Chapter II

METHODOLOGY

Research methodology is a way to systematically solve the research problem. It may be understood as a science of studying how research is done scientifically. A large number of questions are usually answered when we talk of research methodology concerning an investigation or study. The questions are: Why a research study has been undertaken, how the research problem has been defined, why the hypothesis/objectives has been formulated, what data have been collected and what particular method has been adopted for the data collection, and why particular statistical technique has been used for the data analysis and so on. The present study is planned in accordance with the research objectives.

Sample: The sample consisted of 270 menopausal women. These women were drawn from the Department of Obstetrics and Gynaecology, J.N. Medical College, A.M.U., Aligarh. The menopausal women were further categorized into four groups according to McKinley and Jafferys (1974) method for defining menopausal status. The criteria used for the classification of menopausal women are:
(1) **Pre-Menopausal** menstruated within the last three months with no change in regularity of the volume in the previous year.

(2) **Transitional-Menopausal** menstruated within the last three months, but with some change in regularity of volume in the previous year.

(3) **Menopausal** Last menstruated between three and twelve months ago.

(4) **Post-menopausal** Last menstruated more than twelve months ago.

Since some of the subjects did not turn up in the second session of the data collection, the size of the sample is being reduced from 270 to 230. In order to equate the groups only 200 subjects retained in the final sample. Thus each group of menopausal women comprised 50 subjects. The age range of all the groups of menopausal women was from 40 to 55 years. Most of the menopausal women represented housewives. The break-up of the sample is as given below.

<table>
<thead>
<tr>
<th></th>
<th>N=200</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Menopausal</td>
<td>(50)</td>
</tr>
<tr>
<td>Transitional-Menopausal</td>
<td>(50)</td>
</tr>
<tr>
<td>Menopausal</td>
<td>(50)</td>
</tr>
<tr>
<td>Post-Menopausal</td>
<td>(50)</td>
</tr>
</tbody>
</table>
Tools:

The present study used the following tools to measure the menopausal symptoms, self-esteem, self-consciousness, social support and biographical information.

**Monopausal Symptoms Checklist** (MSC: Sharma, 1983). The MSC consists of 33 symptoms, associated directly or indirectly, with the monopause. Of these 11 were somatic, 17 psychological and 5 psychosomatic symptoms. The test-retest reliability of the MSC were found to be 0.714 for overall menopausal symptoms score; 0.822 for psychological symptoms score; 0.810 for somatic symptoms score; 0.794 for psychosomatic symptom score. The validity of the test was determined by calculating index of reliability by Spearman-Brown Prophecy Formula applied on overall menopausal symptom score.

**Scoring:** The responses to items in section A were scored as per scheme given below:

<table>
<thead>
<tr>
<th>Response</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Currently experiencing</td>
<td>2</td>
</tr>
<tr>
<td>Stopped experiencing</td>
<td>1</td>
</tr>
<tr>
<td>Never Experienced</td>
<td>0</td>
</tr>
<tr>
<td>Less than 6 months</td>
<td>1</td>
</tr>
<tr>
<td>Between 6-12 months</td>
<td>2</td>
</tr>
<tr>
<td>1 year or more</td>
<td>3</td>
</tr>
<tr>
<td>Every few hours</td>
<td>3</td>
</tr>
<tr>
<td>Once a day</td>
<td>2</td>
</tr>
</tbody>
</table>
Once a week or more than a week 1
Mild 1
Moderate 2
Severe 3

The scoring for section B was done accordingly: always scored 3, often scored 2, sometimes scored 1 and never scored 0. Thus, the maximum possible score for these items was 90 and minimum was 0.

The lower the score on MSC, the lower the symptomatology.

**Self-Rating Scale** (SRS: Fleming and Courtney, 1984). The SRS consisted of 36 items with the 7-point scale. The SRS measures five factors, namely, self-regard, social confidence, school abilities, physical appearance and physical abilities. Items relating to the school abilities and physical abilities were dropped in the present study. Since items pertaining to these factors were not related to the sample under study, the 26 items from SRS were used.

**Self-Consciousness Scale** (SCS, Mittal and Balasubramanian, 1987). The SCS consisted of 19 items with the five alternative response categories. The scale has five underlined dimensions; two for private self-consciousness (self-reflectiveness and internal state awareness), two for public self-consciousness (style-consciousness and appearance-consciousness) and one for social anxiety.
Significant Others Scale (SOS: Power, Champion, and Aris, 1988). The SOS measures different functional resources of social support that may be provided by a number of significant goal relationships within an individual's social network. The SOS contained 10 items. Five items were to measure emotional support and the remaining five items were to measure practical support.

Two versions of the SOS were used in the present study. The first was labelled "actual" support and the respondent was asked to rate currently applicable relationship with the spouse on each of the 10 support function. A 1-7 point rating scale was used from 1=never, to 7=always. The second version of the SOS was regarded to measure the 'ideal' level of support and the respondent would have liked for the spouse relationship that were currently applicable. Again, they were asked to rate each of the 10 functions on a 1-7 point rating scale.

Personal Data Sheet (PDS). The PDS covered the information relating to the demographic variables.

Procedure:

The data were gathered individually from the subjects. The MSC, SRS, SCS, SOS and PDS were administered on subjects in two different sessions. Before administering these tests the investigator established rapport to the subjects. Since most of the menopausal women were reluctant
to give information, the investigator convinced them that the obtained information will be kept strictly confidential and will be used only for research purpose. In the present study the investigator followed different procedures to collect the information from the literate and illiterate subjects under study. This was done so because the illiterate subjects were not well-versed in English. The data from the illiterate subjects were collected through face to face interview method, whereas the data from the literate subjects were gathered by administration of all the tests. In addition to the information obtained by the subjects on the tests some information were noted down from the menopausal women's case sheet.

Data Analysis:

The data were computed by means of Pearson-product moment Correlation Coefficient, partial correlation, significance of partial r, multiple correlation, significance of multiple r, t-test, and simple percentages.

Pearson product moment correlation coefficients were computed to determine the relationship between self-esteem scores and self-consciousness scores, self-esteem scores and actual/ideal social support scores, and self-consciousness scores and actual/ideal social support scores among pre-menopausal, transitional menopausal, menopausal, and post-menopausal women. Partial correlation were computed for partialled out or eliminating the effects
of variables, that may influence the relationship between
two variables whose relationship is to be considered. For
example, in the present study, we have three personality
variables namely, self-esteem, self-consciousness and two
levels of social support (i.e. actual and ideal): \( r_{12.3} \)
represents the partial correlation between self-esteem and
self-consciousness when the third variable (actual social
support or ideal social support) has been partialled out.
Significance of partial r were determined at 0.95
confidence interval for the pre-menopausal, transitional
menopausal, menopausal and post-menopausal women. Multiple
coefficient of correlation (\( R_1(23) \)) were computed to
determine the correlation between scores actually earned
and scores predicted on the self-esteem from the two
variables self-consciousness and social support. That is,
to what extent self-esteem scores are related to
self-consciousness and actual/ideal social support scores.
Significance of multiple R were calculated at the 0.95
confidence interval for the pre-menopausal, transitional
menopausal, menopausal and post-menopausal women. t-test
was applied to determine the significance of difference
between groups of menopausal women on menopausal symptom
checklist scores. Simple percentages were computed to
exhibit the tendency of pre-menopausal, transitional
menopausal, menopausal and post-menopausal women on section
A of menopausal symptoms checklist.