

The Research Study On The Presence Of Depression Among Youth In Karachi

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Abstract

Depression (major depressive disorder) is a common and serious medical and mental illness that negatively affects person's thoughts, behaviour, feeling and emotions. Fortunately, is a curable disease. Depression is quite different from sadness and feeling of grief. When person often sad and grief for unnecessary things which means person is depress. This study aimed to explore the causes of depression in youth, especially social and economic causes, the nature of youth's social relationships, their attitudes towards studies of this disease and level of awareness regarding this mental illness. The universe of present study was Sir Syed University of Engineering and Technology (SSUET), sample was selected through simple random sampling method which consisted of 155 students (18-33 years). Data was collected by using a tailor-made questionnaire containing 144 questions. SSUET is a private university located in Karachi. It offers different Engineering programs. The findings revealed that majority of the students were affected by depression which influences their behaviour, personality and academic skills but they are not aware of it. In Karachi many students become isolate in their environment due to low socioeconomic background.

Keywords: Depression, Mental Disorder, Youth, Existence, Awareness, Social Context.

تلخیص

یاسیت ایک عام اور سنگین طبی اور ذہنی بیماری ہے جو انسان کے خیالات، رویے، احساسات اور جذبات کو منفی طور پر متاثر کرتی ہے۔ جو قابل علاج بیماری ہے۔ یاسیت اداسی اور غم کی کیفیت سے بالکل مختلف ہے۔ جب انسان اکثر غیر ضروری چیزوں پر افسردہ اور غم کرتا ہے جس کا مطلب ہے کہ انسان یاسیت میں ہوتا ہے۔ اس مطالعے کا بنیادی مقصد نوجوانوں میں خاص طور پر سماجی اور اقتصادی وجوہات، ان کے سماجی تعلقات کی نوعیت، یاسیت کے بارے میں ان لوگوں کے رویے، انکا نظریہ اور شعور کی سطح کو دیکھنا ہے۔ موجودہ مطالعے کا کائنات سرسید یونیورسٹی آف انجینئرنگ اینڈ ٹیکنالوجی (ایس ایس یو ای ٹی) تھا۔ اس نمونے کو سادہ بے ترتیب نمونہ بندی کے ذریعے منتخب کیا گیا جس میں 155 طلباء جن کی عمر 18 سے 33 سال تھی۔ 144 سوالات پر مشتمل ایک سوالنامہ کے ذریعے معطیات جمع کیے گئے۔ ایس ایس یو ای ٹی کراچی میں واقع ایک نجی یونیورسٹی ہے جو مختلف انجینئرنگ پروگرام کراتی ہے۔ نتائج سے ظاہر ہوا ہے کہ زیادہ تر طلباء پریشن کا شکار تھے جو ان کے طرز عمل، شخصیت اور تعلیمی مہارت کو متاثر کرتے ہیں

لیکن وہ اس سے واقف نہیں ہیں۔ کراچی میں سماجی و اقتصادی پس منظر کی وجہ سے بہت سارے طلباء اپنے ماحول میں الگ تھلک ہو جاتے ہیں۔

کلیدی الفاظ: یاسیت، ذہنی امراض، نوجوان، وجود، آگاہی، سماجی پس منظر

Introduction

According to American Psychiatric Association (2000). Diagnostic and statistical manual of mental disorders: DSM-IV-TR Depression present with depressed mood, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite trends, low energy, poor concentration and suicide, which can be seen in any person complained of a common mental disorder in any of age, gender, race, or socioeconomic status.

The World Health Organization (WHO) says depression is often caused by a combination of physical, psychological, social and economical issues. The presence of family depression history, poor diet, unemployment, economical and marital problems, having a high long lasting physical illness, use of drugs, and rapid change in life like marriage, divorced, loss of job etc., parenting behavior with child (TVI, 2017).

Thyer & Wodarski (2007) stated that social work is not only the profession of welfare but also a profession reduces the harmful effects of mental illness. The worker work with these people to prevent mental illnesses and provide them a healthier and happy life.

According to World Health Organization (WHO) report that in Pakistan depression increased more than 18% between 2005 to 2006 and it affects more than 300 million people globally. In 2015, around 4.4% (322 million) people had suffered with depression and latest WHO report stated that women 5.1% are more affected than men that is 3.6%.

Bukhari & Khanam in (2015) conducted a studied that the existences of depression in university students may be due to various reasons like academic high grades pressure, financial and personal stresses. Luni & Ansari et al., (2009), studied that Pakistan is a developing country and it suffers a high rate of depression and its main causes are unemployment, insecurity, gender discrimination an economical issue.

A. A. Gadit (Department of Psychiatry, Hamdard University Hospital, Karachi) highlight the economic burden of depression in Pakistan. He said the depression, bipolar disorder, schizophrenia, epilepsy, alcohol and drug use disorders, Alzheimer's and other dementia; post-traumatic stress disorder, obsessive compulsive disorder, panic disorder and primary insomnia are the mental and

behavioral disorders in which approximately 450 million people are affected. Mental illnesses effect on about 12% globally and these influences on individual's life and families as well. The individuals cannot focus on their jobs, their families, unable to fulfill their responsibilities and faces upsetting problems at last result of discrimination. In this scenario family's needs physical, emotional, economical support and tolerate mental illness as stigma.

Dr. Ayesha Mian, Chairperson of Department of Psychiatry at the Agha Khan Hospital (AKH) said that 10% to 20% population of Pakistan is suffering from common mental illnesses. Her observation that these people look different in society, they are violent, don't get treatments so never get healthier ever (The Newspapers Staff Reporter, 2016).

In (2007), the researchers Husain, et al., stated that social hardships are the main reason of higher prevalence of depression in Pakistan. Some researchers Castaldelli-Maia et al., (2012) stated that the youngsters have not gotten help for mental health problems and cannot discuss their issues as well. The researchers Guney et al., (2010) studied at university students in Ankara and found that the life satisfaction was significantly and negatively correlated with anxiety and depression. The high rate required to awareness and work for mental health issues because conducted a research in different localities of Pakistan, and showed anxiety and depression prevalence rate from 22% to as high as 60% in a given population (Ahmed et al., 2016).

Dr. Fikri, WHO Regional Director for the Eastern Mediterranean said that depression is a treatable disorder in which different therapies and antidepressant medication are provided. Families and communities provide a social support to patients and patients talk others about their feeling regarding illness and Government should improve the mental health services as well. In Pakistan only four major psychiatrist hospitals are available for the whole nation. There are just 750 trained psychiatrists; it means one psychiatrist for 10,000 patients. This shocking condition in Pakistan gets an instant solution for mental health problems (TVI, 2017).

Ganatra, in (2008) stated that there is no proper government policy on mental problems which causes increasing rate of depression. However, in Pakistan, there are number of NGO's working in the field of mental health. It is very important to work for a health sector because majority of youth are affected with mental illnesses, the youth is a backbone of our nation and it's our responsibility to cure them. Government should notice and provide budget and facilities for health sector. (Anwar, H. 2016).

Review of Literature

Depression is so prevalent that it has been referred as the "common cold" of mental illness (Turnbull, 1991). Depression has been a social problem throughout history

of this world it can even be observed in Bible. The biblical tale of King Saul, and Homer's suicidal character of Ajax depict examples of major depressive disorders (Kaplan & Sadock, 1998). When the individual is young, he or she faces many changes in their life, such as emotional, behaviour, sexual, economic, educational, and social and it results effect their personality (Ginwright & James, 2002).

Depression effects student life and the academic performance. Student's experienced academic problems among with low grades are the most common one because they have symptoms of depression (Wechsler, et al., 2000). It's not just in our community (Karachi) but it is a global problem and a significant contributor to the global burden of disease and affects all communities across the world. According to the survey of World Mental Health which was conducted in 17 countries about 1 in 20 people reported having an episode of depression in the last year. Depressive disorders often start at a young age. A recent World Health Assembly called on the World Health Organization and its member states to take action in this direction (Marcus, M. et al., 2012).

The purpose of this present study was to discern the students are mindful of depression and they are persisting from depression as well as how to stipulation with this illness. Death, freedom, isolation and emptiness are the four obstacles. Death is an imminent incidence. Freedom, in a factual sense, refers to the absence of external structure. Isolation we recognize that no matter how close they are to any other person, always there is a difference, and we are alone in spite of it. And the emptiness is part of all above three. Emptiness is there is no chance to cope previous mistakes and things (Yalom, 1980).

There are many potential service users which do not in fact come into contact with services, thus developing self-help skills is also important. It may include seeking out family support, developing hobbies and other fun activities, therefore developing life-coping skills (Goldberg & Huxley, 1992).

A study was conducted to show a relationship between loneliness, personality and mental health problems of university students in Malaysia. According to that research positive relation was found between loneliness and mental health problems and 34.4% of students suffer with mental health problems (Nordin, Talib & Yaacob, 2009).

It varies from person to person, but there are some common signs and symptoms. It is important to remember that these symptoms may be part of normal life. It disturbs daily activities, appetite or weight changes, sleep changes, anger or irritability, energy, self-loathing, reckless behaviour, concentration problems, loss, unexplained pain and loss of feeling in pain included. Depression is a major factor of suicide. Deep despair and hopelessness can make yourself the pain that goes along with depression feel like the only way. Depression often looks different among gender and age wise. Their

sign and symptoms are totally different with each other. Depression comes in many shapes and forms. Different types of depression have unique symptoms, causes, and effects. The types are major depression, dysthymia (recurrent, mild depression) and bipolar depression. A researcher works for presence of depression in which students and the respondents do not aware themselves. In most cases depression has a mean duration of 23 to 30 weeks (Ustun & Kessler, 2002).

Son and Kirchner (2006) said that there are different recovery times for different depression types like dysthymic disorder average duration is 3 years while 9 months for depressive episodes. In the social context, the individual's social environment is concerned with the forms of their experience of mental illness in the social work.

Social work concerns with the individual's personality, psychological aspects, interpersonal aspects and social issues like; family functioning, ethnicity, ego functioning, self-esteem and employment. Social workers are focusing on the results of today's social context and mental disorder, but their practice is based on a shared understanding with bio-psychosocial dimensions of mental health (Alston & McKinnon, 2004).

It is known that depression can spurt in many families. That it has a partial genetic link to it. People like children, siblings, and parents with severe depression are somewhat more likely to suffer from depression than are members of the general population so we can call it hereditary. More ways to interact with a particular gene that may contribute to the different types of depression run in families. In some people, depression can lead to drug abuse. For example, such as Barbiturates, Benzodiazepines and Acne Drug Accutane have been linked in particular to older people, with sometimes depression. Similarly, use of Corticosteroids, Opioids and Ant cholinergic drugs is a highly motivated and enthusiastic state of the disorder that can be associated with bipolar disorder, sometimes even to relieve stomach cramping (Ustun & Kessler, 2002).

A social worker, counselor or a person dealing the patient of depression must help clients to understand the social context of their depression so that they can trust their dealer and believe in achieving something in lives. Thus, this is an obligation of Social workers to help clients to make the important connection between their personal conditions and social phenomenon as a means of social change (Bender, 2003).

According to Dr. Iqbal Afridi, the President of Pakistan Psychiatric Society and the Head of Department of Psychiatry at Jinnah Post Medical Complex said that Depression is a globally disease, one of three are suffering from mental health problems in Pakistan and affects people life for all age groups and also gender wise. It is a second leading suicide death reason among the age group of 15 to 29 years. And this age group is more affected than adults (TVI, 2017).

Study Objectives

- To find out the socio-economic status of youth.
- To assess the level of social adjustment of the students.
- To identify the level of awareness regarding depression.
- To find out the causes of increasing rate of depression among youth students.
- To identify student's attitudes toward their academic life.

Hypotheses

- Those students are aware of depression have precise clue to save their lives.
- Due to depression, students have a personality issues.

Methodology

The present research applied a descriptive and cross sectional approaches, the data was collected from students of Sir Syed University of Engineering and Technology (SSUET), Karachi. The secondary data was taken in through the two ways, one was website searching: different books, research, journals, reports, and required information were collected from the internet and another was picked up through physical presence in the library and associated agencies. After completing the tabulation in a simple statistical method, the researcher used chi-square to test the hypotheses and final association between the independent and dependent variables, data were cross tabulated by making contingency tables in which data were classified into the variables (that is dependent and independent). The researcher adopted simple random sampling method, a technique of probability sampling. The sample was comprised of 155 students (92 males, 63 females) with the age range of 18-33 years. A questionnaire that covered the socio-demographic, personal and educational and depression related factors were formulated in English to serve as research instrument for this study. The total number of questions was 44, which based on personal, family and research profile. These questions were focused to, find out the condition, behavior and symptoms related to depression like loneliness, failure, suicide, feeling guilty, disturb sleep, satisfaction, spending time, etc. It is necessary to test the reliability and smoothness of the questionnaire, pre-testing was conducted before going for actual data collection. In the light of pretesting the research questionnaire was finalized.

Results

Results were analyzed through SPSS method. Among 155 participants, mostly students said that the majority of student's personality does not influence by the depression, and the social impact of Depression was not the good sign for those students who are aware of mental illness. According to the findings, the students agreed about being sad, depressed and unhappy (Partially, 44.5%), (Not at all,

37.4%). (82.5%) participants respond that they are satisfied and happy with their life while (17.4%) are not satisfied and unhappy. (46.4%) of students work slowly due to low mood, personal and academic problems while (36%) respondents said they have insomnia due to work load and pressure. Regarding awareness the findings showed that (52.9%) participants are unaware while (47%) are aware of it.

Findings and Discussion

In developing countries patients of anxiety and depression are around 10%-14%, depression have high prevalence rate among University students (Khan, et al., 2007; Muhammad Gadit & Mugford, 2007). Depression in university students is very common disease and well-known problem (Abedini, et al., 2007; Frotani, 2005). Emotionally and intellectually, initial stage of education were less challenging as compare to university stage (Rodgers & Tennison, 2009).

Table – 1
Respondent age and programs of study

Study program	Age					Total
	18-21	22-25	26-29	30-33	Above 33	
BS	110	10	-	-	-	120
BE	16	17	-	-	-	33
MS	-	1	-	-	-	1
MPhil/PhD	-	-	-	1	-	1
Total	126	28	-	1	-	155

The aim of the research is to find out, does the socio-economic and financial status of individuals can affect on the level of depression of a person possesses? by present research as shown in Table: 1, the findings showed that the socio-economic status of youth plays important role in their behaviour. Most of the university students do part time jobs to pay their tuition fee. Due to low social-economical background, they suffer from depression and other problems as well. In another study students have experienced psychological issues like stress, anxiety, symptoms of depression, eating problems and which produces harmful impacts and affect their academic performance also (Cooley, et al., 2007; Tosevski, et al., 2010). Over the past decade, university and college counselling centers reported more severe psychological problems and needs of students seeking counseling services of various kinds (Gallagher, et al., 2000; Pledge, et al., 1998; O'Malley, et al., 1990; Robbins, et al., 1985; Stone & Archer, 1990). The work of a social worker become difficult to cure the depression patients due to denial and rejection of symptoms by patients because of their independent attitude and doing their job to alleviate poverty (Thyer & Woody, 2007). According to present research it can be considered that counseling plays a vital role to know about the survival of depressions in youth so there should be counseling of students in every level so that an individual may know about his/her

mental illness. The student should take part in extracurricular and social activities to increase level of social adjustment and to repress the depression,

Pakistani medical universities pay less attention towards mental health problems. The research findings recommend that 39% of the students said the signs of low mood, anxiety among 36%, and depression among 25%, along with social, personal and academic difficulties (Zaman, 1996). The main focus of this research to know main causes of depression among youth; some symptoms as we can see in Table: 2. By this study through different data collecting tool, we observed different causes of depression among youth for example generation gaps, breakups of spouse, extraordinary burden of studies, financial problems especially for those who are earning by part time jobs to pay for their education etc.

Table - 2
Symptoms found in Respondents are as follows

Symptoms	Not at All (Percentage)	Partially (Percentage)	A Lot (Percentage)	Total (Percentage)
Feeling sad, depressed and unhappy	58 (37.4%)	69 (44.5%)	28 (18%)	155 (100%)
Work slowly	15 (9.6%)	72 (46.4%)	68 (43.8%)	155 (100%)
Future hopeless	115 (74%)	24 (16%)	16 (10%)	155 (100%)
Hard to make decisions	69 (44.5%)	62 (40%)	24 (15.4%)	155 (100%)
Feel restless	67 (43.2%)	63 (40.6%)	25 (16.1%)	155 (100%)
Feel tired	52 (34%)	66 (42%)	37 (24%)	155 (100%)
Feel like a failure	104 (67%)	29 (19%)	22 (14%)	155 (100%)
disturb sleeping	70 (45%)	55 (36%)	30 (19%)	155 (100%)
	Yes	No		
Aware regarding mental illness	73 (47%)	82 (52.9%)		155 (100%)
Satisfy with their life	128 (82.5%)	27 (17.4%)		155 (100%)
Problem which disturbs student mind	87 (56.1%)	68 (43.8%)		155 (100%)
Aware social impact of depression	42 (27%)	113 (73%)		155 (100%)
Depression affect the personality	85 (55%)	70 (45%)		155 (100%)

According to Table: 2, that unfortunate fact is that many students who suffer from depression are not even aware of the problem. Many students who are under depression may feel lost or awkward. That means that the key to preventing depression lies in awareness of depression. If students are unaware that they are depressed, they are unable to get the aid that they need to overcome it. However, not only students should be aware, as teachers, faculty, and parents should also take part in spreading depression awareness. In present research, we have observed that the majority of our sample is unaware about their mental illnesses. World Health Organization initiate that, as a disease the burden of major depression was second in industrialized countries (Murray & Lopez, 1995). As we can see in Table: 2, (52.9%) of our sample had not identified that they are the patient of mental illness although many symptoms have found within themselves. A research was conducted in university students and they said that in Pakistan there is a lack of systematic research to assess the magnitude and burden of mental health problems. And in fact, university student suffers from serious mental health problems that may affect their normal functioning (Saleem, et al., 2013). In present research, researcher has observed that students who are having mental illness and depression are having a strong negative impact on their studies. As we can see in above Table; the (43.8%) students said that they work slowly due to mood disorder and their mental illness effects on their studies.

According to another research study the rate of mental problems was existing more in female as compared to male participants of the university population. The results of the study are consistent with previous studies. In addition, male participants were more significantly short of self-regulation (Eisenberg, et al., 2007). Social workers can play an important role at different levels like an individual, group and community, thus; if we focus the social worker's role for young people, they work for those who feel insecure their lives because of different traumas, discrimination, unemployment, disability etc. In this scenario young individual's need strong relationship and bonding with their families for reconnection. It is an opportunity for us to make a happy life due to build-up a strong family relationship. It is a very important thing to notice that the social worker's workings with a person, not an illness, though with some different therapies (Alston & McKinnon, 2004). A review of social work research efforts, to establish the relationship between environmental exploitation and human life (Hoof & Polack, 1993).

In Table # 3, variables denotes as m1 and m2 which used in hypothesis "those students are aware of depression have precise clue to save their lives".

In Table # 4, variables denotes as m1 and m2 which used in hypothesis "due to depression , students have a personality issues".

Table – 3
Hypothesis 1 testing with SPSS

m1= precise clue to save lives.

m2= students aware regarding depression.

m1 * m2 Cross tabulation					
		m2			Total
		Yes	No		
m1	Yes	Count	13	29	42
		Expected Count	19.8	22.2	42.0
	No	Count	60	53	113
		Expected Count	53.2	59.8	113.0
Total		Count	73	82	155
		Expected Count	73.0	82.0	155.0

Chi-Square Tests

	Value	Df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	6.027 ^a	1	.014		
Continuity Correction ^b	5.171	1	.023		
Likelihood Ratio	6.163	1	.013		
Fisher's Exact Test				.018	.011
Linear-by-Linear Association	5.988	1	.014		
N of Valid Cases ^b	155				
a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 19.78.					
b. Computed only for a 2x2 table					

Table – 4
Hypothesis 2 testing with SPSS

m1=effect of depression

m2=affect student's personality

m1 * m2 cross tabulation

			m2		Total
			Yes	No	
m1	Yes	Count	70	22	92
		Expected Count	50.5	41.5	92.0
	No	Count	15	48	63
		Expected Count	34.5	28.5	63.0
Total		Count	85	70	155
		Expected Count	85.0	70.0	155.0

Chi-Square Tests

	Value	Df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	41.264 ^a	1	.000		
Continuity Correction ^b	39.180	1	.000		
Likelihood Ratio	43.050	1	.000		
Fisher's Exact Test				.000	.000
Linear-by-Linear Association	40.998	1	.000		
N of Valid Cases ^b	155				
a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 28.45.					
b. Computed only for a 2x2 table					

Conclusions

The students get experience, many pressures and challenges in the university life and as a result; they may experience mental health problems (Bayram & Bilgel, 2008; Grayson, 1989). Mood disorders in youth of Karachi have been the important topic to study for many years. The research covered the existence and awareness of depression among the university students. It has been proved that symptoms of mental illness and depression are present in the majority of students, but they are not aware of it. As a social scientist, I have conducted this research. We work for adjustment and discipline in society for the betterment of life and

lifestyle of an individual's. Social workers have an important role in society regarding awareness, guidance, and motivation towards better brighter future. Further research is needed for development of appropriate techniques, intervention tools to overcome the occurrence of depression among university students.

Recommendations

1. Depression is a worldwide disease and it unknown in people, so it is important to aware the worth in society at initial level like, school, college, university through conduct different seminar.
2. Students are stressful, depressed, moody and aggressive because of extra burden of studies so, university should be noticed and motivate students through curricular activities and games.
3. There should be a counselor to assist and resolve student's issues.
4. Government should conduct awareness programs for parent child bonding, to build up children personality because researcher have found that there is lack of bonding between them.
5. There is one more thing in which students become mental retarded due to higher fees as majority students have low financial status.

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