

An Investigation to *Consequences of Depression at Work – Place: Evidence from Working Professionals at Karachi*

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ABSTRACT

Purpose: main aim of the study is to investigate Depression at Workplace. The basic purpose of this study is to explore the consequences that depression has on one's ability to work. **Literature review:** Depression is a common illness. At some point in their life, around 1 in every 5 women and 1 in every 10 men will suffer from depression. At any given time, 1 in every 20 adults is experiencing a serious 'major' depression. **Methods:** Closed ended well-designed questionnaire is used to collect the data from different working professionals in organization. Universe was service organization at Karachi. Random sample survey was used and intervention of researcher was moderate. Descriptive statistical model of weighted average and weighted average percentages were used for analysis. **Conclusion:** This research paper concludes that More than 80% of people with depression can be treated effectively, generally without missing much time from work or needing costly hospitalization. **Suggestions:** Firstly, awareness should be created about depression and its severity and seriousness amongst individuals at work. Secondly, workplace depression should be given attention to by employees facing depression and their managers and co-workers along with the appropriate medications and therapies involved.

JEL. Classification: I11; J21; J81; J83;

Key Words: Depression, Workplace, Employees, Karachi

1. INTRODUCTION

1.1 Background

Depression is a mental disorder characterized by a pervasive low mood, low self-esteem and loss of interest or pleasure in normally enjoyable activities. The term "*major depressive disorder*" was selected by the American Psychiatric Association for this symptom under mood disorders in the 1980 version of the

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Diagnostic and Statistical Manual of mental disorders (DSM-III) classification, and has become widely used since. The general term **depression** is often used to describe the disorder, but as it is also used to describe a depressed mood. Major depression is a disabling condition, which adversely affects a person's family, work or school life, sleeping and eating habits, and general health (Seanetal 2010).

1.2 Types of depression

Major Depressive Disorder: This illness impairs a person's ability to work, sleep, eat, and function as he or she normally would (Depression 2010).

Dysthymic Disorder: A milder yet more enduring type of major depression. People with dysthymia may appear to be chronically mildly depressed to the point that it seems to be a part of their personality.

Bipolar Disorder: Also known as manic-depression or manic-depressive disorder. This condition is characterized by mood that alternates between periods of depression and periods of elation and excitable behavior known as mania.

Cyclothymic Disorder: A milder yet more enduring type of bipolar disorder. A person's mood alternates between a less severe mania (known as hypomania) and a less severe depression.

Substance-Induced Mood Disorder: Depression may be caused or precipitated by the use or abuse of substances such as drugs, alcohol, medications, or toxins.

Seasonal Affective Disorder (SAD): This condition affects people during specific times or seasons of the year.

Postpartum Depression: A rare form of depression occurring in women within approximately one week to six months after giving birth to a child.

1.3 Symptoms of Depression: Certain symptoms can give a clue that someone is suffering from the kind of depression that will need help.

These may include:

- Sadness which does not change from day to day
- Crying for no apparent reason
- Anxiety, worrying, irritability or tension
- Disturbed sleep
- Reduced appetite and change in weight
- Tiredness, lethargy and lack of motivation
- Loss of interest in normal activities
- Forgetfulness and poor concentration
- Thoughts of worthlessness and hopelessness

1.4 Depression at the Workplace

Depression can seriously affect someone's ability to work effectively. It may be so bad that he or she will have to stop work completely for a time. When it is not quite that bad, most people will try to soldier on, painfully aware that they are not doing their job as well as they usually do. If someone's depression can be recognized and helped, they will get back much more quickly to their normal performance at work. Much

needless unhappiness and suffering can be avoided. Work depression not only affects the individual, but also colleagues, friends and family. If left untreated, it can lead to suicide, dangerous behavior, or serious mistakes that can cost the company thousands of dollars or even cause injuries. In most cases, people just resign or get fired. If treated, all of the above can be prevented (<http://www.cvtips.com/>).

1.5 Research Questions

Do unsatisfactory work conditions mostly cause depression amongst managers and employees? Does depression adversely affect employee's ability to work?

3. LITERATURE REVIEW

3.1 Depression at Work- A TV anchorwoman tells her story of depression

According to Marano (2003), depression is a major mental health issue in America. Nevertheless, it is also, progressively more, a major workplace issue. A landmark 2003 study has drawn the conclusion that depression costs employers \$44 billion a year in lost productivity alone. Those are severely indirect costs and they do not even begin to reflect medical costs. The huge majority of that \$44 billion loss in output comes not from absenteeism due to the disorder but it is the product of so-called presenteeism. Many people with depression showing up for work but they do not performance at anywhere, near full capacity. Even though in spite of that they are failing to return phone calls; turning in poor-quality work; missing deadlines altogether; not following up on new business leads; being paralyzed with indecision, inability to face work at all, coming in late, leaving early, or not even returning from lunch, difficulty getting along with coworkers, withdrawing from the social environment at work.

3.2 The Manager's Role In Managing Depression In The Workplace

According to Wallace (2007), depressive illnesses can affect an employee's productivity, judgment, ability to work with others, and overall job performance. The failure to concentrate fully or make decisions may lead to expensive mistakes or accidents. Changes in performance and on-the-job behaviors that may suggest an employee is suffering from a depressive illness include: decreased or inconsistent productivity, absenteeism, tardiness, frequent absence from work station, diminished work quality, missed deadlines, withdrawal from co-workers, overly sensitive and/or emotional reactions, difficulty learning and remembering, slow movement and actions & frequent comments about being tired all the time. It is time to talk with an employee when you have noticed several of the warning signs mentioned above and the sooner you have this conversation the better.

3.3 Suicides due to Depression

According to Khan cited by Hussain (2003), the relationship between suicide and depression is well known. People who commit suicide out of them more than 80 percent are suffering from depression. Population-based prevalence researches from Pakistan provide high figures for depression. In a one study, 44.4 percent (males: 25.5 percent, females 57.5 percent) of the cohort were found depressed for more than a year. It would come into sight that psychological illnesses (especially depression) are under-recognized and not treated appropriately in Pakistan therefore may possibly be a main factor accountable for suicidal tendencies. There was convincing proof representing that sufficient prevention and treatment of some psychological disorders could lessen suicide rates, whether such interventions were directed towards individuals, families, schools or other sections of the common community. With such high rates of depression, undiagnosed psychological disorders and interpersonal problems in Pakistan groundbreaking management modalities need to be

developed.

3.4 Helping Cope With Depression at Work

Neill (2008) says, "At any one time one worker in six will be experiencing depression, anxiety or problems relating to stress. It is a normal part of working life. Yet with this knowledge we are still facing the reality that people are losing their jobs rather than telling their employers and colleagues about their depression. But there are simple steps employers can take to improve people's situation at work. These include promoting wellbeing among staff. Working in a healthy and supportive environment can be one of the ways that people prevent relapsing. Self-awareness and being able to share feelings with colleagues and employers, rather than living in fear of people finding out, is very important."

3.5 Depression and the Ability to Work

According to Elinson (2004), depression can have a severe impact on a person's ability to work. The combined 1994 and 1995 National Health Interview Survey Disability Supplement was used to identify persons aged 18 to 69 with depression. Socio-demographic, health, functional, and disability characteristics of working depressed personnel and nonworking depressed personnel were compared and a chi square test of significance was used. After completion of adjustment for socio-demographic variables, multiple logistic regression analysis was used to identify factors associated with work among depressed persons. Roughly, half of the persons were from the labor force who reported major depression. When working people were compared to nonworking depressed people, working depressed people tended to be younger, to be male, to be better educated, to have a higher income, to live alone or with a non-relative, and to live in an urban or suburban location. They less often perceived them as unable to work or as disabled and were healthier and less impaired by social, cognitive, and physical limitations than their nonworking counterparts were. Understanding the factors associated with depressed persons' working and not working may help policy makers, employers, and clinicians shape health care benefits packages, employee assistance programs, disability programs, and treatment programs appropriately.

3.6 How to Cope When You Are On the Job

According to Tom Johnson (2002) cited in (www.hopetocope.com), the former chairman and CEO of CNN Newsgroup says "My work was often affected.. Schedules were changed to enable me to come to work late when I could not drag myself out of bed. If you think you have depression and you're taking it to work, go to a professional to get a diagnosis." Johnson was diagnosed as suffering from depression in 1988 while working as publisher and chief executive of the Los Angeles Times Now retired; Johnson remembers that at the time of his diagnosis, no programs existed at his workplace to help. He faced it-alone.

4. METHODOLOGY

This research is exploratory in nature and random sampling is done through closed-ended questionnaire based on likert scale of 1 to 6 showing the intensity of depression. Universe was Karachi and respondents were from different organizations from Karachi with a sample size of 45. data was collected in 2010. Questionnaire was floated to different working professionals. The time horizon was just once. The response rate was 100%.

4.1 Data Variables

Peer Pressure; Gender Discrimination; Sexual Harassment; Autocratic Management; Rigorous Deadlines;

Bossy Co workers

4.3 Model

The model we are using

To summarize the questionnaires in descriptive form statistical model of weighted Average and Weighted Average Percentages are used as bellow:

$$\text{Weighted Average} = \frac{\sum XW}{\sum X}$$

$$\text{Weighted Average \%} = \frac{\text{Wt. Avg}}{\text{Nos on Scale}} \times 100$$

Where,

X = no. of respondents

W = weight on scale

5. RESULTS & DISCUSSION

In the light of all the literature review it has been concluded that depression can seriously affect someone's ability to work effectively. It may be so bad that he or she will have to stop work completely for a time. When it is not quite that bad, most people will try to soldier on, painfully aware that they are not doing their job as well as they usually do. If someone's depression can be recognized and helped, they will get back much more quickly to their normal performance at work. Much needless unhappiness and suffering can be avoided.

The primary research was conducted by floating questionnaires among working individuals in different fields of work. The questionnaire had 25 questions. The questions ranging from 1-5 were personal. They were concerning sex, marital status, Work industry, Designation and the age bracket to which an individual belongs. Whereas, the questions ranging from 6-25 were concerning, the physical, psychological and organizational factors. For these the description for each selected choice in the likert scale is as follows:

1: Not at all; 2: Just a little; 3: Somewhat; 4: Moderately; 5: Quite a lot; 6: Very much

Respondents' information was tabulated on Weighted Average on a scale of 1 – 6 as below:

Description	Wt. Av.	Wt. Av. %
Become slow at work	3.35	55.83
Feeling hopeless	2.87	47.83
Have quite a lot of trouble concentrating on reading	3.56	59.33
Feeling that pleasure and joy had gone out of their life	3.47	57.83
Moderately face difficulties making decisions	3.58	59.67
Lost interest in aspects of life that used to be important to them	3.37	56.17
Feeling sad and blue	3.93	65.5
People were agitated and restless	3.53	58.83
How fatigued people felt they were	4.04	67.33

It takes people great effort to do simple things	3.5	58.33
Feeling guilty	2.73	45.5
Thinking of themselves as failures	2.73	45.5
Feeling lifeless	3.37	56.17
Have moderate amounts of sleep	3.17	52.83
Felt suicidal, suicide is an extreme word, and most people would never admit feeling like killing themselves because of the seriousness of it	2.24	37.33
Felt trapped or caught	3.78	63.0
Felt depressed even when good things happened to them	2.89	48.17
Without any reason had lost weight	2.8	46.67
Without any reason had gained weight	1.76	29.33
Took antidepressants	2.26	37.67

The results of the questionnaire as reported in the table, suggest that depression has an extreme impact on people's everyday activities. It disables them to function as they ordinarily would. People reported that they felt that their movements were effected. They had become slow and lethargic in carrying out their normal activities. Depression also affects the basic ability to focus on reading and concentrating on work related tasks and processes. People reported that they had become very uninterested in life and they felt indifferent to the things that would normally please them. Depressed individuals feel that nothing is interesting and no matter what, they feel worthless and sad. People reported that even to make small decisions, they required hours of consideration. Feelings of guilt made them feel like criminals. Most people reported that no matter how much they tried to relax themselves, agitation, restlessness and constant fatigue seemed to be permanent residents of their life.

Untreated depression even if ignored, lives in the subconscious mind and makes people feel like failures, lifeless, trapped and suicidal. People unconsciously start gaining and losing weight and any effort to feel better seems in vain. Lack of moderate amounts of sleep makes matters worse and people resort to antidepressants in an effort to feel better, which help them feel better only until the effect of the pill lasts; nevertheless, the depression keeps growing within.

6. CONCLUSION

Depression is an illness, which affects an individual greatly and has an impact on the way a person acts and reacts to everything. Depression faced at work, is more serious than most of us realize; it is a growing phenomenon. It is a rather common illness affecting 1 out of every 20 adults at any given time.

Work depression affects three out of every ten workers at least once a year. It not only affects the individual, but also colleagues, friends and family. If left untreated, it can lead to suicide, dangerous behavior, or serious mistakes that can cost the company thousands of dollars or even cause injuries. Overall, medical utilization costs for patients with depression are significantly higher than of those without depression. Most people are unaware of how severe their depression actually is, and if they do feel that they are unusually low without any reason, they prefer using self-help, trying to unwind their stress, rather than seeking professional help. The worst part is that a greater majority of individuals try to suppress their depression and seek to avoid it, because dealing with a "psychological" problem appears to be more stressful and costly to them.

If someone's depression can be recognized and helped, then one will get back much more quickly to his or her normal performance at work. In such a way needless unhappiness, suffering and loss to companies can be avoided.

7. RECOMMENDATIONS

7.1 Employees Dealing With Depression

When faced with depression employees should:

- Talk to someone, either a counselor or a confidant at work.
- Discuss the problem with their doctor. Depression commonly goes undiagnosed.
- Try to determine the cause of the depression.
- Seek the help of professionals.

7.2 Treatment of Depression

There is a choice of treatments available, including medications, psychological treatments, or a combination of both. These treatments usually relieve the symptoms of depression in a matter of weeks. The medications commonly used to treat depression are Tricyclics, Monamine Oxidase Inhibitors (MAOIs) and Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs).

Two of the psycho-therapies that are highly effective for treating depression are psychotherapy and cognitive/behavior therapies.

7.3 Managers dealing with employees suffering from depression:

If an employee voluntarily talks about health problems, including feeling depressed or down all the time, a manager should keep these points in mind:

- Do not try to diagnose the problem yourself.
- Confront the situation quickly.
- Be empathic.
- Listen to their story.
- Provide a solution to the employee.
- Follow up.
- Create a culture of support.
- Hire an organizational psychologist

8. LIMITATIONS OF STUDY

Following were the limitations that were faced during this research report:

- Firstly, we faced a time span limitation, because this research has been conducted in the time span of a semester and the sampling was random sampling of working individuals, because people are not readily available to fill out questionnaires.
- Secondly, there is no secondary data available.
- Thirdly, depression is thought of as a personal problem and people are reluctant to admit that they are depressed.
- Fourthly Our society has a taboo attached to seeking the help of professionals such as psychologists and psychiatrists as they think that one only needs to be seriously out of his senses to visit one

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