



Self-Awareness and Quality of Life in Menopausal Women: A Concept Analysis

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Abstrak: This study aims to clarify the concept of self-awareness in menopausal women and examine its relationship with quality of life (QoL) using Walker and Avant's concept analysis framework. The analysis included articles published between 2021 and 2025, retrieved from databases such as Google Scholar, ProQuest, PubMed, CINAHL, and Science Direct, using keywords "menopause," "self-awareness," "quality of life," and "concept analysis." The findings reveal that self-awareness in menopausal women comprises interoceptive awareness, cognitive insight, emotional recognition and regulation, health literacy, and adaptive behavioral responses. Antecedents of self-awareness include health literacy, access to information, emotional support, mindfulness experience, and motivation for self-care. Its consequences involve improved symptom management, adaptive coping, reduced anxiety and depression, and enhanced physical, psychosocial, and sexual QoL. Empirical referents identified include MENQOL, MRS, MAAS, MAIA, symptom diaries, and outcomes of mindfulness or self-awareness interventions. The study concludes that self-awareness is a multidimensional construct essential for improving the QoL of menopausal women. Clarifying this concept establishes a theoretical foundation for developing targeted nursing interventions, standardized measurement tools, and future research exploring mechanisms linking self-awareness to QoL.

Keywords: Self-Awareness, Menopause, Quality of Life, Concept Analysis, Women's Health

Introduction

Menopause is a natural biological transition marked by the permanent cessation of menstruation and hormonal fluctuations, often accompanied by vasomotor symptoms, sleep disturbance, mood changes, sexual dysfunction, and cognitive complaints that together can reduce quality of life. Psychological constructs such as self-awareness and mindfulness have been examined as potential moderators or mechanisms through which women adapt to menopausal changes. Menopause is a natural biological transition marked by the permanent cessation of menstruation and hormonal fluctuations, often accompanied by vasomotor symptoms, mood disturbances, cognitive changes, sleep problems, and sexual dysfunction. These symptoms can significantly impair women's quality of life (QoL) across physical, psychological, and social domains (Avis et al, 2022) (Kaunitz & Manson, 2021).

Global evidence further indicates that perimenopausal and postmenopausal women experience elevated rates of anxiety and depressive symptoms, suggesting a substantial emotional burden during this transition (Almeida et al, 2023) (Gibson et al, 2022). Recent research highlights the role of psychological processes, particularly mindfulness, emotional regulation, and reflective capacity in promoting adaptation to menopausal changes. Mindfulness-based interventions and cognitive-behavioral approaches have demonstrated effectiveness in reducing anxiety and depressive symptoms while improving overall QoL (Gupta et al, 2022) (Kim & Lee, 2023) (Saadati et al, 2024). This evidence underscores the importance of *self-awareness* the ability to observe internal states, recognize cognitive and emotional patterns, and interpret physiological sensations as a potential mechanism influencing coping and symptom management.

Health literacy and menopause education also play critical roles. Women with higher awareness of menopausal physiology and symptom patterns adopt more adaptive coping strategies and report improved QoL (Nakamura et al, 2024) (Thompson & Harris, 2025). Health literacy and menopause education also play critical roles. Women with higher awareness of menopausal physiology and symptom patterns adopt more adaptive coping strategies and report improved QoL (Nakamura et al, 2024) (Thompson & Harris, 2025). Preliminary studies indicate a positive association between self-awareness and QoL among menopausal women (Setyowati & Kusumawati, 2023). Despite its significance, *self-awareness* is inconsistently defined in menopausal research, ranging from interoceptive awareness to emotional insight and reflective decision-making. This inconsistency hampers measurement, cross-study comparisons, and intervention design. A systematic concept analysis is thus needed to clarify the defining attributes, antecedents, consequences, and empirical referents of self-awareness in menopausal women.

Preliminary quantitative research further suggests that self-awareness is positively associated with QoL, particularly through pathways involving emotional regulation and self-efficacy (Setyowati & Kusumawati, 2023). Despite its significance, *self-awareness* is inconsistently defined in menopausal research, ranging from interoceptive awareness to emotional insight and reflective decision-making. This inconsistency hampers measurement, cross-study comparisons, and intervention design. A systematic concept analysis is thus needed to clarify the defining attributes, antecedents, consequences, and empirical referents of self-awareness in menopausal women.

Methodology

Concept analysis (*concept analysis*) it is carried out to identify the main concepts to be taught arrange them in a hierarchical form, and detail individual concepts into critical and irrelevant matters (Anwar et al,2022). This study employed Walker & Avant's (2019) eight-step concept analysis framework: selection of the concept, determination of purpose, identification of uses, defining attributes, model/borderline/contrary cases, antecedents and consequences, and empirical referents. Data is collected from various sources, namely: articles from various *database* (Google Scholar, Pro-quest, PubMed, CINAHL, and Science Direct), dictionaries, and WHO *website*. Searchin journal articles is limited to full-text

articles, used in English and/or Indonesian in 2021–2025 was reviewed using databases including the meaning of self-awareness and quality of life. The keywords used are *self-awareness, menopause, quality of life, concept analysis, women's health*.

Results and Discussion

The results of this concept analysis demonstrate that self-awareness is a multidimensional construct that plays a critical role in how women experience, interpret, and adapt to the menopausal transition. Using Walker and Avant's concept analysis framework, this study integrates contemporary evidence to clarify the meaning, scope, and functional components of self-awareness in menopausal women. The findings indicate that self-awareness influences quality of life through interconnected bodily, cognitive, emotional, and behavioral processes, supporting adaptive coping and symptom management. These results align with recent menopause research emphasizing psychological and behavioral factors as key determinants of well-being during midlife transitions (Avis et al, 2022) (Almeida et al, 2023).

Defining the Purpose of Analysis

The purpose of this concept analysis is to clarify the concept of self-awareness in menopausal women, as the term has been used inconsistently across psychological, nursing, and health sciences literature. While some studies equate self-awareness with symptom awareness or mindfulness, others frame it as emotional insight or health literacy, resulting in conceptual ambiguity. By defining the core meaning, attributes, and applications of self-awareness, this analysis aims to enhance theoretical clarity, support consistent measurement, and inform the development of nursing and health interventions designed to improve quality of life during menopause (McEwen & Wills, 2023) (Meleis, 2022).

Identifying All Concept Uses

The concept of *self-awareness* has been widely examined in psychological literature as a core component of self-regulation and mental health. In psychological literature, self-awareness is commonly defined as the capacity to consciously attend to internal experiences, including thoughts, emotions, and bodily sensations. It is closely associated with constructs such as mindfulness, metacognition, and emotional intelligence, emphasizing reflective attention and nonjudgmental observation of internal states. Research indicates that self-awareness enhances emotional regulation and psychological well-being by enabling individuals to recognize internal experiences without excessive reactivity, a function particularly relevant during periods of emotional and physiological change such as menopause (Creswell, 2023) (Sutton et al, 2022). From a behavioral and health sciences perspective, self-awareness is used to describe an individual's ability to recognize bodily cues, monitor symptoms, and translate this awareness into health-related decisions and behaviors. In women's health research, self-awareness is often linked to symptom monitoring, self-management, and health literacy. Studies have shown that greater awareness of bodily and emotional changes promotes adaptive health behaviors, timely

help-seeking, and improved quality of life among menopausal women (Tang et al, 2022) (Salazar-Pousada et al, 2024).

Within clinical and nursing contexts, self-awareness is regarded as a foundational component of self-care and patient engagement. Nursing theories such as Orem's Self-Care Deficit Theory and Meleis' Transitions Theory implicitly identify self-awareness as a prerequisite for recognizing health needs and navigating developmental transitions. Clinical interventions including counseling, reflective education, and mindfulness-based programs frequently aim to enhance self-awareness to improve symptom control, emotional well-being, and quality of life in menopausal women (Orem et al, 2021) (Amin et al, 2025). Specifically in menopause-related research, self-awareness refers to a woman's ability to recognize menopausal symptoms, interpret their meaning, and integrate this understanding into daily life and identity. This includes awareness of physiological changes, emotional fluctuations, sexual health concerns, and evolving social roles. Evidence suggests that women with higher levels of self-awareness perceive menopause as a manageable life transition rather than a disruptive health crisis, resulting in better coping strategies and improved quality of life outcomes (Lee et al, 2024) (Seyed Hoshiyar et al, 2021).

Determining Attributes

Self-awareness in menopausal women is defined by a set of core attributes that distinguish the concept from related constructs such as general knowledge, symptom reporting, or emotional reactivity. The primary attribute is *interoceptive awareness*, which refers to the conscious perception and interpretation of internal bodily sensations, including vasomotor symptoms, sleep disturbances, and somatic discomfort commonly experienced during menopause. This bodily awareness enables women to recognize menopausal changes as part of a normative physiological transition rather than as isolated or threatening health events. Closely related is *cognitive insight*, which involves reflective awareness of thoughts, beliefs, and meanings attributed to menopause, including perceptions of aging, femininity, and health expectations. Together, interoceptive awareness and cognitive insight allow women to contextualize menopausal experiences, reducing uncertainty and maladaptive interpretations that may negatively affect quality of life (Creswell, 2023) (Tang et al, 2022).

In addition to bodily and cognitive dimensions, self-awareness in menopause encompasses *emotional recognition and regulation*, *health literacy and symptom interpretation*, and *adaptive behavioral responses*. Emotional recognition and regulation refer to the ability to identify affective states such as anxiety, irritability, or sadness and to manage these emotions through adaptive coping strategies rather than avoidance or suppression. Health literacy and symptom interpretation enable women to understand menopausal symptoms, distinguish normal transitional changes from pathological conditions, and evaluate appropriate management options. These processes support *adaptive behavioral responses*, including lifestyle modification, engagement in physical activity, stress-management practices, and timely help-seeking. Empirical evidence indicates that women with higher levels of self-awareness demonstrate more effective symptom management, improved emotional well-being, and better overall quality of life during the menopausal transition,

highlighting the multidimensional and dynamic nature of the concept (Amin et al, 2025) (Salazar-Pousada et al, 2024) (Seyed Hoshiyar et al, 2021). Determining attributes of self-awareness in menopausal women:

1. Interoceptive Awareness

Interoceptive awareness refers to the ability to consciously perceive and interpret internal bodily sensations, such as hot flashes, night sweats, palpitations, fatigue, and sleep disturbances, which are common during menopause. This attribute enables women to distinguish menopausal symptoms from pathological conditions, reducing uncertainty and health-related anxiety. Recent studies emphasize that heightened interoceptive awareness allows women to respond more adaptively to bodily changes and facilitates timely self-care and professional consultation. In menopause research, interoceptive awareness is closely linked to symptom monitoring and acceptance of physiological transitions, which contributes to improved quality of life and reduced symptom distress (Tang et al, 2022) (Creswell, 2023).

2. Cognitive Insight

Cognitive insight involves reflective awareness of one's thoughts, beliefs, and interpretations related to menopause, including perceptions of aging, femininity, and health expectations. Women with higher cognitive insight are better able to recognize maladaptive beliefs—such as viewing menopause solely as a loss or illness—and reframe them as a normal life transition. This attribute plays a critical role in shaping emotional responses and coping strategies, as cognitive appraisal strongly influences stress perception and psychological well-being. Evidence indicates that positive cognitive interpretations of menopause are associated with lower depressive symptoms and better menopause-specific quality of life (Lee et al, 2024) (Salazar-Pousada et al, 2024).

3. Emotional Recognition and Regulation

Emotional recognition and regulation refer to the capacity to identify emotional states (e.g, irritability, anxiety, sadness, mood swings) and manage these emotions effectively through adaptive strategies rather than avoidance or emotional suppression. During menopause, hormonal fluctuations may intensify emotional reactivity, making this attribute particularly important. Research demonstrates that women who are aware of their emotional patterns and equipped with regulation skills experience lower psychological distress and improved emotional well-being. Mindfulness-based and self-awareness-focused interventions have been shown to enhance emotional regulation and reduce menopausal symptom burden, thereby supporting overall quality of life (Şener Çetin, 2021) (Amin et al, 2025).

4. Health Literacy and Symptom Interpretation

Health literacy and symptom interpretation encompass the ability to access, understand, and evaluate menopause-related health information and to correctly interpret bodily and emotional changes. This attribute enables women to differentiate normal menopausal symptoms from signs requiring medical attention and to make informed decisions regarding lifestyle modification, nonpharmacological interventions, or medical treatment. Studies indicate that women with higher menopause-specific health literacy

demonstrate greater confidence in managing symptoms and are more likely to engage in preventive and health-promoting behaviors. Inadequate symptom interpretation, conversely, is associated with delayed care-seeking and poorer quality of life outcomes (Salazar-Pousada et al, 2024) (Tang et al, 2022).

5. Adaptive Behavioral Responses

Adaptive behavioral responses refer to purposeful actions taken in response to heightened self-awareness, including lifestyle adjustments, stress-management practices, physical activity, dietary changes, and seeking social or professional support. This attribute reflects the translation of internal awareness into observable behavior. Empirical evidence shows that women who respond adaptively to menopausal awareness are more likely to experience symptom relief and improved physical, psychological, and social well-being. From a nursing perspective, adaptive behaviors are indicators of effective self-care agency and healthy transition, reinforcing the role of self-awareness as a catalyst for improved quality of life during menopause (Seyed Hoshiyar et al, 2021) (Meleis, 2022).

Creating a Model Case

To further clarify the concept of self-awareness in menopausal women, a model case is presented to illustrate how all defining attributes of the concept are manifested in a real-life context. A model case serves as a concrete example that demonstrates the presence of each determining attribute, thereby distinguishing self-awareness from related or incomplete expressions of the concept. By illustrating how interoceptive awareness, cognitive insight, emotional recognition and regulation, health literacy, and adaptive behavioral responses operate together, the model case provides a comprehensive and practical understanding of self-awareness during the menopausal transition. This example also highlights how self-awareness functions as a dynamic process that supports adaptive coping and enhances quality of life in menopausal women.

Mrs. A, a 52-year-old menopausal woman, has been experiencing hot flashes, night sweats, sleep disturbances, and occasional fatigue for the past year. She is able to notice and accurately identify these bodily sensations as menopausal symptoms rather than signs of a serious illness, demonstrating strong **interoceptive awareness**. By paying attention to symptom patterns and bodily cues, she recognizes triggers such as stress and lack of sleep, which helps her anticipate and manage symptom severity. Mrs. A reflects on her thoughts and beliefs about menopause and acknowledges that she initially associated menopause with aging and loss of femininity. Through reflection and education, she reframes menopause as a natural developmental transition, illustrating clear **cognitive insight**. She is also aware of emotional changes, including irritability and anxiety, and consciously applies emotion regulation strategies such as mindfulness, relaxation breathing, and self-reflection, reflecting effective **emotional recognition and regulation**.

In addition, Mrs. A actively seeks reliable menopause-related health information from healthcare providers and credible sources. She understands the nature of her symptoms and available management options, including lifestyle modification and nonpharmacological interventions, indicating adequate **health literacy and symptom interpretation**. Based on

this understanding, she makes purposeful changes to her daily routine, including regular physical activity, dietary adjustments, symptom tracking, and participation in a support group. These actions represent **adaptive behavioral responses**. Collectively, the presence of all five attributes enables Mrs. A to manage menopausal symptoms effectively, reduce emotional distress, and maintain a satisfactory quality of life, thereby exemplifying a model case of self-awareness in menopausal women.

a. Borderline Case

Borderline and contrary cases are presented to further clarify the concept of self-awareness in menopausal women by illustrating partial and absent manifestations of the defining attributes. These cases help differentiate self-awareness from related or incomplete expressions and highlight the consequences of limited or absent self-awareness during the menopausal transition. A borderline case represents an example in which some, but not all, defining attributes of self-awareness are present. Mrs. B is a 50-year-old woman who reports experiencing hot flashes and sleep disturbances. She is able to recognize these bodily sensations as menopausal symptoms, indicating partial **interoceptive awareness**. However, she does not consistently reflect on her beliefs about menopause and tends to attribute her symptoms solely to work-related stress, demonstrating limited **cognitive insight**.

Mrs. B is aware of feeling irritable and emotionally exhausted, but she lacks effective strategies to regulate these emotions, reflecting incomplete **emotional recognition and regulation**. Although she has basic information about menopause from informal sources, her **health literacy and symptom interpretation** remain limited, leading to uncertainty about appropriate management options. As a result, her **adaptive behavioral responses** are inconsistent (she occasionally modifies her lifestyle but does not seek professional support or sustain self-care practices. This case illustrates a borderline expression of self-awareness, where partial awareness exists but is insufficient to produce optimal coping or quality of life outcomes.

b. The Case of Contrary

A contrary case exemplifies the complete absence of the defining attributes of the concept. Mrs. C is a 54-year-old woman who experiences frequent hot flashes, insomnia, and mood changes but does not recognize these symptoms as related to menopause, indicating a lack of **interoceptive awareness**. She holds rigid beliefs that her symptoms signify serious illness or personal weakness and does not engage in reflection, demonstrating an absence of **cognitive insight**. Mrs. C struggles with persistent anxiety and irritability but is unable to identify or manage her emotional responses, reflecting poor **emotional recognition and regulation**. She avoids seeking information or discussing her symptoms with healthcare providers, resulting in low **health literacy and symptom interpretation**. Consequently, she does not engage in meaningful self-care or adaptive coping behaviors, indicating an absence of **adaptive behavioral responses**. This contrary case highlights how the lack of self-awareness can exacerbate symptom distress, impair coping, and negatively affect quality of life during menopause.

Identifying Antecedents and Consequences

a. Antecedents

Antecedents of self-awareness in menopausal women refer to conditions or events that must be present prior to the development of self-awareness during the menopausal transition. One key antecedent is exposure to menopausal-related physiological and psychological changes, which initiate the need for women to attend to internal bodily sensations and emotional states. Hormonal fluctuations, vasomotor symptoms, sleep disturbances, and mood changes serve as triggers that prompt women to reflect on their internal experiences. Without the presence of these changes, the activation of menopause-specific self-awareness would be unlikely (Tang et al, 2022).

Another important antecedent is access to accurate health information and basic health literacy. Women who have opportunities to obtain reliable information from healthcare professionals, educational programs, or credible media sources are more likely to recognize and correctly interpret menopausal symptoms. Social and cultural contexts also function as antecedents (supportive family environments, open communication about menopause, and positive cultural attitudes toward aging facilitate the development of self-awareness. Conversely, stigma and misinformation may hinder awareness and reflection (Salazar-Pousada et al, 2024).

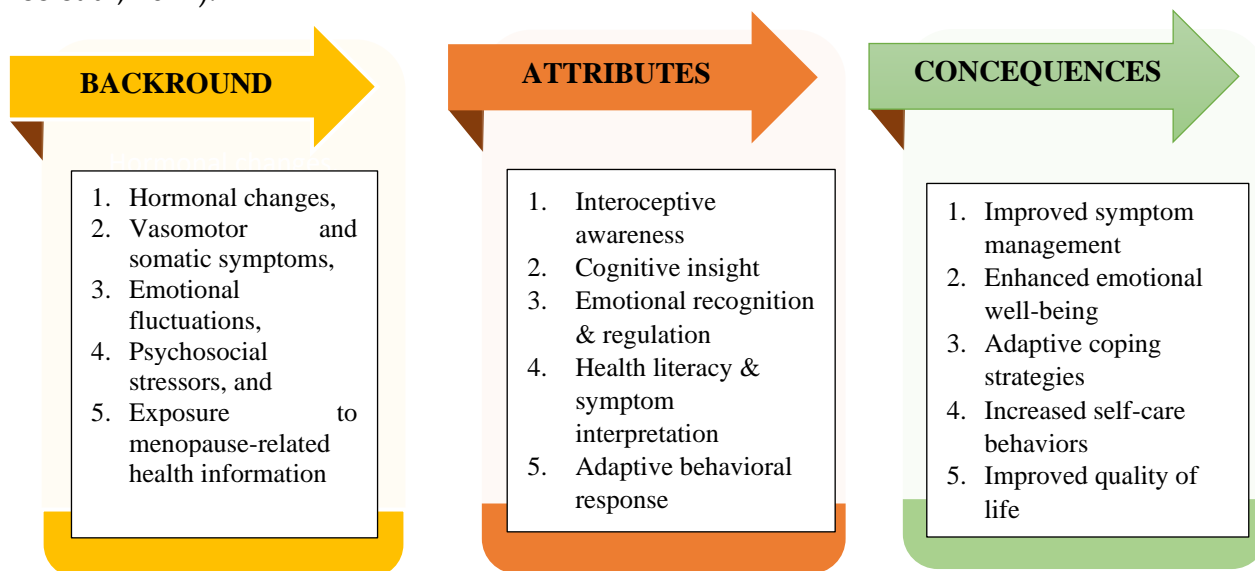
Psychological readiness and personal motivation for self-reflection further precede the development of self-awareness. Previous experiences with mindfulness, stress management, or reflective practices enhance a woman's capacity to attend to internal states and regulate emotions. Emotional support from peers and healthcare providers also acts as an antecedent by creating a safe environment for reflection and symptom disclosure. Together, these antecedents establish the cognitive, emotional, and contextual foundation necessary for self-awareness to emerge during menopause (Creswell, 2023) (Meleis, 2022).

b. Consequences

Consequences of self-awareness in menopausal women are the outcomes that occur as a result of the presence or absence of this concept. One of the primary positive consequences is improved symptom recognition and management. Women with higher levels of self-awareness are better able to monitor symptom patterns, identify triggers, and implement appropriate self-care strategies, leading to reduced symptom severity and distress. This enhanced symptom management directly contributes to improved physical comfort and daily functioning (Seyed Hoshiyar et al, 2021). Psychological and emotional well-being represent additional key consequences of self-awareness. Increased awareness of emotional states enables women to regulate mood fluctuations more effectively, resulting in lower levels of anxiety, depression, and emotional exhaustion. Self-awareness also supports cognitive reappraisal and acceptance of menopause as a normal life transition, which promotes adaptive coping and psychological resilience. These outcomes align with the concept of healthy transition described in nursing theory (Amin et al, 2025) (Meleis, 2022).

At a broader level, self-awareness leads to enhanced engagement in health-promoting behaviors and improved quality of life. Women who are self-aware are more likely to seek professional care when needed, participate in social support networks, and

adopt sustainable lifestyle changes. In contrast, the absence of self-awareness is associated with maladaptive coping, delayed help-seeking, increased symptom burden, and poorer quality of life outcomes. Thus, self-awareness functions as a critical mechanism linking menopausal experiences to both individual well-being and effective healthcare utilization (Lee et al, 2024).



Determining Empirical Referents

Empirical referents are observable phenomena or measurable indicators that demonstrate the existence of a concept in practice. For self-awareness in menopausal women, empirical referents reflect the extent to which women can perceive, interpret, and respond to internal bodily sensations, emotional states, and health-related information during the menopausal transition. Because self-awareness is a multidimensional construct, no single instrument fully captures all its attributes) (therefore, multiple empirical indicators are required to operationalize the concept. Interoceptive awareness, as a core attribute of self-awareness, can be empirically assessed using instruments such as the *Multidimensional Assessment of Interoceptive Awareness (MAIA)*, which measures attention to bodily sensations, emotional awareness, and self-regulation. This tool has been widely used in studies examining bodily awareness and mindfulness-related interventions and is relevant for capturing women's awareness of menopausal symptoms such as hot flashes and somatic discomfort. Symptom diaries and ecological momentary assessments also serve as empirical referents by documenting women's real-time recognition and monitoring of menopausal symptoms (Tang et al, 2022) (Creswell, 2023).

The cognitive and emotional aspects of self-awareness can be measured using validated scales assessing mindfulness, emotional awareness, and emotion regulation. Instruments such as the *Mindful Attention Awareness Scale (MAAS)* and emotion regulation questionnaires provide empirical evidence of a woman's ability to recognize thoughts and emotions without excessive reactivity. These measures have been applied in menopausal populations to evaluate the effectiveness of mindfulness-based and self-awareness-focused interventions, demonstrating associations with reduced psychological distress and improved emotional well-being (Şener Çetin, 2021) (Amin et al, 2025).

Health literacy and adaptive behavioral responses, which reflect the translation of awareness into action, can be empirically assessed through menopause-specific quality of life and symptom management tools. Instruments such as the *Menopause-Specific Quality of Life Questionnaire (MENQOL)* and the *Menopause Rating Scale (MRS)* serve as indirect empirical referents by capturing outcomes related to symptom interpretation, coping behaviors, and overall well-being. Additionally, measures of health literacy, help-seeking behavior, and lifestyle modification provide observable indicators of how self-awareness influences self-care practices. Collectively, these empirical referents enable researchers and clinicians to assess self-awareness in menopausal women and to evaluate interventions aimed at enhancing quality of life during the menopausal transition (Salazar-Pousada et al, 2024) (Seyed Hoshiyar et al, 2021).

Conclusion

Self-awareness is a multidimensional concept essential to understanding and supporting menopausal women. Enhancing self-awareness is a promising approach to improving QoL during this transition. *Self-awareness* is a multidimensional and dynamic concept that plays a critical role in shaping how women experience and adapt to the menopausal transition. This concept analysis clarifies self-awareness in menopausal women by identifying its defining attributes, antecedents, consequences, and empirical referents, thereby addressing existing conceptual ambiguity in the literature. The findings highlight that self-awareness encompasses interoceptive awareness, cognitive insight, emotional recognition and regulation, health literacy, and adaptive behavioral responses, which collectively support effective coping and improved quality of life.

By elucidating the mechanisms through which self-awareness influences symptom interpretation, emotional well-being, and self-care behaviors, this analysis provides a theoretical foundation for developing targeted nursing and health interventions. Enhancing self-awareness may serve as a key strategy to promote healthy menopausal transitions, optimize symptom management, and improve overall quality of life among menopausal women. Future research should focus on refining measurement tools, testing *self-awareness-based interventions*, and examining causal pathways linking self-awareness to health outcomes in diverse menopausal populations.

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