Assess the Relationship between Personality Traits (Neuroticism, Extraversion and Self-Efficacy) with Anxiety and Depression among Aging Population

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Authors’ contributions

This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.

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ABSTRACT

Background: Many people experience and deal with anxiety very efficiently at home, work place and every walk of their life. The beneficial outcomes of high level of anxiety are usually the effects and achievements you and others experience. On the outward, you should appear to be very effective in proper work and routinely lifestyle and this may be objectively perfect if you judge yourself on what you are accomplishing.

Aim: The aim is to assess the relationship between personality traits (neuroticism and extraversion and self-efficacy) with anxiety and depression among aging population.

Objectives: 1. To assess the relationship between personality traits of neuroticism with anxiety among aging population. 2. To assess the relationship between personality traits of neuroticism with depression among aging population. 3. To assess the relationship between personality traits of extraversion with anxiety among aging population. 4. To assess the relationship between personal traits of extraversion with depression among aging population. 5. To assess the relationship between personality traits self-efficacy with anxiety among aging population. 6. To

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assess the relationship between personality traits self-efficacy with depression among aging population. To compare the relationship between personality traits (neuroticism, extraversion and self-efficacy) with anxiety and depression among aging population. To correlate relationship between personality traits (neuroticism, extraversion and self-efficacy) with anxiety and depression among aging population. To associate score of personality traits (neuroticism extraversion and self-efficacy) with their selected demographic variables.

Methodology: The research design is cross-sectional study, and participants are, the aging populations. Sampling technique will be non-probability convenience sampling. Data will be obtained from the participants with the use of standardized scale personality five big inventory scale, self-efficacy scale, Hamilton-depression and Hamilton anxiety scale.

Results: There may be relationships between neuroticism, extraversion and self-efficacy with anxiety and depression among aging population and this relationship will be tested with demographic variables by regression analysis.

Conclusion: Findings will be drawn from the statistical analysis.

Keywords: Relationship; personality traits; anxiety; depression; aging population.

1. INTRODUCTION

Individual personality traits are related to symptoms, but as more people develop personality disorders, we are beginning to understand how the traits may interact with one another [1-3].

Personality traits are the effect on figures of emotions, love and affection and behaviors that persons share to the experience. Personality traits we have to suggest reliability and constancy in various situations, and somebody who getting outcome high on an exact personality trait, such as extraversion, is predictable to be outgoing over time. [4]. therefore, trait psychology persists over time in various situations based on the knowledge that people or individuals differ from one another based on a set of basic scopes of traits. In this personality trait we have to use Five-Factor Model in trait system[5].

Both anxiety and personality style are connected. Anxiety can come in a variety of different forms, sizes and tastes. Often anxiety is like a little force that can motivate you to do anything you have avoided, and sometimes it can be an intense crush of anxiety. But, most of the time, that is somewhere in between. A number of theories available in the causes of generalized anxiety disorder (GAD). One that gets over shadowed by biological theories is that anxiety can be a learned style of how someone treats emotions and the environment [6][7][8].

Before addressing the personality-depression relationship, several conceptual issues regarding the personality construct should be considered. First, personality has historically been described as having two components: temperament referring to biologically dependent, early-emerging, healthy individual variations in feeling and its control, and personality referring to individual variances as a result of socialisation [9].

Depression and anxiety disorders are characterized by the individual having the violent behaviors of negative emotion that emerge from dangerous or violent cycles. There are cycles that emerge as a result of the environment (both social and non-social), as well as psychologically dangerous of the individual. Depression and anxiety disease are frequently co-occurring [7].

The personality health link, especially for neuroticism and conscientiousness, is well established. Extraverted persons are known to experience a greater number of positive emotions, which can reduce the risk of disease [8].

Personality traits are more common and just a suitable way to define the people or individual. According to our personality the psychologist aid, predicting that, whatever work will be do it will be good for a worker or not, how long he or she is likely to live, and what kinds of specific jobs and their activitites the person will enjoy. As a result, the increased interest in personality psychology among applied psychologists, such as those working in health or organizational psychology [10].

1.1 Background of the Study

Personality is inherited as well as developed with their way of thinking, with the help of traits parents give shape their children's personalities.
Environment and nature work together to shape an individual's personality; our personality is shaped by our experiences in the world, which are woven around our genetic matrix [11].

There is no recognized mental health diagnosis for high functioning anxiety. Slightly, it has changed a catch-all term for people who suffer from anxiety, but identify the main cause of reasonably functioning well in various aspects of their lives. If you are having high level of anxiety, the people or individual noticed that your anxiety level is high and the anxiety disables you. On the outside, you may arise to be the typical personality who get shine in particular work and in life, but the way of working in your life you actually feel on the inside may be very changed[12].

Sadness is associated with neuroticism but also with a more positive outlook towards the current and may also affect future care planning with negative views of the future symptoms of depression. Higher levels of neuroticism have been linked to increased health-related worry and anxiety, so we theorized, that neuroticism would be linked to increasing the people's awareness of future care and needs [13].

It has been noted that personality plays a significant role in every stage of life. Similarly, those dimensions also influence adaptation in old age. Biological changes can interfere with the workings of the brain. Feelings of isolation or worthlessness can arise as a result of social changes. As a result, personality is certainly, a very important factor in effective aging.

Personality traits are moderately stable, implying and their variations are not common and drastic. Yet, the alteration does occur over time, either as a result of realistic forces such as psychological and physiological aging or as a result of intervention [14]. The term "personality" refers to a group of people's stable or individual differences, which can be intentionally induced or occur naturally. Personality traits are one of the arrangements and aspects of human variability that represent equally genetic and environmental factors. In the other study the researchers found that twin studies agree on heritability estimates ranging from 40% to 50% for major personality traits, with the majority of the remaining variations attributable to non-shared environmental influences[15].

At the individual level, retirement is a milestone that often leads to changes in health, social relations, finances and the allocation of time and, hence, in individual satisfaction with different domains of life. We investigate how two sources of individual heterogeneity personality and gender impact the well-being effect of retirement [16].

Neuroticism related to a negative view of circumstances leading to retirement, while Conscientiousness related to aspirational reasons for retirement. Extraversion and Neuroticism were the only predictors of life satisfaction in pre-retirement individuals, while Agreeableness, Conscientiousness and low Neuroticism were predictors of life satisfaction and positive experiences in those who had already retired. Personality provided incremental prediction of retirement life satisfaction above reasons for retirement [17].

1.2 Rationale of Study

To understand the personality traits of the ageing population is one of the main components now because many are going to reach to the older age group in another ten years. Many of the factors influence changes in the personality of older people like retirement, physiological changes, affected by chronic diseases, mood disorders and abandoned by their own children.

This study, along with previous research, supports to find out the relationship between personality traits (neuroticism and extraversion and self-efficacy) with anxiety and depression among aging population.

2. METHODOLOGY

It is community based cross-sectional study. Sample will be aging population i.e., Male and Female of Bapatwadi and Nalwadi area of Wardha city will be involved in this study. The sample will be chosen based on the inclusion criteria, and the sampling technique will be non-probability convenience sampling. Cross sectional research design data will be collected by demographic variable and participants are aging population. The standardized scale will be used in this study.

2.1 Inclusion Criteria

- Participants will be between 60-75 years of age group.
- Aging population who are available during the period of data collection.
• Aging population who are willing to participate.
• Males and females are included.
• Aging population can read and write Marathi, Hindi and English.

2.2 Exclusion Criteria

Participants who are having following ailments will be excluded from this study.

• Aging population who were already exposed to this type of study.
• Aging population with disabled.

2.3 Withdrawal Criteria

Participants who are not fulfilling the following criteria will be withdrawn from the study:

• Want to withdraw from the study
• Incidence of any attrition.
• Not fulfilling study schedule

The patients with incidence of any attrition will be treated under observation and free of cost. The patient with depression and its concern that the anxiety issue will be referred to AVBRH for further treatment. The reason of withdrawal will be recorded.

2.4 Sample Size

For this study, the sample size will be selected 150.

2.4.1 Data management and monitoring

It consists of demographical data of aging population i.e., Age, Gender, Educational level, living status, Source of finance, Religion, Occupational status. In the community after 30 mints given tool for data will be collected.

2.5 Statistical Analysis

Statistical analysis will be carried out using descriptive and inferential statistics.

3. EXPECTED OUTCOME/RESULT

3.1 Primary Outcome

1. This study is planned to investigate the relationship between personality traits (neuroticism and extraversion and self-efficacy) with anxiety and depression among aging population and after investigation the data will be identified the personality traits of (neuroticism and extraversion and self-efficacy) among aging population.

2. The investigator will extend the research on multiple correlations and regression analysis of each variable among each personality traits with anxiety and depression among aging population will be examined.

3.2 Secondary Outcome

1. The identified personality traits among aging population will carry on with interventional study for aging population of future.

3.3 Data Analysis Method

Inferential statistics will be used. For analysis of demographic figures frequency and mean, mean percentage and standard deviation will be used for relationship between personality traits (neuroticism, extraversion and self-efficacy) with anxiety and depression among aging population.

4. DISCUSSION

The current study provides proof of the actual features (neuroticism, extraversion, and self-efficacy) involved in anxiety and depression among aging population. 150 samples will be selected to draw better generalizations.

The group differences which considered the variables of (neuroticism, extraversion and self-efficacy with anxiety and depression among aging population in urban and rural experiences may help to explain the differences that the researcher expected in such a diverse population. In the present study significant relationship between personality traits (neuroticism and extraversion and self-efficacy) with anxiety and depression may be drawn among aging population [18].

The relationships between personality traits (neuroticism, extraversion) and self-efficacy with aging depression in that the results include for each variable, the mean (standard deviation) was computed. According to the study, they must use the assumption of logistic regression to assess the independence of predictive variables, logistic
Corelation was examined, and multicollinearity will be checked in this study to investigate the relationship between analytical variables (neuroticism, extraversion, and self-efficacy) and elderly depression, and the Pearson association coefficient was used [19].

Another study, they used correlation coefficients between neuroticism and elderly depression and value is, (P0.001, r=0.54), in the extraversion and elderly depression (r=-0.65, P0.001), and self-efficacy and elderly depression (r=-0.66, P0.001) value and they were calculated, and all significant at P0.001. According to these findings, Neuroticism is comparable to older depression. Extraversion and self-efficacy, on the other hand, are inversely comparative to elderly depression. This information show that neuroticism is directly comparative to elderly depression. Extraversion and self-efficacy, on the other hand, are inversely related to elderly depression. This information shows that self-efficacy, extraversion, and neuroticism are important predictors of ageing depression. In summary, they must explain three variables and 51% of the variation in male teachers with age-related depression [20].

This study, along with previous study, in terms of personality traits, compared and recreate the group and in the group, they distributed the who is the drug addicted, heroin addicts and they had significantly advanced levels of psychoticism, neuroticism, delinquency and dependence. According to levels of personality the value of significantly higher levels of extraversion (t = 8.36, p 0.01) and social conformism (t = 12.28, p 0.01) were create in the group of reintroduced about drug users according to Eysenck's personality theory, who still had the inclined to resist developing an addiction problem Extraversion [21-23].

One cross-sectional study used the depression scale, self-efficacy scale, and the big inventory, using the demographical factors, and according to demographic factors analysing each factor. Individuals analyzed for the proportion of self-efficacy that influenced the association between extraversion, consciousness, neuroticism, and depressive symptoms [24,25].
The study, along with previous study, aimed to investigate the relationship between family functions and personality traits with general self-efficacy among university students and the general population. In this study they are conduct this two-part study, the first part was carried out on a sample of 500 students, and in the second part the study was repeated on a larger sample consisting of 1000 participants from the general population data were collected from the General Self-Efficacy Scale (GSE), Family Assessment Device (FAD), and the Revised NEO Personality Inventory (NEO PI-R). The analysis was performed using Pearson’s correlation coefficient, Fisher’s z test and regression analysis. After that analysis present study exposed that all the subscales of family functions and all personality traits are significantly related to general self-efficacy among university students and general population (p < 0.001). But in the general population, there was no significant correlation between openness to experience with general self-efficacy (p > 0.05). Furthermore, the results of regression analysis showed subscales of family functions and all personality traits together can predict 27 and 35% of the variance in general self-efficacy among university students and the general population, respectively. Personality traits play a role in predicting general self-efficacy, but the personality trait of conscientiousness plays a greater role than other personality traits and also compared to family functioning, personality traits play a greater role in predicting general self-efficacy. [26,27].

5. CONCLUSION

Conclusion will be drawn from the statistical analysis.

6. RECOMMENDATION

Promotion of the quality of life and well-being is accounting age subgroups (after retirement, e.g., 5/ 10-year intervals).

6.1 Age in Years

- 60 -65
- 66 -70
- 71-75
- 76 and above

6.2 Specific Outlines

- Retirement preparation, should be associated with traits linked to planning and self-control as well as anticipatory emotions [28].

6.2.1 Practice-oriented direction

Retirement have made significant progress in understanding the factors that influence people’s well-being in retirement.

Some factors impact people such as fiscal, physical and psychological well-being in retirement:

- Family-related factors- More dependents, Cost related to dependent care
- Retirement transition-related factors- Financial planning, retiring to receive financial incentives
- Post-retirement activities- such as any kind of paid work (part-time, full-time, or self-employment. [28]

6.2.2 Intervention

An intervention may include a set of social-behavioral strategies (e.g., education, skills training), psychosocial therapies (e.g., cognitive behavioral therapy), programmatic organizational strategies (e.g., workplace provisions for caregivers) or broad policy initiatives.

Another intervention psychoeducation given to the after retirement for decrease the anxiety and depression.

- Physical Activity: yoga, exercises, meditation
- Health education: self-care
- Social support and psychological adjustment: management of personal aims [29]

CONSENT

Respondents' written consent has been collected and preserved by the author in accordance with international or university standards (s).

ETHICAL APPROVAL

The Institutional Ethical Committee granted ethics approval, DMIMS (DMIMS (DU)/ Institutional Ethical committee/Aug-2019/8309). The conclusion will be drawn from the outcomes.

COMPETING INTERESTS

Authors have declared that no competing interests exist.
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