

Factors Related to The Mother's Readiness to Face Menopause Bandar Klippa Village, Percut Sei Tuan District, Deli Serdang Regency

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<p>Track Record Article Diterima : 31 May 2022 Dipublikasi: 25 June 2022</p>	<p style="text-align: center;">Abstrak</p> <p>Menopause is the scientific cessation of menstruation. One of the problems in menopause will be caused by the mother's lack of readiness to deal with menopause which can cause symptoms, diseases and psychological disorders that need attention.</p> <p>This type of research is a descriptive-analytical survey using secondary and primary data. This study included all postmenopausal women in hamlet XX, Bandar kalippa Village, Percut Sei Tuan District, Deli Serdang Regency with a sample of 38 people.</p> <p>The results of this study show that the readiness of postmenopausal women to face menopause in 2022, based on the age of the majority of 40-44 years 20 people (52.63%) and based on the majority of junior high school education below 21 people (55.26%) and based on the knowledge that lacks knowledge 28 people (73.68%) and based on the economy 26 people (68.42%). Moreover, this shows that the probability $(0.000) < (0.05)$ Ho is rejected means Ha is accepted; it can be concluded that age, education, knowledge and economy are related to the mother's readiness to face menopause.</p> <p>It is hoped that all postmenopausal women in hamlet XX Bandar kalippa Village, Percut Sei Tuan District, Deli Serdang Regency to increase higher readiness for menopause, increase knowledge of menopause, and increase awareness and willingness to overcome disorders and readiness in menopause to create maternal health in dealing with menopause until the elderly.</p> <p>Keywords: Knowledge; Menopause;Mother; Readiness.</p>
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1. Introduction

According to the World Health Organization (WHO), it is estimated that 25 million women will enter menopause every year. WHO also said that in 1990 around 467 million Indonesian women spent their time postmenopausal, and 40% of postmenopausal women lived in developing countries with an average age of 51 years of menopause. Indonesia's population in 2020 will reach 262.6 million people, with women living at the age of menopause at around 30.3 million people with the average age of menopause at 49 years. Estimates show that there will be around 30-40 million women from the entire population of Indonesia, 240-250 million people in 2010. According to WHO, in 2025, postmenopausal women will jump from 107 to 373 people.

When women enter menopause, women experience a decrease in the amount of the hormone estrogen in the blood. As we know by definition, menopause is the cessation

of the menstrual cycle for good; this situation is understood by some of our society, especially the older generation, that at menopause, women are no longer allowed to have sex. Menopause occurs in line with age; the ovaries become less responsive to stimulation by LH and FSH, which are produced by the pituitary gland. As a result, the ovaries release less estrogen and progesterone, and eventually, the ovulation process (release of an egg) stops (Khanjani, 2017; Wita, 2016).

The changes that occur both physically, psychically and sexually will cause women who are facing menopause to be anxious and worried. The anxiety they experience is often associated with worry in the face of unprecedented situations. This kind of woman is usually very sensitive to emotional influences. Generally, the woman is not well informed, so in her imagination, only negative effects will be experienced after menopause (Novianti, 2019).

Physical symptoms accompanying menopause include hot flushes from the chest to the face, night sweats, vaginal dryness, insomnia, urinary incontinence, fatter, and osteoporosis (Sasnitiari, 2018). At the age of 50, women enter menopause so that there is a decrease or loss of the hormone estrogen, which causes women to experience complaints or disorders that often interfere with daily activities and can even reduce their quality of life (Nurlina, 2017). Most women start experiencing menopause symptoms in their 40s and peak at 50 -most experienced symptoms for less than five years, and about 25% for more than five years (Laritmas, 2020). However, when taken on average, generally, a woman will experience menopause around the age of 45-50 years. As a result of the change from menstruation to no longer menstruating, there is an automatic change in the female reproductive organs (Azizah, 2020).

Study Linda (2019) shows the relationship between physical changes and readiness to face menopause. The correlation results of 0.375 mean that the closeness of the relationship of this study is included in the low category. It is necessary to strive for menopausal health services by intensifying physical exercise according to age with the frequency of three times a week and a duration of 30 minutes per exercise to get optimal results in improving the quality of life of menopausal women (Simangunsong, 2020).

A gradual decrease in estrogen levels causes the body to adjust to hormonal changes slowly, but in some women, this drop in estrogen levels occurs suddenly and causes severe symptoms. This is often the case if the removal of the ovaries causes

menopause. These changes often affect the psychological state of a woman. Anxiety that appears in postmenopausal women is often associated with readiness to face a previously unworried situation. Such women are very sensitive to the emotional effects of hormonal fluctuations. Generally, they do not get the correct information, so they imagine the negative effects experienced after entering menopause. They are worried about the end of the reproductive era, which means the cessation of sexual and physical desires.

Premenopause is a phase occurring at the age of 40 and starts the climacteric phase. This phase is characterized by irregular menstrual cycles, elongated menstrual bleeding, more menstrual blood count, and the presence of pain during menstruation (Agustiawati, 2017). A person's mental readiness to face menopause depends on their concern for menopause. People feel anxious about facing menopause; of course, the level of readiness to face menopause will be different from people who do not worry about menopause. People who are not anxious about menopause will be better prepared for menopause than people who are anxious about menopause (Sari, 2020).

According to Novianti (2019), the mother's knowledge is related to the mother's readiness to face menopause. The good knowledge possessed by the mother will affect her readiness to face the menopause period, while the mother who is well known but does not have readiness due to the fear of facing menopause and age-related practice. Knowledgeable mothers are not good but have readiness because of the information obtained about menopause (Isviyanti, 2020).

Sufficient knowledge will help women better understand and prepare for Menopause. Educated women will have better health knowledge. Education is learning to develop and improve certain abilities so that educational goals can stand alone (Siregar, 2019; Sinaga, 2019).

Socio-economic conditions affect physical factors, health and education (Siregar, 2020). Women from low economic groups tend to be designed and adapt well when experiencing Menopause. As a person ages, the experience increases, so it will be better to face Menopause.

Based on the initial survey conducted by researchers in the hamlet of XX women who want to enter menopause totalling 38 women obtained the following data: 34 people (89.29%) said they were afraid of the cessation of their reproductive period when facing menopause, they said they were afraid of their husbands do not love them anymore, three people (7.14%) say that they are afraid of changing their bodies

when they get old, they say they do not know about stopping menstruation can affect body changes and as many as one people (3.57%) say they know menopause is a period that women will indeed experience.

2. Method

This analytical descriptive research looks at factors related to maternal readiness to face menopause in Bandar Klippa Village, Percut Sei Tuan District, Deli Serdang Regency. The population and samples in this study were pre-menopausal mothers in Bandar Klippa Village, Percut Sei Tuan District, Deli Serdang Regency has as many as 38 people from February to April 2022. Moreover, the sample in this study is the entire population, namely 38 people in the total population using the total sampling formula.

The data collection technique uses primary data by distributing questionnaires to respondents through checklists and secondary data obtained from data from Bandar Klippa Village, Percut Sei Tuan District, Deli Serdang Regency based on population data. Data analysis uses univariate and bivariate methods using chi-square statistics.

3. Results and Discussion

Table 1. The Relationship between Respondents' Age and Mother's Readiness to Face Menopause

Age	Readiness to Face Menopause				Total	P
	Yes		No			
	f	%	f	%		
40-44 years old	5	25	15	75	20	100
45-55 years old	15	83,33	3	16,67	18	100
Total	20	52,64	18	47,37	38	100

Based on the results of research conducted in table 1, it can be seen that the majority of respondents aged 40-44 years who are ready to face menopause are as many as 20 people (52.64%) and respondents aged 45-55 years who are not ready as many as 18 people (47.36%). From the table above, it can be seen that the results of statistical tests with the chi-square test show that the probability (<0.001) $< \alpha$ (0.05) H_0 was rejected. This shows that the age of the respondents is related in tandem to the low level of readiness in the face of menopause.

Table 2. The Relationship of Respondents' Education in Readiness to Face Menopause

Education	Readiness to Face Menopause				Total		P
	Yes		No		%	%	
	f	%	f	%			
Junior High School	2	9,52	19	100	90,48	100	<0.001
High School	3	42,86	4	100	57,14	100	
Diplomas and bachelors	8	80	2	100	20	100	
Total	13	28,95	25	100	65,79	100	

Based on the results of research conducted from table 2, it can be seen that the majority of respondents who have a lower junior high school education who are ready to face menopause as many as 2 people (9.52%) who have a high school education as many as 3 people (42.86%), who have a diploma education, barchelor as many as 8 people (80%), while those who are not ready to face menopause who have a junior high school education and below as many as 19 people (90.48%), who have a high school education as many as 4 people (57.14%), who were educated diploma, barchelor as many as 2 people (20%). From the table above, it can be seen that the results of the statistical test with the chi-square test show that the probability (<0.001) of $< \alpha$ (0.05) H_0 is rejected. This shows that respondents' education is meaningfully related to the low level of maternal readiness in the face of menopause.

Table 3. The Relationship of Respondents' Knowledge in Readiness to Face Menopause

Knowledge	Readiness to Face Menopause				Total		P
	Yes		No		%	%	
	f	%	f	%			
High	8	80	2	20	10	100	<0.001
Low	4	14,28	24	85,71	28	100	
Total	12	31,58	26	68,42	38	100	

Based on the results of the study conducted in table 3, it can be seen that the majority of respondents who were ready and said well were eight people (80%), who said not good as many as four people (14.28%) and those who were not ready to say yes as many as two people (20%), who said no as many as 24 people (85.71%). From the table above, it can be seen that the results of statistical tests with exact fisher show that the probability (<0.001) $< \alpha$ (0.05) H_0 is rejected. This shows that respondents'

knowledge is meaningfully related to the low level of maternal readiness to face menopause.

Table 4. The Relationship Of The Respondent's Economy With Internal Readiness Facing Menopause

Income	Readiness to Face Menopause				Total		P
	Yes		No		%	%	
	f	%	f	%			
<850.000 IDR	4	15,38	22	84,62	26	100	<0.001
>850.000 IDR	10	83,33	2	16,67	12	100	
Total	14	36,84	24	63,16	38	100	

From the table above, it can be seen from 38 respondents who were ready and whose economy was <850,000, as many as four people (15.38%) and those who were not ready, as many as 22 people (84.62%), and whose economy >850,000 who were ready as many as two people (16.67%) and those who were not ready as many as ten people (83.33%). From the table above, it can be seen that the results of the statistical test with the chi-square test show that the probability (<0.001) of $< \alpha$ (0.05) H_0 was rejected. This shows that the respondents' economy is meaningfully related to the low level of maternal readiness in the face of menopause.

A woman will go through the process of getting old and going through menopause. The age period of 40 –55 years is very interrelated because it is related to a woman's bodily and spiritual changes. Many women experience physical stress and psychiatric stress that affects their emotions. Various complaints will be experienced by women from mild to severe symptoms (physical and psychological symptoms) known as a climacteric syndrome (Simangunsong, 2020; Baber, 2016). Regular physical activity will be effective in reducing the symptoms of menopause as well as improving health in old age (Jayasinghe, 2016; Sandroff, 2018).

Age is the life span measured by years; it is said that early adulthood is the age of 18 years to 40 years. The chi-square test showed that maternal age was associated with readiness to face menopause. In this case, it is stated that age is a significant influence in dealing with menopause. These results indicate that maternal age 40-44 years is related to factors of maternal readiness in dealing with menopause. Octaviani (2018), the duration of exercises with moderate intensity physical activity slowly to high intensity, for three days a week, can improve blood pressure control and is useful in training weight loss programs.

The distribution of the relationship between mother's age in readiness to face menopause can be found that 15 people are not ready to face menopause aged 40-44 years (83.33%) and those who are ready are five people (25%), while at the age of 45-55 years who are not ready to face menopause are three people (16.67%) and 15 people are ready (83.33%).

So, according to the researcher's assumptions from the research results, mothers aged 45-50 years are more prepared to face menopause than mothers aged 40-44 years because older mothers know more or have more experience than younger mothers. Education is a continuous process of higher adjustment for human beings who have developed physically and mentally. The chi-square test results showed that maternal education was related to the mother's readiness to face menopause. In this case, it states that education is a tool that can receive knowledge and expand the mind so that it is easy to develop oneself to take action decisions (Sitorus, 2020). Mothers with low education find it difficult to accept innovation; most of them are less able to improve the welfare of their families. Mothers with low education are usually less aware of the importance of education in their children's survival, resulting in low education in postmenopausal mothers (Hanafi, 2021).

The results showed that the majority of respondents with junior high school education and below had the highest percentage of 21 people (55.26%), those with high school education were seven people (18.42%), and the Diploma were ten people (26.32%) related to the mother's readiness to face menopause. If it is seen from table 2 with 38 respondents that the distribution of the relationship between maternal education and readiness to face menopause, the results show that junior high school education and below who said they were ready were two people (9.52%), high school education was three people (42.86%), education Diploma, Bachelor as many as eight people (80%), while those who said they were not ready for junior high school education and below were 19 people (90.48%), who had high school education as four people (57.14%), with education Diploma, bachelor as many as two people (20%).

Mothers with a low level of education are an obstacle for mothers to motivating themselves in preparing for menopause because the basic education level still has limitations in absorbing and processing the information obtained; besides that, they cannot also analyze needs, thus causing their attitudes to be negative (Sasrawita, 2017). So, according to the researcher's assumptions from the research results, mothers with higher education are more prepared to face menopause than

mothers with low education because mothers with higher education gain more knowledge than mothers with low education. The mother's knowledge about menopause is all the information she has about menopause, whether it is the definition of menopause to the menopause stage. The chi-square test results show that the mother's knowledge relates to the factors of readiness to face menopause. This is because mothers who lack knowledge are more unprepared to face menopause.

The results showed that most respondents said they knew about menopause; as many as ten people (26.32%) said they did not know about the menopause stage as many as 28 people (73.68%). It can be seen in table 3 that the distribution of knowledge of those who are ready to face menopause who say they know as many as eight people (30.4%), who say they do not know as many as four people (14.26%), while those who are not ready to face menopause who say they know as many as two people (7.6%), who said they did not know as many as 24 people (85.71%).

Knowledge of one of them is supported by education; adequate education will make it easier for a person to gain a better understanding of menopause. A good understanding of the ins and outs of menopause will support a woman's readiness to face menopause. Knowledge is a result, and this occurs and performs sensing of a certain object (Notoatmodjo, 2018; Ashar, 2020). A mother's knowledge will be related to the source of information obtained when the mother gets enough information; it will give the mother good knowledge. So, according to the researcher's assumptions from the research results, mothers with good knowledge are more prepared to face menopause than mothers with poor knowledge because mothers with good knowledge know more than mothers with poor knowledge.

Stress is difficult to avoid for women who judge or consider menopause to be a scary event and try to avoid it. She will feel very miserable because she has lost the signs of womanhood that she has been proud of and will face menopause with such anxiety and fear that she is not ready to face menopause. It is likely to happen because he lacks the correct information about the ins and outs of menopause. On the other hand, for a woman who considers menopause as something that all women will face, then she will not experience stress and face it with full acceptance and sincerity so that the various physiological disorders she experiences do not have an impact on psychological disorders and will be better prepared to face menopause (Linda, 2019).

The readiness of a person or mother to face menopause because it has a very important role in readiness to face menopause. A positive attitude that a person has

can influence a person's feelings, thoughts and actions towards changes in physical changes experienced in the run-up to menopause. To make a person or mother more ready to take action in the face of menopause both physically and psychologically. Meanwhile, a negative attitude makes a person not ready to face the changes that occur during menopause (Sari, 2020).

Socio-economics is one of the fields of study that tries to solve the problem of the basic needs of human life. The results of the test using the chi-square test show that the economy is related to the readiness of the mother to face menopause.

The results showed that from 38 respondents whose mother's income per month was Rp. <850.000, there were 26 people (68.42%), while the income is Rp.> 850,000 who are not ready as many as two people (16.67%), who are ready as many as ten people (83.33%).

This means that mothers with low economic status are more unprepared to face menopause. So, according to the researcher's assumptions from the results of the study, mothers who earn a lot are more prepared to face menopause than mothers whose income is less because mothers who have sufficient income can more easily meet nutrition than mothers whose income is more or less cannot fulfil nutrition because nutrition is related to the fast and slow can menopausal.

A woman who is approaching menopause should always think positively that the condition is something natural in nature. This period of change will be well passed, without any significant interference, if the woman can adjust to the new conditions. The ready and unprepared conditions women experience in facing and overcoming menopause are greatly influenced by how they are judged during menopause.

4. Conclusions and Suggestions

From the results of the study, it was found that five mothers ready to face menopause aged 40-44 years (13.16%) and 15 people (39.47%), mothers aged 45-55 years who were not ready (39, 48%) and three people (7.89%) who were not ready. There were mothers with junior high school education and below who were ready to face menopause 2 (5.26%) were not ready, 19 people (50%) with high school education that was ready, three people (7.90%) who were not ready were four people (10.53%), education Diploma, bachelor who are ready eight people (21.05%) who are

not ready two people (5.26%). Some mothers know and are ready for eight people (21.05%), who are not ready for two people (5.26%), and those who do not know who are ready are four people (10.53%) who are not ready for 24 people (63.16%), and there are mothers whose economy is IDR <850,000 ready four people (10.53%) who are not ready 22 people (52.63%), whose economy is IDR > 850,000 who are ready ten people (26.32%) who are not ready two people (5.26%).

It is hoped that postmenopausal women will know about menopause so that mothers are better prepared to face menopause. Families are expected to be able to help elderly mothers in dealing with menopause so that elderly mothers are ready to face their menopause.

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