in the village Padangan District of Winong with p-value = 0.001 (21). Most research indicates a relationship between knowledge and attitude toward readiness to face the menopause phase. Another researcher found a relationship between knowledge and attitudes of premenopausal women in the Sekar Jaya Village, Ogan Komering Ulu (22), in the working area of the Kembang Mumpo Health Center with moderate closeness.

CONCLUSION

There is no relationship between premenopausal mothers' knowledge level and their readiness to face the menopause phase, and there is no relationship between their attitudes and their readiness to face the menopause phase. Most of the premenopausal mothers' level of knowledge was adequate, with negative mothers' attitudes and mostly ready to face the menopause phase at the Curug Community Health Center in 2024. Community health centers may be able to conduct seminars or education regarding menopause and changes in physical and psychological symptoms through health examination programs carried out at community health centers. This is related to mothers who are not aware of the symptoms of menopause they are experiencing and premenopausal mothers' relatively insufficient knowledge of menopause.

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