

Influence of Interpersonal Communication on Husbands' Attitude Towards Menopausal Wives in Obukpa Town, Enugu State

Asadu Clement Afamefuna

Department of Journalism and Media Studies, University of Port Harcourt, Nigeria

Chibueze, Ebere

Department of Psychology, University of Nigeria, Nsukka, Enugu State, Nigeria

Abstract: Menopause is a period of transition every woman passes at the age 45-55 and with several challenges and pressure on marriages. This study centres on the influence of interpersonal communication on husbands' attitude towards menopausal wives in Obukpa Town, Enugu State. Three research question were formulated and a total of 10 participants were purposively selected from the population of 260 to participate in a focus group discussion because their wives over 50 years of age. It was found that a majority of men do not know much about menopause and did not even know when their wives got to that stage. It was equally found that due to this limited information, the level of support menopausal women get from their husbands was small, however, it did not greatly affect their marriage satisfaction. Men marry for several reason and can remain with their wives due to good moments they had shared in the past, but this affects the woman's quality of life.

Keywords: Menopause, women, quality of life and interpersonal communication.

Background

Women are naturally created in a way that in their mid 40s and early 50s, their body undergoes serious degeneration or changes that come with some obvious psychological, emotional and sometimes physical signs. These changes are caused by a natural aging process known as menopause. Menopause happens to every woman once the person gets to the age between 45 and 55. This topic is poorly discussed and understood by many people including women. The term menopause was taken from two Greek words, *mens*, which means monthly and *pause*, which means stop. It simply means the last (monthly) menstrual period a woman experiences. It marks the end of ovulation in a woman and this comes with a lot of changes in a woman's life. Some people call it 'change of life.' The National Institute of Aging (1992) defines menopause as "the point in a woman's life when menstruation stops permanently, signifying the end of her ability to have children" (p.5). "It is the last stage of a gradual biological process in which the ovaries reduce their production of female sex hormones". Fox-Spencer and Brown (2006) see menopause as "the woman's period of transition from reproductive to non-reproductive life medically known as climacteric phase" (p.14)

Menopause comes with reduction in the female sex hormones –estrogen and progesterone. When these hormones are not enough in a woman's body it can make her prone to several health challenges such as mood swing, depression, memory loss, tiredness, osteoporosis (weakness of the bones), sleep disorder among others. Subsequently, the National Institute on Aging adds that "lower estrogen levels decrease the blood supply to vagina which makes delicate tissues thinner, drier and less able to produce secretions to comfortably lubricate before and during intercourse" (p.12). The World Health Organization (1996) recognizes the classification of stages of

menopause as; premenopausal, perimenopausal, and postmenopausal. “Premenopausal women are those who have experienced regular menstrual bleeding within the last 12 months, perimenopausal women are those women who have experienced irregular menses within the last 12 months or the absence of menstrual bleeding for more than three months but less than 12 months, and postmenopausal women are those who have not experienced menstrual bleeding for 12 months or more”.

Menopause has some physical symptoms that affect the behaviour, attitude and perception of a woman that if not well discussed and understood by husband or family members may bring about misunderstanding, quarrel or divorce. For instance, there is this happily married woman with six children enmeshed in crisis with the husband due to poor knowledge and information sharing of menopausal experience with her partner. On getting to the menopausal age, she was faced with some menopausal challenges such as loss of libido, dyspareunia, insomnia, joint and muscular pain, urinary urgency and insomnia. She became obsessed and could not understand herself again, but was not sharing this with her husband. She started declining from regular sexual intercourse as before. Her husband was not comfortable and could not understand her any longer. The woman saw every sexual act as capable of worsening her health situation and some of her friends told her that menopausal challenges in a woman was due to frequent deposition of sperm cells in her body. They told her that at her age, sperm deposition in her body was more of poison than pleasure. Believing them, the woman started distancing herself from the husband. Naturally, affection and intimacy that existed between the two began to decline, and frequent problems and quarrelling became very obvious.

The couple live as strangers under one roof. Within a while, the husband’s attention shifted completely away from the woman to other women and the wife was thrown into anxiety and depression which obviously worsened her mental health situation. She died out of complications arising from congestive cardiac failure which may have been averted if both parties were in an open communication. WHO admits that menopause is often not discussed within families, communities, workplaces, or health-care settings.

Ideally, unmediated interpersonal communication would have saved the situation. This type of communication bonds and binds husband and wife. Baucom and Eldridge (2013) observe that interpersonal communication “affects relationship satisfaction and stability”. Houston et al (2001) note that “decline in positive communication behaviour over time are a significant risk factor for marital distress and divorce.” Sogrin and Flora (2011) add that divorce is a process that takes years to unfold and can be predicted fairly well from an analysis of married couple’s communication behaviour. Not talking enough to each other and not being at home often enough have been identified as significant predictors of divorce and challenges in marriage.

Observation by the authors reveal that there is increasing rate of divorce and quarrels these days especially in marriages that have lasted for years. It is not clear if menopausal health conditions were part of the cause. Therefore, the aim of this paper is to investigate influence of interpersonal communication on husbands’ attitude towards menopausal wives in Enugu State.

Achieving health self-efficacy among Menopausal Women through Communication

According to Nyarks, Nyarks, Akunna, and Frank, (2024), communication is crucial in creating an environment that promotes safety and comprehension. Menopause comes to women with different symptoms, however, environment and culture affect menopausal experiences. Since it is an irreversible condition, women can only cope with the situation by understanding what to do at all times. A chronic health condition such as menopause is expected to be self-managed by seeking information from professional health workers and sharing with caregivers or partners. This helps in reducing the severity of the condition. By doing this, the person becomes efficacious in handling certain personal situations. Nyarks and Enang (2021) mentioned that communication skill is important life skills to understanding, as this can be done vocally or even non-verbally. Connor and Norman (2005) observe that it has been increasingly recognized that individuals can make contributions to their own health and well-being through adopting

particular health-enhancing behaviours and avoiding other health-compromising behaviours (p.1).

Self-efficacy as Albert Bandura calls it, refers to the confidence a person has about his/her capacity to undertake behaviour(s) that may lead to desired outcomes. Peters, Potter, Kelly and Fitzpatrick (2019) add that the higher the self-efficacy, the better the health outcomes and reduced health care utilization. Bandura (2014) notes that “people make causal contributions to their own psychosocial functioning through mechanisms of personal agency such as beliefs about their capabilities to exercise control over events that affect their lives” (p.3). He adds that “higher levels of perceived self-efficacy are accompanied by higher performance attainments” (p.4).

The foregoing suggests that self-efficacy is attained through interaction and learning. Interaction can increase or decrease one’s self-efficacy. Discussing one’s health situation improves the health self-efficacy of an individual with chronic disease. Poor self-efficacy can lead to risky behaviour by someone with chronic disease.

Interpersonal communication and bonding of couples

Naturally, humans are created to live in company of others. Loneliness can kill or affect one’s health and social life. No marriage, and by extension family, remains united for long without the existence of affection and intimacy. Nyarks and Hope (2022) opined that marriage is a significant milestone in a person’s life, it is more of a sacrament than a societal construct. When two people who never knew each other meet and marry, it is only love and intimacy built on respect that can sustain the relationship. It has to be mentioned that relationship is built by interaction and expectations. Honeycutt and Bryan (2011) observe that “it is this two that affect the nature and extent of intimate involvement”. They go ahead to define intimacy as “a cognitive appraisal of behavioural interactions that affect the future course and level of commitment in a relationship. It involves people sharing their private thoughts, beliefs and fantasies with someone” (p.12). The sharing of such private information helps us to understand selves and our partners. Intimacy or a lack of it predicts the future of a relationship.

A husband and wife can only be intimate if they understand themselves as friends. Friendship is based on trust, self-concept support and helping behaviour. Cushman and Cahn (1985) see trust as a relationship based on authenticity; self-concept support refers to a relationship based on respect for one’s social and psychological self; helping behaviour refers to a relationship based upon reciprocal assistance in time of need” (p. 51). Robin (2020) notes that communication is the foundation of any relationship; “strong marriage intimacy may not be possible without effective communication between spouses. Even the marriage that is falling apart can be saved when communication is applied effectively” (p2). Communication allows partners to put their “thoughts and emotions into words” (p.7). lack of communication in a relationship can keep partners apart and overtime, lose affection and feelings for each other even as they live under the same roof (p.8).

Theoretical framework

This study is anchored on expectancy violations theory (EVT). This is an interpersonal communication theory propounded by Judee Burgoon in 1978. As a communication theory, EVT “is concerned specifically with what people expect to do in interpersonal interactions” (Burgoon). The theory influences how we interpret and react to people’s actions. Interactions, relationships and expectations are influenced by the social norms within an environment. These expectations are violated when someone acts in a manner that deviates from a behavior that is typical (normative) or anticipated (Afifi & Metts, 1998). EVT seeks to explain how we react if an unexpected thing happens. Expectancy in the communication sense denotes an enduring pattern of anticipated behaviour that can be specific to an individual, context, and/or relationship.

When violation of our expectancy occurs, arousal is heightened which initiates cognitive appraisals related to (a) the meaning of the violation and (b) the evaluation of the positive or negative value

of the violation (violation valence) (p, 191). Violation valence is the degree of positivity or negativity we assign to the violation. Positive valence leads to better relationship and interaction. The arousal connotes a response that involves directing some attention away from the topic at hand and toward the violator and violation (Burgoon 1993, p.35). In the views of Burgoon and Hale (1988) EVT predicts that “a violation that has a positive valence will typically lead to better interaction outcomes than a non-violation” (p,192). “Partners tend to nonverbally reciprocate decreased intimacy but utilize verbal repair strategies to determine why the decrease in intimacy had occurred” (p.196). Increased negative violations bring about increased uncertainty about the relationship while positive violations decrease uncertainty about the relationship. In other words, positive violation is always encouraged. This can occur when a person feels that the partner is not caring only to be surprised by a wonderful gift and attention from the partner. The negative valence occurs when a person thinks partner is outspoken only to discover later he/she a recluse. Expectancies can be predictive or prescriptive.

EVT proposes that our expectations are influenced by three key factors: the communicator, the relationship and the context in which the interactions occur. Communicator characteristics includes salient features of an interaction partner, such as gender, age, personality and communication style. Relationship factors include things such as the degree of familiarity between partners. Contextual elements include aspects of the environment that might define how individuals should communicate in a particular situation, such as the formality of the setting or the nature of the task (p.191). In other words, when two people meet their communication behaviour is influenced by many factors. The way we perceive a person affects our evaluation or extent the person violates our expectations. “Those with positive EVT will always have closer distance of interaction with those that have communicator reward value i.e. those we like and feel attracted to. This theory supports that closeness or intimacy begets intimacy” (Burgoon and Hale,1988).

To Burgoon and Hale (1988) intimacy behaviour involves “a set of nonverbal cues that includes distance, leaning/body orientation, eye contact and openness of posture-on interaction between friends and strangers” (p, 196). Decreased intimacy is seen as a negative violation which leads to less positive interaction outcomes than conforming to expectations while increased intimacy is seen as positive violation for friends.

Methodology

The survey research design was adopted for this study. The design allows a researcher to obtain appropriate information, attitude or opinion on a phenomenon from respondents. The data generated can, therefore, be generalized to the entire population (Ihejirika and Omego). The population for this study comprised all the married men in Obukpa town in Nsukka Local Government Area of Enugu State. Obukpa people are over 95% Catholics and the church has a well-structured men organization. Obukpa has five parishes with each one having active members of about 52. This gives a population of about 260 active members. From this number, two people were purposively selected from each parish to be part of the focus group discussion because they accepted that their wives were over 50 years of age. This gives us 10 participants in a focus group discussion.

The extent to which husbands were aware their wives had got to menopause. A total of seven men did not know their wives had got to menopausal stage; however, by their explanations, their wives exhibited certain changes in the body suggesting menopausal symptoms. For instance, the men note that their wives were having regular mood swing, always feeling weak, knee pains, always withdrawn and reduced sexual urge. Two out of the remaining three said they suspected their wives had been poisoned or charmed in order not to conceive again. The remaining one person did even notice any changes in the wife.

Level of assistance to the wives to cope with their situation. The whole respondents did not believe their wives had any issue that requires assistance. To them, their wives were just getting old. In fact, three out of the number said their wives were pretending to be older than them.

On the level of satisfaction with their marriages, six of the respondents said they were satisfied with their marriage since the wives had given birth to children. The other four were neither satisfied nor not.

Discussion

Research question one:

To what extent are husbands in Obukpa aware their wives had got to menopausal status?

It was found that many men were not aware their wives had got to menopausal status. This is why most men do not assist or understand their wives when the menopausal challenges come. The menopausal symptoms were seen by some men as pretense or sickness. The men's lack of this knowledge was because menopausal issues were not discussed openly for no known reasons. This finding is in line with what Yoshany et al (2017) found. They found that "education and training of husbands on menopausal conditions of wives can increase their wives' confidence and help them have a positive attitude towards it. It also increases their marital satisfaction and improves their quality of life." Moghani, Ebrahimzadeh, Safari and Jamali (2021) submit that husbands' knowledge about menopause is very little.

This little knowledge can affect the level of intimacy between husband and wife during menopause. Intimacy in marriage is a reciprocal process occurring between couples because "they are engaged in the reciprocal feeling of disclosing their inner self, being trusted, validated, and emotionally closed. Studies demonstrate that the length of marriage affects the development of intimacy among couples." (Yoshany et al, 2017, p.3)

Research question two: What is the Level of assistance to the wives during menopause?

The psychological, physical and emotional consequences of menopause can be devastating to many women such that their health may generally deteriorate. At this point they need the understanding and cooperation of husbands who happens to be the closest. The finding here shows that many men do not see menopause as sickness and would not see any need for assistance. This situation can worsen the menopause issues and mental health of the woman.

Sagia (2024) notes that the higher the husband's support, the lower the wife's anxiety level. In other words, the severity or otherwise of the menopause is dependent on husband's support and cooperation. Mansfield, Koch and Gierach, (2008) in their study of 96 husbands of women in menopause found that "one-third of the husbands believed they were not supportive, but the majority said they provided mostly emotional support". They add that "lack of information, negative effects of their wives' menopausal transition, and their own stresses may have interfered with husbands' ability to provide social support".

Research question three: What is the level of satisfaction with the marriage?

When a woman gets to menopause a lot of changes occur in her behaviour and understanding. It is not every man can understand and tolerate these. However, people marry for several seasons and this reflected in the answers our respondents gave. It was found that men still feel satisfied with the marriage having lived together for years with children. Khan, Shakoor and Yusuf (2022) found in their study that "many husbands do not cope with their spouse's menopausal symptoms due in part to their limited information about menopausal transition and its related consequences."

Conclusion

Menopause is a very challenging period in a woman's life. Most marriages always have problems during menopause because of limited information the spouses have. The existence of interpersonal communication between husband and wife even before getting to the menopausal stage has been identified as healing since it increases the understanding of the man about menopause and reduces the stress the woman passes through thereby improving her quality of life.

Recommendation

There should regular interpersonal communication between husbands and wives for a consistent healthy relationship as regards menopause and intact marriage as a whole.

REFERENCES

1. Afifi, W. A., & Metts, S. (1998). Characteristics and consequences of expectation violations in close relationships. *Journal of Social and Personal Relationships*, 15(3), 365–392. doi:10.1177/0265407598153004
2. Bandura, A. (2014). *Exercise of personal agency through the self-efficacy mechanism*. In R. Schwarzer (Ed.) self-efficacy: Thought control of action. Routledge pp3-11
3. Burgoon, J. K. & Hale, J. L. (1988). Nonverbal expectancy violations: Model elaboration and application to immediacy behaviours. *Communication Monographs*, (55) 58-99.
4. Burgoon, J. K. (1993). Interpersonal expectations, expectancy violations, and emotional communication. *Journal of Language and Social Psychology*, 12(1-2), 30–48. <https://doi.org/10.1177/0261927X93121003>
5. Burgoon, J. R. (1993), interpersonal expectations, expectancy violations and emotional communication. *Journalism of language and social psychology* 12, 30-48.
6. Connor, M & Norman, P. (2005). *Predicting health behaviour: A social cognitive approach* (2nd edition). Open University Press.
7. Honeycutt, J.M. & Bryan, S.P. (2011). *Scripts and communication for relationships*.
8. Khan, N.I.Z., Shakoor, S & Yusuf, S. (2022) Menopausal symptoms: prediction of quality of marital relationship among couples. *Journal of mind and medical sciences*. 9 (1) DOI: 10.22543/7674.91.P133142
9. Mansfield, P. K., Koch, P.B.& Gierach, G (2008) Husbands' support of their perimenopausal wives. *Women & Health* 38 (3) https://doi.org/10.1300/J013v38n03_07
10. Moghani, S.S., Ebrahimzadeh, M., Safari, A & Jamali, J. (2021). The Effectiveness of Husbands' Awareness of Menopausal Complications on Physical Psychological Experiences of Postmenopausal Women. *Journal of holistic nursing and midwifery* 31(3) pp. 155-164
11. Nyarks, A., & Hope, M. M. (2022). Impact of Effective Communication in a Marriage. *International Journal of Research in Education, Sciences and Technology*, 4(2), 33-40.
12. Nyarks, A., and Enang, V. (2021). Teachers' Communication Skills and Students' Academic Performance in Linguistic: Empirical Study of Students in Tertiary Institutions in Akwa Ibom State. *International Journal of Advancement in Education, Management, Science and Technology*, 4(3): 95-107.
13. Nyarks, A., Nyarks, I., Akunna, C. P., and Frank, E. I. (2024). Cultural Competence in Counseling: Investigating the Influence of Language Barriers on Client-Counselor Dynamics. *International Journal of Innovative Studies*, 1(1):1-22.
14. Peter Lang. Cushman, D.P. & Cahn, D.D. (1985). *Communication in interpersonal relationships*. State University of New York.
15. Peters, M; Potter, C.M; Kelly, L & Fitzpatrick, R. (2019). Self-efficacy and health-related quality of life: A cross-sectional study of primary care patients with multi-morbidity. *Health and Quality of Life Outcomes* 17:37 <https://doi.org/10.1186/s12955-019-1103-3>
16. Robin, C. (2020). *Communication in marriage: How to communicate effectively with your spouse, build trust and rekindle love*.
17. Sagia, B.A. (2024). Providing Husband Support Affects Wife's Anxiety Level in Facing Menopause. *Archives of The Medicine and Case Reports* 5 (1). Pp. 577-579
18. Yoshany, N., Morowatisharifabad, M.A., Mihanpour, H., Bahri, N & Jadgal, K.M. (2017). The effect of husbands' education regarding menopausal health on marital satisfaction of their wives *Journal of Menopausal Medicine* 23, Pp.15-24