INFLUENCE OF NEUROTIC PERSONALITY TRAIT ON MENOPAUSE CRISES

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Abstract: Neuroticism is also sometimes called Emotional Stability. This dimension relates to one's emotional stability and degree of negative emotions. People that score high on neuroticism often experience emotional instability and negative emotions. This study examined the influence of neurotic personality traits on menopause crisis for public primary schools' female teachers in Laikipia County The study utilized ex post facto research design because it was not possible or acceptable to manipulate the characteristics of human participants. The study was based on the Big Five theory of personality. The target populations were 600 female teachers, 50 teacher counselors, 5 Sub County Directors of Education in the Ministry of Education, giving a total of 655 respondents in Laikipia County. The researcher used stratified sampling, two stage clustered sampling, random sampling and purposive sampling techniques. The sample of the study was 289 respondents. The statistical analysis entailed the computation of frequencies and percentages. The Findings revealed that neurotic personality trait have a statistically significant influence on menopause crisis with a Linear Regression analysis where (r²=0.652; p>0.013) which was significant at 0.05 level of confidence. From the findings of the study, it can be concluded that neurotic personality trait influence menopause crisis. It is recommended that counselors should aim at helping menopausal female teachers deal with their emotional instability.

Keywords: neuroticism, personality traits, menopause crisis, big five theory.

1. INTRODUCTION

National Health Institute (2016) showed at human being go through many body changes throughout their lifetime due to varying levels of hormones in the body which occur at transitions of life. Menopause is one such major transition period in the life of every woman. At menopause a woman stops experiencing menstruation and is no longer fertile. The stage is generally associated with unavoidable manifestation of aging process in women that is unique to female reproductive life cycle. This often begins in the late 30's and most women experience total loss of production of estrogen by their mid-50. The usual age of onset of menopause is between ages 44 to 55. Sometimes, one experiences earlier or later than this but the average age is 51 years. According to Muchanga (2021), menopause is a natural process of aging defined as a definite cessation of ovarian follicles activity and consequently end of menstruation. In the same line of exploration, Ilankoon and Kerstin (2021), asserts that menopause is a bio-psychosocial phenomenon involving the transition in a woman's life from being fertile to infertile. This is a complex and critical period due to the fact that the woman is subject to face many challenges due to changes in her physical and emotional life.

Neuroticism is the state of being neurotic, a condition according to Ready et al., 2012) is a long-term tendency to be in an emotional state that is negative. People with neuroticism tend to have more depressed moods. They suffer from feelings of guilt, envy, irritability and anxiety more frequently and more damning than other people. Those who score highly tend to be sensitive to environmental stress and responded poorly to it. They view everyday situations as menacing while every major or trivial frustration is troublesome and may lead to hopelessness. An individual with neuroticism typically feels conscious and shy.

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According to Wagner et al (2015), neuroticism is an issue of relevant concern to women undergoing menopause since it was found to be stable among the middle and older adults. Incidentally, associations of neuroticism to psychopathology have been reported to be broader stronger and clearer in comparison to any other personality trait. When heightened, neuroticism has been shown to have a wide array of clinical syndromes, such as anxiety, mood disorientation and even substance use disorders. Research conducted on emotional complexity and the emotional state in older adults in USA suggested that neuroticism could be a liability for individuals as they grow older, not only because they experience less contentment but also because their "negative affect" is associated with poorer mental health. In conclusion neuroticism was significantly found to be negatively associated with emotional well-being (Ready, Åkerstedt, & Mroczek, 2012).

High neuroticism personality traits render women more vulnerable to serious symptoms of menopause This indicates that negative menopausal experiences can be predicted with individually and separately (Connor, 2015). According to Cheng-Hsiang (2015), in their study of the effects of menopause status, previous diagnoses of depression, vasomotor symptoms and neuroticism on depressive symptoms among climacteric women, neuroticism played a vital role in the persistence of depression among climacteric women after 30 months.

According to Lora (2015), high levels of neuroticism personality trait proved women to be more vulnerable to severe menopausal symptoms. The author's view concurs with Cheng-Hsiang (2015) in their correlational study on the Relationship between Symptoms of Menopause and Personality Traits in Polish Perimenopausal Women, where the frequency of psychological symptoms of menopause were directly related to neuroticism where (r=0.46, P=0.000). Higher neuroticism and interference from hot flashes are associated with insomnia. Vasomotor symptoms and a greater degree of emotional instability are contributors towards establishing which women are most likely to experience insomnia during menopause. These findings show relevance of neuroticism to a woman's experience of insomnia as she goes through the menopause transition (Baker, de Zambotti, Colrain & Baker, 2014).

2. RESEARCH DESIGN

The study utilized *ex post facto* correlational research design. *Ex- post facto* research can be viewed as experimental research in reverse. *Ex post facto* research is ideal for conducting social research when is not possible or acceptable to manipulate the characteristics of human participants. It is a substitute for true experimental research and can be used to test hypotheses about cause and effect or correlational relationships, where it is not practical or ethical to apply a true experimental or even a quasi-experimental design (Simon & Goes, 2013). The research design was appropriate for this study since the independent variables were not be manipulated to establish their effects on the dependent variables. The research design was adopted in order to determine the influence of the independent variables under study that is neurotic personality related characteristics and female teacher's menopause crises (the dependent variable). A structured questionnaire was used to gather raw data from the female teachers in public primary schools in the study area. The questionnaire comprised items on the female teachers' neurotic personality traits in relation to menopause crises.

3. STUDY RESULTS

Results of descriptive analysis of data on neurotic personality traits is presented in the following section. The respondents were guided by a Linkert scale in which 1 represented Strongly Disagree (SD), 2 represented Disagree (D), 3 represented Neutral (N), 4 represented Agree (A) and 5 represented Strongly Agree (SA).

The researcher obtained and analysed data on neurotic personality trait and presented it in Table 1

Table 1: Descriptive Results on Neuroticism Personality Traits and Menopause Crisis

CODE	Statements	1=SD	2=D	3=N	4=A	5=SA
N1	I am a person whose moods go up and 17.7%		26.3%	21.1%	26.3%	8.6%
	down easily	(37)	(55)	(44)	(55)	(18)
N2	I can be stirred up easily	18.7%	24.9%	18.2%	30.%	7.7%
		(39)	(52)	(38)	(64)	(16)
N3	I feel threatened easily	20.6%	27.8%	12.4%	28.7%	10.5%
	-	(43)	(58)	(26)	(60)	(22)
N4	I become overwhelmed by events	13.9%	32.1%	21.1%	29.2%	3.8%
		(29)	(67)	(44)	(61)	(8)
N5	I keep my emotions under control	7.7%	20.1%	21.1%	28.7%	22.5%
		(16)	(42)	(44)	(60)	(47)
N6	I don't get embarrassed easily	11.5%	42.1%	18.2%	17.2%	11.0%
	-	(24)	(36)	(38)	(88)	(23)

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The results posted in Table 1 revealed that respondents agreed on all items. Three items recorded slightly over a third agreeing with the statements. These are 'I become overwhelmed by events' at 33% while 27.8% were neutral. This indicates that women undergoing menopause are affected strongly by events. This concurs with Fang (2007) who noted that menopause can alter the harmonious functioning of the brain leading to difficulties in concentration, reduced memory as well as difficulty in focusing for long periods.

The findings revealed further that 53.1% agreed with the statement that they don't get embarrassed easily while 28.7% were not sure. This is in congruence with the views of Dalal and Agarwal (2015) that at menopause there occurs a drop-in oestrogen which as a result leads to symptoms such as hot flushes, irregular menstrual bleeding, night sweats, insomnia and vaginal dryness. These symptoms therefore make women at menopause get easily embarrassed even to talk about what they are going through.

The findings revealed that more than a quarter of the respondents (27.8 %) disagreed that they keep their emotions under control while 27.8% were not sure. This implies that women in menopause transition find it difficult to control their emotions which may affect their relationship with their colleagues in work place. This concurs with the findings of Fang (2007) who stated that perimenopause symptoms may be more erratic, unpredictable and intense; so much so that many women feel they are losing control or as if they are going crazy. Additionally, the menopausal women are characteristic of common symptoms such as tiredness, hot flushes and night sweats (Sabir & Mustafa, 2012).

Majority of the respondents (73%) had the opinion that their moods go up and down while 44 % were neutral. Findings of Fang (2007) showed that during the transition to menopause, levels of the hormone oestrogen drop, causing wide-ranging changes throughout the body and many of these changes have direct connections to menopausal mood swings displayed through irritability, depression, anxiety, crying episodes and feeling weepy and insomnia. Stöppler (2018) further posits that psychogenic symptoms such as trouble in sleeping, lack of energy, difficulty in concentration, nervous tension, feelings of sadness are among the most frequently reported symptoms of menopausal transition. These are exhibited due to the concept of menopause among women where the oestrogens levels decrease.

CODE Mean SD N1 I am a person whose moods go up and down easily 2.82 1.246 N2 I can be stirred up easily 2.84 1.260 N3 I feel threatened easily 2.81 1.334 N4 I become overwhelmed my events 2.77 1.129 N5 I keep my emotions under control 3.38 1.247 N6 I don't get embarrassed easily 3.24 1.201

Table 2: Female Teachers' Means on Influence Neuroticism to Menopause Crisis

The means of the items ranged from 2.81(SD=1.334) to 3.38 (SD=1.247). Most of the means were above 2.5 meaning that majority of the female teachers agreed with the statements. An examination of the SD reveal that they were high ranging from 1.201 to 1.334. This is an indication that there were variations in the respondents to the items. These findings concur with Fang (2007) who found that higher levels of neuroticism lead to lower quality of life among postmenopausal women. This implies that personality would play an important role in women's quality of life during transition period of menopause. Similarly, Malik (2021) found out that neuroticism accounted for 56.6% variation in quality of life which is a high influence on the quality of life of menopausal women. Similarly, Fang (2007) revealed that all stages of menopausal women who have high levels of neuroticism are more vulnerable to depression which is a psychological effect of menopause.

4. CONCLUSIONS

The findings showed that there was statistically significant difference between female teachers' neurotic personality characteristics and menopause crisis There is a strong relationship between neuroticism and menopause crises where (r²=0.652; p>0.013) which was significant at 0.05. The results of the findings indicate that there is a significant difference between neuroticism and menopause crises. This disagrees with (Ready et al, 2012) who found that neuroticism was negatively associated with one's emotional well-being. Therefore, the null hypothesis that stated that 'there is no statistically significant difference between personality traits and management of menopause crises among female teachers in public primary schools in Laikipia County' was therefore rejected. Neurotic personality traits have a statistically significant influence on menopause crisis

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5. RECOMMENDATIONS

The schools' administrators should aim at helping menopausal female teachers to feel less threatened, less overwhelmed and more in control of their emotions and moods. Female teachers in menopause transition should understand their personality characteristics so that they can understand themselves and cope with stresses brought by menopause symptoms.

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