

Original Research

Impact of Menopause Counselling on Maternal Anxiety in Gebyog Village, Magetan, Indonesia

Putri Indriyani Renti Chotijah, Astin Nur Hanifah, Tinuk Esti Handayani and Suparji*

Midwifery Transfer Study Program Magetan, Midwifery Department, Politeknik Kesehatan Kemenkes Surabaya, Indonesia

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***Correspondence:**

Suparji

Address: Midwifery Study Program
Magetan, Politeknik Kesehatan Kemenkes
Surabaya, Indonesia.

Email: suparjiyozabri@gmail.com

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ABSTRACT

Background: Menopause signifies the end of menstruation and ovarian follicle activity in women. It is diagnosed after 12 consecutive months of amenorrhea without other causes. Typically occurring between 40 and 50 years, menopause often induces anxiety, especially among women with limited knowledge. To address this, the government promotes health counseling to improve women's understanding and management of menopause. **Methods:** This study utilized a pre-experimental design involving 63 respondents from Gebyog Village, Magetan, Indonesia, selected by simple random sampling. The study examined two variables: the independent variable (counseling) and the dependent variable (anxiety level). Data was collected using the Hamilton Rating Scale for Anxiety (HARS) questionnaire, administered both before and after counseling sessions. Descriptive analysis was conducted using frequency distribution, and the Mann-Whitney U test was used for inferential analysis. **Results:** The counseling intervention led to a significant reduction in anxiety levels among the participants. The Mann-Whitney U test results indicated a P value of 0.000, demonstrating a statistically significant effect of counseling on reducing anxiety levels ($P = 0.000 < \alpha = 0.05$). **Conclusion:** Counseling effectively reduces anxiety in women facing menopause. It is recommended that health workers enhance their efforts in providing menopause-related counseling, particularly through village health posts like posbindu and poslansia, to support women during this transition.

Keywords: Menopause; counselling; anxiety level

1. INTRODUCTION

The cessation of menstruation in women, commonly called menopause, occurs when the ovarian follicles become inactive. Natural menopause occurs at the end of the menstrual period and is not caused by any pathological factors. It is characterized by at least 12 consecutive months without menstruation (amenorrhea).⁽⁶⁾ Before the onset of menopause, there is usually a transition phase known as premenopause, which is the transition period from ovulation to no development (anovulatory). Most of the initial symptoms experienced by women, namely premenopause, are around the age of 40 years, until the peak period at the age of 50 years.^(1,7,8)

When a woman reaches the age of 45, her menstruation may become irregular and she may even experience premenopausal symptoms. However, in Indonesia, most women are not yet aware of the impacts of entering menopause. They view it as a natural process that does not require preparation.⁽²⁾ Based on research by Enur Nurhayati et al. in 2022 on the Level of Anxiety in Mothers Approaching Menopause conducted in Sumberagung Village,

Tulungagung Regency, half of the respondents had mild anxiety levels of 33%, while moderate anxiety levels were 50%. Most respondents had never received information related to approaching menopause.⁽³⁾ According to BPS data in 2022, the number of mothers aged 40-50 years in the Karangrejo sub-district was 1,801 people, and in Gebyog Village, the number of women aged 40-50 years was 165 people. In Gebyog Village, Karangrejo Sub-district, Magetan Regency, researchers collected thirteen samples of perimenopausal women aged around 45 years at the Gebyog Village Posbindu, it was found that 9 people (69%) had never received counseling about menopause, had insufficient knowledge about menopause. Almost all of them did not know the symptoms of menopause and therefore experienced anxiety, 2 people (15%) had mild anxiety, and 10 people (76.92%) had moderate anxiety. The body can experience negative impacts due to excessive anxiety, because it disrupts the stability of the body's organs. This disorder can be very disruptive to menopausal women in their daily activities. Unfortunately, they often lack accurate information, making them imagine the negative impacts they will experience during premenopause and menopause.⁽⁴⁾ The government aims to improve the quality of life of the elderly by establishing the Elderly Health Center or Posyandu Lansia. This program is expected to provide information about menopause.^(5,9)

The government is trying to improve the health of the community as a whole and elderly women who are going through menopause. One of the efforts of the Elderly Family Development group to improve the health of the elderly, including menopausal women, is the Elderly Service Post. Women must prepare themselves for their menopause so that they are able to adjust to the physical and cognitive transitions and difficulties that will come. Explanations related to health, or adequate health education, are expected to increase knowledge, attitudes, and behavior of women so that they are able to overcome problems and adjust.⁽⁶⁾ Midwives play an important role in supporting women who are going through menopause and their families by providing promotive, preventive, curative, and rehabilitative support. The goal is for women to be able to go through this transition with happiness and well-being, remain active and productive, and be ready to face old age with good health conditions.⁽³⁾

This study has similarities, both of which examine the level of anxiety in menopausal mothers.

However, this study has differences with previous researchers, namely the location of the study in Gebyog Village, Karangrejo District, the age of the study was 40-50 years, the sampling technique used simple random sampling, with the Pre-Experimental research method using the One group pretest posttest design with analysis using the Mann Whitney Test. Researchers are interested in researching the anxiety of menopausal mothers because health programs related to menopause have not been prioritized. Women's reproductive health service programs at the Health Center and health education do not reach the target of premenopausal mothers to prepare women to face menopause by increasing their knowledge through education.

2. METHODS

2.1. Study Design

This research is pre-experimental because the design is not truly experimental, there are external variables that influence the formation of the dependent variable. Therefore, the independent variable is not the only factor that influences the results of the experiment.⁽¹⁴⁾ The research design is One Group Pretest Posttest design, namely pre-test and post-test of one group, which allows comparison with the pre-counseling situation, thus allowing for more accurate determination of results. The application in this study is that one group will be given a pretest at the beginning, then given Menopause counseling and then will be tested on the anxiety questionnaire post-test. This method can increase the accuracy of the results by allowing comparison with the situation before the counselling.⁽¹⁴⁾

2.2. Population and Sample

This study involved 165 mothers in Gebyog village, Karangrejo sub-district, aged between 40 and 50 years. A sample is a portion of a population taken using a sampling technique.⁽¹⁴⁾ A sample is a good representation of the number and characteristics of a population. If the population is large and the researcher feels limited by funds, manpower, or time, using a sample taken from that population can be a possible alternative.⁽¹⁵⁾

The sample was obtained from a research population that included the following inclusion and exclusion criteria

Table 1. Inclusion and exclusion criteria

Inclusion Criteria	Exclusion Criteria
✓ Mothers aged 40-50 years who come to the Gebyog village health post who experience menstrual disorders, either using hormonal or non-hormonal birth control.	✓ Mothers under 40 years old who experienced early menopause and had reproductive complaints or diseases.
✓ Mothers aged 40-50 years who are willing to participate in the study.	✓ Mothers aged 40-50 years who had not menstruated for 1 year.
	✓ Mothers aged 40-50 years who still menstruated regularly.
	✓ Mothers aged 40-50 years who refused to participate in the study.

2.3. Research Variables

Variables can be categorized based on various factors such as age, gender, education, marital status, occupation, knowledge, income, illness, and others. These variables are further divided according to their specific functions.⁽¹⁰⁾

Based on their functions, variables are divided into: independent variables and dependent variables. Independent variables vary and have the ability to influence or determine the value of other variables that play an important role in research. In this study, the independent variable studied was Counseling. Variables that are influenced or determined by other variables are called dependent variables. In this study, the level of anxiety is used as the dependent variable.

2.4. Data Analysis

In descriptive analysis, the results of the analysis are presented in the form of tables or graphs to explain the research variables.⁽¹¹⁾ The data describes the characteristics of respondents and the level of anxiety before and after being given counseling. Statistical Data Analysis is carried out to understand the influence of dependent and independent variables, namely the difference in the level of maternal anxiety before and after being given treatment in the form of menopause counseling. After collecting and examining the data, the researcher analyzed the data using the Mann Whitney u test, namely to understand the difference in the median of two independent samples. This section may be divided by subheadings. It should provide a concise and pre-cise description of the experimental results, their interpretation, as well as the experiental conclusions that can be drawn.

2.5 Ethics Research

The research conducted adhered to strict ethical standards. Informed consent was obtained from all

participants, who were provided with detailed information about the study and freely agreed to participate. A formal research permit was secured through the Applied Undergraduate Program in Midwifery Transfer Level at Magetan Campus and was approved by the relevant local health authorities. Anonymity and confidentiality were rigorously maintained, with no personal identifiers included in the data, and access to information was restricted to authorized personnel only. The study received ethical clearance from the Health Research Ethics Commission (KEPK) of the Surabaya Ministry of Health Polytechnic (Approval No. EA/2355/KEPK-Poltekkes_Sby/V/2024).

3. RESULTS

3.1 Mother's Characteristics

Characteristics of pre-menopausal mothers in Gebyog village are represented in Table 2.

Table 2. Characteristics of premenopausal mothers in Gebyog village in 2024

Respondent Characteristics	Frequency (f)	Percentage (%)
Education		
Basic	23	36.50
Intermediate	31	49.21
High	9	14.29
Work		
Not working	35	55,55
Farmer	8	12,70
Private/Self-Employed	17	26,99
Civil Servant	3	4,76
Parity		
Nulipara	0	0
Primipara	13	20,63
Multipara	50	79,37
Total	63	100

Table 2 research data according to the level of education of premenopausal mothers illustrates the highest percentage is the level of secondary education compared to the level of primary and higher education. Based on the type of work illustrates the highest percentage is not working or as a housewife. However, there are also premenopausal mothers who are active as farmers, private / self-employed and civil servants with

a lower percentage than those who do not work. While seen from parity the highest presentation of premenopausal mothers is multipara.

3.2 Data on Mothers' Anxiety Levels Before Counseling

The following are the levels of maternal anxiety before counseling is carried out (Figure 1):

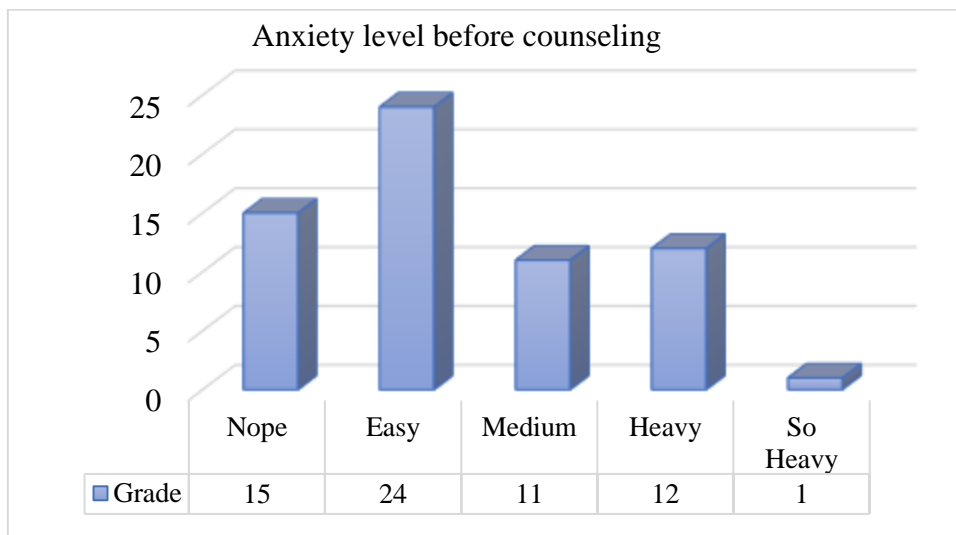


Figure 1. Anxiety level of mothers before menopause counseling for premenopausal mothers in Gebyog village in 2024

Figure 1 shows the percentage of anxiety experienced by mothers before receiving menopause counseling. Before counseling, almost all menopausal mothers experienced different levels of anxiety, ranging from mild, moderate, severe, and finally experiencing very severe anxiety.

3.3 Data on Mothers' Anxiety Levels After Counseling

From Figure 2, it can be seen the percentage of maternal anxiety levels after menopause counseling. It

can be seen from the diagram above that the percentage of not experiencing anxiety is 68.8%. And experiencing mild anxiety with a percentage of 28.8%. Moderate anxiety with a percentage of 4.67% and a severe anxiety level of 1.59% and a very severe anxiety level of 0%. At the sub-district level, premenopausal mothers after counseling were still found to experience mild, moderate and severe anxiety.

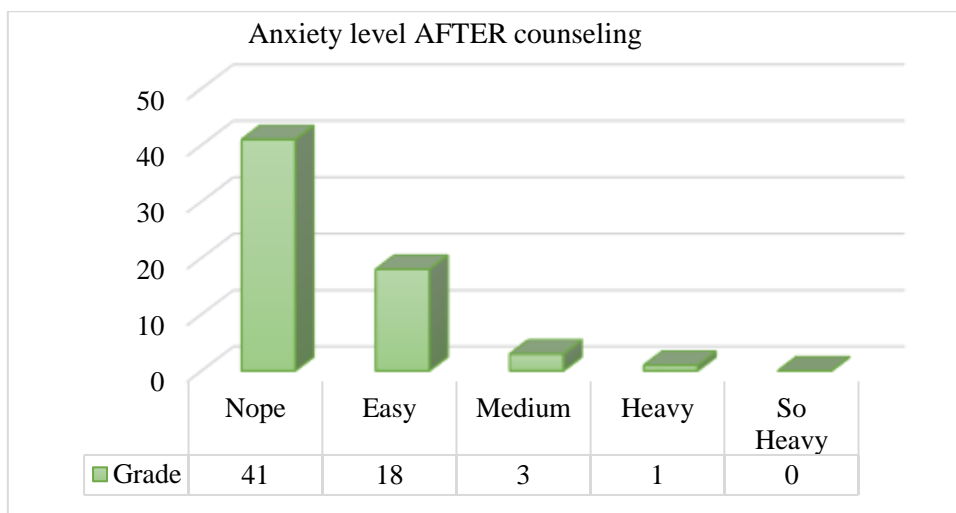


Figure 2. Maternal anxiety level after menopause counseling for premenopausal mothers in Gebyog village in 2024

3.4. Results of the Analysis Before and After Counseling for Premenopausal Mothers on Anxiety Levels

From Figure 3, it can be seen that after menopause counseling, there was an increase in those who did not experience anxiety, and there was a decrease in mothers who experienced mild, moderate, severe, and very severe anxiety. The level of anxiety before counseling with the category of none was obtained at a percentage of 23.81%, the mild category

with a percentage of 38.09%, the moderate anxiety level category 17.46%, the severe anxiety level category 19.05%, and the very severe category with a percentage of 1.59%. This is inversely proportional after counseling for the category of no anxiety with a percentage of 65.8%, the mild anxiety category with a percentage of 28.57%, the moderate anxiety category with a percentage of 4.76%, the severe anxiety category with a percentage of 1.59%. And the very severe category with a percentage of 0%.

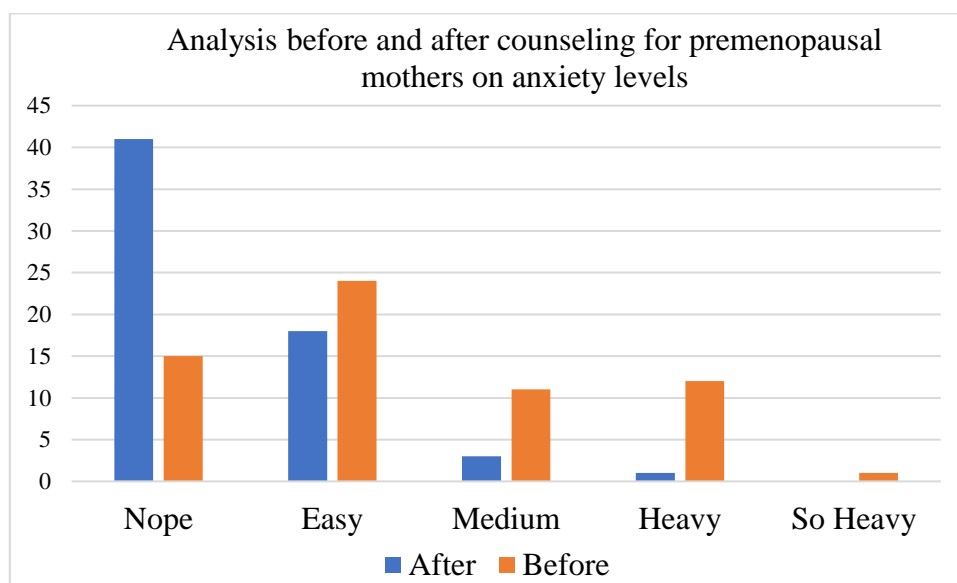


Figure 3. Level of mothers' anxiety before and after menopause counseling for premenopausal mothers in Gebyog village in 2024

The purpose of this study was to determine how counseling affects the level of anxiety of mothers experiencing menopause. Table 2 shows the average change in anxiety levels after the study was conducted by 12.83. The data were analyzed using the Mann Whitney u test, obtained a value of $p = 0.000$ so that $p = 0.000 < \alpha = 0.05$ can be interpreted in Gebyog Village, Karangajo District, Magetan Regency in 2024, there was an influence between counseling and the level of anxiety of menopausal mothers.

Table 2. Statistical Test Results Mann Whitney u test

Anxiety Level	Mean Rank		p value
	Before	After	
Nothing	15 (23.81%)	41 (65.08%)	0.000015
Light	24 (38.09%)	18 (28.57%)	
Medium	11 (17.46%)	3 (4.76%)	
Heavy	12 (19.05%)	1 (1.59%)	
So heavy	1 (1.59%)	0 (0%)	
Total (63)	19.94	12.83	

4. DISCUSSION

4.1. Identification of Respondent Characteristics

Premenopausal mothers aged 40-50 years in Gebyog village from 63 research data based on the mother's education level illustrates the highest percentage is secondary education level compared to primary and higher education levels.⁽⁷⁾ According to Madinah (2023) If a person's education is higher, they will have more knowledge and information that is more easily accessible, so that anxiety associated with menopause can be overcome properly. Human activities or activities in improving nature or steps to change behavior to achieve maturity and perfect human life are known as education.⁽⁸⁻¹⁰⁾ Based on the type of work, the highest percentage is sitting idle or as a housewife. However, there are also premenopausal mothers who are active as farmers, private / self-employed and civil servants with a lower percentage than those who do not work. According to Muchin 2022

Women's daily activities can affect their status. A woman who is only a housewife may not know much about changes, so they do not know how to deal with menopause.⁽¹¹⁻¹³⁾ Meanwhile, when viewed from parity, the highest presentation of premenopausal mothers is multipara (having given birth to more than one child) experiencing anxiety in dealing with menopause. In line with Fitiana's research (2023) Parity has an impact on menstruation and premenopausal symptoms. So, more parity also accelerates the age of menopause.

With increasing parity, the ovaries will produce more progesterone. With increasing progesterone, the excretion of the hormone AMH also increases. The presence of the hormone AMH will increase FSH and accelerate menopause.⁽¹⁴⁻¹⁶⁾ The level of maternal anxiety is influenced by education, occupation and parity. One of the aspects that can have an influence is the level of education which plays a role in understanding, thinking patterns and absorption of information obtained so that the mother experiences anxiety because of the mother's ignorance about menopause. A housewife is a mother's career and daily activities taking care of her children can cause anxiety. Social activities that are followed by women are more informed by friends who are involved in social activities or friends who are involved in social activities. With their busy lives they don't have time to think about the symptoms of dealing with menopause trying to stay active and reduce menopausal symptoms. Working mothers have a broad way of thinking, so they have confidence in themselves and their abilities so they will not experience anxiety.

4.2 Anxiety Level of Premenopausal Mothers Before Counseling.

The results of the study showed that almost all premenopausal mothers experienced anxiety before menopause, with categories of mild, moderate, severe, and very severe anxiety. According to Majitno, 2019, many factors can influence mothers undergoing menopause in the form of diversity and levels of anxiety, including psychological factors, family roles, statements, and ethics. Negative thoughts about menopause are referred to by psychics as the beginning of a decline in the quality of women's femininity and sexuality in old age. If mothers know about how to prepare themselves for menopause, their anxiety can be reduced. Participating in health education activities about menopause helps mothers become more aware of their condition.⁽¹⁸⁾ Based on this, it turns out that

mothers who do not get enough information about menopause are often found with anxiety due to lack of knowledge.

4.3 Anxiety Level of Premenopausal Mothers After Counseling.

The results of the study stated that the level of maternal anxiety after counseling was obtained, most of them no longer felt anxious. And a small portion of mothers still felt anxiety, either mild, moderate or severe. However, severe anxiety was not experienced by mothers once after counseling. According to S Nuriman (2023) Education factors can influence a person's knowledge. The higher the level of education, the broader the knowledge and the easier it is to get information. Not only formal education can provide increased knowledge, but also other sources of information.⁽²³⁾ The results of the study showed that even though health counseling about menopause had been given, some mothers experienced anxiety. According to Utami (2022) Individual factors influence this. Education influences a person's level of anxiety, because a person's knowledge increases, it is easier for them to obtain information, which means they have more knowledge. Conversely, lack of education will hinder attitudes towards the principles instilled.⁽¹⁷⁾

However, there are a few mothers whose anxiety levels remain the same or do not decrease after being given counseling. Factors influencing anxiety according to Yulizawati (2022) Each person will respond to anxiety uniquely. Internal factors, such as education, level of knowledge, age, and external factors, such as social support, career, environmental conditions, and counseling, influence this.⁽¹⁹⁻²¹⁾ According to researchers, by providing counseling, mothers receive information so that they are better prepared to face menopause, which will reduce anxiety. After counseling, mothers experienced a decrease in anxiety, but a small number did not experience a change in anxiety levels. According to researchers, counseling cannot directly reduce the anxiety levels of premenopausal mothers because the anxiety that is formed is difficult to eliminate. In addition to being caused by education levels, work, parity, and counseling, psychological support is needed from the family and environment.

4.4 The Effect of Menopause Counseling on Anxiety Levels of Premenopausal Mothers.

The results of this study indicate that there is an effect of providing menopause counseling on the level of maternal anxiety in facing menopause in Gebyog Village. This shows that premenopausal mothers' anxiety about menopause is very different before and after receiving training on menopause. In Gebyog Village, counseling on menopause can reduce the anxiety of premenopausal mothers. Based on W Sari's research, 2020 showed that the reasons for anxiety are factors that influence menopause including education, age, knowledge, economic capacity, number of children, age of puberty, personality response, intellectual, and adduction. An important part of health promotion is health counseling to increase knowledge, perceptions, and actions about health.⁽²²⁾

After counseling, there are still mothers who experience mild anxiety. According to Nurul Cindy (2023) in premenopause, those who experience mild anxiety can still think logically and find solutions to the causes of their anxiety. Premenopausal mothers generally experience mild anxiety.⁽²³⁾ Information is the basis of counseling, so the community should know more after receiving health counseling. However, the media used can affect the success of counseling. Less interesting media causes mothers to pay less attention to the material provided. This study shows that the anxiety of mothers facing menopause is greater before than after counseling. This shows that counseling can help reduce anxiety caused by menopause. Developing mothers' knowledge about menopause through the delivery of information and health education about menopause is a process. This helps mothers gain proper and accurate knowledge about what happens when they experience menopause. Mothers who are in premenopause will gain knowledge and understanding about menopause with midwives who provide counseling, which helps reduce anxiety.

5. CONCLUSION AND RECOMMENDATION

From the results of the research conducted, conclusions were obtained based on specific objectives : The researcher's research can draw conclusions based on the following research findings Characteristics of premenopausal mothers aged 40 to 50 years in Gebyog

village, almost half of the respondents have secondary education, most mothers do not work and almost all mothers are multiparous, Most mothers experience anxiety before getting guidance, Most mothers' anxiety levels have decreased after getting guidance, In Gebyog village, counseling on menopause can reduce the anxiety of mothers facing menopause. Write conclusion here. Don't write conclusion with numbering or bulleting. If needed, the suggestion or recommendation or future research directions can be added after conclusion. For institutions, this study can serve as a reference for future research on anxiety in menopausal mothers. For the community, premenopausal women should seek health information and participate in health services to manage anxiety, with family support being crucial. Researchers should conduct more in-depth studies on this topic. Health centers should focus on providing education about menopause to help prevent anxiety in premenopausal women.

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Conflict of Interest

The authors declare no conflict of interest.

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