

The Relationship Between Knowledge and Family Support with Anxiety in Premenopausal Women at Pekik Nyaring Community Health Centre Care, Central Bengkulu Regency 2022

by Elly Wahyuni

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Proceeding Paper

THE RELATIONSHIP BETWEEN KNOWLEDGE AND FAMILY SUPPORT WITH ANXIETY IN PREMENOPAUSAL WOMEN AT PEKIK NYARING COMMUNITY HEALTH CENTRE CARE, CENTRAL BENGKULU REGENCY 2022

Elly Wahyuni.¹, Mariati¹, Lela Hartini¹, Dwie Yunita Baska.¹, and Mariana Tantiri Mariana Nainggolan²

¹²

¹ Department of Midwifery, Poltekkes Kemenkes Bengkulu, Indonesia

² Applied Bachelor of Midwifery Study Program, Poltekkes Kemenkes Bengkulu, Indonesia

* elly_bid@yahoo.com

Abstract

The percentage of the incidence of anxiety experienced by premenopausal women worldwide is still relatively high (77%). About 25% of anxiety occurs during menopause, with various symptoms caused by individuals, depending on psychological and emotional. This study aimed to determine the relationship between knowledge and family support with anxiety incidence in premenopausal women at the Pekik Nyaring Community Health Centre, Central Bengkulu Regency, in 2022. The research design used a cross-sectional approach. The population in this study were all women aged 45-55 years in 12 Integrated Post for Non-Communicable Diseases or Pos Pelayanan Terpadu Penyakit Tidak Menular (Posbindu PTM) Pekik Nyaring Community Health Centre, totalling 981 people. The sample in this study was 78 respondents taken by purposive sampling, and the number of samples distributed in each Posbindu was not equal. Data analysis using univariate and bivariate analysis using Chi-Square. The results showed that 78 premenopausal women (53.8%) experienced moderate and severe anxiety, (59%) had poor knowledge, and (65.4%) had poor family support. There was a relationship between knowledge and anxiety in premenopausal women with $p=0.002 < 0.05$ and OR = 5.0. It means that premenopausal women with poor knowledge were 5 times more likely to experience moderate and severe anxiety. There was a relationship between family support and premenopausal women's anxiety, $p=0.000 < 0.05$ and OR = 8.4. It means that premenopausal women who receive family support were at least 8 times more likely to experience moderate and severe anxiety. Suggestions for the Community Health Centre, in this case, the Head of the Community Health Centre, can optimise health workers to create innovative programs related to women's preparation for menopause.

Keywords: Anxiety, Knowledge, Family Support, Premenopausal women

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1. Introduction

Menopause is a phase of the normal life of the female reproductive organs, where menopause begins with the premenopause period. Premenopause is the transitional phase from the fertile period to the stage where no more fertilisation exists. Premenopause starts to occur in women at the age of 40 years. This phase is characterised by irregular menstrual cycles, prolonged menstrual bleeding, large amounts of menstrual blood, and pain during menstruation (Supami, 2016). Premenopause in women will cause physiological and psychological changes. Physiological changes include menstrual cycle disorders, hot flashes, palpitations, excessive sweating at night, vaginal dryness, and incontinence. At the same time, premenopausal psychological changes include irritability, stress, depression, and anxiety (Proverawati, 2010).

Based on World Health Organization (WHO) data states that the percentage of the incidence of anxiety in the world (77%) is experienced by all women. About 25% of anxiety occurs during menopause with various symptoms (Lusiana, 2014). Anxiety that arises in dealing with menopause is individual, depending on the psychological-emotional state. It also concerns changes in the body due to the end of the menstrual period. If this anxiety is allowed to appear for a long time, it will cause depression, resulting in mental disorders (Nuratminingsih, 2016). Research conducted by Li-Yu Hu (2019) stated that mental disorders in women during the menopausal transition that are often found in addition to anxiety are depression (4.6%), bipolar (0.2%), and insomnia (2.8%), while the percentage for anxiety is 3,6%.

According to Sukitide (2021), the factors that influence the occurrence of anxiety are knowledge, education, family support, work, and socio-economic environment. Knowledge is a process of knowing to remember information or material that was previously learned or received. With the process of obtaining information, knowledge is expected to increase to reduce anxiety risk. Knowledge about menopause is given to improve the understanding of premenopausal women's wisdom, thereby reducing the anxiety experienced (Irawati, 2019). It is in line with Isnaeni *et al.* (2020) with a sample of 65 people, 22 people (40%) women who lacked knowledge about menopause experienced severe anxiety (35.3%), and 19 people (23.1%) had moderate knowledge of experiencing menopause. Severe anxiety (1.53%), the remaining 24 people (36.9%) had good knowledge and did not experience anxiety, so it was concluded that knowledge dramatically affects the level of anxiety experienced by premenopausal women. Premenopausal women at the time of menopause need support from family. Family support is assistance family members provide to create physical and psychological comfort in a tense situation (Rahmawati, 2020). It is in line with research conducted by Hartinah in Surabaya, 2018, with the results of a study on the influence of family support (12.3%) in alleviating women's anxiety facing menopause (Hartinah, 2018).

Indonesian Demographic and Health Survey (IDHS) data estimated that in 2025 the number of postmenopausal women in Asia will increase from 107 million to 373 million. It is estimated that the population of Indonesia in 2020 will reach 262.2 million people, with the number of women living in the age of menopause around 30.3 million people with an average age of over 51 years experiencing menopause (BKKBN, 2017). The Profile of the Health Office (2020), Bengkulu Province, explains that the female population is 988,684 people, with the number of women aged 45-54 years being 103,332 people (9.56%). One of the nine regencies in Bengkulu Province, Central Bengkulu Regency, has the 8th largest female population, 56,796.

The documentation study taken by researchers at one of the Community Health Centre in Central Bengkulu Regency, Bengkulu Province, the Pekik Nyaring Community Health Centre, obtained data from the Integrated Post for Non-Communicable Diseases or *Pos Pelayanan Terpadu Penyakit Tidak Menular (Posbindu PTM)* in the month of service in January 2022. It was found that 3 people (0, 3%) women aged 48-52 years came and complained of anxiety with symptoms of entering menopause, including palpitations, signs of heat and anxiety with abnormal

menstrual cycles in the last 1 year. The Pekik Nyaring Community Health Centre has a female population of 9,273 people (Central Bengkulu Regency Health Office, 2021).

The survey was conducted at *Posbindu PTM* Pekik Nyaring Community Health Centre Care on February 18, 2022. It was conducted on 15 women aged 45-55 years with a brief interview, 10 people (66%) said they felt anxious about menopausal symptoms that will be and are being handled and had never known about menopause. In contrast, 5 people (33%) felt that menopausal symptoms are something natural and not anxious. Based on the high number of anxiety experienced by premenopausal women at the Pekik Nyaring Community Health Centre Care, Central Bengkulu Regency, the authors are interested in researching the Relationship between Knowledge and Family Support with Premenopausal Women's Anxiety at the Pekik Nyaring Community Health Centre Care, Central Bengkulu Regency, in 2022.

2. Materials and Methods

This study used observational analytics with a cross-sectional approach. The population in this study were all women aged 45-55 years in 12 *Posbindu PTM* (981 women). The sampling technique was using purposive sampling. The number of samples was calculated proportionally utilising the formula and inclusion/exclusion criteria (78 respondents). Inclusion criteria included: 1. All women who come to the *Posbindu PTM*; 2. 45-55 years old; 3. Able to read and write; 4. Willing to be a respondent; 5. Do not suffer from chronic diseases, where the exclusion criteria were involved: 1. Not able to communicate well; 2. Have a degenerative disease. The research was conducted in 12 *Posbindu PTM* in the Pekik Nyaring Community Health Centre Care, Central Bengkulu Regency, in 2022 from June 17 to July 14.

3. Results and Discussions

Results

1. Univariate Analysis

As displayed in Table 1, most premenopausal women (62.8%) aged 50-55 years, almost all premenopausal women (83.3%) had low education and most premenopausal women (59%) worked as housewives.

Table 1: Description of the Characteristics (Age, Occupation, Education) of Premenopausal Women at Pekik Nyaring Community Health Centre Care, Central Bengkulu Regency, in 2022

No	Variable	Frequency (n)	Percentage (%)
1	Age (years)		
	45-49	29	37.2
	50-55	49	62.8
2	Education		
	Low	65	83.3
	Moderate	10	12.8
	High	3	3.9
3	Occupation		
	Housewife	46	59.0
	Farmer	16	20.5

Private employee	13	16.7
Civil servant	3	3.8

Table 2 showed that most premenopausal women (53.8%) experienced moderate and severe anxiety, most premenopausal women (58.9%) had poor knowledge and most premenopausal women (65.4%) received poor family support.

Table 2: Frequency distribution of anxiety, knowledge, and family support in premenopausal women

No.	Variable	Frequency (n)	Percentage (%)
1	Anxiety		
	Moderate and severe	42	53.8
	Mild	36	46.2
2	Education		
	Poor	46	58.9
	Good	32	41.1
3	Family support		
	Poor	51	65.4
	Good	27	34.6

2. Bivariate Analysis

The results of table 3 showed that out of 46 premenopausal women had poor knowledge, 32 premenopausal women (69.6%) had severe and moderate anxiety and 14 premenopausal women (30.4%) experienced mild anxiety.

Table 3: The relationship between knowledge and anxiety in premenopausal women

Variable	Anxiety Severe and moderate		Mild		Total		P OR Value
	F	%	F	%	F	%	
Knowledge							5.0
Poor	32	69.9	14	30.4	46	100	0.002
Good	10	31.3	22	68.7	32	100	

Bivariate results using Chi-Square obtained $p=0.002 < 0.05$, meaning there was a relationship between knowledge and anxiety in premenopausal women at Pekik Nyaring Community Health Centre, Central Bengkulu Regency. The value of OR=5.0 means that premenopausal women who had less knowledge were 5 times more likely to experience moderate and severe anxiety than premenopausal women who had good knowledge

Table 4: Relationship between family support and anxiety in premenopausal women

Variable	Anxiety		Mild Total		P OR Value	
	Severe and moderate					
	F	%	F	%	F	%
Family support						8.4
Poor	36	70.6	15	29.4	41	100
Good	6	22.2	21	77.8	27	100

The results of table 4 showed that from 41 premenopausal women who received poor family support, 36 premenopausal women (70.6%) experienced severe and moderate anxiety and 15 premenopausal women (29.4%) experienced mild anxiety.

Bivariate results using Chi-Square obtained p-value = 0.000 < 0.05, meaning that there was a relationship between family support and anxiety in premenopausal women at Pekik Nyaring Community Health Centre, Central Bengkulu Regency. The value of OR = 8.4 means that premenopausal women who receive family support were at least 8 times more likely to experience moderate and severe anxiety than those who receive good family support.

Discussion

1. Characteristics (Age, Occupational Education) of Premenopausal Women

The results showed that most premenopausal women (62.8%) were aged 50-55. It stated that the age category of premenopausal women at the Pekik Nyaring Community Health Centre Central Bengkulu Regency had been included in the normal age category for women to experience menopause. Menopause generally occurs between the ages of 45 and 55 and lasts about 3-4 years. Menopause begins at different ages in different people. It is because the body has run out of eggs and decreased the hormone estrogen. The process of decreasing estrogen production takes place over a long period (Suparni, 2016). A person's age also affects a person readiness to face menopause. A person's age is related to increasing experience, where the experience will increase a person's knowledge and maturity in dealing with problems that occur in life. Some women feel happy through middle age and menopause events. This situation is caused due to women who have or are approaching menopause, assuming that menopause is a natural event and will be experienced by all women. Hence, they consider it a normal thing. As a person ages, they experience will increase so that he will be better prepared to face menopause (Nurpatminingsih, 2016). Anxiety about the coming of menopause generally occurs in women who enter the age of 50 years. The fears experienced by women include fading beauty and fear of losing their husbands due to decreased sexual arousal. After 45 years, a woman still experiences menstruation, but it is no longer regular. Some women have experienced premenopausal symptoms. Menopause is the final stage of a biological process, a decrease in the production of the hormone estrogen from the ovaries due to ageing (Proverawati, 2010).

Most premenopausal women (83.3%) had low education. Many premenopausal women still had low education because the Pekik Nyaring Community Health Centre Central Bengkulu Regency is geographically still included in the rural category. Therefore, people's understanding that high school is sufficient just for men still contributes significantly to education. A low level of education will affect knowledge because premenopausal women's education is essential in determining a person's high level of knowledge. With high education, the more information

premenopausal women will receive, so they are expected to accept this situation reasonably as a physiological change of the body (Setiyani, 2019).

Most premenopausal women (59%) worked as housewives. Women who stay at home or work outside the house in the climacteric phase tend to increase their presumption of an object without thinking more rationally due to the increase in estrogen, increasing anxiety. If it is excessive, it will fall into a feeling of suspicion, which will fall to a state of severe anxiety and very likely lead to panic (Septiani, 2019). Saimin (2016) conducted research on premenopausal women in Kendari City, where the most anxiety group was the group who did not work with a total of 69 premenopausal women (33.7%). A woman who has social activities outside the home will get more information, for example, from friends at work or friends in social activities. It is also following research conducted by Rosmiati (2021) that the anxiety level of premenopausal women in the active working group did not have as many as 8 people (80%). The working mother group had mild anxiety as much as 2 people (20 %), and most of the premenopausal women in the housewives group had moderate anxiety levels as many as 7 people (70%) with almost 3 people (30%).

2. Distribution of Anxiety Frequency, Knowledge and Family Support of Premenopausal Women

The results showed that most of the premenopausal women, 42 people experienced moderate and severe anxiety (53.8%), and most of the 36 experienced mild anxiety (46.2%). So it means that many premenopausal women still experience moderate and severe anxiety. It happens because the lack of interest in finding information about menopause, signs of menopause symptoms and age of menopause causes women to experience anxiety in dealing with menopause. Not all women experience fear or anxiety when facing premenopause. Some women do not feel psychological disorders. The severity of anxiety experienced in the face of changes in premenopause and menopause depends on an assessment of the changes in conditions. Negative assessment leads to anxiety, but if it is positive, then anxiety will not occur (Hawari, 2011).

The study found that most premenopausal women (59%) lacked knowledge. More than half of premenopausal women's insufficient knowledge is due to the lack of information about menopause. The low knowledge of premenopausal women can be seen from the questionnaire analysis, where 29.49% do not know that stress is the cause of anxiety in facing menopause, and 12.02% do not know the symptoms of menopause. The research data showed that premenopausal women with good knowledge of menopause had mild anxiety levels. It indicates that knowledge is very influential on a person's level of anxiety. Following the existing theory, low knowledge quickly causes a person to experience anxiety (Puspitasari, 2020). Premenopausal women with good knowledge experience moderate anxiety because premenopausal women fear changes in themselves (Sandra, 2017). Low knowledge causes a person to experience stress easily. Ignorance of something is considered a pressure that can lead to crisis and can cause anxiety. Stress and anxiety can occur in individuals with low levels of knowledge due to the lack of information obtained (Wibowo, 2020).

The results showed that most premenopausal women (65.4%) lacked family support. Family support, with the lowest percentage in this study, was related to the informational support provided by the family to premenopausal women. Informational support was low because the family did not know about menopause, and there was no counselling from community health workers. Family support is a form of attitude and family acceptance of family members in the form of informational support, assessment support, emotional support and instrumental support given to premenopausal women to be ready to face menopause (Rahmawati, 2020). Mothers need family support in dealing with premenopause. With family support, the anxiety experienced by mothers will be reduced. The form of support that the family can provide in reducing maternal anxiety can be done in several ways. The family cares and invites

them to talk about the problems that the mother is facing. The family advises that the mother takes better care of her health, the husband does not make physical problems with his partner, who is no longer as good as in the fertile period, and the family accepts the mother's condition. The latter is not as strong and agile as before. In addition to the social environment, family support can also help reduce the effects of menopausal anxiety (Dyah, 2014).

3. The Relationship Between Knowledge and Anxiety in Premenopausal Women

Bivariate results using Chi-Square obtained $p=0.002 < 0.05$, meaning there was a relationship between knowledge and anxiety in premenopausal women at Pekik Nyaring Community Health Centre, Central Bengkulu Regency. The value of $OR = 5.0$ means that premenopausal women with poor knowledge were 5 times more likely to experience moderate and severe anxiety than those with good knowledge. This study is in line with the research of Rudi (2021). There was a significant relationship between knowledge and anxiety. The higher a person's level of knowledge, the more information they have so that the process of receiving the information will be easier to absorb. So that anxiety facing menopause can be alleviated.

Puspitasari (2020) explained a relationship between knowledge and women's anxiety facing menopause. The better the knowledge of women, the lighter the anxiety experienced. Low knowledge causes a person to experience stress easily. Ignorance of something is a pressure that can lead to stress and anxiety. Premenopausal women with good knowledge will experience mild anxiety because they already have less knowledge, not knowing about things related to premenopause. It caused the anxiety to be only mild. If premenopausal women had begun to understand the phenomenon of menopause, the anxiety they experienced also did not need to be followed up (Asih, 2017). Premenopausal women with good knowledge do not experience anxiety in dealing with menopause is influenced the mother's level of education, where the mother's education level is one of the factors that will affect the level of maternal anxiety towards menopause armed with good knowledge. The mother will get more information needed. Thus, they can choose and determine the best alternative for their problems. People with higher education usually act more rationally, so it will be easier to accept new ideas. It means that with higher education, a person will have better health knowledge, including how to deal with anxiety when experiencing menopause (Yazia, 2020).

4. Relationship Between Family Support and Anxiety in Premenopausal Women

Bivariate results using Chi-Square obtained $p=0.000 < 0.05$, meaning that there was a relationship between family support and anxiety in premenopausal women at Pekik Nyaring Community Health Centre, Central Bengkulu Regency. The value of $OR = 8.4$ means that premenopausal women who received family support were at least 8 times more likely to experience moderate and severe anxiety than women who received good family support. These results align with Rahmawati's research (2020) that there was a relationship between family support and anxiety levels; the more support the family provides, the mother's anxiety level will decrease or become poor and poor. On the other hand, the poor attention and support provided by the family, the higher the level of maternal anxiety in dealing with menopause.

Family support is related to anxiety before premenopause because the support provided by the family, both psychologically and other supports, makes premenopausal women not experience anxiety disorders in dealing with the times leading up to menopause (Rosmiati, 2021). The existence of good support from a husband or family can provide significant benefits in overcoming anxiety. With the support of their husband/families, women will feel more needed and feel themselves valuable in the eyes of the family, thereby reducing the level of anxiety in women. On

the other hand, mothers who do not get the support of their husbands feel that they are no longer valuable after menopause which will increase the mother's anxiety (Yazia, 2020). This study is also in line with Hartinah's research (2018) which showed that the husband's support contributed 12.3% to anxiety in women approaching menopause or there was a relationship between the support provided by the family and the incidence of anxiety. Husband's support in the form of emotional support, informational support, instrumental support and positive assessment or positive family support had a significant relationship.

4. Conclusion

1. Most premenopausal women were 50-55 years old. Almost all premenopausal women had low education, and most worked as housewives.
2. Most women experienced severe and moderate anxiety. Also, most premenopausal women lacked knowledge (poor). Then, almost half of the premenopausal women lacked family support at Pekik Nyaring Community Health Centre Care, Central Bengkulu Regency.
3. There was a relationship between knowledge and anxiety in premenopausal women at the Pekik Nyaring Community Health Centre Care, Central Bengkulu Regency.
4. There was a relationship between family support and anxiety in premenopausal women at Pekik Nyaring Community Health Centre Care, Central Bengkulu Regency

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