

The MIMESOZA Menopause Handbook

A practical guide for women in Zambia

Written by the Midlife and Menopause Society of Zambia

Understanding menopause, caring for your health, and finding support

Menopause is a natural stage of life. Yet for many women, it can be a time of uncertainty, physical changes, emotional challenges and questions that are rarely discussed openly.

You do not have to navigate it alone.

This handbook provides clear, evidence-based information about menopause, common symptoms, hormonal changes, cultural myths and stigma, and practical ways to support your wellbeing through midlife and beyond.

1. What is menopause?

Menopause is a natural biological transition that marks the end of a woman's reproductive years.

Menopause itself is defined as **12 consecutive months without a menstrual period**, when there is no other medical explanation for the absence of periods.

For most women, natural menopause occurs between approximately **45 and 55 years of age**. However, every woman's experience is different.

Menopause can also occur earlier as a result of surgery, medical treatment or other health conditions.

Menopause is a process, not a single day

The years leading up to menopause are called **perimenopause**.

During perimenopause, hormone levels fluctuate and periods may become irregular. Symptoms can begin before periods stop completely.

After 12 months without a period, a woman is considered to have reached menopause. The years that follow are referred to as **postmenopause**.

Perimenopause can last several years, and symptoms vary considerably between women. Some women experience very few symptoms, while others experience symptoms that significantly affect their quality of life.

2. What happens to your hormones?

The main hormones involved in the menopause transition are **oestrogen and progesterone**.

These hormones are produced primarily by the ovaries and play important roles throughout the reproductive years.

As the ovaries gradually become less active:

- Oestrogen levels fluctuate and eventually decline.
- Progesterone production becomes less consistent as ovulation becomes less frequent.
- Periods may become irregular before stopping altogether.
- The hormonal changes can affect many parts of the body.

Oestrogen receptors are found throughout the body, including in the brain, bones, cardiovascular system, urinary and genital tissues. This is one reason menopause can be associated with such a wide range of physical and psychological changes.

Importantly, **not every symptom experienced during midlife is necessarily caused by menopause**. Other health conditions, medications, stress, sleep problems and life circumstances can produce similar symptoms.

If something is new, severe, persistent or concerning, speak to a healthcare professional.

3. Common symptoms of menopause

Every woman's experience is different.

Some women have few symptoms, while others experience several symptoms at the same time. Symptoms can change throughout perimenopause and may continue after the final menstrual period.

Changes in your periods

You may notice:

- Periods becoming irregular

- Longer or shorter cycles
- Heavier or lighter bleeding
- Periods being skipped
- Changes in menstrual flow

Hot flushes and night sweats

Hot flushes are sudden feelings of heat, often affecting the face, neck and chest. They may be accompanied by sweating, flushing or a racing heartbeat.

Night sweats can disrupt sleep and leave you feeling tired during the day.

Sleep changes

You may experience:

- Difficulty falling asleep
- Waking during the night
- Waking earlier than usual
- Night sweats
- Feeling tired despite spending enough time in bed

Mood and emotional changes

Some women experience:

- Irritability
- Anxiety
- Low mood
- Increased emotional sensitivity
- Feeling overwhelmed
- Reduced confidence
- Difficulty coping with stress

Hormonal fluctuations may contribute to mood symptoms, but life circumstances, sleep disruption and other factors can also play an important role.

Brain fog and concentration

Some women describe:

- Forgetfulness
- Difficulty concentrating
- Losing their train of thought
- Feeling mentally slower
- Difficulty finding words

These experiences can be frustrating, but they do not mean that you are "losing your mind."

Vaginal and urinary changes

Declining oestrogen can cause changes to vaginal and urinary tissues.

You may experience:

- Vaginal dryness
- Burning or irritation
- Discomfort during sex
- Reduced sexual desire
- Urinary urgency or frequency
- Recurrent urinary tract infections

These symptoms are common and **treatable**. You do not simply have to accept pain or discomfort as an inevitable part of ageing.

Other changes

Some women also report:

- Joint or muscle aches
- Headaches
- Palpitations
- Changes in skin and hair
- Changes in body composition
- Reduced energy

4. Menopause and your mental health

Menopause is more than a physical transition.

Hormonal changes, disrupted sleep and physical symptoms can interact with work, relationships, caregiving responsibilities, financial pressures and other life changes that may occur during midlife.

You might find that you are:

- More anxious than usual
- Less patient
- More easily overwhelmed
- Struggling with confidence
- Feeling unlike yourself

- Finding it harder to cope with stress

These experiences deserve to be taken seriously.

At the same time, significant or persistent anxiety or depression should not automatically be attributed to menopause. Mental health difficulties can occur at any stage of life and deserve appropriate assessment and support.

Asking for help is a sign of self-care, not weakness.

5. Menopause and sexual wellbeing

Changes in sexual wellbeing are common during menopause, but they are rarely discussed.

Lower oestrogen levels can contribute to vaginal dryness and discomfort, while changes in mood, sleep, body confidence, relationships and stress can also influence sexual desire and satisfaction.

There is no "normal" level of sexual desire during menopause.

Some women experience little change. Others experience significant changes in desire, arousal, comfort or sexual satisfaction.

If sex has become uncomfortable or painful, talk to a healthcare professional. There are treatments and strategies that may help.

Your sexual wellbeing remains part of your overall health.

6. Menopause, culture and stigma

Menopause does not happen in a cultural vacuum.

How a woman experiences menopause can be influenced by her family, community, relationships, beliefs, expectations, socioeconomic circumstances and access to healthcare. WHO recognises that cultural and social factors can shape women's experiences of menopause.

In many communities, menopause is not openly discussed. Some women may feel embarrassed about symptoms or believe they should simply endure them.

This silence can prevent women from asking questions or seeking appropriate healthcare.

Let's challenge some common myths

Myth: "Menopause is a disease."

Fact: Menopause is a natural biological stage of life. However, symptoms can be significant and deserve appropriate support and treatment.

Myth: "You just have to suffer through menopause."

Fact: Some women need little or no treatment, while others benefit from lifestyle changes, psychological support, medical treatment or a combination of approaches. There are options.

Myth: "Menopause means you are old."

Fact: Menopause is a stage of reproductive ageing, not a measure of a woman's worth, ability or vitality.

Myth: "Menopausal women should stop being sexually active."

Fact: Menopause does not end sexuality. Women can continue to have fulfilling sexual relationships throughout midlife and later life. Vaginal and sexual symptoms can often be treated.

Myth: "Menopause is the same for every woman."

Fact: Menopause is highly individual. Some women have few symptoms, while others experience significant physical and emotional changes.

Myth: "Talking about menopause is shameful."

Fact: Menopause is a normal part of women's health. Talking openly about it helps women recognise symptoms, seek appropriate care and support one another.

7. Looking after yourself during menopause

There is no single lifestyle plan that works for every woman. Small, sustainable changes can nevertheless support your overall health and wellbeing.

Move your body

Regular physical activity can support cardiovascular health, muscle strength, bone health, mood and general wellbeing.

Choose activities that you enjoy and can maintain, such as:

- Walking
- Running
- Dancing
- Cycling
- Swimming
- Strength exercises
- Yoga or stretching

You do not have to exercise perfectly for it to be beneficial.

Prioritise sleep

Try to develop a consistent sleep routine.

Helpful habits may include:

- Going to bed and waking at similar times
- Keeping your bedroom comfortable and cool
- Limiting caffeine later in the day
- Creating a relaxing wind-down routine
- Addressing night sweats and other symptoms that disrupt sleep

Persistent sleep difficulties deserve attention rather than simply being accepted as "part of menopause."

Nourish your body

Aim for a varied diet containing:

- Vegetables and fruit
- Whole grains and other high-fibre foods
- Beans, lentils and other legumes
- Protein-rich foods
- Healthy fats
- Calcium-rich foods where appropriate
- Adequate fluids

There is no single "menopause diet" that every woman needs to follow.

Look after your bones

Bone health becomes increasingly important after menopause.

Weight-bearing activity, resistance exercise, adequate calcium and vitamin D, and avoiding smoking can all contribute to healthy bones.

Ask your healthcare professional whether you have individual risk factors that require further assessment.

Protect your heart

Menopause is an opportunity to review your overall cardiovascular health.

Know your:

- Blood pressure
- Cholesterol
- Blood sugar where appropriate
- Family history
- Smoking status
- Physical activity levels

Your healthcare professional can help you understand your individual risk.

8. Take care of your emotional wellbeing

Self-care does not have to mean expensive treatments or products.

Consider:

- Making time for activities you enjoy
- Staying connected with supportive people
- Spending time outdoors
- Practising relaxation or mindfulness
- Setting boundaries around your time and energy
- Talking to someone you trust
- Seeking professional psychological support when needed

Menopause can be an opportunity to reassess what you need—not just physically, but emotionally and socially.

9. When should I see a healthcare professional?

You don't need to wait until symptoms become unbearable before asking for help.

Consider speaking to a healthcare professional if:

- Your symptoms are affecting your quality of life.
- You are struggling with sleep.
- You are experiencing persistent anxiety or low mood.
- Sex has become painful.
- You are experiencing troublesome vaginal or urinary symptoms.
- You have questions about HRT or other treatment options.
- You are concerned about your bone, heart or general health.

Seek medical assessment for unusual bleeding

Bleeding after menopause should always be discussed with a healthcare professional.

Similarly, unusually heavy or persistent bleeding during perimenopause may require assessment.

Do not assume that every change in bleeding is simply menopause.

10. Remember: there is no "right" way to experience menopause

You may feel relieved when your periods stop.

You may feel sad.

You may feel completely indifferent.

You may experience physical symptoms that make the transition difficult.

You may experience all of these feelings at different times.

There is no single way to experience menopause.

Your experience is valid, and you deserve accurate information, respectful healthcare and support.

A final word

Menopause is not the end of womanhood.

It is not the end of your relationships, your sexuality, your ambitions, your confidence or your contribution to your family and community.

It is a transition—and like every transition, it can bring challenges as well as opportunities.

You deserve to understand what is happening in your body.

You deserve to ask questions.

You deserve to seek help.

And you do not have to navigate menopause alone.

Menopause Society of Zambia

Working towards a Zambia where every woman has access to clear, trustworthy information, quality healthcare and support throughout menopause and beyond.

Important

This handbook provides general educational information and is not a substitute for individual medical advice. Menopause symptoms can have causes other than hormonal changes, and treatment should be tailored to each woman's health, circumstances and preferences.

