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## A Review of Spouse's Reactions to Menopausal-Related Changes

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### Abstract

Challenges faced by women during their menopausal phases do not only revolve around them, but also their respective spouse. Even though a considerable amount of literature has been published on menopausal context, to date, there is no published review paper regarding spouse's reaction toward menopausal-related changes. Therefore, the purpose of this paper is to review literature and studies conducted that related to spouse's reaction to menopausal-related changes. This review paper is based on multiple databases focusing on spouse's reactions and menopause. As a result, of the thoroughly reviewed literature, three classifications related to the context of spouse's reactions in menopausal phases have been found as the following; (i) types of reactions, (ii) internal and external factors and (iii) impacts on menopausal women and spouse. In conclusion, this review paper will provide useful information to develop effective health education module which involving spouses to ensure that menopausal women have a meaningful life throughout the menopausal phases.

**Keywords:** Spouse, Menopause, Husband, Menopausal Symptoms

### Introduction

Menopause is a natural development process in women cycles of life which comprises of physiological and psychological changes (Avis et al., 2015; Ayers, Forshaw, & Hunter, 2010; Sturdee, & Panay, 2010). However, several studies have highlighted the impact of those related changes on women's quality of life (Dare, 2011; Intan et al., 2017; Mohammadalizadeh et al., 2015; Saka, Saka, Latinowo, & Raji, 2011). Recently, there is an increasing number of women in the ageing population that spend more than one third of their life in the menopausal phase. This issue receives a lot of attention from the researchers worldwide (Bachmann & Doty, 2010).

Apart from that, menopausal-related issues do not involved women only, but also, their spouse. Earlier literatures, found that the family members give different aspect of reactions and concept of menopause that will lead to either positive or negative impact to women's well-being (Borawski, Kinney, 1996; Dege, & Gretzinger, 1982; Dillaway, 2008; Riessman, 2003; Shumaker, Hill, 1991). In fact, the first study focusing on male spouse attitudes on menopause and spousal support by

Mansfield, Koch and Gierach, (2003), suggested that, spouse's experiences may help health care providers in developing health intervention to these women. Similarly, recent studies have pointed out that these male spouse's perception on menopause is critical to understand the impact on their marriage, especially the women well-being (Reale, Rodolpho, Quirino, Hoga, & Rosa, 2016; Reberte, de Andrade, Hoga, Rudge, & Rodolpho, 2014).

Despite that, the male spouse's life experiences during menopausal phase has been ignored and limited (Liao, Lunn, & Baker, 2015). It is worth in highlighting that a considerable amount of literature have been found that focusing on spouses reaction and experiences during other reproductive events such as pregnancy (Mortazavi, Hosseini, Tabarraie, & Towfighian, 2016; Yargawa & Leonardi-Bee, 2015), postpartum (Agrawal, Ickovics, Lewis, Magriples, & Kershaw, 2014; Dumbaugh et al., 2014; Johansson, Fenwick, & Premberg, 2015), menstrual phase (Khani, Hamzehgardeshi, & Bozorgi, 2017; Yagnik, 2015); breastfeeding (Al Namir, Brady, & Gallagher, 2017; Dumbaugh et al., 2014; Özlüses & Çelebioglu, 2014) and family planning (Tilahun, Coene, Temmerman, & Degomme, 2015), but, limited study focusing at the end of reproductive aging (menopausal phase)(Mansfield et al., 2003).

Therefore, the aim of this review paper is to review a variety of spouse reaction towards menopausal-related changes among the wives according to the available existing literature. In the meantime, the factors affecting reactions and impacts of reactions are identified. Moreover, there are a limited number of studies on spouse reaction especially in the Asean countries; hence, this review paper attempts to be the preliminary steps in achieving the quality of life among local menopausal women.

### **Methodology**

There are several electronic databases that had been used for this review such as PubMed, Science Direct, Cochrane, ISI Web of Science, Scopus, Google Scholar, and including the author previous study. The author did a comprehensive searching strategy by using the combination of relevant keywords that related to male spouse and menopausal women since there is a limited literature focusing on reactions of spouses.

Based on the reviews, the themes identified are presented into three parts that comprise of (i) the types of spouse reaction, (ii) the factors affecting the spouse reaction, and (iii) the impact of the reaction to menopausal women and spouse. Finally, the conclusion suggested a recommendation and an important strategy to overcome the related issues. Figure 1 below is the overall summary of the themes and parts identified for this review.

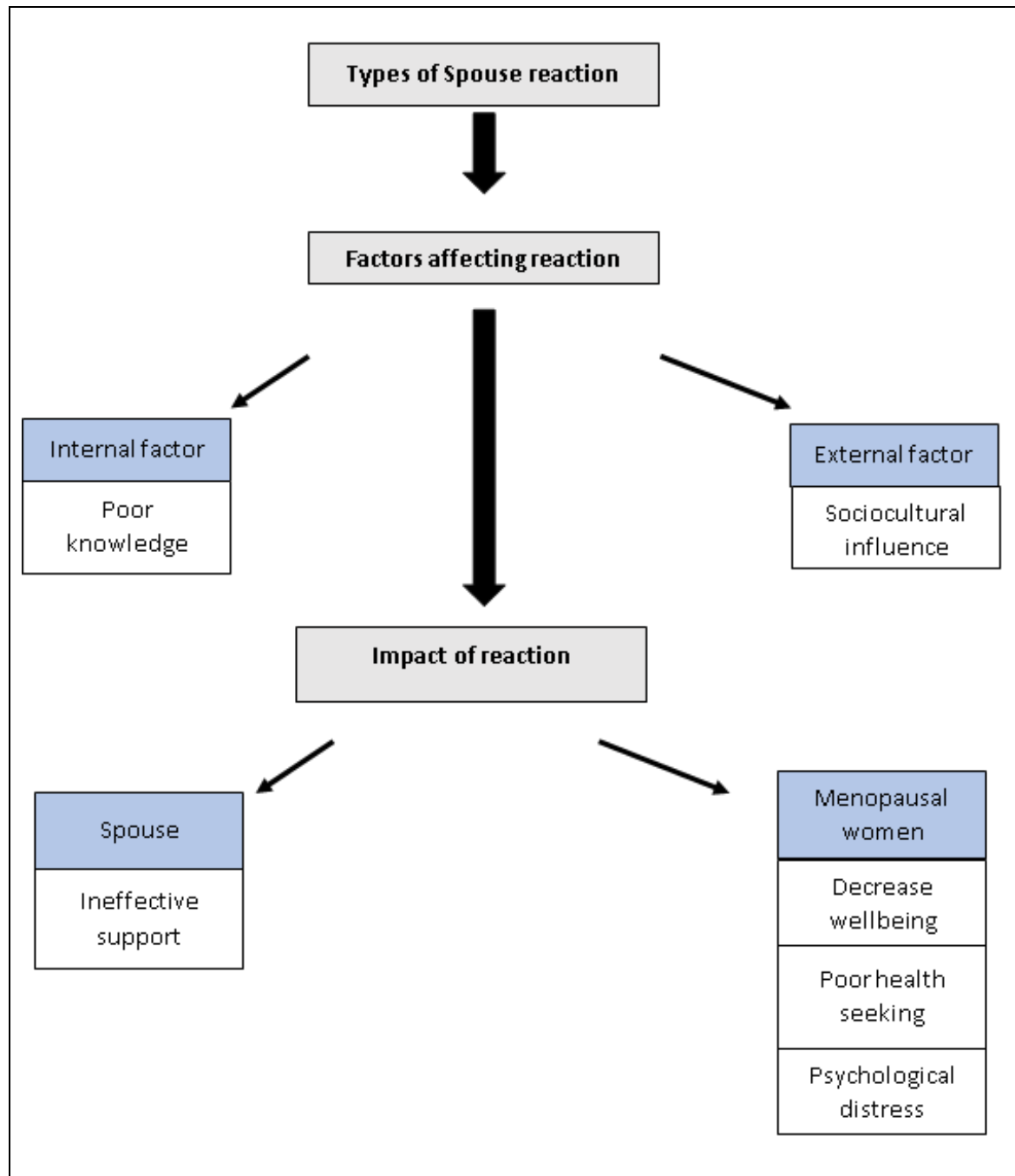


Figure 1: Overall summary of the themes identified based on the review

### **Types of Spouse Reaction to Menopausal-Related Changes**

Positive and negative reactions are two types of spouse reactions that had been identified based on a little number of literatures relating to menopausal women and their spouses. Nevertheless, it is worth highlighted that majority of male spouses had been reported to have negative reactions toward menopausal-related changes in numerous studies. According to Dillaway, (2008) and Mansfield et al., (2003), which were an earlier qualitative study in the USA has reported that there is a misconception existed regarding the meaning of menopause. Even recently, a qualitative study done among men in Brazil also reveal that they believe that the menopausal symptoms is a myth or excuses told by their wives and, they got confused with the related changes (Reale et al., 2016). In another recent qualitative study of 33 married Muslim men in Turkey, also found that majority of the respondents express negative signs of menopause as the ending of femininity, ageing, ending of sexual life, loss of fertility, increased weight and a loss of beauty. Moreover, it is interesting to note that the spouses favour their wives to menstruate continuously because they do not want to put an end to their sex life and hoping for more children (Hidiroglu, Tanriover, Ay, & Karavus, 2014).

A similar finding was found in Malaysian preliminary quantitative study of 84 male spouses regarding attitude of their menopausal wives. The predominant finding reported that the spouses focus on the negative aspect of menopausal changes such as easily stress, forgetfulness and no longer a real woman (Azidah et al., 2015). Despite these negative attitudes, in terms of knowledge on menopause changes, it also appears that majority of them emphasize more on changes that related to the sexual changes such as low libido, vagina dryness and lethargic compared to other menopausal changes. These negative reactions have been confirmed by other men's view of menopause study that male spouse, only focusing on the changes that affect them obviously (Dillaway, Byrnes, & Miller, 2008; Reale et al., 2016). According to the researcher, the reason of these sexual focuses is because of men are more interested in sexual activities as compared to women (Browes, 2015)

On the other hand, in a report of a qualitative studies on women perspective, it is found that, their spouses provide less support during the menopausal phase, compared to other reproductive events (pregnancy, postpartum, breastfeeding) and other sources of support (friends, mothers, health workers) (Dillaway, 2008; Koch & Mansfield, 2004). This report is in line with a qualitative study on male spouse that stated many of them did not provide any support, just ignored, did not have any conversation on the menopausal matter or stayed far away during that time and claim that this is one of the best strategy of support (Mansfield et al., 2003; Szpak, Folwarczny, Drozdol, Szućcik, & Skrzypulec, 2010).

### **Factors Affecting Spouse Reaction**

Findings from available studies have mentioned that there are various factors have been found that could influence spouse negative reactions. In this review, the author classifies the factors into internal and external factors. Internal factor is the factor that comes from the men themselves, which is poor knowledge regarding menopause. Obviously, many literature states that lack of knowledge among the spouses are the major factor that determines their negative reactions or responses to their menopausal wives. From an earlier literature in the Western, about one third of the spouse claimed that they had no information about menopause (Mansfield et al., 2003; Solstad & Garde, 1992) as well as one fourth of men knew nothing or nearly nothing (Koch & Mansfield, 2004). Furthermore, consistent studies reported that this poor knowledge will lead spouse to underestimate the

menopausal symptom of their menopausal wives (Reale et al., 2016) and felt powerless to offer support (Mansfield et al., 2003). Similarly, it also appears in a recent Malaysian male spouse preliminary study, that identified majority of spouses reported that due to no knowledge about menopause was the main barrier to support their menopausal wives (Azidah et al., 2015).

Apart from the poor knowledge about menopause, a study shown that the level of education is not associated with the presentation of the negative reaction. It seems that both well-educated and less educated spouses had misconceptions about menopause due to hearsay in their surrounding society (Hidiroglu et al., 2014). This fact has made itself an external factor (social-cultural factor) which it determines the spouses' reactions around menopause. A recent review on men's perceptions on menopause by (Reale et al., 2016), summarized that the negative reaction toward menopause are mediated mainly by their sociocultural factor across the countries. In many Western communities, menopause phase is a social stigma, and labelled as taboo that cannot be discussed openly (Yagnik, 2015), a private thing that related to sexual, (Ayers, Mann, & Hunter, 2011; Hinchliff & Gott, 2011) awkwardness, and it is inappropriate to discuss in public (Duffy, Iversen, & Hannaford, 2011; Mansfield et al., 2003; Yagnik, 2015) and must be discreet about it (Mansfield et al., 2003). Likewise, in the Muslim countries such as Turkey and Iran, such negative reactions are common, and it is a taboo to have a discussion with the opposite gender and health worker (Hidiroglu et al., 2014), as well as being label as having a lack of sexual interest (Ghazanfarpour, Khadivzadeh, and Roudsari, 2018). This is identified as a reasonable explanation on the susceptibility of men to an inaccurate cultural stereotypes (Dienye, Judah, & Ndukwu, 2013; Hofnie-Hoëbes, Weightman, Shatona, & Kelson, 2018).

Similarly, in an earlier study of menopausal symptoms among 400 women in Malaysia found that, they do not talk about the topic publicly and regard dyspareunia and urinary incontinence as an embarrassing matter to complaint (Ismael, 1994). This concept of embarrassing has been instilled in the Malay culture names as '*Malay Adat*' that served as the major influence of Malay behaviour, values and accepted ways of thinking (Hamdan & Radzi, 2014). Other literature about Malaysian culture, consistently reports that it is not a norm to seek advice or treatment for menopausal problem, it is privacy, discreet, highly sensitive, shyness, hard to raise to others and they have to accept it as a sign of ageing (Abdullah, Moize, Aznil Ismail, Zamri, & Farhah Mohd Nasir, 2017; Damodaran, Subramaniam, Omar, Nadkarni, & Paramsothy, 2000; Hussain, 2017; Wong & Nur Liyana, 2007). In fact, a recent qualitative study in Malay culture among women, (Muhamad, Kerian, Secondary, Author, Muhamad, Horey, Liamputtong, Low, & Sidi, 2018) expressed that even though their spouses noted their changes, especially related to sexual changes, but the taboo warned them not to talk about it.



Hoffman, (2015) has already drawn attention that human commonly influence by their socio-cultural identities, which can be presented with either negative or positive perception or consequences. Therefore, from the review it can be seen that the social stigma and misconception of taboo in the various social cultural could result to a negative reaction of the spouses which also may lead to negative impact to the menopausal women

### **Impact of Spouse Reaction**

The impact of negative reaction affects not only menopausal women with menopausal-related problem but also their spouses which have been reviewed and presented in the following sections.

### **Impact to Spouses**

As mentioned before in this review, from the previous studies, lack of information and misconception among spouses about menopause would foster ineffective of support provided to their wives (Mansfield et al., 2003). In fact, these spouses feel powerless to offer support and lead them to stay far away from their wives (Reale et al., 2016), provide support that is only relevant according to their feelings and perceptions which mostly shaped by their negative taboo practices (Muhamad, Liamputtong, O'Halloran, Low, & Moolchaem, 2016a).

### **Impact to Menopausal Women**

Meanwhile, most of the studies revealed that the impact is mainly affecting the menopausal women as compared to their spouses. A recent literature review discovered that, the negative reaction of male spouse consistently associates to lower level of women well-being (Manne, Badr, Zaider, Nelson, & Kissane, 2010). Instead, it shows a powerful effect on the adjustment during menopausal experience that could lead women to their own negative attitude (Koch & Mansfield, 2004), become depression (Lee et al., 2010), which then leads to the increase of the severity of menopause-related symptoms (Wimberly & Gables, 2007) (Ayers, Forshaw, & Hunter, 2010). A similar finding from Malaysia's study by Muhamad, Liamputtong, O'Halloran, Low, & Moolchaem, (2016b) found that the Malay culture and taboo practices worsened the menopausal problem especially on the sexual menopausal problem which also happened in other Muslim and Asean countries (Meldrum, Liamputtong, Wollersheim, 2014; Yun, Kim & Chung, 2014).

Regardless of the decrease of the women well-being, the negative views from their spouses also give an impact on the barrier of help-seeking among these menopausal women. A recent review reported that in Nepalese society, due to internalised patriarchal culture and family misconception about menopause, these women are having poor access of menopausal treatment (Ghimire et al., 2015). Studies in other Western countries commonly appeared with negative reaction from spouses caused a barrier to help-seeking which women feel hesitate to reveal their problems to health workers and inhibit them from seeking any medical help (Bergvall & Himelein, 2014; Kingsberg, 2014).

A review from Islamic countries also reveals that the negative reaction from the spouses has put a barrier to their wives from getting medical help regarding menopausal-related problem with the health professional, resulted with a lower rate of health seeking (Azar, Bradbury-Jones, & Kroll, 2013). A similar finding is also found in a study among Malay culture in Malaysia, about menopausal women who experience sexual issues with their spouses that leads to the acceptance of the menopausal-related problem, unable to seek any help and hiding their needs (Muhamad, Kerian, Secondary,

Author, Muhamad, Horey, Liamputtong, Low, & Zucker, 2018). Indeed, this could be a possible explanation on the low complaint of menopausal symptom among Malaysian women as reported in the previous study that reveal, although they experience the problem, 80 percent of them refuse to seek any medical consultation and 89 percent of them claimed that they are in a good health (Ismael, 1994) yet, they are actually suffering in silence (Muhamad, Kerian, Secondary, Author, Muhamad, Horey, Liamputtong, Low, & Zucker, 2018).

Next, based on a recent literature review regarding spouse misconception on menopause and sexuality, it is found that the most common impact on them is emotional distress (Muhamad et al., 2016b). An evidence from previous studies also showed that sexuality-related changes could increase the risk of severe psychological distress due to unable to fulfil their sexual role based on the gender stereotypes (Stephenson & Meston, 2012), doubting the spouses of looking for a sex worker or involved in extramarital sex (Ghazanfarpour, M., Khadivzadeh, T. and Roudsari, R.L., 2018). In more recent literature reveal that menopausal women experience distress and suffer when their spouse linked the menopausal sexual changes (vaginal dryness, low libido) with signs of unfaithfulness (Hidiroglu et al., 2014) and later leads to marital disharmony (Reale et al., 2016; Svedhem, Eckert, & Wijma, 2013).

Similarly, in Malaysian study, it is found that psychological problem as a result of being stigmatized by their spouse. An evidence from a Malaysian study on women, has found that they have an ultimate fear when their sexual changes been stigmatized by their spouses as the end of femininity, decrease in sexual desire which leads to depression (Muhamad et al., 2016b). A report from the Islamic Department (Today, 2015; Zainab, I., Wan-Ibrahim, W. A., & Asyraf, 2014) states that, sexual problems contribute to the increase number in divorce and polygamy which obviously undesired by women and it caused depression on women.

### **Limitations**

The findings of this review paper are limited to online databases, libraries, journals and thesis. Thus, other sources such as working paper, book chapter and conference proceeding may be included in future research. Moreover, majority of the studies are reviewed using qualitative method which may result to ungeneralizable to other settings and only discusses on the negative reaction of spouse which reported in majority of the study.

### **Conclusion**

From this review, it is revealed that the negative spouse reaction on menopausal-related symptom is mediated by internal and external factor, namely, poor knowledge of spouse and social stigma in society. Considering the findings of the review, it clearly demonstrates that the negative spouse's reaction lead to a great negative impact either to menopausal women or their spouses. Therefore, it is important that effective interventions is needed to overcome the situation as early as possible within the menopausal phase. As recommended by numerous studies, education interventions is needed in order to increase menopause health awareness among spouses (Hidiroglu et al., 2014; Mohammadalizadeh Charandabi et al., 2015; Reale et al., 2016; Yoshany & Morowatisharifabad, 2017). As such, educational program support is one of the major intervention needed for the spouses and ensure it is in line with World Health Organizations' suggestion that one of the best intervention to overcome social stigma in community is to educate (Yagnik, 2015). Therefore, the finding from this



review paper will facilitate the health care provider in developing a module to give awareness to the spouses in order to achieve the wellbeing of menopausal women.

### Ethical Approval

The study protocol was approved by the Human Research and Ethics Committee for Clinical Studies of Universiti Sains Malaysia [IRB:USMKK/PPP/JEPeM/14120493]. This study was conducted according to the Declaration of Helsinki 1975 and the International Conference on Harmonisation–Harmonised Tripartite Guideline for Good Clinical Practice (GCP).

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