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A comparative study to assess the knowledge of rural and urban women with regard to menopausal problems and its natural remedies at selected areas of Guntur (District), Andhra Pradesh

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Abstract

Objective: To compare the knowledge of rural and urban women with regard to menopausal problems and its natural remedies. 2) To associate the knowledge of rural and urban women with regard to menopausal problems and its natural remedies with their selected variables.

Materials and Methods: A comparative descriptive research design was adopted. A total 200 (urban (n=100) and rural (n=100)) menopausal women were selected by using non-probability purposive sampling technique. Data were collected by using structured knowledge questionnaire. Data was analyzed by using descriptive and inferential statistics.

Results: Majority of the rural women 58 (58%) had moderate knowledge while among urban women majority 51 (51%) had inadequate knowledge. The mean knowledge of rural women was 17.73 with a standard deviation of 4.12 and regarding urban women the mean knowledge was 16.31 with a standard deviation of 3.88. There is a difference between the knowledge of rural and urban women with as the calculated independent 't' value was 2.51 at 0.05 level of significance. Association was found between the religion ($\chi^2=15.7$) in rural women and occupation ($\chi^2=23.2$) among urban women.

Conclusion: It is important to educate the women on menopausal problems and its natural remedies in way to improve their quality of living.

Keywords: comparative, women, menopausal problems, natural remedies

Introduction

Women are the vital set up and heart of the family. Women are facing lot of problems through their life. One of the most common problems they are facing is menopause and hormonal changes during their middle adulthood ^[1].

Menopause is a stage of life, not a disease ^[2]. Menopause has been defined by the WHO as the permanent cessation of menstruation resulting from the loss of ovarian follicular activity, 12 months of consecutive amenorrhoea is recognised to occur in natural menopause ^[3].

With the increasing life expectancy, a woman spends almost 1/3rd of life in menopause. Menopause is cessation of periods for 12 months or cessation of ovarian function resulting in permanent amenorrhoea. Menopause usually occurs more or less in mid-life, signalling the end of the reproductive phase of women's life ^[4]. In India, the normal age of the menopause is 47.5 years of age, yet it can begin any time between 39 and 51 years of age and can last in the vicinity of 2 and 8 years ^[5].

During the transition to menopause, women may experience vasomotor, urogenital, psychomotor and psychological symptoms as well as sexual dysfunction ^[6].

Overall, menopause causes a wide range of symptoms such as hot flushes, night sweats, aching in muscles and joints, sleeping problems, short breath, weight gain, increased facial hair, depression, irritability, anxiety, sexual problems, vaginal dryness and urinary symptoms such as urine leakage while laughing and coughing. These symptoms decrease women's health and affect their biological, psychological and social health ^[7].

Menopause required no medical treatment. Instead, treatments there are several therapies available for the management of conditions associated with menopause. Therapies may include hormone therapy, vaginal oestrogen, low dose antidepressants, vitamin 'D' supplements, etc. However, longitudinal studies have found that the women who utilized these therapies had an expanded hazard for heart attacks, stroke, and breast malignancy. And many studies have reported that, menopausal women can handle the signs and symptoms by the home remedies which includes cool hot flushes by drinking more water, get enough

sleep, practice relaxation techniques, a balanced diet, regular exercise and by avoiding alcohol consumption and smoking^[8].

Objectives

1. To compare the knowledge of rural and urban women with regard to menopausal problems and its natural remedies.
2. To associate the knowledge of rural and urban women with regard to menopausal problems and its natural remedies with their selected variables

Materials and Methods

Research approach: Quantitative research approach.

Research design: Comparative descriptive research design.

Setting of the study: The urban area is Israel pet and rural area is Kuragallu in Guntur, Andhra Pradesh

Sample and sampling technique: 200 women of whom 100 were rural and 100 were from urban by using Non-probability purposive sampling technique.

Method of data collection: a structured knowledge questionnaire was adopted. The tool was organized under the following sections:

Section A: Socio-demographic data

Section B: 33 objective type questions regarding

menopausal problems and its natural remedies.

Validity

The structured knowledge questionnaire for the present study was validated by 7 experts in Obstetrics and Gynecological Nursing.

Reliability

The reliability of the test obtained was 0.84 using test re-test method.

Pilot study

Pilot study was conducted on 10 rural women and 10 urban women. The study was found feasible.

Data collection

The data were collected from February 6, 2020 to March 6, 2020 personally by the investigator.

Plan for data analysis

Descriptive statistics:

- Frequency and percentage
- Mean and standard deviation

Inferential statistics

- Independent 't' test
- Chi-square.

Results

Table 1: Frequency and percentage distribution of rural and urban women according to their socio-demographic variables. N=200

Socio-Demographic Variable	Rural	Urban		
	F	%	F	%
Place of residence				
a) Rural	100	100	0	0
b) Urban	0	0	100	100
Age				
a) ≤40 years	7	7	8	8
b) 40-45yrs	14	14	18	18
c) 46-50yrs	35	35	29	29
d) 51-55 yrs	26	26	26	26
e) >50 yrs	18	18	19	19
Religion				
a) Hindu	42	42	29	29
b) Muslim	14	14	32	32
c) Christian	44	44	39	39
d) Others	0	0	0	0
Education				
a) Illiterate	59	59	48	48
b) Primary	29	29	32	32
c) High school	6	6	5	5
d) Intermediate	2	2	11	11
e) Graduate	2	2	2	2
f) Postgraduate	2	2	2	2
Occupation				
a) Government	5	5	5	5
b) Private	20	20	13	13
c) Business	1	1	12	12
d) Daily wage earner	45	45	31	31
e) Unemployed	29	29	39	39
f) Government	5	5	5	5
Family income				
a) <5000/m	43	43	27	27

b) 5001-10,00/m	31	31	50	50
c) 10,001-20,000/m	14	14	11	11
d) 20,000-30,000/m 30,001 and above	6	6	6	6
e) <5000/m	6	6	6	6
Marital status				
a) Married	75	75	77	77
b) Unmarried	1	1	1	1
c) Widow	24	24	22	22
d) Separated	0	0	0	0
Parity				
a) Nulliparous	8	8	5	5
b) Para 1	4	4	22	22
c) Para 2&3	58	58	48	48
d) Para 4&5	21	21	21	21
e) Para 6 and above	9	9	4	4
Type of menopause				
a) Natural	77	77	89	89
b) Induced	23	23	11	11
Previous knowledge				
a) Yes	38	38	49	49
b) No	62	62	51	51
If yes, sources of information				
a) Mass media	4	4	7	7
b) Health personnel	17	17	25	25
c) Friends	5	5	3	3
d) Family	12	12	14	14
e) Others	0	0	0	0

Table 2: Frequency and percentage distribution of rural and urban women according to their knowledge. N=200

Knowledge	Rural		Urban	
	F	%	F	%
Adequate	4	4	1	1
Moderate	58	58	48	48
Inadequate	38	38	51	51

Table 3: Mean, standard deviation and independent 't' test of knowledge scores. N=200

Item	Rural		Urban		Independent 't' test p=0.05
	M	SD	M	SD	
Knowledge	17.1	4.1	16.3	3.8	2.51*

* Significant

Table 4: Association between the knowledge of rural and urban women with their socio-demographic variable N=200

Socio-demographic variable	Rural χ^2 2 p=0.05	Urban χ^2 2 p=0.05
Age	15.1 ^{NS}	4.84 ^{NS}
Religion	15.7*	2.94 ^{NS}
Education	4.28 ^{NS}	11.0 ^{NS}
Occupation	4.28 ^{NS}	23.2*
Family income	9.84 ^{NS}	1.23 ^{NS}
Marital status	3.02 ^{NS}	2.93 ^{NS}
Parity	5.72 ^{NS}	9.98 ^{NS}
Type of menopause	2.33 ^{NS}	1.27 ^{NS}
Previous knowledge	1.59 ^{NS}	3.88 ^{NS}
If yes, Sources of information	2.00 ^{NS}	0.48 ^{NS}

NS- Non-Significant, * Significant

Discussion

In the present study majority (58%) of the rural women have moderate knowledge while 38% of the women have inadequate knowledge and only 4% of them have adequate knowledge with regard to menopausal problems and its natural remedies while majority (51%) of the urban women have inadequate knowledge while 48% have moderate

knowledge and only 1% has adequate knowledge with regard to menopausal problems and its natural remedies. This finding was supported by a study conducted by Jacintha Veigas, Dr. Raj Gopal et al (2014) in which the results revealed that 75% of the subjects had good-knowledge on health maintenance, 1.25% had very poor knowledge [3].

The mean knowledge of rural women with regard to menopausal problems and its natural remedies is 17.73 with a standard deviation of 4.12 while the mean knowledge of urban women with regard to menopausal problems and its natural remedies is 16.31 with a standard deviation of 3.88. There is a difference between the knowledge of rural and urban women with regard to menopausal problems and its natural remedies as the calculated independent 't' test ('t'= 2.51) is greater than the table value (1.96) at 0.05 level of significance.

Conclusion

In present study, it was found that urban women had less knowledge compared to rural women. Therefore, the nursing personnel should take up the responsibility of using various teaching strategies to impart knowledge to the women regarding the natural remedies.

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