International Journal of Nursing and Healthcare Research

A STUDY TO ASSESS THE EFFECTIVENESS OF A PLANNED TEACHING PROGRAMME ON KNOWLEDGE REGARDING MENOPAUSE AMONG MARRIED WOMEN IN SELECTED OPDS AT CARMEL HOSPITAL, ALUVA

P.A. Shigy*[1] and Kavithamol[2]

[1*]Ph.D Scholar, Malwanchal University, Indore, Madhya Pradesh, India.
[2]Research Supervisor, Malwanchal University, Indore, Madhya Pradesh, India.

ABSTRACT
The present study was aimed to assess the effect of planned teaching programme on menopause among married women in selected OPDs at Carmel hospital, Aluva. The objective of the study was to assess the knowledge regarding menopause among married women in selected OPDs at Carmel hospital, develop and implement the planned teaching programme, determine the effectiveness of planned teaching programme by using paired t-test, find out the association between post-test knowledge score and selected demographic variables. The one group pre-test – post-test pre - experimental research design was used in this study and it was conducted among 30 samples from Carmel hospital, Aluva. Simple probability sampling technique was used in this study. Structured questionnaire was used to assess knowledge regarding menopause among married women. The data collected were tabulated and analysed by using descriptive and inferential statistics. The result shows that there was a significant relationship between post-test knowledge score and selected demographic variables like previous knowledge, socioeconomic status and religion. The planned teaching programme was effective and there was a significant relationship between pre-test knowledge score and post-test knowledge score.

KEYWORDS
Menopause, Knowledge and Married Women.

Author for Correspondence:
P.A. Shigy,
Malwanchal University,
Indore, Madhya Pradesh, India.

Email: jcmaria55@gmail.com

INTRODUCTION
"It's a sign of times when your roots are grey and your memory's shorter; it's a sign of times when your hourglass shape becomes a glass of water" - Jeanie Linders
Menopause is a natural transition encompassing not only the biological changes but also the social and cultural changes associated with the aging process.

Menopause is defined as the permanent cessation of menses resulting from reduced ovarian hormone secretion that occurs naturally or is induced by surgery, chemotherapy or radiation. Natural menopause is recognized after 12 months of amenorrhea that is not associated with a pathologic course. Women may experience an early menopause because of surgery if both ovaries are removed. Other causes of premature menopause include ovarian failure as a result of chemotherapy, radiation therapy to the pelvis autoimmune disease.

While most women traverse the menopausal transition with little difficulty, others may undergo significant stress. And with increasing age, emerging physical health problems can cause significant changes in the women's lifestyle, leading to social withdrawal, avoidance and curtailment of physical activity.

Changes in health and illness of individuals create a process of transition, and client in transition period tend to be more vulnerable to the risk that may in turn affect their health, uncovering these risks may be enhanced by understanding the transition process. Menopause may be viewed as a transition from middle age to old age by many women and they fear this period because of the anticipated losses. The experience is not universal among women; there is no fixed pattern and no chain of events that must transpire. The onset and end are unpredictable. The duration is indefinite and experiences are different for every woman as she passes through it.

Menopause is emerging as a major health scourge in India with an alarming rate of 18% of women in the 30 to 49 age groups attaining the non-reproductive age prematurely. Illiteracy among young married women and early child bearing with poor nutritional levels has been cited as a reason for premature menopause, which might continue to a burden in the future.

BACKGROUND OF THE STUDY

Menopause is a unique stage of female reproductive life cycle, a transition from reproductive to non-reproductive stage. It is characterized by cessation of menstruation and women may view menopause as a transition from middle age to old age. Some women may look upon this with pleasant anticipation as time of relative freedom from such worries as undesired pregnancies and the stress of child bearing. Many women may have fear during this period because of the anticipated losses. Thus, women may be hesitant and ignore the unusual and hormonally related symptoms may go undetected resulting in a delay in diagnosis and treatment.

Menopause raises important health care issues and present physical challenges. Menopause causes short term changes and there are long term risks that can have a major impact on overall health and quality of life. Some consider menopause to be a call to action, it is a time to learn more about one's body, a process that can be invigorating and empowering.

Several psychological factors are related to the process of physical change. A woman may experience fear of losing her appearance, uncertainty about her purpose in life as a middle-aged woman, sadness at the passing of the fertile prime of life. These feelings may even outweigh the physical discomfort caused by complex hormonal changes. Menopausal women may also experience psychological problems like anxiety, depression, anger, fear, loss of memory and lack of concentration. Depression is found to be the most common health problem. It accounts 55% and 36% of women suffer from insomnia, 30% experience forgetfulness during menopause.

Menopausal changes considerably depend on the makeup of an individual and on her previous outlook at menopause and its significance. Many women in the developing countries do not know that they can age gracefully unaware of the havoc menopause can cause to their lives. Most of they suffer in silence not bringing to notice their symptoms.

For the purpose of the study most of the women knowledge was not up to the mark before administration of structured teaching programme. This facilitated them to learn more about the menopausal symptoms and its management, the rationale behind the change and to adapt to the set of changes.

NEED FOR THE STUDY

Menopause is the stoppage of menstruation for at least six months after the age of 40 years. It normally occurs between 45 and 50 years. It accompanied by various body changes and deleterious health effects which can be better managed by lifestyle changes and hormonal therapy.

The hormonal and behavioural changes that occur during menopausal period led to a high demand for special healthcare. Menopause introduces a major change in the morbidity pattern in middle life of woman. The proportion of women who experience premature menopause either due to biological or otherwise induced reasons have long duration of exposure to menopause leading to severe symptoms, when compared to women who have undergone menopause naturally. The reproductive, maternal, new-born, child and adolescent health (RMNCH+A) programme strategy which is based on "continuum of care" concept, propagated high impact intervention in the life cycle for women does not address the late reproductive age group of women. The health of the women in the later reproductive age and menopause are ignored by all existing health programmes.

Menopause does not cause any life-threatening conditions. But it affects the quality of life of the women in the Middle Ages. In Kerala the life expectancy of females at birth is 80.15 years and average age to menopause estimated to be 40-45 years.

The health care needs of the women vary among different stages of life; in her third phase of reproductive life, it depends on the physiological characteristics and sociocultural factors. Usually, women in this perimenopause are negligent about their health and end up with chronic diseases which call for urgency in public health focus on emerging health issues of middle-aged women.

This brings the importance of understanding of health in menopausal women, and developing appropriate health promotion activities. A supportive, understanding attitude from any health care system may lead to improved wellness of women in Middle Ages. Therefore, looking beyond, the physiology to understanding of sociodemographic context of individual women by studying menopause and its correlates gains significance. This can contribute to reducing the gap between an identified need and care provided and promoting health of women.

Problem statement

A study to assess the effectiveness of a planned teaching programme on knowledge regarding menopause among married women in selected OPDs at Carmel Hospital, Aluva.

Objectives of the study

Assess knowledge regarding menopause among married women in selected OPDs at Carmel Hospital, Aluva.

Develop and implement the planned teaching programme.

Determine the effectiveness of planned teaching programme by comparing pre-test – post-test knowledge score.

Find out the association between post-test knowledge score and selected demographic variables.

LITERATURE REVIEW

Study related to knowledge regarding menopause

A study to assess the knowledge on menopausal self-care among premenopausal women was done by in Anjali Lekha Vishwanath and T Anju Philip. Quantitative research with descriptive study design was used for the study. The sampling technique used to select the sample is cluster sampling. Total participants include 120 premenopausal women between the age group of 35 to 50 year the data were collected by semi structured questionnaire. The study revealed that, there was no association observed between knowledge score and selected demographic variable such as age, education, and family income.

A study to assess the complexities of the experience of menopause in American women from diverse ethnic and socio-economic background was done by Sharon a George. The design of the study was qualitative study. The sampling technique used to select the sample is data saturation. The total participants include 15. The data was collected by using open ended questionnaire. The study revealed that, three major themes of face were identified;

expectations and realization, sorting things out and a new life phase. All some women expressed similar thoughts in particular categories, no two women had the same experience of menopause.

A study to assess the knowledge and perception regarding menopause among married women was done by Amitha, Malathi et.al. The design of the study was a cross sectional descriptive study. Simple random sampling technique used for selecting the samples. The study was conducted among 140 married women between the age group of 45-55 years. Data was collected by using structured knowledge questionnaire and perception scale towards menopause. Data were analysed by using inferential and descriptive statistics. The study revealed that majority of the married women 120(85.7%) had average knowledge on menopause. Among 140 married women most 111(79.3%) of them had good perception.

Study related to menopausal symptoms and management

A study to assess the effectiveness of structured teaching Programme on knowledge regarding menopausal symptoms and its management among women was done by Vruti Patel, Sijo Koshy *et al*. This study aimed at assessing the existing knowledge regarding menopausal symptoms and its management among women. Determining the effectiveness of structured teaching programme on menopausal symptoms and its management among women and finding the association between post-test knowledge score and selected demographic variables like age, education, occupation and family type. The design of the study was a one group pre-test, post-test, pre-experimental approach was adopted. The study was conducted among 60 menopausal women conveniently selected from two villages of Vadodara. Non probability convenient sampling technique was used to select the sample for this study. The content validity of the tool and teaching plan was established. Reliability of the tool was tested by split half technique. It was found that the effectiveness of structured teaching programme in terms of increasing knowledge score among menopausal women was 46.13%.

A study to assess the level of knowledge regarding menopausal, premenopausal syndrome and post-menopausal syndrome and its management among the postmenopausal women in selected community Lucknow UP was done by S.K Mohana Sundari and Rajana Verma. The design of the study was a descriptive and non-experimental. The sampling technique was purposive non random sampling technique adopted to select subject from Target population. The total participants include 30 postmenopausal women. The data was collected by using structured questionnaire. The study revealed that, 46.7% has inadequate knowledge, 53.3% has moderate level of knowledge and 0% has adequate knowledge.

A study to assess the prevalence and severity of menopausal symptoms and the quality of life in middle aged women in Sri Lanka was done by Nirmala Ratnayake, Janake Lenora et.al. The design of the study was descriptive cross-sectional study. The sampling technique used to select the sample were cluster sampling method. The study was done in 184 premenopausal and 166 postmenopausal women aged 30 to 60 years. This study revealed that, prevalence of menopausal symptoms and their severity were significantly higher among postmenopausal women compared to premenopausal women. The overall score of some domains, namely, physical functioning, role performance due to emotional and physical problems and comfort were significantly impaired in postmenopausal women compared to premenopausal women.

A study to assess the menopause knowledge, attitude, symptoms and management among midlife employed women was done by College of Nursing, Kon Kuk University Chungju Korea. The sampling technique was cross sectional questionnaire. The data was collected from 40-60 years at midlife and middle-aged women in selected area. The study revealed that, the menopausal women showed significantly higher physical symptoms and premenopausal women. The menopausal women showed significantly higher psychosomatic symptoms then premenopausal women. There was a significant correlation between menopausal attitude and management.

Study related to effect of health education regarding menopause

A study to assess the effect of health education on knowledge and attitude of menopause among middle-age teachers was done by Helen Gebretatyor Lidia Ghirmai. The design was a semi experimental design with pre intervention, immediate post intervention and three month follow up test was used in this study. The sampling technique was stratified random sampling was used to select female teachers using proportional allocation. The selected size of sample of female teachers from elementary, middle and secondary level was 82, 13 and 4 respectively. The data was collected by using structured questionnaire. The study revealed that 110 middle aged teachers were approached out of which 11 excluded due to failure to give constant and unwillingness to participate in this study. Finally, 99 middle age women participate in which one lost follow up that made the response rate 98.9%.

A study to assess the effectiveness of structured teaching programme on knowledge regarding menopausal symptoms among women in premenopausal age. Was done by Aswathy S. S, Dr. Laishram. The design of the study was pre-experimental (one group pre-test- post-test). Purposive sampling technique used for selecting the samples. 50 women of premenopausal age were selected. The study revealed a significant correlation between statistical variables such as age, education and monthly family. The income of post-menopausal women with prior knowledge scores at $P < 0.05$ and was effective in increasing the knowledge of premenopausal women regarding the menopausal symptom.

Hypothesis

All hypothesis will be tested at <0.05 level of significance.

H_1: There will be significant difference between post test score compare to pre-test score of knowledge regarding menopausal symptoms and its management

H_2: There will be significance association between post-test knowledge score of married women regarding menopause and selected demographic variables

METERIAL AND METHODS

Research design selected for the study is pre-experimental one group pre-test Post-test design. The variables in study are planned teaching program and knowledge score. Extraneous Variable: The extraneous variables under the study are demographic variables such as age, class, religion, education of mother, family type, knowledge and source of information.

Research setting

The setting of study was conducted at Carmel Hospital, Aluva among married women in OPDs.

Population

The term population refers to aggregate or totality of all subjects or member. In this study it refers to the married women in selected OPDs at Carmel Hospital, Aluva.

Sampling Technique

Purposive sampling technique is used for selection of samples for data collection.

Sample Size

The samples in the study consist of 30 married women in selected OPDs at Carmel Hospital, Aluva. The time of data collection between 11-02-22 to 14-02-22.

Inclusive Criteria

Only among females.

College students within the age group of 18-26 at selected colleges in Ernakulam district.

Exclusive criteria

Client who is male.

Client who are below 18 or above 26 years old female.

Client who are not interested to participate.

Instruments Used

A standard questionnaire was used to assess the knowledge. It consists of two sections:

Section A: Demographic data. It consists of age, education, socio-economic status, previous knowledge, job, religion.

Section B: Multiple choice questionnaires to assess the knowledge of married women regarding menopause.

Data collection

The study was carried out after obtaining approval from the Hospital Administrator, Carmel Hospital,

Aluva to conduct a study. By non-probability purposive sampling, the samples were selected, which is included a sample size of 30 married women. The data was collected on 11-02-22 by using structured knowledge questionnaire. Informed consent had obtained from the participants. Pre-test will be done on 11-02-22. And structured teaching programme was administered to the subjects. Post-test was conducted on 14.02-22.

RESULTS AND DISCUSSION
Section A: Demographic Data
Table No.1 and Figure No.1 shows 33.33% belong to the age group of 25-30 years, 20 % belongs to the age group of 31-35 years, 13.33% belong to the age group of 36 - 40 years, zero percentage belong to the age group of 41-45 years and 33.33% belong to the age group of 46 -50 years.

From the Table No.2 reveals that 56.66% had SSLC/+2 education, 20% had degree education, 6.66 % had graduate education and 16.66% had post graduate education

From Table No.3 and Figure No.2 it reveals that 13.3% belong to Hindu religion, 53.4% belong to Muslim religion and 33.3% belong to Christians.

From the Table No.4 and Figure No.3 indicates that 30% of the subject had knowledge regarding menopause and 70% of the subject do not had knowledge regarding menopause.

From the Table No.5 Figure No.4 it reveals that 50% of subject belongs to <15000, 44% of the subject belongs to 15000 -30000, 6.7% belongs to 30000-50000 and 3.4% of subject belongs to >50000.

The Table No.6 shows that 60% of the subjects are employed and 40% of the subjects are unemployed.
SECTION B: Knowledge score of married women regarding menopause and its management
From the Table No.7 and Figure No.5, it shows that 10% of subject having very good knowledge 16.6% of subject having good knowledge, 53.4% of subject having average knowledge and 20% of subject having poor knowledge regarding menopause and its management.

From the Table No.8, Figure No.6 it shows that 50% of subject having excellent knowledge, 36.6% of

subject having very good knowledge, 13.4% of subject having good knowledge and no one graded with average or poor knowledge
Section C: Effect of planned teaching program on menopause and its management
The Table No.9 shows that the calculated value of t is 8.20 which is more than tabulated value 2.05. This shows that there is a significant difference in knowledge score before and after teaching program. So, we rejected the null hypothesis and accepted the research hypothesis.
Section D: Association between post–test knowledge score and selected demographic variables
The findings of the table show that is a statistically significant association between pre-test knowledge score and selected demographic variable such as religion, previous knowledge and socio-economic status. Therefore, the research hypothesis is accepted and rejected null hypothesis. And no association found with other demographic variable such as age, education and job status. So accepted the null hypothesis and rejected research hypothesis.
Discussion
The present study revealed that during pretest 3 of subject were having 10% of very good knowledge, 5 of subject were having16.6% of good knowledge, 16 were having 53.4% of average knowledge and 6 were having 20% of poor knowledge regarding menopause and its management. After planned teaching program the knowledge score of married women regarding menopause, we found that 15 of the subjects were having 50% of excellent knowledge ,11 of the subjects was having 36.6% of very good knowledge ,4 of the subjects was having 13.4% of good knowledge and no one graded with average or poor knowledge. The planned teaching program was effective. A Descriptive Study to Assess the Knowledge Regarding Menopause among Premenopausal Women in Selected Village of Tarn-Taran, Punjab, in a View to Develop Health Education conducted by Dr. Ramesh women Kumari. The study was descriptive in nature. The sample size for the study was 100 pre-menopausal women of age group above 40 years in selected village of Tarn Taran, Punjab. The self-structured

knowledge questionnaire was selected for the collection of data. The obtained data was analyzed in terms of the objectives of the study using descriptive and inferential statistics. The study results showed that out of 100 samples that majority (53 %) of sample had inadequate knowledge, (33%) had moderately adequate knowledge and only (14%) had adequate knowledge. There is significant association of knowledge and selected demographic variables such as qualification ($x2=22.622$), occupation ($x2=22.178$) and family income ($x2=16.385$) on the knowledge score of premenopausal women regarding menopause in selected village as the calculated value is more than tabulated value at 0.05 level of significance. The impact of age ($x2=12.148$), religion($x2=0.354$), type of family ($x2=4.532$), source of information ($x2=3.133$) and dietary pattern ($x2=0.300$) on knowledge score of premenopausal women regarding menopause in selected village found to be nonsignificant as the calculated value is less than tabulated value at 0.05 level of significance. After the data collection health education pamphlet was distributed to each sample.

A descriptive study to assess the level of knowledge and attitude regarding menopause among menopausal women in selected rural areas in Faridabad March 2015.

The objective of the study was to assess the level of knowledge and attitude regarding Menopause among Menopausal women in selected rural areas of Faridabad. To find out association between knowledge and attitude regarding the Menopause among Menopausal women in rural areas with selected demographic variables. 100 menopausal women were drawn by convenient sampling technique. The tool consists of demographic variables, which was to collect personal information about the subjects and interview technique to assess the knowledge and structured five-point liker scales to assess the attitude towards the Menopause among Menopausal the finding reveals that 5% of the total subjects had good knowledge, 94% had average knowledge, 1% had poor knowledge. 98% of the total subjects had positive attitude, 2%had neutral attitude, 0% had negative attitude. There were found. The significant between Attitude and occupation.

Table No.1: Distribution of sample based on age

S.No	Age	Frequency	Percentage
1	25-30	10	33.33%
2	31-35	6	20%
3	36-40	4	13.33%
4	41-45	0	0%
5	46-50	10	33.33%

Table No.2: Distribution of sample based on Education

S.No	Education	Frequency	Percentage
1	SSLC/+2	17	56.66%
2	Degree	6	20%
3	Graduate	2	6.66%
4	Post Graduate	5	16.66%

Table No.3: Distribution of sample based on Religion

S.No	Religion	Frequency	Percentage
1	Hindu	4	13.3%
2	Muslim	16	53.4%
3	Christian	10	33.3%

Table No.4: Distribution of sample based on previous knowledge regarding menopause

S.No	Knowledge	Frequency	Percentage
1	yes	9	30%
2	No	21	70%

Table No.5: Distribution of sample based on socioeconomic status

S.No	Socio economicstatus	Frequency	Percentage
1	<15000	15	50%
2	15000-30000	12	40%
3	30000-50000	02	6.7%
4	>15000	01	3.3%

Table No.6: Distribution of sample based on job status

S.No	Job status	Frequency	Percentage
1	Employed	18	60%
2	Unemployed	12	40%

Table No.7: Distribution of sample based on pre-test knowledge score

S.No	Knowledge score	Frequency	Percentage
1	>25 (excellent)	0	0
2	25-20 (very good)	3	10%
3	20-15 (good)	5	16.6%
4	15-10 (average)	16	53.4%
5	<10 (poor)	6	20%

Table No.8: Distribution of sample based on post-test knowledge score

S.No	Knowledge score	Frequency	percentage
1	>25 (excellent)	15	50%
2	25-20 (very good)	11	36.6%
3	20-15 (average)	4	13.4%
4	15-10 (good)	0	0
5	<10 (poor)	0	0

Table No.9: Significance of difference between pretest and posttest knowledge score of subjects

S.No	Knowledge score	Pre-test	Post-test	Paired t test	Level of significance
1	Mean	14.4	24.16	8.20	✸Significant
2	Standard Deviation	5.6	3.4	-	-

Table No.10: Association between pretest knowledge score and elected demographic variables

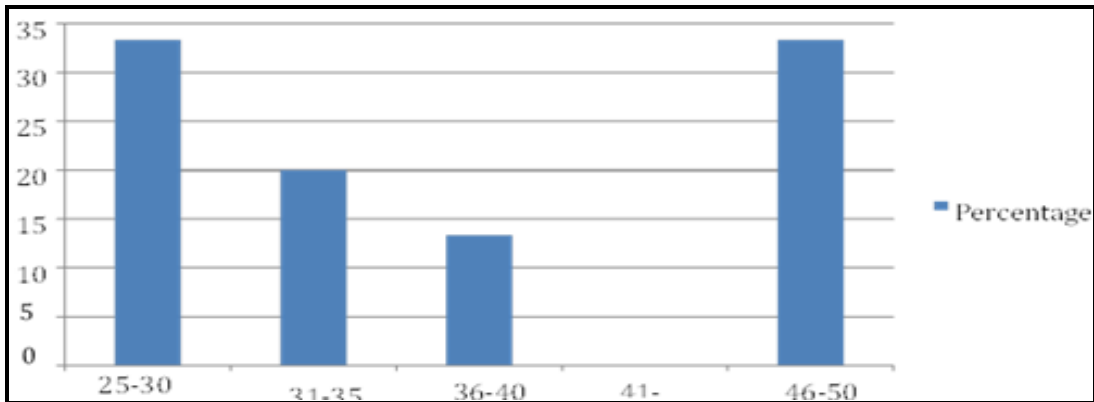| S.No	Demographic variable	Observation value of Chi-square test	Table value of Chi-square test	Df	DF Significance
1	Age	0.72	7.8	3	Not Significant
2	Education	4.27	5.99	2	Not Significant
3	Religion	6.25	5.99	2	✸Significant
4	Previous Knowledge	4.01	3.89	1	✸Significant
5	Socioeconomic Status	9.8	7.82	3	✸Significant
6	Job status	0.185	5.99	2	Not Significant

Figure No.1: Bar diagram showing distribution of sample based on age
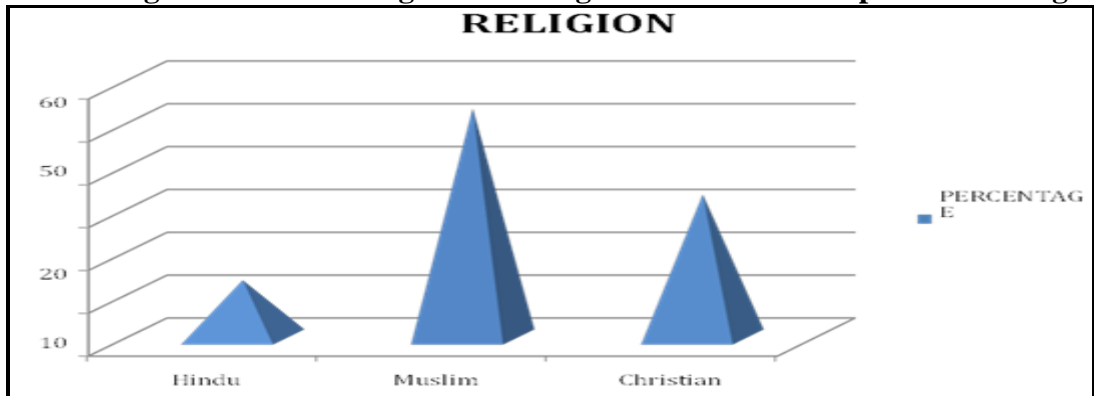

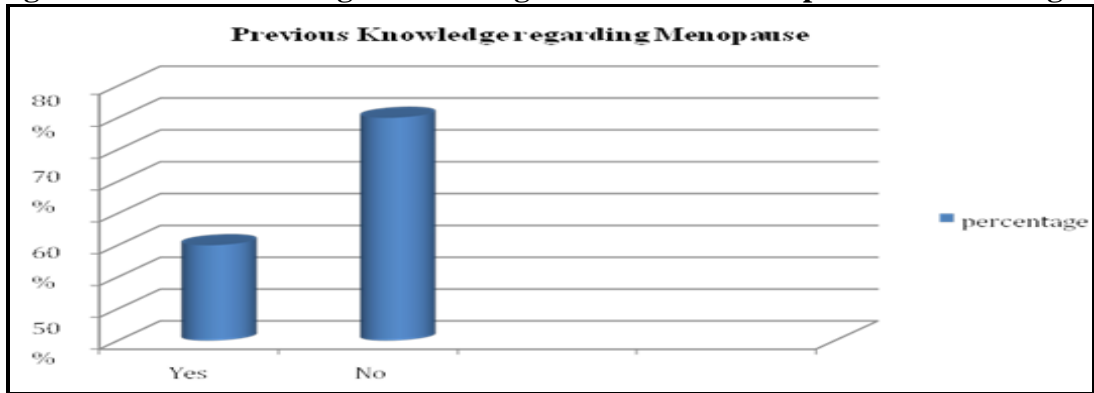**Figure No.2: Column diagram showing Distribution of samples based on Religion**

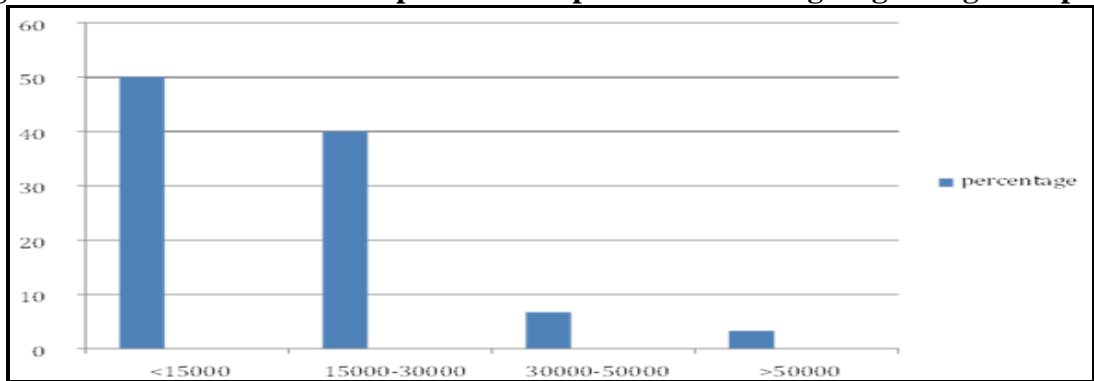**Figure No.3: Distribution of sample based on previous knowledge regarding menopause**

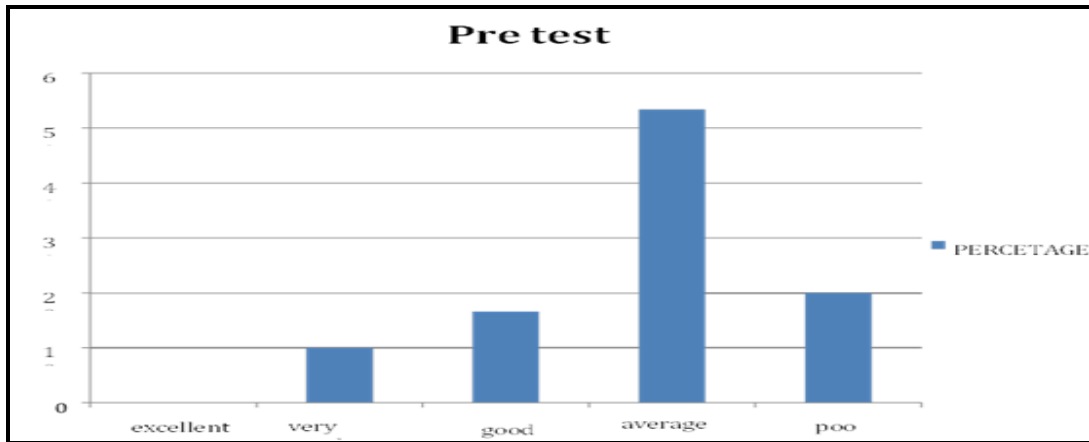**Figure No.4: Distribution of sample based on socio economic status**

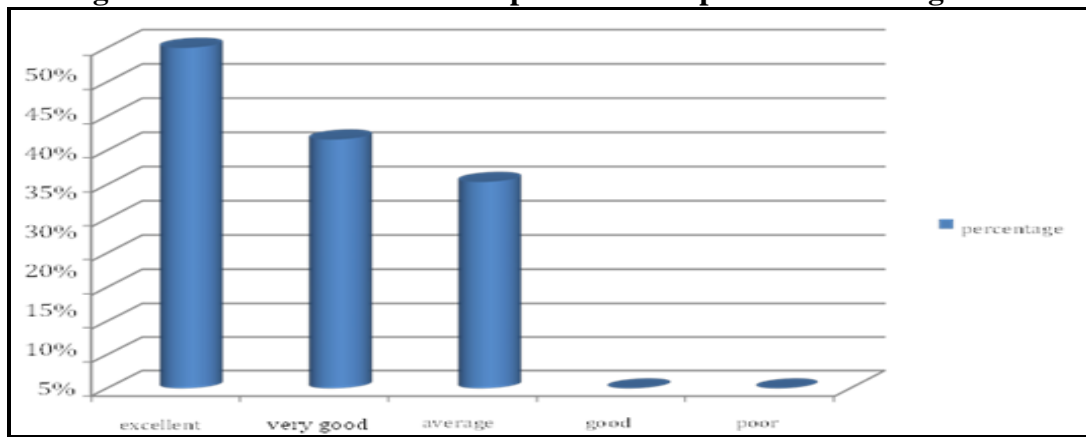**Figure No.5: Distribution of samples based on pre-test knowledge score**

Figure No.6: Distribution of sample based on post- test knowledge score

CONCLUSION

After conducting the study, the investigation reached at the conclusion that majority of married women have average knowledge about menopause in the pretest. Planned teaching program was effective in improving the knowledge of married women regarding menopause and its management.

IMPLICATION

Nurses as a member of health team can impart knowledge about menopause and its management. The findings of the study have implications in the field of nursing education, nursing practice, nursing administration and nursing research.

NURSING EDUCATION

The study highlights the importance of education to enhance the knowledge on menopause. The group should be prepared in such a way that they should recognize the importance of educational programme.

NURSING PRACTICE

The nurses, as professional health care providers have an important role in enhancing the knowledge regarding menopause problems and how to manage middle age problems and health issues.

Nurses as resource person working in hospital and community settings should conduct education program regularly for middle aged women.

NURSING ADMINISTRATION

The nurse administrator can arrange service education program and continuing education program on menopause problems and how to manage the middle age health issues and focus their attention to make the public consequences about the harmful effect of unhealthy lifestyle.

ACKNOWLEDGEMENT

CONFLICT OF INTEREST

We declare that we have no conflict of interest.

BIBLIOGRAPHY

1. Eun Kyung Kwak, Hyun Soon Park, Nam Mi Kang. Menopause knowledge, Attitude, symptom and management among Midlife Employed Women, *Journal of Menopausal Medicine,* 20(3), 2014, 118-125.
2. Amitha, Malathi G. Nayak, Pratibha. Knowledge and perception regarding menopause among Married Women, *Indian Journal of Public Health Research and Development,* 11(2), 2020, 511-516.
3. Vruthi Patel. Effectiveness of structured teaching program on knowledge regarding menapousal symptoms and its management among the Women, *IOSR Journal of Nursing and Health Science,* 3(3), 2014, 22-26.
4. Sharon A. George. The menapous experience women's perspective, *Jogin Clinical Studies,* 31(1), 2002, 77-85.
5. Mohana Sundari S K. A study to assess the level of knowledge regarding menopausal, peri menopausal syndrome, post-menopausal syndrome and its management among post-menopausal women in selected community Lucknow, UP, *International Journal of Practical Nursing,* 5(2), 2017, 91-96.
6. Melanie Ford. A descriptive study of menopausal woman's life experiences, stressors and their occupational meanings, *Eastern Kentucky University,* 2015, 1-69.
7. Helen Gebertatyor, Testamariam H. Effect of health education on knowledge and attitude of menopause among middle- age teachers, *BMC Womens Health,* 20(1), 2020, 232.
8. Aswathy S S, Laishram Dabashini Devi. Effectiveness of structured teaching programme on knowledge regarding menopausal symptoms among women in premenopausal age, *International Journal of Innovative Science and Research Technology,* 5(2), 2020, 401-405.
9. Dewhurst. Text book of obstetrics and gynecology for post graduates, *Blackwell Science,* 6th Edition, 1999, 441-461
10. Meir Stanier. Psychological aspects of post-menopausal syndrome, *British Medical Journal,* 1999.
11. Jiny James. A study to evaluate the effectiveness of structured teaching programme on knowledge regarding menopausal problems and its remedial measures among middle aged women in selected rural areas, Banglore.
12. D C Dutta. Text book of gynaecology, *New Central Book Agency (P) LTD, Calcutta,* 4th Edition, 2006, 74-75.
13. Mashiloane C D, Bagratee J, Moodley J. Awareness of attitude toward menopause and hormone replacement therapy in an African community, *International Journal of Gynecology and Obstetrics,* 76(1), 2001, 91-93.
14. Moon-Soo Lee, Jong-Hun Kim, Man Sik Park, Jaewon Yang, Young-Hoon Ko, Seung - DukKo. Factors influencing the severity of menopause symptoms in Korean post-menopausal Women, 25(5), 2010, 758-765.
15. National Center for Complementary and Alternative Medicine, *Menopausal Symptoms and Complementary Health Practices,* 2015.