Original Article

Impacts of Menopause on Psychological Wellbeing of Women in Sialkot-Pakistan

Laiba Idrees,[1] Salbia Abbas,[1] Saira Abbas,[2] Saba Rani,[1] Asifa Batool[1]

[1]*Department of Psychology, GC Women University Sialkot,*
[2]*Department of English, University of Management and Technology Sialkot*

Abstract

Objective: To assess the impacts of menopause on psychological wellbeing of women in Sialkot-Pakistan.

Methods: This cross sectional correlational study design study was conducted at different areas like mohallas and streets of Sialkot (rural and urban areas), from March to June 2021. Self-report questionnaire was designed which contained Consent form, Demographic Information, Greene Climacteric Scale and Ryff Psychological Well-being Scale. Women with Age range of 40 to 60, with natural menopause only, from all socioeconomic backgrounds, religions and educational backgrounds were included. Data was entered and analyzed through SPSS version 20. Cronbach's reliability for scales and subscales was calculated.

Results: Cronbach's a value of Greene Climacteric scale was .987 and Cronbach's a value of Ryff Psychological wellbeing Scale was .955. All the scales and its subscales were highly reliable for our population. There was strong negative correlation between menopausal symptoms and psychological wellbeing (r=-.69). Relation between the years of menopause and severity of menopausal symptoms was also negative (r=-0.49). Research findings indicates moderate negative relationship of menopausal symptoms and educational level (r=-.31).

Conclusion: Menopause negatively affects the psychological well-being of menopause.

Keywords: Menopause, Menopausal Symptoms, Psychological well-being, Menopausal Women.

Corresponding Author: Laiba Idrees   **Email:** ch.min29@yahoo.com

Introduction

As female gets old with passage of time, she goes through various periods of life, from a child to an adult. Her body continues to change at all levels; these changes may be anatomical, physiological, and hormonal. Menopause is simply one more period of life like puberty. It's a phase of woman's life in which ovaries quit producing eggs.[1] The human ovaries become inert to gonadotropins with propelling age, and their capacity to reproduce comes to an end. Between the ages of 45 and 55 years, menses become unpredictable, irregular and normally stop accordingly denoting the finish of a lady's reproductive life.[2]

Menopause is a combination of two words "meno" and "pause". Meno means "month" and pause means "to stop". According to WHO, it is defined as a cessation of menstruation for 1 year as a result of less ovarian follicular activity. Perimenopause is marked as a small period prior to menopause and first year after menopause. Post-menopause the whole time span after menopause.[3]

Menopause isn't a period of high danger for psychological problem however might be a period of mental pressure for ladies. A few ladies will encounter mental indications during the perimenopausal years. It is critical to build up whether the indications are of adequate seriousness and span to diagnose them as a mental disorder like depression or panic disorder. Neurotransmitters are highly influenced by the rapid hormonal changes, especially the serotonin and gamma amino butyric systems. Estrogen balances the number of other hormones and modulates dopamine turnover and endorphins levels. When estrogen level falls below the required level during the menopause it can lead to the different menopausal symptoms like hot flashes which can affect

women's sleep patterns. These disturbed sleep patterns can be the leading cause of anxiety, depression and other psychological problems.[1] Psychological issues are broad among menopausal ladies, and they are related with vasomotor side effects, hot flushes, night sweats, fatigue and obesity. Psychological issues alongside vasomotor manifestations, creates to negative perspectives toward menopause.[4]

"Psychological/Psychosocial Model" says that stressors and losses due to menopause are the main cause of menopausal symptoms.[5] There is powerful exploration and data in regards to its natural angles uniquely its endocrine base, yet the psychosocial viewpoint is very fascinating and easy to refute because of its changing nature among various societies and environments. No greater capacity to duplicate and a sensation of loss of femininity creates a fear. Menopause is mid-life transition, loss of reproductively might be source of stress, especially for those societies where long reproductive age period is wanted on the social conviction that this will prompt an enormous family size that is considered as an image of achievement.[1] Menopausal ladies have a regular psychological issue of absent mindedness, reduction in attention, effected reasoning and verbal problems. Deficits in memory are also reported by the menopausal ladies. These symptoms are alarming. Brain's structure and functions are highly changed because of estrogen insufficiency. These severe and alarming symptoms of cognitive aging can be the sign Alzheimer's disease. Indications of depression and anxiety are other neuropsychiatric manifestations connected to intellectual execution at midlife changes in ladies; however they don't clarify memory deficits in menopause. Depression is more prevalent in females than males. Menopausal ladies are at two-to fourfold higher danger for major depressive symptoms than premenopausal ladies.[4]

Menopause is phase of life which is experienced by all the ladies around the world. So, it's a very extensive topic and there is lot of researches on this topic around the globe. Various local and international studies have explored the impacts of menopause on women and found very negative impact of menopause on psychological wellbeing of women. But there is very less work available in Sialkot, so it would be the first full fledges study on the topic of impacts of menopause on psychological wellbeing of women in our sector. In Pakistan, women population is more likely to experience psychological issue because of menopause and menopausal symptoms. Pakistan is developing country and ladies are living in very adverse condition. Their socioeconomic status and monthly income don't allow them consult the doctors. We tried to explore and understand psychological state of menopausal women. Findings of this study can be used by psychologists, medical practitioners and health education departments to create awareness about the impacts of menopause.

Methods

To explore the impacts of menopause on psychological wellbeing of women, cross-sectional correlational study design was used. To analyze the numerical data Quantitative research was used in this study. Random sample of 171 middle age ladies with menopausal symptoms was collected through printed questionnaires in face to face interaction. Ladies with natural menopause were the target population for examination. Age range of the participants was 40-60 years. Participants were from different religions, different socioeconomic, educational and vocational backgrounds. Inclusion criteria were women with Age range of 40 to 60, with natural menopause only. Women with surgical menopause or menopause after chemotherapy were excluded. Women from all socioeconomic backgrounds, religions and educational backgrounds were included.

An organized self-report Questionnaire was utilized in the actual study to analyze the impacts of menopause on psychological wellbeing of women. This self-report questionnaire was designed which contained Consent form, Demographic Information, Greene Climacteric Scale and Ryff Psychological Wellbeing Scale. Individuals who were not able to complete the form, we read aloud the questions and response options to them.

Demographic sheet was created to gather data about the participant's background. It included items concerning participants' age, education, family system, habitat, socioeconomic status and household income.

Greene Climacteric Scale[6] was used to measure menopausal symptoms. In this scale, four main areas of symptoms (Psychological, Physical, vasomotor and sexual dysfunction) are measured. It was 4 point likert scale ranging from 0 to 3. It was scored as 0= not at all, 1=a little, 2= quite a bit and 3=extremely. It has total 21 items. Items from 1-11 measures the psychological symptoms, items 12-18 measures the physical symptoms of menopause, items 19-20 measure vasomotor symptoms of menopause and 21st item is used to assess sexual dysfunction.

Brief form Ryff's Scales of Psychological Well-Being[8] with total 42 items was used in this research. It has 6 subscales of 7 items each. It is a collection in which six self-report scales intended to quantify psychological wellbeing. 6-point likert scale was used ranging from 1-6 (Strongly disagree to strongly agree). Its subscales were Autonomy, Environmental Mastery, Personal Growth, Positive Relations with Others, Purpose in Life and Self-Acceptance. Participants were from the

different areas of Sialkot. Written and verbal consent was taken from participants by explaining the purpose and nature of our study. They were allowed to quit from their participation without any penalty. Consent form along with demographic sheet and scales of current study i.e.; Greene Climacteric Scale6 Ryff's Scales of Psychological Well-Being[8] were administered on the menopausal women to collect data. After collecting the whole data regarding study, Statistical Package of Social Science (SPSS) version 20 was used with the end goal of data entry, control and examination. Gathered information was cleaned and screened for any incomplete or missing information. Percentages, means and \ of demographic variables were calculated by using descriptive statistics. Pearson product coefficient correlation, regressions of model variables was calculated through SPSS. Cronbach's reliability for scales and subscales was calculated. All the scales and its subscales were highly reliable for our population.

Results

Table 1: *Summary of socio-demographic and clinical characteristics of the entire sample*

Variable	Categories	F	%
Age			
	41-45	20	11.7
	46-50	49	28.7
	51-55	61	35.7
	56-60	88	24.0
Education			
	Under matriculation/Matric	80	64.9
	Intermediate	90	23.4
	Graduation	11	9.4
	Post-Graduation	4	2.3
Family Status			
	Nuclear	135	78.9
	Joint	36	21.1
	Nuclear	135	78.9
Habitat			
	Rural	113	66.1
	Urban	58	33.9
Monthly income			
	below 25k	20	11.7
	Rs. 26k-Rs.50k	112	65.5
	Rs.51k-Rs.100k	31	18.1
	above Rs.100k	8	4.7
Social Economic Status			
	lower class	15	8.8
	middle class	145	84.8
	upper class	11	6.4

Note: N = 171

Table 2: *Pearson Product Moment Coefficient of Correlation of Components of Greene Climacteric Scale in current sample (N=171)*

Components of GCS	1	2	3	4
Psychological Symptoms	-	.994**	.938**	.747**
Physical Symptoms	-	-	.951**	.777**
Vasomotor Symptoms	-	-	-	.819**
Sexual Dysfunction	-	-	-	-

**p<0.01

Note: There is a highly significant positive relationship between psychological, physical and vasomotor and sexual components of Greene Climacteric Scale.

Table 3: *Pearson Product Moment Coefficient of Correlation of Menopausal Symptoms with Psychological Wellbeing, years of Menopause, Socioeconomic Status and Educational level (N=171)*

Variables	1	2	3	4	5
Menopausal Symptoms	-	-.696**	-.419**	-.273**	-.316**
Psychological Wellbeing	-	-	.281**	.195*	.233**
Years of Menopause	-	-	-	.194*	.145*
Socioeconomic Status	-	-	-	-	.434**
Education	-	-	-	-	-

Table 4: *Regression Coefficient of Menopause on Psychological Wellbeing*

Variables	B	B	SE	p
Constant	279.60**		14.38	0.01
Menopause	-3.39 **	-.696	.27	0.01
R^2	.49			

$**p<0.01$, N=171

Note: Table shows the impact of menopause on the Psychological wellbeing. The R2 value of .49 revealed that the predictor variable explained .49% variance in the results with F=158.86, **p<0.01. Findings revealed menopausal symptoms have negative relationship with psychological wellbeing (β=-.696, **p<0.01).

Discussion

The present study was aimed to examine impact of menopause on the psychological wellbeing of women.

It also examined the relationship between the severity of menopausal symptoms and their psychological impacts. In our sample, there was negative correlation between severity of menopausal symptoms and psychological wellbeing. Menopausal ladies show low self-esteem and less control over their lives which shown high ratio of anxiety and depression in menopausal ladies. It was indicated that Menopause has negative relationship with Psychological wellbeing. In table III, findings of current study indicate strong negative correlation between menopausal symptoms and psychological wellbeing (r=-.69). It means that if a woman is facing severe menopausal symptom, she is more likely to have low psychological wellbeing. We have seen in our surrounding that menopausal women are more likely to depressed and have low level of self-esteem because of their inability to reproduce. "Psychological/ Psychosocial Model" is also in support of or research findings, it says that stressors and losses due to menopause are the main cause of menopausal symptoms[5]. In another study it was sleep disturbance might be straightforwardly connected to changes in menopause. A sleeping disturbance is by all accounts because of night sweats brought about by hormonal changes that happen and lead to expanded excitement. Postmenopausal sleep disturbance in a woman may be due to unresolved grief associated with menopause or may indicate independent sleep disturbances, such as occasional sleep deprivation, depression, anxiety etc.[8]

Symptoms of menopause would be less severe and less prevalent in postmenopausal women. Table III indicates that there is negative correlation between the years of menopause and severity of menopausal symptoms (r= -0.49). There is moderate negative relationship between years of menopause and severity of menopausal symptoms. It means that as time passes symptoms of menopause become less prevalent. As the years of menopause increases, women face less psychological symptoms because menopausal symptoms become less severe. It is so, because women learn to live with those symptoms and this perspective is well explained with help of "Feminist Model", which describes that menopause is the phase of life, which is faced by the number of ladies in the world. It is an inevitable life transition. It is a normal and learning phase Women with peri menopause face the more severe symptoms as compared to the post menopausal women. Papini, et al. found that postmenopausal women show more positive and normal attitude toward the menopause. They have less psychological and emotional impacts due to their long term dealings with menopause. Women learn that it's normal and every woman in this world have to go through the same phase of life.[9]

Socioeconomic status and educational level of meno-pausal ladies also had a strong impact on the severity of menopausal symptoms and their impact n psychological wellbeing. It is evident from the current study that menopausal symptom are more severe in the ladies with low socioeconomic status and low educational level. Ladies with low socioeconomic status had to go through other number of stressors with menopausal stress. Table III indicates that there is negative correlation between these two factors (r=-.273). Ladies from low socioeconomic background are more likely to experience the severe symptoms because they don't have enough resources to mediate those menopausal symptoms and their impacts on psychological wellbeing. a previous study also had the similar findings as ours, Advancing the monetary situation of women can increase personal satisfaction and wellbeing of women in menopause, which can be because of expanded resources to approach the medical care in case of menopausal adverse impacts on psychological wellbeing.[10] Women with lower level of education are more vulnerable to impacts of menopause. In table 3 research findings indicates moderate negative relationship of menopausal symptoms and educational level (r=-.31). Women with low literacy rate lack the knowledge and awareness about the certain facts and effects of menopause. They lack awareness that how to buffer impacts of menopause. A previous study of Namazi et al. also found that there is a negative connection between the degree of information and the severity of menopausal symptoms.[10] Women with advanced education and awareness about menopause are more mindful of menopausal symptoms and methodologies to manage those issues and they go for treatment of their symptoms on priority basis.

In present study, it is identified that menopausal symptoms has direct negative impact on psychological wellbeing of women. Impact on psychological wellbeing is reinforced by other number of factors like years of menopause, education and socioeconomic factors. Different factors differently affect psychological wellbeing of menopausal women.

Limitations

- Sample size was so small, so that the results cannot be generalized.

- Data was comprised of more uneducated and women who are housewives.

- Data was comprised of more rural participants than urban. So, it was not possible to explore the habitat differences.

- Moreover, Participants were only from on city, Sialkot. So, results cannot be generalized to the whole country or world.

- Measurement scales were too long; it became too laborious for the participants.

Conclusion

It is concluded that women with severe menopausal symptoms have very low psychological wellbeing. Ladies from low socioeconomic status and low educational level are more prone to psychological impacts of menopause. Menopause causes the severe hormonal changes which can lead to the severe psychological issues. Study findings highlight the importance of education and awareness regarding menopause at rural and urban areas of city. Psychological, physical and social support is very much needed for the wellbeing of menopausal women in Sialkot.

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