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**A study to assess the depressive symptoms and bio-psycho-social problems among postmenopausal women living in selected villages of Udupi district, Karnataka**

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## "ABSTRACT

The study titled "A study to assess the depressive symptoms and biopsychosocial problems among postmenopausal women living in selected villages of Udupi district, Karnataka" was carried out by Shwetha Nayak, for the partial fulfilment of requirement for the award of degree of Master of Science in Nursing at Manipal College of Nursing, MAHE, Karnataka.

The objectives of the study were to identify the depressive symptoms among postmenopausal women by using inventory of depressive symptomology self report [IDS-SR], to determine the bio-psycho-social problems contributing to depressive symptoms among postmenopausal women by using rating scale on bio-psycho-social problems of postmenopausal women, to find the association between depressive symptoms and bio-psycho-social problems among postmenopausal women, to determine the association between depressive symptoms and selected demographic variables and to determine the association between bio-psycho-social problems and selected demographic variables of postmenopausal women in selected grama panchayaths of Udupi district, Karnataka.

The conceptual framework for the study was based on Sr Callista Roy's Adaptation Model. A descriptive survey design was used for the study. Simple random sampling technique was used to select three grama panchayaths of Udupi District and a total of 290 postmenopausal women were selected using convenient sampling technique.

## Abstract

Manipal College of Nursing Manipal iv

The tools used for the study were demographic proforma, inventory of depressive symptomatology self report [IDS-SR] and rating scale on bio-psycho-social problems of postmenopausal women.

The content validity of the tools was established through suggestions from seven experts from different departments. The pretesting of the tool was done on 8th December 2017 by administering the tool to 5 postmenopausal women belongs to Kodibettu grama panchayath. Rating scale on bio-psycho-social problems of postmenopausal women and IDS-SR Kannada version tools reliability were established by administering the tools to 20 postmenopausal women belongs to

Kodibettu grama panchayath on 9th December 2017. Cronbach's alpha was computed to find the reliability of the instruments. The "r" value was found to be 0.78 and 0.75 respectively. The pilot study was conducted on 10th, 11th and 12th December 2017 by collecting the data from 30 postmenopausal women belongs to Kodibettu grama panchayath.

The administrative permission for conducting the study was taken from the Dean, Manipal College of Nursing and administrative permission from panchayath President of Udyavara, Athradi, Bommarabettu and Kodibettu grama panchayaths. Research proposal with a validated tools were submitted to the Institutional Ethics Committee (IEC) and clearance was obtained (IEC 729/2017). CTIR registration also done for the study.

The main study was conducted in the month of December 2017 and January 2018. Formal administrative permission to conduct the study was taken from  
Abstract

Manipal College of Nursing Manipal v  
Panchayath President of concerned grama panchayath. The study was conducted in Udyavara, Athradi and Bommarabettu grama panchayaths of Udupi district, Karnataka.

Among the 290 postmenopausal women, most of the women 126 (43.4%) were belongs to the age group of 51-55 years and majority 244 (84%) were married. Most of the women, 117 (40.3%) were educated till middle school. Majority of the women 226 (77.9%) were housewives. Most of the women 148 (51%) had a monthly family income less than or equal to 20,000 rupees. Majority of women 253 (87.2%) were belongs to nuclear family. Most of the women had two children 116 (40%). Majority of the women had natural menopause 249 (85.9%) and regular menstruation before menopause 272 (93.8%). Most of the women 101 (34.8%) had five years of duration after attaining the menopause and 146 (50.3%) of the women had menopause between 46-50 years of age. The mean age of menopause was  $51.68 \pm 4.254$  years. Most of the women 289 (99.7%) were consulted the physician to treat the menopause symptoms and not taken the hormonal therapy. Majority of the women 213 (73.4%) were not had any comorbidities.

Majority of 225 (77.6%) of them had no depressive symptoms, 60 (20.7%)

had mild depressive symptoms and 5 (1.7%) had moderate depressive symptoms.

The commonest bio-psychosocial problems reported by the postmenopausal women were joint pain (15.9%), leg cramps (13.8%), low back pain (13.4%), difficulty to fall asleep (4.8%), hot flushes (4.5%), severe sweating at night (4.1%), fatigue (2.8%), decreased interest in sexual activity (18.6%), becomes nervous

Abstract

Manipal College of Nursing Manipal vi

without reason (2.4%), decreased concentration at work (.7%), decreased ability to overcome the problems (.3%) and easily gets irritated with family members (1.7%).

The fisher's exact test values shows that biological problems such as feels hot over the body ( $p=.001$ ), feels severe sweating especially at night ( $p<.001$ ), feels numbness in extremities ( $p=.013$ ), feels getting tired easily ( $p<.001$ ), difficulty in falling asleep ( $p<.001$ ), feels tightness in head and body ( $p=.032$ ), leg cramps ( $p<.001$ ), aches in muscles and joints ( $p<.001$ ), low back pain ( $p<.001$ ), dizziness while working ( $p<.001$ ), feels pain in breast ( $p<.001$ ), difficulty in stay asleep ( $p<.001$ ), feels that energy to work has reduced ( $p<.001$ ), experience of frequent urination ( $p<.001$ ), experience of urine leakage during coughing, sneezing or laughing ( $p=.003$ ), feels that skin is wrinkled ( $p<.001$ ), feels that skin has become dry ( $p<.001$ ) were associated with depressive symptoms. The fisher's exact test values shows that psychological problems such as crying spells ( $p<.001$ ), decreased enthusiasm at work ( $p<.001$ ), decreased ability to overcome the problem ( $p<.001$ ), reduced concentration on work for longer duration ( $p<.001$ ), feels forgetting more than before ( $p<.001$ ), feels nervous without any reason ( $p=.006$ ) and reduced interest in sexual activity ( $p<.001$ ) were associated with depressive symptoms. The fisher's exact test values shows that social problems such as easily getting irritated with family members and others ( $p<.001$ ), feels reduced family support than before ( $p<.001$ ), decreased interaction with the neighbors than before ( $p<.001$ ) and reduced interest in attending social function ( $p<.001$ ) were associated with depressive symptoms.

Abstract

Manipal College of Nursing Manipal vii

The fisher's exact test values depicted that age ( $p<.001$ ), number of living

children ( $p=.003$ ), duration after attaining menopause ( $p=.012$ ) and age at menopause ( $p<.001$ ) were associated with depressive symptoms.

The one way ANOVA test values shows that age ( $p<.001$ ), marital status ( $p=.001$ ), education ( $p<.001$ ), occupation ( $p=0.045$ ), duration after attaining the menopause ( $p<.001$ ) and age at menopause ( $p<.001$ ) were associated with biological problems. The one way ANOVA test values shows that age ( $p<.001$ ), marital status ( $p<.001$ ), education ( $p<.001$ ), occupation ( $p=.027$ ), year of first menstruation ( $p=.034$ ), duration after attaining the menopause ( $p<.001$ ) and age at menopause ( $p<.001$ ) were associated with psychological problems. The one way ANOVA test values shows that education ( $p=.041$ ) and family monthly income ( $p=.034$ ) were associated with social problems.

The recommendations are made based on the present study findings for future research. A comparative study can be done among the postmenopausal women of rural and urban areas, awareness and education can be given to the postmenopausal women regarding the bio-psychosocial problems and coping with these problems, and a similar study also can be done with a qualitative approach."