

# PERCEPTION AND EXPERIENCE OF MENOPAUSE AMONG PRIMARY SCHOOL TEACHERS IN JOS NORTH, NORTH CENTRAL NIGERIA

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## ABSTRACT

### BACKGROUND

As life expectancy increases, most women spent a larger part of their lives in the post-menopausal state, with part of this during the peak of their career for working class women. Perception, attitude and experience of the menopause and its transitional period may differ from one female population to the other.

### OBJECTIVE

The objective of this study was to determine the perception and experience of menopause among a group of educated Nigerian career women, and how menopausal symptoms affect their family relationship and work performance.

### METHOD

This was a cross sectional study. Two hundred and twenty five post-menopausal primary school teachers in Jos North were administered structured questionnaires. The information obtained were analysed using Epi info 2002 statistical software.

### RESULTS

Most of the women (99.1%) felt that menopause was a natural process of aging. The most frequently reported symptoms were low backache or muscle pains (72.9%), poor memory or forgetfulness (63.6%), hot flushes (51.1%) and tiredness (49.8%).

Over half (55.6%) of the women were sexually active with 84.8% of them reporting reduced libido. Over half (56%) of the women studied felt that menopause negatively affected their work performance. Only 8% of the women had heard of hormone replacement therapy.

### CONCLUSION

Post-menopausal primary school teachers in Jos North have a positive perception of menopause. Menopausal symptoms are also common and this negatively affects work performance in quite a number of them.

**KEYWORDS:** Perception, Experience, Menopause, Primary school teachers

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## INTRODUCTION

**M**enopause is the permanent cessation of menstruation resulting from loss of ovarian follicular activity. Natural menopause is recognized to have occurred after 12 consecutive months of amenorrhoea for which there is no other obvious pathological or physiological cause<sup>1</sup>. Menopause occurs with the final menstrual period, which is known with certainty only in retrospect – a year or more after the event. No adequate independent biological markers does exist for the event<sup>1,2</sup>.

For most women, the natural menopause takes place between the ages of 45 and 53 years<sup>3,4</sup> with an average of about 50 years<sup>2</sup>. The average age at menopause varies between developed and developing countries, occurring earlier in developing countries and late in developed countries<sup>2,4,6</sup>.

As life expectancy increases, more women spent a larger proportion of their lives in the post menopausal state. In 1990, some 467 million women were aged 50 years or over and this is expected to rise to 1200 million by the year 2030<sup>5</sup>. Growing numbers of these women can expect to live for several decades after the menopause

In 1990, 40% of post menopausal women lived in the world's industrialized regions while 60% live in

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developing countries. By 2030, although overall numbers would have increased, the proportion of post menopausal women living in industrialized regions will have declined to 24% and 76% will be living in developing countries<sup>2,3,7</sup>, thus the menopause transition and the post menopause will very much be a condition of the 21st century in the developing countries.

The body undergoes a variety of changes both because the ovaries stopped functioning and produce fewer hormones and because of aging. Wide ranges of symptoms have been attributed to the menopause. However, it has been difficult to distinguish between symptoms that result from loss of ovarian function and those from the aging process or from the socio-environmental stresses of the mid-life years<sup>3</sup>. There are cultural differences in attitudes to the menopause; for example menopausal complaints are fewer in Japanese and Chinese than in North American women<sup>8,9</sup>. The incidence of menopausal symptoms among women in developing countries has been reported to be far lower than among women in Europe and North America<sup>2</sup>. Menopause in women in developing countries have some positive aspects, such as freeing them from the burdens of childbirth and from cultural restrictions imposed on the social and religious life of younger women who still menstruate. More influence in the families and communities come with the onset of menopause. Thus the psychological reaction of women to the menopause reflects the values of the society and the social status assigned to the aging woman.<sup>2</sup>

Perception, attitude and knowledge regarding the menopause and its transitional period may differ from one female population to another. Numerous factors determine women's experiences; social background, occupation, physical and emotional health, education and general symptoms may influence the view of menopause.<sup>10</sup> Studies on the effect of education on menopausal experience in some parts of the world show conflicting results, for instance, a study among Indonesian women found that educated women reported more frequent menopause symptoms than non-educated women<sup>11</sup> while a multicultural study in the United State shows that less educated women reported more menopausal symptoms than highly educated women<sup>12</sup>. A study in Bahrain shows that attitude towards the menopause significantly differ based on education, with the university group having the most positive attitude and the illiterate having the most positive attitude<sup>13</sup>

Despite the fact that a high number of the female workforce are within the peri menopausal age range, the menopause is rarely seen as a health and safety or occupational health issue. The published literature

reveals extensive research on the nature of menopause and effects on midlife women's general health. However, little research has also explored the effects of menopause on women's work performance. Hormone replacement therapy (HRT) was introduced to address symptoms of the perimenopause and menopause and can ease some of the symptoms as well as reduce the risk of diseases. However there have been concerns about whether the overall benefit outweighs the risk. Subsequently, widespread media coverage in western countries led to decrease in the uptake of HRT and increase discontinuation. The situation in low resource countries like Nigeria is different, little is known about women's knowledge about hormone replacement therapy.

Every woman's experience of the menopause is unique: she may experience all the symptoms or none of them. Some women find the transition barely noticeable while others find it life altering<sup>14</sup>. Attitudes of women to the menopause are strongly influenced by social, cultural and economic settings in which they live and may also reflect differences in modes of treatment for or perception of symptoms<sup>15</sup>.

The objective of the study was to determine the perception of a group of educated Nigerian career women (primary school teachers) about the menopause and to explore their experience of symptoms in terms of its prevalence and how it affects family relationship and work performance. It also aims to determine their knowledge and utilization of hormone replacement therapy.

## METHODS

This was a cross sectional study. A pretested structured questionnaire containing mainly closed ended questions was self-administered to female public primary school teachers in Jos North Local Government Area who had attained menopause, after obtaining their consent. These women were selected through a convenience sampling technique, during a 2 week screening exercise for all teachers in the local government area from 18<sup>th</sup> to 29<sup>th</sup> February 2008. Teachers who declined to participate or having medically or surgically induced menopause were excluded from the study. The information obtained from the women included their age, educational level, parity, year of last menstruation, age at which the last menstruation occurred and whether they have had treatment for any medical or surgical condition before the onset of their last menstruation. Other information obtained included their opinion about the cessation of their menstruation and its effects on their relationship with family members and work performance. They were also asked if they experienced some common

menopausal symptoms and their knowledge and source of information about hormone replacement therapy. During the screening, two hundred and ninety two (292) questionnaires were issued to women who said that they had attained menopause (stop menstruating). Two hundred and seventy three (273) questionnaires were completed and returned out of these; two hundred and twenty five (225) had stopped menstruating naturally for at least one year. These were the subjects used for this study. The data was analysed using simple statistical methods with EPI info 2002 statistical software.

## RESULTS

The mean age of the women studied was 53.72 +/- 3.079 years, range 49-63 years (Table I).

Table I: Age distribution of postmenopausal primary school teachers in Jos North

Age (years)	Frequency (N)	Percentage (%)
46-50	43	19.1
51-55	108	48
56-60	69	30.7
61-65	5	2.2
Total	225	100

Mean : 53.72 +/- 3.079. Range: 49-63years

The mean parity was 5.76 +/- 2.14, range 0-9. All the respondents had tertiary education (either a degree or national certificate of education (NCE)). The mean age at menopause was 48.4 +/- 1.9 years. The median age at menopause was 48 years. About 57.8% (154) of the respondents have been menopausal for a period of 5 years or less and 6.7% (15) were greater than 10 years post menopause, mean 5.3 +/- 3.0, range 1-15 years (Table II).

Table II: Duration of menopausal period among primary school teachers in Jos North

Duration (years)	Frequency	Percentage (%)
.	130	57.8
6-10	80	35.5
11-15	15	6.7
Total	225	100

Mean : 5.3 +/- 3.0. Range: 1-15years

The common menopausal symptoms experienced by the women included low-backache or muscle pains (72.9%), poor memory or forgetfulness (63.6%), hot flushes (51.1%), easy fatigability (49.8%) and urinary frequency (37.3%). Other symptoms experienced include vaginal dryness (34.7%), night sweat (34.8%) and difficulty falling asleep (25.3%). Five women (2.2%) responded affirmatively to the symptoms of stress incontinence [urine comes out when you cough or carry heavy objects?] (Table III).

Table III: Prevalence of menopausal symptoms experienced by postmenopausal primary school teachers in Jos North

SYMPTOM	FREQUENCY (N =225)	PERCENTAGE (%)
Low backache/muscle pains	161	79.9
Poor memory/forgetfulness	143	63.6
Hot flushes	115	51.1
Feeling tired frequently	110	49.8
Urinary frequency	84	37.3
Night sweats	78	34.8
Vaginal dryness	78	34.8
Insomnia	57	25.3
Anxiety/feeling nervous	52	23.3
Urine comes out on coughing/straining	5	2.2
Pain during micturition	4	1.8

Over half (55.6%) of the women studied were sexually active, although 84.8% (125) of these women reported reduced sexual desire.

Most of the women saw menopause as a normal process of aging (99.1%), however, 24.9% of the women thought that symptoms due to the menopause should be treated (Table IV).

Table IV: Perception of post-menopausal primary school teachers in Jos north about menopause

OPINION ABOUT MENOPAUSE	FREQUENCY	PERCENTAGE (%)
Normal process of aging	223	99.1
Disease condition	2	0.9
TOTAL	225	100
<i>Should menopausal symptoms be treated?</i>		
Yes	56	24.9
No	75	33.3
Don't know	94	41.8
TOTAL	225	100

The menopausal status did not affect their relationship with their spouse (70.2%) or children (55.1%) in most of the women studied. Menopause, however, affected this relationship unfavourably in a small proportion of the women. Over half of the women studied (56%) indicated that the onset of menopause had negatively affected their work performance (Table V).

Table V: Effect of menopause on family relationships and work performance among postmenopausal primary school teachers in Jos north

EFFECT ON RELATIONSHIP/WORK	FREQUENCY (N)	PERCENTAGE (%)
<i>With spouse</i>		
Favourable	26	11.6
Not favourable	40	17.8
No effect	158	70.2
No response	1	0.4
Total	225	100.0
<i>With children</i>		
Favourable	78	34.7
Not favourable	22	9.8
No effect	124	55.1
No response	1	0.4
Total	225	100.0
<i>Work performance</i>		
Favourable (improved)	0	0.0
Not favourable (reduced)	126	56.0
No effect (no change)	99	44.0
Total	225	100.0

None of the women studied was on hormone replacement therapy (HRT) nor had ever used it. However, 8% of the women had heard of HRT, either from a health worker or have read about it.

#### DISCUSSION:

The purpose of this study was to find out perception of the menopause among a group of educated postmenopausal Nigerian career women (primary school teachers) and their experience of menopausal symptoms and how it affect their work performance. It was clear from this cohort of women studied that most of them perceived menopause as a normal physiological process of aging (99.1%). This finding is similar to the studies in Ibadan, Nigeria (95.6%)<sup>15</sup> and Egypt<sup>16</sup>. This explains the finding in this study which

shows that most of the women don't know if menopausal symptoms should be treated at all. Majority of the women indicated that menopause did not affect their relationships with their spouse and had a favourable effect on the relationship with their children. This is due to the culture in most African societies where post-menopausal or elderly women enjoy a higher social status, sometimes equal to that of men<sup>17</sup>, unlike their premenopausal counter parts.

This study also indicates a high prevalence of menopausal symptoms. This may explain the negative effect of the menopause on work performance noted among over half of the women interviewed. Though to our knowledge no study has evaluated the effect of menopause on work performance among career women in Nigeria, however, a study in the UK indicated that approximately equal proportion of women agreed/strongly agreed and disagreed/strongly disagreed that their performance at work had been negatively affected by their menopausal symptoms<sup>18</sup>. There is need for further studies on this area in our environment. The common symptoms in this study were non-specific musculo-skeletal symptoms of low backache or muscle pains and poor memory or forgetfulness. These were not significantly reported among women studied in Lagos, Nigeria<sup>19</sup> where hot flushes was relatively more common (83.7%) among educated respondents compared to the frequency of 51.1% among respondents in this study. The teaching profession of the women may have made these symptoms more pronounced. There may however be a genuine difference in these symptoms in the two populations.

Generally the menopausal symptoms reported by respondents in this study are similar to findings from other studies both within and outside Nigeria, with varying prevalence of symptoms from one region to the other. For instance, a lower prevalence of vasomotor symptoms has been reported in Asians compared to Africans and Caucasians<sup>5,19-22</sup>. In this study, over half (55.6%) of the respondents were sexually active, this percentage is higher than those obtained in Ife (42%)<sup>5</sup> and in Ibadan where 71.13% of respondents feel that sexual life ended with menopause<sup>15</sup>. This difference may be due to the high proportion (57.8%) of women in early menopause 5years in this study population. The educational level of these women may be a factor in making them have a more positive attitude towards sexual activity in the menopause. The difference may genuinely be due to higher post-menopausal sexual activity among women in Jos than in Ife and Ibadan possibly due to cultural differences. The reduction in libido in this study confirms the findings of most studies<sup>5,15,19-22</sup>.

The finding that none of the women were on hormone replacement therapy is the same with findings from Ibadan<sup>15</sup>. This is most likely related to the poor knowledge of the women about hormone replacement therapy (8%). This is in great contrast with studies from an urban region in South Africa which indicated that 78.5% of post-menopausal women in the study were using hormone replacement therapy<sup>23</sup>. A similar study in a rural South African community however, shows that 94% of the women have never heard about hormone replacement therapy<sup>24, 25</sup>. This is similar to the finding of 92% in this study.

We conclude that there is a positive perception of the menopause among this group of career women (primary school teachers in Jos North), even though menopause negatively affects work performance in quite a number of them. Menopausal symptoms are common among them, despite this; they have a low knowledge and no experience with the use of hormone replacement therapy. There is a definite need for dissemination of information and sensitization of the public especially females about menopause and hormone replacement therapy. This will empower them to make informed choices about their health during this period.

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