

Gender Differences and Job Stress in Depression among Civil Servants in Enugu State, Nigeria

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Abstract

This study investigated gender differences and job stress in depression among civil servants in Enugu State. A total of two hundred (200) participants comprising 100 males between the ages of 28 – 62 with mean age of 41.64 and standard deviation of 8.89, and 100 females between the ages of 25 – 60 with the mean age of 39.62 and standard deviation of 7.01 were selected for the study. They were selected making use of available sampling method from the population of both Federal and state parastatals' civil servants, all in Enugu State. Self-rating depression scale developed by Zung (1965), which is a 20-item questionnaire designed to assess the cognitive, psychomotor, affective, and interpersonal dimensions of depression was administered to the participants to assess their level of depression. Also, Job-related tension scale developed by Kahn, Wolfe, Quinn, Snoeck and Rosenthal (1964), which is a 15-item questionnaire designed to assess organizational stress was administered to the participants. A cross-sectional survey design was adopted and Two-Way Analysis of Variance F-test was applied at the statistical tool. The findings revealed that the gender yielded a significant outcome F (1,196) = 27.94 at P<.001. Also, Job stress yielded as significant outcome F (1,196) 0.20 at P<.05. The findings were discussed and recommendations were made.

Keywords: Job Stress, Job Satisfaction, Job Involvement, Depression, Good Health.

Introduction

Health is the level of functional or metabolic efficiency of a living being. In humans, it is the general condition of a person's mind, body and spirit, usually meaning to be free from illness, injury or pain.

According to World Health Organization (1946), health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.

As life goes on, humans experience difficulties in trying to keep up with good health conditions. Human problems arise when the physical, mental, emotional and social well-being are tampered with and which can lead the individual to live unfulfilled life.

However, one of the health problems that face human beings is depression. Depression according to Sandra (1997) is a state of low mood and aversion to activity which can affect a person's thoughts, behaviours, feelings, and even physical well-being. Grohol (2006) also referred to depression as clinical depression, which is not just a feeling of blues or sadness, but a state of stress, unhappiness and sadness which lasts for at least two weeks.

Moreover there are different types of depression known to scientists and each of these may have different causes and produce different depressive signs and symptoms (Grohol, 2006). Major depression also known as Major Depressive Disorder, is one of the most severe types of depressive disorders, which is characterized by a protracted state of sadness. During this time, an individual may lose interest in once enjoyable life activities (Melinda, Joana & Jeane, 2010). Major depression also boosts people's level of anxiety. It is a number of physical manifestations such as loss of appetite and a consequent loss of weight, or overeating, which can lead to over-weight and obesity (Roxanne & Edwards, 2009).

Atypical depression is another type of depression which is considered to be a kind of major depression (Grohol, 2006). People with atypical depression experience remission periods. When their moods improve, they feel as if life is worth living. Such changes could be related to happy times in their lives or social activities. These happy moments do not last long. They experience low moods and thoughts again (Grohol, 2006).

Similarly, dysthymia or chronic depression is a milder form of depressive disorder. People with dysthymia experience decrease in their level of life satisfaction; have difficulties carrying out their daily life activities. They may have chronic pains and headaches. One of the symptoms of this type of depression is that, people with this depression feel like they were born with the blues. They feel that they have always lived like this and always will (APA, 2000).

Seasonal Affective Disorder is another type of depression. People with this disorder experience depressive symptoms during a particular time of the year. Most people have seasonal affective disorder during late autumn and winter, when there is less sun and the days are shorter (Roxanne & Edwards, 2009). Seasonal Affective Disorder manifests itself through symptoms such as constant fatigue, sleeplessness, hard time waking up, sadness, and feelings of empty life (Grohol, 2006).

Bipolar Disorder is another type of depression. The name 'Bipolar' means that a person with this condition swings in his or her mood and emotions between two poles: On one end is depression and the other



end is mania. During low episode, a person with bipolar disorder experiences all the clinical depressive symptoms including sadness, suicidal thoughts, lack of energy and other emotional, mental, and physical problems caused by depression (APA, 2001).

However, depression is one of the mental disorders which have high prevalence. Based on World Health Organization information cited in Modabber-Nia, Tehrani, Moosari, Ash, and Fallahi (2007), depressive disorders are the fourth leading health problem in the world. This suggests that depressive disorders may become the second most disabling disease of mankind by the year 2020 (Modabber-Nia et al, 2007).

In Nigeria especially in eastern part, people suffer greatly this cankerworm called depression. Depression is one of the major psychological disorders people suffer which affects as well as endangers their lives (Grohol, 2006). The manifestations of the depressive symptoms make the individuals to be socially withdrawn thereby striving to adapt to their environment.

Moreover, depression has been observed to retard the psychological well-being of our people and there is need to find out the possible causes. One of the factors linked to depression in this present study is gender. Meta-analysis of studies conducted in various countries has shown that women are roughly twice as likely as men to experience depression (Nolen-Hoeksema, 1990). The reason for this sex differences in depression is not entirely clear although most researchers today believe that it is a combination of several factors including the effects of estrogen on the stress hormone and cortisol (Leinbenluft, 2001), and the tendency of women to ruminate over their problems [Nolen-Hoeksema, 1990).

Furthermore, the above explanations point to differences between men and women biologically, environmentally, and psychologically. Nolen-Hoeksema (1990) maintains that some studies support the idea that women's hormones are responsible for their higher vulnerability to depression than men. The fact is that this gender differences does not emerge until puberty, when girls experience significant hormonal changes. This also supports the idea that there is something particular in a woman's biology that makes her extremely susceptible to depression (Nolen-Hoeksema, 1990).

The environmental perspective for the higher rates of depression in women than in men is based on the assumption that women experience more stressors in their lives than men (Morgan, 2001). Women are more oppressed across the world. If women in some societies were to share equal roles to men in their societies and still displayed twice rate of depression as men, it would be able to say comfortably that biology plays a major role in accounting for sex differences.

Looking at the psychological perspective according to learned helplessness theory, repeated exposure to negative situations where one has little control produces feelings of helplessness and symptoms of depression (Marcott, 1999). Women are more likely to experience situation where they are made to feel helpless, such as through sexual abuse and single parent situations. They would then be more likely to develop a sense that they are not in control of their environments, which may lead to the development of depression (Marcott, 1999).

On the other hand, another factor which has been linked to depression in this study is stress. Stress may be acute, psychological, emotional, social, or job-related. Stress experienced by workers at workplace is called job stress (Akinboye, Akinboye&Adeyemo, 2002). Job stress may be due to a number of factors such as poor workload, shift work, long hours of work, role ambiguity, role conflicts, poor relationships with the boss, colleagues or subordinate officers, risk and danger to mention a few.

Job stress may manifest by the presence of headache, sleep disturbances, difficulty in concentration, short temper, upset stomach, job dissatisfaction and morale (NIOSH, 1998).

Depression is however, one of the health problems facing people in all works of life. Everyday observations show that people especially the working class show symptoms of depression, although not diagnosed as to qualify in the clinical case. Thus, it becomes pertinent to seek the influence of job stress and gender on both state and federal workers' depressive level in Enugu state.

Method

Participants

A total of two hundred participants comprising one hundred males between the ages of 28-62 with mean age of 41.64 and standard deviation of 8.89 and One hundred females between the ages of 25-60 with mean age of 39.62 and standard deviation of 7.01 were selected for the study. They were selected making use of available sampling method from the population of both state and federal parastatals workers which are: Enugu State Primary Education Board (SPEB) ; Federal Neuro-Psychiatric Hospital, Enugu; Enugu State University of Science and Technology (ESUT), Enugu; Enugu State Teaching Hospital (Parklane); Enugu State Library; and Federal Government Secretariat, all in Enugu state. A Cross-Sectional Survey design was adopted to sample the participants' opinion.

Assessment Tool

Two sets of instrument were used in this study: (a) Self-rating Depression Scale (SDS) developed by Zung



(1995), which is a -20 item questionnaire designed to assess the cognitive, affective, psychomotor, somatic and social interpersonal dimensions of depression was used to measure the participants' depressive level. Self-rating depression scale was validated here in Nigeria by Obiora (1995), who obtained a test-retest coefficient reliability of 0.93 with Nigerian samples. The norms for Nigeria males (n=100) = 48.77 and females (n=100) = 47.87. The norms served as the basis for the interpretation. Individuals who scored higher than the norms had clinical depression and vice versa.

(b) Job-related Tension Scale (JTS) developed by Kahn, Wolfe, Quinn, Snock and Rosental (1964), which is a-15 item questionnaire designed to assess the organizational stress was also used to measure the participants' organizational stress. Job-related Tension Scale was also validated here in Nigeria by Oseghare (1988) who obtained the reliability coefficient of 0.39 with Nigeria samples. The norms for Nigeria males (n=132) = 2.84 and females (n=94) = 2.81. The norms served as the basis for the interpretation. Individuals who scored higher than the norms had organizational stress and vice versa.

owever, Two- Way Analysis of Variance F- test was applied as statistical tool through the use of Statistical Packages for Social Sciences (SPSS) to analysis the participants'scores.

Results

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Variance	Factors	Mean	SD	N			
Job stress	Low	43.05	6.085	100			
	High	48.50	5.663	100			
Gender	Males	43.71	6.755	100			
	Females	47.84	5.463	100			

Source	Sum of square	DF	Mean square	F	Sig
Job Stress	1485.12	1	1485.12	48.654	.000
Gender	852.845	1	852.845	27.940	.000
Job stress	6.125	1	6.125	.201	.655
& Gender					
Error	5982.780	196	30.524		
Total	8326.875	199			

Kev = P < .001

The above indicated significant gender differences f(1,196) = 27.94 at P<. 001. This means that there is a significant gender differences on the workers' depressive level. Also, the table above showed significant influence of job stress on depression among the workers F(1,196) = 48.65 at P<.001. This means that the workers with high job stress had more clinical depression than those with low job stress. The result however showed that workers with high job stress (x = 48.50) were more depressed compared with those with low job stress who obtained a mean of x = 43.05. Also, females (x = 47.84) were more depressed compared with males with a mean of x = 43.71.

Discussion

The findings of this study revealed that there are gender differences in the manifestation of depressive symptoms. There are possible factors that precipitated these differences between men and woman in the manifestation of depressive symptoms. One of such factors is gender roles socialization. Gender roles socialization begins the moment a child is born from the simple question, "is it a boy or a girl (Gleitman, Fridlund and Reisberg, 2000). Men often talk about their job. When they come back from their workplaces, they have enough time to cool-off the stress experienced at workplace thereby making them to be less depressed, unlike women who talk about their job as well as their family. They have little time for themselves because, once they come back from their workplace, they engage in family chores. Both the stress experienced at the workplace and the family, can make them to breakdown thereby feel helpless, hopeless and even frustrated which are the symptoms of depression.

Another factor that could have led to this gender differences in depression is gender-based stereotyping. Women are being subordinated and discriminated against. In public service offices, men are easily noticed and rewarded than their female counterparts. As a result of this, women tend to work harder than normal so as to be recognized which also makes them become vulnerable to depressive symptoms.

Moreover, another factor which could have brought about this gender differences in depression is physical appearance. Men often see themselves as being stronger than women. As a result of this, may become



more easily adapted to stressful life events than women, who sometimes see themselves as weaker vessels. As women try to adapt to the stressful life events, may become helpless and frustrated which are the symptoms of depression.

On the other hand, the findings of this study revealed that job stress influences depression, though people with high job stress manifested high depressive symptoms than those with low job stress. There are possible factors that led to these differences between people with high and low job stress on the manifestation of depressive symptoms. One of the possible factors is poor work environments/conditions. These include: heavy workload; infrequent rest breaks; long heavy work hours; hectic and routine task that have little inherent meaning; lack of participation by workers in decision making;

inadequate facilities; job insecurity, rapid change for which workers are unprepared, and air pollution. As the workers try to perform their duties in such conditions, they may be stressed up. Stressful working conditions are actually associated with increased absenteeism, tiredness, and intentions by the workers to quit their job.

Also poor remuneration could be another factor that precipitated job stress. Some people are working for nothing. What they are being paid is not commensurate with the services rendered. As a result of this, they are not happy doing their job, thereby making them to feel helpless and frustrated.

In addition, job stress could have emanated from the misfit of job and man. In most of our public services, people are not employed based on their qualifications. They may end up in the field they were not properly trained in. They become neophytes as they try to meet up with the demands of their job. They become stressed up thereby feeling helplessness, hopelessness, and may even want to quit their job as a result of incompetence.

Daily hassle is another precipitating job stress factor. Bad road networks and traffic jam can choke people up as they try to report to their various offices. When they eventually get to their offices, can be stressed up thereby making them to be helpless and this invariable affect their job performance.

Implications of the Study

The implication of this study is that women are more vulnerable than men to depression, thereby suggesting that women who are exposed to high job stress are at greater risk of becoming depressed than their male counterparts.

Also, people with high job stress are more depressed than those with low job stress, and ignorance of this fact may lead to less productivity by the workers.

Conclusion

In human, health is the general condition of a person's mind body and spirit, usually meaning to be free from illness injury or pain. Thus, depression is one of the illnesses that deteriorate humans.

The significance of the first findings revealed that women are more susceptible to depression than men. Therefore, equal and unbiased attention should be given to both men and women so there may be no issue of gender superiority in the public offices even at home. This present study has shown that, if not given the same opportunities, there will be gender differences in depression.

However, job stress is of increasing importance due to continuing structural changed in the workplace, with both increasing demands and job insecurity imposed on employees. A range of adverse health outcomes have been identified, but psychological disorders such as depression are significant because, they occur frequently and are often unrecognized.

The significance of the second findings showed that job stress is undeniably factor in depression. Therefore, managements should try as much as possible to provide the necessary facilities for the workers to work effectively in order to enhance high productivity. Everyone needs good health for effective job performance.

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