

Menopause Depression Management Through Self-Esteem Development

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Abstract

In our culture, it is an established myth that menopausal depression is normal for every woman. However, the fact can differ from this common misconception. Women who suffer from it go through dramatic mental changes. Hence, she should get the same attention as any other medical illness. In this study, the researcher tried to find ways to decrease menopausal depression by fostering her self-esteem. The study aimed to find the correlation between depression and self-esteem during menopause among women. A sample of 30 women was collected by purposive sampling from Kolhapur City. The self-esteem scale developed by Singh and Srivastava and depression scale developed by Thakur and Singh were administered to the sample. After calculating raw scores, the correlation was found using the product moment method. A negative and significant correlation was found between depression and self-esteem. So women who have high self-esteem will have a low level of depression, and vice versa if the self-esteem is low, the woman will quickly feel depressed.

Keywords: depression management, menopause, self-esteem

Abstrak

Dalam budaya kita, sudah menjadi mitos yang mapan bahwa depresi menopause adalah hal yang normal bagi setiap wanita. Namun, faktanya bisa berbeda dari kesalahpahaman umum ini. Wanita yang menderita itu mengalami perubahan mental yang dramatis. Oleh karena itu, ia harus mendapatkan perhatian yang sama seperti penyakit medis lainnya. Dalam penelitian ini, peneliti mencoba mencari cara untuk mengurangi depresi menopause dengan menumbuhkan harga dirinya. Penelitian ini bertujuan untuk menemukan hubungan antara depresi dan harga diri pada wanita menopause. Sampel sebanyak 30 wanita dikumpulkan dengan purposive sampling dari Kota Kolhapur. Skala harga diri yang dikembangkan oleh Singh dan Srivastava dan skala depresi yang dikembangkan oleh Thakur dan Singh diberikan kepada sampel. Setelah menghitung skor baris, korelasi ditemukan dengan menggunakan metode product moment. Korelasi negatif dan signifikan ditemukan antara depresi dan harga diri. Sehingga wanita yang memiliki self esteem tinggi akan memiliki tingkat depresi yang rendah, begitu pula sebaliknya jika self esteem rendah maka wanita tersebut akan cepat merasa tertekan.

Kata kunci: harga diri, manajemen depresi, menopause

Introduction

Menopause is a phase in life of women who have not experienced a menstrual cycle or period of more than 12 months (National Institute on Aging, 2021). This is a new stage in their life cycle. They will experience various physical and psychological symptoms such as decreased bone mass, increased risk of cardiovascular disease, sleep problems, mood swings, hot flushes, and lack of libido. These symptoms are all influenced by a decrease in hormones in women. Biological changes during menopause result in many psychological difficulties, like vasomotor symptoms and psychosomatic symptoms. Therefore it is necessary to make a suitable adjustment to cope with menopausal problems. It is a challenging period for women in their lives.

Worldwide, the menopause (median age) is considered to be from 45 to 55 years (World Health Organization, 1996). On average, women reach menopause at the age of 51 years. Although the age of menopause is 51 years globally, in India different studies have found that the average age of a menopausal woman is 41.9 and 49.4 respectively (Kriplani & Banerjee, 2005). This average indicates that the incidence of menopause in women in India is younger than in general. Based on a survey by the Indian National Family Health Survey (NFHS-3) conducted in 2005-2006, it was found that around 18 percent of married women in the 30-49 year age group stated that they had experienced menopause (International Institute for Population Sciences & International, 2007).

Menopause in women is also associated with several factors, such as smoking, educational attainment, marital status, employment status, family history, abortion, and body mass index (Gold et al., 2001; Harlow & Signorello, 2000; Hidayet et al., 1999; Murabito et al., 2005; Remez, 2001; Shelling, 2010; Sievert, 2006). Previous studies have shown significant effects on menopause, are educational attainment, the standard of living, the number of children, age at first and last birth, contraception, body mass index, and anemia (Syamala & Sivakami, 2005).

With the onset of the menopause phase, every woman must prepare for all the changes that happen to them. It is not uncommon for many to experience mental problems such as depression when they enter the menopause phase. Research Freeman et al. (2008) found a positive correlation indicating that a woman will feel more stressed when experiencing disturbing menopausal symptoms. Symptoms experienced during menopause include vasomotor, psychosomatic, and psychological symptoms (Augoulea et al., 2019; Hazlina et al., 2022; Sood et al., 2019; Yadav et al., 2021). Shringarpure et al. (2022) found the results of a study of 145 women in urban and rural areas, most of them experienced psychosomatic symptoms such as physical exhaustion-fatigue, sleep problems, difficulty climbing stairs, hot flushes, and body aches.

However, these issues will vary depending on ethnic group, socio-economic status, and rural and urban status. Because there is a study by Nisar and Sohoo (2010) found somatic symptoms in menopausal women with a background living in rural areas more than those living in urban areas. Research conducted in the city of Jammu and Kashmir in India found that menopausal symptoms were higher in rural women than urban women. This is because the quality of life related to health is better than in rural women. A study conducted in urban areas in India showed that only about 10% of menopausal women said that they had problems when they entered the menopause phase. In contrast, the majority of women who entered the menopausal phase said that they did not experience menopausal symptoms (Sharma & Saxena, 1981). Damayanti and Purnamasari (2012) it was found that there was a problem in post-menopausal women in the village of Kondangjajar, this problem was related to low self-esteem when entering the menopause phase, which made her feel insecure about the changes she felt, significantly changes in her physique, so that some women with the menopausal phase in the village use various beauty products because, he felt he was no longer useful.

Menopause in women does not come suddenly. The Menopause phase comes slowly until in the end women will not experience menstruation. The phase is divided into three phases: pre-menopause, menopause, and post-menopause.

Pre-Menopause

Pre-menopause or perimenopause is one to two years before the menopause phase, known as the Pre-menopause phase (Santoro, 2016). This phase is a transitional period towards the menopause phase. Pre-menopause can last for months or years. Women begin to feel body changes, such as hot flashes, night sweats, increased heart rates, mood swings, brain fog, and vaginal dryness. The decrease in levels of the hormones estrogen and progesterone causes these changes. Some women may experience pre-menopause earlier when they are 30 to 40 years.

Menopause

When a woman has not had a period or menstruation for more than 12 months (Meeta et al., 2013), then at that time she has entered a stage known as menopause. This is a degenerative transition and normal aging accompanied by loss of reproductive function. This menopause phase usually occurs between the ages of 45 to 55 years (World Health Organization, 1996). The average age for a woman to enter the menopause phase is 51 years. However, some women may experience it before the age of 40, which is known as premature menopause or premature menopause.

Post-Menopause

According to World Health Organization (1981), post-menopausal is the remaining period of life after menopause. The phase after amenorrhea (a condition in which a woman has not had menstruation) for 12 months, this phase is called post-menopause. In the post-menopausal phase, there will be an increased likelihood of health risks, namely cardiovascular (heart) disease, osteoporosis (weak bones), and urinary tract infections (UTIs) (National Health Service, 2023). So in this phase, a woman must have a healthy diet and lifestyle. Most women experience menopause without experiencing health problems. However, some women will experience vasomotor symptoms that will affect physical changes such as hot flashes, excessive sweating, and sleep disturbances.

According to Blackburn and Davidson (1990), the menopause phase of a woman is influenced by several factors, namely:

1. Age at first menstruation (menarche)
2. Psychological and occupational conditions
3. Marital status
4. Number of children
5. Use of drugs
6. Smoking
7. Weather and altitude of residence
8. Socio-economic

Physical Changes

Vasomotor Symptoms

Hot flashes and night sweats are common symptoms during the menopausal phase. This phase is known as the vasomotor symptoms. In this vasomotor symptom, body temperature increases, such as a sudden burst of heat, which will cause the body to sweat, especially on the face, palms, and feet. Vasomotor symptoms are also sometimes accompanied by an increased heart rate, feelings of anxiety, and dizziness (Johnson, 2022). Night sweats are symptoms that occur at night, so they will interfere with sleep and can even cause sleep problems (insomnia). Because this lack of rest will bring up other effects,

such as irritability and fatigue. These symptoms last for a few seconds to several minutes, averaging 4 minutes. Most women experience hot flashes before they have an irregular menstrual cycle. According to Thompson et al. (1973), in a study of 90 women who experienced hot flashes, more than 68% experienced them daily, with as many as 21% reporting them every few hours. The average duration of women experiencing hot flashes is 3.3 minutes, sometimes lasting up to 60 minutes. These symptoms may occur four to six years after the menopause phase and can appear many years before menopause (Lichtman, 1991).

Psychological Changes

Mood Swings

Many menopausal women report feeling the mood swings they experience. These changes, such as crankiness, irritability, and feeling blue, may all be part of this syndrome. These mood swings can occur due to decreased estrogen in menopausal women (Azri, 2018). This decrease in estrogen will also inhibit the effects of noradrenergic neuron hormones in the brainstem so that a menopausal woman will have more effortless mood swings. The noradrenaline hormone is a hormone whose job is to control the body's reaction when a person is in a state of stress.

Changes in Cognition

It is starting to appear the changes felt by middle-aged women who have menopause. Changes in the feeling of decreased cognitive abilities, such as complaints of forgetfulness, difficulty concentrating, and difficulty thinking. A decrease in estrogen causes this decrease in cognitive ability. Besides decreased estrogen in the brain, other influences cause decreased cognitive abilities in post-menopausal women. When a woman enters the menopause phase, it will affect the brain cells that are produced, some cells are connected to each other, and some cells die because of this influence, thus affecting the part of the brain that is very important for memory (Goldstein, 2021). At the time of menopause, glucose levels in the brain will decrease so that the primary fuel brain cells use to work decreases. Therefore a woman who has entered the menopause stage can easily forget. Barlow and David (2006) show that there is a relationship between cognitive performance during the menopausal transition, which begins to decline due to being confounded by variations in cognitive performance abilities throughout life.

Anxiety

Anxiety is often used to describe the various symptoms of an anxiety disorder, such as fear for no reason, worry, and irritability. The leading cause of anxiety in women already in the menopausal phase is hormonal fluctuations. This fluctuating hormone has begun to appear in the perimenopausal phase, which causes hormonal irregularities in the menstrual cycle (Harlow et al., 2012). Several studies have also found that anxiety symptoms appear during perimenopause (Tangen & Mykletun, 2008). However, other medical and psychological situations can cause anxiety during menopause. Some mental health research shows that negative feelings not expressed when facing anxiety will become stress. Even though women experience this stressful condition, many try to deny the feeling of anxiety they feel and pretend they are not aware of the feeling of stress. This condition can cause further development of anxiety in women during menopause. Bremer et al. (2019) found that samples from research conducted reported that anxiety felt would have a more intense effect on stressful conditions. Research by Ozdemir et al. (2020) found that as many as 485 Turkish women aged 35 to 78 years and in the post-menopausal phase stated they were worried, apprehensive, and afraid of death.

Depressions

A persistent sad, anxious, or empty mood is one of the main symptoms of depression. Feelings of hopelessness and helplessness accompany this. Depression can affect eating habits, sleeping, and other social activities. During the menopause phase, women can experience mood swings and feel sad which is different from depression. According to the study of women's health across the nation (SWAN), there is more psychological pressure at the perimenopausal stage than at the initial pre-menopausal stage

(Bromberger et al., 2013). Changes in hormonal levels often cause psychological problems such as somatization symptoms and depression. Women who experience early menopause will be twice as likely to experience symptoms of major depression.

Self-Esteem during Menopause Problem

Self-esteem is defined as how we feel our worth and how we view ourselves. It is often considered a personality trait that involves beliefs about oneself, such as judgments about one's appearance, beliefs, emotions, and behavior. With self-esteem within us, we can overcome the fundamental challenges of life that lead to happiness. Low self-esteem will result in less practical social skills. Sheema and Hussain (1993) studied the relationship between self-esteem, self-awareness, and social support in women in the menopausal phase. The results of this study found that 200 women of various stages of menopause were examined and found a significant positive correlation between self-assessment scores and self-awareness scales among pre-menopausal women, transitional menopausal women, and post-menopausal women. Physical changes cause this low self-esteem; previously, they were perfect, and when they were in this phase, they thought that they were no longer good (Proverawati, 2010). Therefore, this study examined the relationship between depression and self-esteem in post-menopausal women. Researchers assume there will be a negative correlation between depression and self-esteem in menopausal women.

Methods

Participants

The sample in this study was 30 women in the age group of 40 to 60 years. The studied sample was collected from Kolhapur City. The sampling technique used purposive sampling method. Then the sample will be asked to complete a questionnaire using the depression scale (DS) and the Self-Esteem Scale (SES).

Measures

Depression Scale (DS)

This measuring tool was developed by G.P Thakur and R.N Singh called the depression scale, which consists of 60 items using 5-point scaling. This measuring instrument consists of 7 dimensions, namely viz, apathy, sleep disturbance, pessimism, physical exhaustion, indecisiveness, dejection, and social withdrawal. The depression scale has a reliability test of 0.87 while the validity test of 0.78.

Self-Esteem Scale (SES)

In measuring self-esteem, researchers used a self-esteem scale measuring instrument. Robinson and Shaver (1973) developed this measuring instrument, which R.N. Singh and Ankita Srivastava later modified into Hindi. This measuring instrument has 20 items with a 5-point scale. The reliability test of the self-esteem scale measuring tool is 0.86.

Results and Discussion

The data processing results obtained a correlation between self-esteem and depression is 0.620. It finds the results significant at $p < 0.01$, which shows that considering the total sample there is a correlation between depression and self-esteem. This correlation is negative and significant. This means that women who have high self-esteem are more prone to depression during menopause than women who have low self-esteem. These results are consistent with previous research that found that higher self-esteem negatively correlates with depressive symptoms (Brown et al., 2014; Mauas et al., 2014). This is probably because a woman feels gorgeous when she is young, such as having beautiful skin and long hair, but as she gets older and enters menopause, she is not what she used to be. In this case, her self-esteem will decrease, increasing the potential for depression during menopause. Thus the formulated hypothesis states that there is a negative relationship between depression and self-esteem is accepted. The results of these values can be seen in **Table 1**.

Table 1. Indicating the Correlation between Self-esteem and Depression

| Variable | Self-esteem |
|------------|-------------|
| Depression | -.620** |

** Correlation is significant at the level .01 level

In another study, it was found that every woman who is approaching the menopause phase has different self-esteem. Some results show that he has high social self-esteem but low physical self-esteem. As a study conducted by Banaczek and Saracen (2016) found, out of as many as 90 women in the perimenopausal phase aged 49-61, they had self-esteem from the normal range or higher. The woman who filled out the survey had high self-esteem in the social and psychological fields, and the lowest score was in the physical.

Women who do not feel any complaints during the menopause phase will have high self-confidence and self-esteem (Bloch, 2002). This was continued by Kusumawardhani (2006), if a woman feels complaints of menopausal symptoms, her confidence and self-esteem can decrease because she considers herself useless, and her outlook on the future is bleak and pessimistic. Because the emergence of complaints during menopause will have a negative impact on the quality of life in post-menopausal women, causing a low quality of life (K & Arounassalame, 2013). Runiari et al. (2015) found that for women who are in the menopausal phase and have low self-esteem, then most of their quality of life is lacking. Meanwhile, women who have high self-esteem have a good quality of life.

Meanwhile, Ibrahim (2005) explains that if a woman feels that the menopause phase is natural and will be experienced by her, she will have a positive quality of life and will not become anxious quickly. The influence of support from family and the closest people who will become a woman to accept themselves for the changes that are felt will increase self-esteem. Social support can not only come from family because social support can also come from peers. Rahwuni et al. (2014) found that menopausal women who get positive social support from their peers and closest family will feel loved, valued, and cared for. The influence of social support behavior will increase self-esteem. Fitri (2008) found that social support provided by peer groups has a more significant influence than the husband's support.

In addition to social support, increasing self-esteem in post-menopausal women can also come from daily activities. According to Azar and Vasudeva (2006), women who are in the menopausal phase by having activities such as working and organizing with the environment will generally have higher self-esteem. Activities such as walking, yoga, cycling, gardening, and jogging can also increase self-esteem in women (Olchowska-Kotala, 2018). This is because having a busy life in the form of work done by menopausal women allows them to develop themselves, which is associated with increased self-esteem and happiness in menopausal women.

Although menopause in women is accompanied by depression and other psychological distress, this research shows that depression can be managed by increasing self-esteem. A negative and significant correlation between depression and self-esteem was found in the study. Self-esteem may be high or low, but low self-esteem can be associated with unpleasant moods, and mood swings can also affect low self-esteem. Positive feelings will also make it possible to increase the self-esteem of a woman in the menopausal phase.

There are ways to increase self-esteem, and they can be used to increase self-esteem at any age. In this way, one must recognize the power to change one's self-image. Careful attention must be paid to feelings and thoughts. This way is a way to learn more about ourselves. Modification of negative self-talk and positive approaches can be used to increase self-esteem. Apart from that, by doing positive activities in the environment around us, we can also increase our self-esteem to become more positive in dealing with change.

Conclusion

Depression and self-esteem in post-menopausal women are negatively and significantly correlated with each other. So if a woman in this phase has high self-esteem, then her level of depression will be low, and vice versa if her self-esteem is low then it will allow the woman to feel depressed in this phase quickly. Therefore, efforts to increase self-esteem in menopausal women involve social support from family and peers. Because with this support, it can make him feel comfortable, loved, and become more confident. Apart from family support, daily activities such as gardening, sports, or joining organizations can also increase self-esteem in menopausal women. If a menopausal woman can accept herself with high self-esteem, she will not be anxious and worried about the changes that occur during the menopause phase.

The results of this study are expecting concern for oneself, and starting to accept the changes that occur in oneself so as to be able to bring up positive feelings, especially in women who are entering menopause. So that you can avoid yourself from feeling depressed about the changes and symptoms you are experiencing. Apart from that, by getting social support that is able to increase self-esteem, there is hope that the family environment, such as husbands, is more aware of this and always provides support to his wife. Not only from husbands, social support can come from peers which will make self-acceptance stronger, and a sense of being loved.

This research still has many limitations. With a sample of only 30 people, it is still not good enough to describe the overall results. The results of data processing that is too simple may also be said to be a limitation of this study. In addition, many other factors, such as social support, can affect self-esteem in post-menopausal women. Factors that affect depression in women who are in the menopausal phase also have various kinds, such as family, work, urban or rural residence, and lifestyle. The researcher hopes that future researchers pay attention to the measurement tools used, the factors that influence the level of self-esteem, and depression in women in the menopause phase, and develop a research model because, with the level towards the menopause phase, it is hoped that it can examine the quality of post-menopausal self-esteem or pre-menopausal.

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