

**Deanship of Graduate Studies  
Al-Quds University**



**Women's Perspectives about Menopause  
in the Gaza Strip**

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**Women's Perspectives about Menopause  
in the Gaza Strip**

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## **Dedication**

To the soul of my dear father

To my beloved mother

To my kind brothers and sisters

To my friends and colleagues

To whom helped me and wished the best for me

I dedicate this research for all of them

**Sally Mohammed Salha**

## **Declaration**

I certify that this thesis submitted for the degree of master is the result of my own research, except where otherwise acknowledged, and that this thesis or any of its parts has not been submitted for higher degree to any other university or institution.

**Signed:**

Sally Mohammed Salha

Date: -----/-----/-----

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*With my appreciation and respect,*

*Sally Mohammed Salha*

## Abstract

Menopause is a transitional stage in women's life. Menopause is viewed as a normal ageing process; however, signs and symptoms associated with this process and their impact on women were not discussed before among menopausal women in Gaza Strip. An analytic cross sectional study was conducted to understand the concerns and challenges of menopausal women in terms of knowledge, Attitude, and Practice (KAP) in addition to the Quality of Life (QoL); and to identify recommendations that can help menopausal women overcome these challenges.

The research study was conducted using a sample size of 400 menopausal women aged 40-60 years old residing in Gaza for at least 2 years. The sample of menopausal women was selected randomly from three main primary health care facilities in Gaza strip. The study used a quantitative method analysis by administering a survey composed of three parts targeting socioeconomic, KAP and QoL situation.

The main results of the study showed that the mean age for the women is 52.47 years with only 17.8% who had bachelor and/or high studies degrees. Around 86% of these women are unemployed and half of the families of these women have a monthly income of less than 1000 NIS. The mean age of menarche was 13.7 years, while the mean age of menopause was 47.12 +/- 3.89 years. 55.2% used birth control methods at one point in their life. The mean of the pregnancy times for the women was 7.73; the mean number of children was 6.29; and 14.7% had more than two abortions. 70% were between 14-21 years at their first pregnancy.

Around 49% of the surveyed women had poor to moderate level of knowledge about menopause with 75.3% had their source of information from family and friends. 66% positively viewed menopause; while 56.8% negatively viewed hormone replacement therapy. The mean for the knowledge, attitude, and practice scores was 59.8%, 60.3%, and 46.8% respectively.

Regarding lifestyle factors, more than half of the surveyed women don't practice exercise (workout) and 82.8% try to follow a special type of diet. Also, 35% indicated the use of food supplements and almost all of them don't smoke. Around 56% of the surveyed women evaluated their health as being between poor and fair. All surveyed women identified at least one stressor in their life with large effect on one third of them; and 41.6% of surveyed women can poorly to moderately handle stress. All surveyed women indicated to have at least one disease with sight problems (31.3%) followed by diabetes, teeth and gum problems and fatigue, around 20% each.

Inferential statistics showed that the menopausal age is affected by the BMI, employment status, pregnancy times, herbal drinking, and menarcheal age; however, no correlation between menarcheal age and menopausal age was found. It was also found that the knowledge score is affected by women's age, marital status, refugee status, educational status, employment status, menopausal status, as well as being the main breadwinner for the family. The attitude score is affected by the refugee status, educational level, practicing exercise; self-evaluation of health and stress management. The practice score was found to be affected by the marital status, educational level, employment status, BMI and being the main breadwinner. The QoL score is affected by the marital status, employment status, being the main breadwinner, longevity of menses, severity of dysmenorrhea, number of meals, drinking herbal and caffeinated drinks, and the varied life stressors. Furthermore, it was found that practice score is positively correlated with the knowledge score; however, the knowledge and the attitude were not correlated. The QoL score was correlated to both the knowledge and the attitude scores.

This research study identifies a set of recommendations to improve KAP and QoL among menopausal women and concluded that additional multidimensional studies need to be conducted locally and regionally to further tests associations and casualties, and urges to inform the development of evidence-based policies and programs to improve women's health throughout their menopausal years.

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