

Assessment of factors causing depression among academic staff of tertiary institutions in South-West Nigeria

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ABSTRACT: Studies have revealed that depression is the current major reason for disability and projected to probably become the second major menace responsible for death globally in the nearest few years. Hence, certain factors causing depression among academic staff of tertiary institutions in South-West region of Nigeria are considered for assessment in this study. The research team developed and administered a structured questionnaire with 232 responses. Factors examined include Personal/Relational Factor (*feeling of loneliness, mental health challenge and family crisis*) and Professional/Job Factor (*job nature, job workload and wrong job placement*). Employing Chi-square test of independence in the study, results revealed that monthly income of academic staff is the most significant towards their respective factors with 0.001, 0.000, 0.020 and 0.036. Also, it is shown that the longer academic staff have stayed in service, the more they are likely going to face crisis or challenges in their different families as family crisis or challenge of academic staff is influenced by the number of years that they have spent in service with significant value of 0.001. Furthermore, it is discovered from the study that marital status is insignificant to family crisis or challenge at 0.067. Eventually, the study reveals that the most prevalent factor of depression is *Wrong Job Placement* as almost all the socio-economic characteristics (age, educational level, years in service and monthly income) are respectively significant with 0.009, 0.007, 0.043 and 0.036 on feeling of being wrongly placed in the current job of these academic staff.

Keywords: Depression, socio-economic characteristics, academic staff, factors, Chi-Square

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INTRODUCTION

Across the world, it is maintained that depression affects not less than 350 million people (World Health Organization WHO 2017). As noted by the World Mental Health Survey, about 1 in 20 people averagely have at least an incidence of depression in the previous year, when a study was carried out in 17 countries (World Health Organization WHO 2017). Despite the fact that identified rates of depression are more in countries with high income, above 8 out of 10 of these people are residents of countries with low income and are mostly found in Sub-Saharan Africa. Thus, people from countries with high income are more likely to be diagnosed with depression (World Health Organization WHO 2017). Reasonably, global disabilities are traceable to depression because people's ability to function well is

reduced at a tender age and this occurs frequently (World Health Organization WHO 2017). Providing solution to depression is therefore a rising requirement globally. Recently, the World Health Assembly placed a serious call on the World Health Organizations and its entities to act fast and proffer solution to this menace (WHO, 2012). At any point in time, 4% to 10% of humans across the globe including children experience depression, and this is a threat to their lives, profession and study (Gudmundsen et al., 2019). Depression occurs when people are disinterested in things and experiences of life because of change or swing in their mood, emotions, behaviours, etc. (National Collaborating Centre for Mental Health, 2010). It is therefore an issue that raises concerns in different societies. This is because from 2005

to 2015, it was researched and discovered that the percentage of people who live with depression increased by 18% (World Health Organization WHO 2017). It is also projected that depression will be the major factor responsible for disease burden (Mathers and Loncar, 2006). Study has shown that greater percentage of disease burden in the United Kingdom is due to depression as compared to the other diseases like cancer and heart disease (Ferrari et al., 2013). Though depression has negative effect on one's life, its exact cause is not yet known (Center for Disease Control and Prevention CDC, 2016). Low output/productivity in the society is majorly caused by depression (Olesen et al., 2012) and it is tragic to note that depression negatively influences nearly one out of every five people to end his or her life by suicide.

Studies have also revealed that depression is the current major reason for disability and projected to probably become the second major menace responsible for death globally in the nearest few years (World Health Organization WHO, 2018). Similarly, several researches have revealed that there is a difference in the predominance of depression from males to females (Galambos et al., 2004). A major explanation for this is said to be a hormonal difference carried out by most studies. Women experience more hormonal unsteadiness which is most likely due to symptoms of depression. Hypothyroidism is another disease that is associated with depression that women are also more likely to suffer from (American Institute of Stress, 2016). Two major disorders that are most common types of mental disorders are depression and anxiety comorbidity. Many people suffering from anxiety also experience depression, and vice-versa. Furthermore, these two disorders (anxiety and depression) have been found to be generally more predominant among college students than other people (American College Health Association 2013; Beiter et al., 2014; Holliday et al., 2016). It was noted by (American Psychological Association, 2008) that the predominance of depression may differ due to sexual orientation (Kerr, 2016) reports that LGBT (lesbian, gay, bisexual, transgender) have more depression cases when compared to heterosexuals. Higher risks of mental health problems become the resultant effect of the bullying, harassment and teasing treatments received by the LGBT group (Center for Disease Control and Prevention, 2014). As a result of this, their output at home, work and school will be poor and discouraging, and they can even commit suicide because of this (WHO, 2016)]. Depression also poses a major risk on people's socioeconomic life according to (Jokela and Keltikangas-Järvinen, 2011). Other risks that are associated with mental disorder are poverty, unemployment and inability to provide shelter (Hudson, 2005). Depression can also be caused by lower socioeconomic status of people (Eaton et al., 2001; Jokela and Keltikangas-Järvinen, 2011).

The most commonly reported conditions among the mental health conditions were burnout and stress. Survey data also shows that most university staff reported that their jobs were stressful due to the experience of burnout obviously higher among them than the general working population. Healthcare workers are other high risk group people with similar health condition like the tertiary institution workers (Guthrie et al., 2018). It was found out in Malaysia that stress prevalence ranges between 5.5% and 25.9% among workers in higher institutions of learning (Tai et al., 2019). Also, in Malaysia, a study was conducted on factors that contribute to depression among in an academic institution where questionnaires were employed to assess depression's presence in relation to factors on their socio-demographic, personal and job lives (Razali, et al., 2019). Contributing factors of depression were later found out, in this study, to be inadequate facilities for work, low-level job categories, working in urban campuses, and low income of staffs.

Examining depression, anxiety and stress based on the DASS-42 Models among 200 randomly selected Polytechnic staff in Nigeria, (Adetunji and Ademuyiwa, 2019) discovered that junior administrative staffs experience more depression, stress and anxiety than academic staffs and senior administrative staffs; senior administrative staffs have the least stress and anxiety while academic staffs experience the least depression. Also, the depression and anxiety levels of staffs in the various groups are significantly different but there is no significant difference in the disparities observed in their stress level. Rakhmanov et al., (2020) worked on the levels of anxiety and depression among staffs of a Nigerian Private University during the outbreak of COVID-19 pandemic. The study involved 69 staffs consisting of 49men and 20 women. Levels of anxiety and depression were found to be higher in women than in men. Also, lower depression and anxiety were found among academic staffs than the unemployed relatives of both academic and non-academic staffs.

However, this study aims at assessing factors causing depression among academic staff of tertiary institutions in the South-West region of Nigeria. Specific objectives are to:

- (a) examine the different depression factors in the six states within the region;
- (b) assess the socio-economic effects of depression factors on the academic staff within the region;
- (c) determine the significance of each of the socio-economic characteristics to the depression factors within the geographical region;
- (d) identify the most prevalent factor of depression.

METHODOLOGY

The study areas included tertiary institutions from Ekiti, Lagos, Ogun, Ondo, Osun, and Oyo states within the

South-West geographical regions of Nigeria and these consisted of some Universities, Polytechnics, and Colleges of Education or Monotechnics. Data collection was conducted among academic staff within the various tertiary institutions through administration of online survey (questionnaires). The questionnaire was divided into three major parts which included the Socio-economic Characteristics of Respondents (gender, age, marital status, educational level, years in service, monthly income), Personal or Relational Factors, and Professional or Job Factors, with three (3) major factors being assessed under each of them.

SPSS (version 23) and Microsoft Excel were used to code the questionnaires recovered for data cleaning, exploration and analysis. Appropriate descriptive statistics were used to present the data and examine the different factors responsible for depression among academic staff from the different states being considered. Confirmatory test of hypothesis was also carried out through Chi-Square analysis (Chi-Square test of independence).

Chi-square Test

Chi-square test is the most important contribution of Pearson to the modern theory of Statistics. Chi-square test is also known as test for goodness of fit and test of independence. Pearson invented the Chi-square mainly to cater for the needs of biologists, economists and psychologists. Chi-square test is a non-parametric test that is used for two specific purposes. The first is to test the hypothesis of no association between two or more groups or populations; that is, to check independence between two variables. Secondly, it is used to test how likely the observed distribution of data fits with the expected distribution (i.e., to carry out test of goodness of fit) (Rana and Singhal, 2015). It is used to analyze categorical data; for example, male or female patients, smokers and non-smokers, etc. The general formula used to calculate the chi-square (χ^2) test statistic is given as:

$$\chi^2_{\text{calculated}} = \sum_{i=1}^r \sum_{j=1}^c \frac{(O_{ij} - E_{ij})^2}{E_{ij}} \sim \chi^2_{\text{tabulated}} = t_{\alpha, (r-1)(c-1)}$$

where O_{ij} = observed count in category;

E_{ij} = expected count in the category under the null hypothesis;

r, c = number of rows and columns in the contingency table;

$(r - 1)(c - 1)$ = Degree of freedom

RESULTS AND DISCUSSION

Responses totaling 232 were obtained from the six

different states of the South-West region of Nigeria, with 51 (22%) being the highest response from both Ekiti and Ondo States and 11 (4.7%) being the lowest response from Oyo State. Other states' distribution is Lagos, 32 (13.8%); Ogun, 48 (20.7%) and Osun, 39 (16.8%).

Personal/relational factors

Examining the effects of socio-economic factors on respondents' feeling of sadness or loneliness, (Table 1) shows that responses from one of the characteristics (marital status) is significant to feeling of loneliness or sadness among the respondents with p-value being 0.000. This stipulates that the feeling of loneliness or sadness in life, as a depression factor, is affected by marriage. This is similar to (Wu et al., 2023) where poor interpersonal relationships, an unfulfilling life, general uncomfortable symptoms and others were factors that associated with a higher risk of having depression. Also, it is noted here that the feeling of loneliness or sadness is prevalent among the married people than marital status groups, as above 30.0% responded that they either often or sometimes have this feeling. All other characteristics are not significant towards the feeling of loneliness or sadness.

Table 2 reveals that gender and marital status are significant characteristics on respondents who have previously or recently had mental health challenge both with Chi-square p-value of 0.001. A closer look at the result reveals that more females (20.8%) affirmed that they have had this challenge while only 5.6% of the males made this affirmation, 79.2% and 90.0% respectively have responded not to have had any mental challenge prior to the conduction of this research. This is also in line with the discovery of (American Institute of Stress, 2016; Guthrie, et al., 2018; Rakhmanov et al., 2020). No female (0.0%) was neutral about this response but 4.4% among the males preferred not to disclose this status. From the result in this (Table 2), more of married people maintained "Yes" to this question or "Prefer not to say" (which may mean compliance) when compared to other factors. However, "Age, Educational Level, Years in Service and Monthly Income" are not significant characteristics on mental health challenge.

Results from (Table 3) reveals that "Years in Service" and "Monthly Income" (as supported also by Razali et al., (2019) are characteristics associated with respondents' family crisis or challenge. When compared to other factors, academic staffs (30.4%) who have spent above 20 years in service responded "Yes" while 17.9% who have spent between 1 and 5 years responded "Yes". This suggests that the longer academic staff have stayed in service, the more they are likely going to face crisis or challenges in their different families which is in contrast to the finding of (Obi and Okobia, 2021) and this means that the solution to depression among academic staff is not necessarily staying longer in service. It is, however, stunning to discover that marital status is not a significant

Table 1: Association between socio-economic factors and feeling of loneliness or sadness.

Characteristics	How often do you feel sad or lonely about life?					Chi-Square p-value ($\alpha = 0.05$)
	Always	Often	Sometimes	Rarely	No Response	
Gender						0.409
Male	1 (1.4%)	3 (4.2%)	17 (23.6%)	20 (27.7%)	31 (43.1%)	
Female	0(0.0%)	3(1.8%)	41(25.6%)	38 (23.8%)	78 (48.8%)	
Age						0.141
21-30	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	3 (100.0%)	
31-40	0 (0.0%)	1 (1.6%)	16 (25.0%)	19 (29.7%)	28 (43.7%)	
41-50	0 (0.0%)	2 (2.6%)	24 (31.6%)	19 (25.0%)	31 (40.8%)	
51-60	0 (0.0%)	2 (3.0%)	13 (19.1%)	13 (19.1%)	40 (58.8%)	
61-70	1 (4.8%)	1 (4.8%)	5 (23.8%)	7 (33.3%)	7 (33.3%)	
Marital Status						0.000
Single	0 (0.0%)	1 (5.9%)	3 (17.6%)	6 (35.3%)	7 (41.2%)	
Married	0 (0.0%)	4 (1.9%)	53 (26.1%)	47 (23.2%)	99 (48.8%)	
Divorced/Separated	0 (0.0%)	0 (0.0%)	0 (0.0%)	4 (100%)	0 (0.0%)	
Widowed	1 (12.5%)	1 (12.5%)	2 (25.0%)	1 (12.5%)	3 (37.5%)	
Educational Level						0.846
Bachelor/HND	0 (0.0%)	0 (0.0%)	6 (35.3%)	5 (29.4%)	6 (35.3%)	
Master	0 (0.0%)	2 (1.9%)	24 (23.3%)	28 (27.2)	49 (47.6%)	
Ph.D.	1 (0.9%)	4 (3.6%)	28 (25.0%)	25 (22.3%)	54 (48.2%)	
Years in Service						0.877
1-5	0 (0.0%)	1 (2.5%)	9 (23.1%)	11 (28.2%)	18 (46.2%)	
6-10	0 (0.0%)	0 (0.0%)	12 (24.5%)	14 (28.6%)	23 (46.9%)	
11-15	0 (0.0%)	2 (4.4%)	14 (31.1%)	8 (17.8%)	21 (46.7%)	
16-20	1 (2.3%)	2 (4.6%)	11 (25.6%)	10 (23.3%)	19 (44.2%)	
Above 20	0 (0.0%)	1 (1.8%)	12 (21.4%)	15 (26.8%)	28 (50.0%)	
Monthly Income						0.405
Below ₦100,000	0 (0.0%)	1 (10.0%)	1 (10.0%)	3 (30.0%)	5 (50.0%)	
₦100,000 - ₦150,000	0 (0.0%)	0 (0.0%)	10 (23.3%)	12 (27.9%)	21 (48.8%)	
₦150,000 - ₦200,000	0 (0.0%)	0 (0.0%)	18 (30.5%)	18 (30.5%)	23 (39.0%)	
₦200,000 - ₦250,000	0 (0.0%)	2 (5.0%)	14 (35.0%)	5 (12.5%)	19 (47.5%)	
₦250,000 - ₦300,000	0 (0.0%)	1 (4.0%)	2 (8.0%)	7 (28.0%)	15 (60.0%)	
Above ₦300,000	1 (1.8%)	2 (3.6%)	13 (23.6%)	13 (23.6%)	26 (47.3%)	

Source: 2023 Depression Factors Survey

Table 2: Association between socio-economic characteristics and mental health challenge.

Characteristics	Have you previously or recently had any challenge with your mental health?			Chi-Square p-value ($\alpha = 0.05$)
	No	Prefer not to say	Yes	
Gender				0.001
Male	144 (90.0%)	7 (4.4%)	9 (5.6%)	
Female	57 (79.2%)	0 (0.0%)	15 (20.8%)	
Age				0.848
21-30	3 (100.0%)	0 (0.0%)	0 (0.0%)	
31-40	53 (82.8%)	3 (4.7%)	8 (12.5%)	
41-50	64 (84.2%)	3 (3.9%)	9 (11.9%)	
51-60	61 (89.7%)	1 (1.5%)	6 (8.8%)	
61-70	20 (95.2%)	0 (0.0%)	1 (4.8%)	
Marital Status				0.001
Single	15 (88.2%)	0 (0.0%)	2 (11.8%)	
Married	179 (88.2%)	7 (3.4%)	17 (8.4%)	
Divorced/Separated	1 (25.0%)	0 (0.0%)	3 (75.0%)	
Widowed	6 (75.0%)	0 (0.0%)	2 (25.0%)	
Educational Level				0.179
Bachelor/HND	14 (82.3%)	2 (11.8%)	1 (5.9%)	
Master	91 (88.3%)	1 (1.0%)	11 (10.7%)	
Ph.D.	96 (85.7%)	4(3.6%)	12 (10.7%)	

Table 2 Contd.

Years in Service				0.520
1-5	35 (89.7%)	1 (2.6%)	3 (7.7%)	
6-10	40 (81.6%)	3 (6.1%)	6 (12.3%)	
11-15	41 (91.1%)	1 (2.2%)	3 (6.7%)	
16-20	34 (79.1%)	1 (2.3%)	8 (18.6%)	
Above 20	51 (91.1%)	1 (1.8%)	4 (7.1%)	
Monthly Income				0.248
Below ₦100,000	8 (80.0%)	1 (10.0%)	1 (10.0%)	
₦100,000 - ₦150,000	37 (86.0%)	2 (4.7%)	4 (9.3%)	
₦150,000 - ₦200,000	52 (88.1%)	2 (3.4%)	5 (8.5%)	
₦200,000 - ₦250,000	30 (75.0%)	1 (2.5%)	9 (22.5%)	
₦250,000 - ₦300,000	22 (88.0%)	0 (0.0%)	3 (12.0%)	
Above ₦300,000	52 (94.6%)	1 (1.8%)	2 (3.6%)	

Source: 2023 Depression Factors Survey

Table 3: Association between socio-economic characteristics and family crisis or challenge.

Characteristics	Do you have any family crisis or challenge you are facing currently?			Chi-Square p-value ($\alpha= 0.05$)
	No	Prefer not to say	Yes	
Gender				0.175
Male	114 (71.3%)	14 (8.7%)	32 (20.0%)	
Female	51 (70.8%)	2 (2.8%)	19 (26.4%)	
Age				0.194
21-30	3 (100.0%)	0 (0.0%)	0 (0.0%)	
31-40	50 (78.1%)	2 (3.1%)	12 (18.8%)	
41-50	57 (75.0%)	4 (5.3%)	15 (19.7%)	
51-60	45 (66.2%)	7 (10.3%)	16 (23.5%)	
61-70	10 (47.6%)	3 (14.3%)	8 (38.1%)	
Marital Status				0.067
Single	12 (70.6%)	1 (5.9%)	4 (23.5%)	
Married	148 (72.9%)	14 (6.9%)	41 (20.2%)	
Divorced/Separated	0 (0.0%)	1 (25.0%)	3 (75.0%)	
Widowed	5 (62.5%)	0 (0.0%)	3 (37.5%)	
Educational Level				0.328
Bachelor/HND	11 (64.7%)	0 (0.0%)	6 (35.3%)	
Master	78 (75.7%)	6 (5.8%)	19 (18.5%)	
Ph.D.	76 (67.9%)	10 (8.9%)	26 (23.2%)	
Years in Service				0.001
1-5	30 (76.9%)	2 (5.1%)	7 (17.9%)	
6-10	42 (85.7%)	0 (0.0%)	7 (14.3%)	
11-15	38 (84.5%)	1 (2.2%)	6 (13.3%)	
16-20	22 (51.1%)	7 (16.3%)	14 (32.6%)	
Above 20	33 (58.9%)	6 (10.7%)	17 (30.4%)	
Monthly Income				0.001
Below ₦100,000	9 (90.0%)	1 (10.0%)	0 (0.0%)	
₦100,000 - ₦150,000	34 (79.1%)	0 (0.0%)	9 (20.9%)	
₦150,000 - ₦200,000	49 (83.0%)	4 (6.8%)	6 (10.2%)	
₦200,000 - ₦250,000	27 (67.5%)	1 (2.5%)	12 (30.0%)	
₦250,000 - ₦300,000	19 (76.0%)	1 (4.0%)	5 (20.0%)	
Above ₦300,000	27 (49.1%)	9 (16.4%)	19 (34.5%)	

Source: 2023 Depression Factors Survey

factor on family crisis or challenge as the p-value slightly goes above 0.05. All other characteristics are not related to family crisis and challenge.

Professional/job factor

Assessing professional or job factor of depression, the

researchers first examine the respondents' nature of job employment in relation to the various socio-economic characteristics. In (Table 4), it is shown that three out of the socio-economic characteristics (age, years in service and family income) are significant at p-values 0.001, 0.001 and 0.000 respectively which means they are characteristics associated with nature of job employment

Table 4: Association between socio-economic characteristics and nature of job employment.

Characteristics	What is the nature of your current job employment with your institution?				Chi-Square p-value ($\alpha = 0.05$)
	Permanent Staff	Temporary Staff	Contract Staff	Ad-hoc/ Adjunct Staff	
Age					0.001
21-30	2 (66.7%)	1 (33.3%)	0 (0.0%)	0 (0.0%)	
31-40	52 (81.3%)	7(10.9%)	2 (3.1%)	3 (4.7%)	
41-50	74 (97.4%)	0 (0.0%)	2 (2.6%)	0 (0.0%)	
51-60	67 (98.5%)	1 (1.5%)	0 (0.0%)	0 (0.0%)	
61-70	21 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	
Marital Status					0.444
Single	13 (76.4%)	2 (11.8%)	1 (5.9%)	1 (5.9%)	
Married	191 (94.1%)	7 (3.4%)	3 (1.5%)	2 (1.0%)	
Divorced/Separated	4 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	
Widowed	8 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	
Educational Level					0.058
Bachelor/HND	14 (82.3%)	1 (5.9%)	1 (5.9%)	1 (5.9%)	
Master	92 (89.3%)	6 (5.8%)	3 (2.9%)	2 (2.0%)	
Ph.D.	110 (98.2%)	2 (1.8%)	0 (0.0%)	0 (0.0%)	
Years in Service					0.001
1-5	30 (76.9%)	6 (15.4%)	1 (2.6%)	2 (5.1%)	
6-10	45 (91.8%)	1 (2.1%)	3 (6.1%)	0 (0.0%)	
11-15	43 (95.6%)	1 (2.2%)	0 (0.0%)	1 (2.2%)	
16-20	43 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	
Above 20	55 (98.2%)	1 (1.8%)	0 (0.0%)	0 (0.0%)	
Monthly Income					0.000
Below ₦100,000	1 (10.0%)	3 (30.0%)	4 (40.0%)	2 (20.0%)	
₦100,000 - ₦150,000	38 (88.4%)	4 (9.3%)	0 (0.0%)	1 (2.3%)	
₦150,000 - ₦200,000	58 (98.3%)	1 (1.7%)	0 (0.0%)	0 (0.0%)	
₦200,000 - ₦250,000	40 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	
₦250,000 - ₦300,000	25 (100.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	
Above ₦300,000	54 (98.2%)	1 (1.8%)	0 (0.0%)	0 (0.0%)	

Source: 2023 Depression Factors Survey

Table 5: Association between socio-economic characteristics and job workload.

Characteristics	What is your workload per week (in hours)?					Chi-Square p-value ($\alpha = 0.05$)
	Below 6 hours	6 to 9 hours	9 to 12 Hours	12 to 15 hours	Above 15 hours	
Age						0.000
21-30	0 (0.0%)	1 (33.3%)	2 (66.7%)	0 (0.0%)	0 (0.0%)	
31-40	5 (7.8%)	23 (35.9%)	10 (15.6%)	14 (21.9%)	12 (18.8%)	
41-50	3 (4.0%)	21 (27.6%)	27 (35.5%)	10 (13.2%)	15 (19.7%)	
51-60	3 (4.4%)	25 (36.8%)	23 (33.8%)	13 (19.1%)	4 (5.9%)	
61-70	8 (38.1%)	7 (33.3%)	1 (4.8%)	4 (19.0%)	1 (4.8%)	
Marital Status						0.814
Single	2 (11.8%)	5 (29.4%)	6 (35.3%)	2 (11.8%)	2 (11.8%)	
Married	15 (7.4%)	68 (33.5%)	54 (26.6%)	38 (18.7%)	28 (13.8%)	
Divorced/Separated	1 (25.0%)	0 (0.0%)	2 (50.0%)	0 (0.0%)	1 (25.0%)	
Widowed	1 (12.5%)	4 (50.0%)	1 (12.5%)	1 (12.5%)	1 (12.5%)	
Educational Level						0.358
Bachelor/HND	1 (5.9%)	5 (29.4%)	5 (29.4%)	3 (17.6%)	3 (17.6%)	
Master	7 (6.8%)	29 (28.1%)	37 (35.9%)	17 (16.5%)	13 (12.6%)	
Ph.D.	11 (9.8%)	43 (38.4%)	21 (18.8%)	21 (18.8%)	16 (14.2%)	
Years in Service						0.114
1-5	4(10.3%)	17 (43.6%)	8 (20.5%)	5 (12.8%)	5 (12.8%)	
6-10	2 (4.0%)	13 (26.5%)	11 (22.4%)	12 (24.5%)	11 (22.4%)	
11-15	1 (2.2%)	10 (22.2%)	18 (40.0%)	9 (20.0%)	7 (15.6%)	
16-20	5 (11.6%)	12 (27.9%)	13 (30.2%)	8 (18.6%)	5 (11.6%)	
Above 20	7 (12.5%)	25 (44.6%)	13 (23.2%)	7 (12.5%)	4 (7.2%)	
Monthly Income						0.020
Below ₦100,000	1 (10.0%)	2 (20.0%)	4 (40.0%)	1 (10.0%)	2 (20.0%)	
₦100,000 - ₦150,000	5 (11.6%)	14 (32.6%)	7 (16.3%)	9 (20.9%)	8 (18.6%)	
₦150,000 - ₦200,000	1 (1.7%)	19 (32.2%)	17 (28.8%)	12 (20.3%)	10 (17.0%)	
₦200,000 - ₦250,000	3 (7.5%)	9 (22.5%)	19 (47.5%)	3 (7.5%)	6 (15.0%)	
₦250,000 - ₦300,000	1 (4.0%)	10 (40.0%)	10 (40.0%)	4 (16.0%)	0 (0.0%)	
Above ₦300,000	8 (14.6%)	23 (41.8%)	6 (10.9%)	12 (21.8%)	6 (10.9%)	

Source: 2023 Depression Factors Survey

Table 6: Association between socio-economic characteristics and wrong job placement.

Characteristics	Do you feel you are wrongly placed in your current job?			Chi-Square p-value ($\alpha= 0.05$)
	No	I don't know	Yes	
Age				0.009
21-30	2 (66.7%)	1 (33.3%)	0 (0.0%)	
31-40	43 (67.2%)	1 (1.6%)	20 (31.2%)	
41-50	44 (57.9%)	7 (9.2%)	25 (32.9%)	
51-60	53 (77.9%)	4 (5.9%)	11 (16.2%)	
61-70	19 (90.5%)	0 (0.0%)	2 (9.5%)	
Marital Status				0.688
Single	11 (64.7%)	2 (11.8%)	4 (23.5%)	
Married	141 (69.5%)	10 (4.9%)	52 (25.6%)	
Divorced/Separated	4 (100.0%)	0 (0.0%)	0 (0.0%)	
Widowed	5 (62.5%)	1 (12.5%)	2 (25.0%)	
Educational Level				0.007
Bachelor/HND	9 (52.9%)	3 (17.7%)	5 (29.4%)	
Master	63 (61.2%)	6 (5.8%)	34 (33.0%)	
Ph.D.	89 (79.4%)	4 (3.6%)	19 (17.0%)	
Years in Service				0.043
1-5	28 (71.8%)	4 (10.3%)	7 (17.9%)	
6-10	28 (57.2%)	1 (2.0%)	20 (40.8%)	
11-15	29 (64.4%)	2 (4.5%)	14 (31.1%)	
16-20	30 (69.8%)	4 (9.3%)	9 (20.9%)	
Above 20	46 (82.1%)	2 (3.6%)	8 (14.3%)	
Monthly Income				0.036
Below ₦100,000	4 (40.0%)	2 (20.0%)	4 (40.0%)	
₦100,000 - ₦150,000	24 (55.8%)	4 (9.3%)	15 (34.9%)	
₦150,000 - ₦200,000	39 (66.1%)	2 (3.4%)	18 (30.5%)	
₦200,000 - ₦250,000	27 (67.5%)	2 (5.0%)	11 (27.5%)	
₦250,000 - ₦300,000	20 (80.0%)	1 (4.0%)	4 (16.0%)	
Above ₦300,000	47 (85.5%)	2 (3.6%)	6 (10.9%)	

Source: 2023 Depression Factors Survey

as a factor that account for depression among academic staff of tertiary institutions. This is further substantiated by the research carried out by (Razali et al., 2019). The other two characteristics (marital status and educational level) have no association with nature of job employment. "Age" and "Monthly Income" (Table 5) are related to or associated with job workload of academic staff at p-values of 0.000 and 0.020 respectively. Workload per week (in hours), of academic staff of these institutions, as a factor of depression is thus significantly affected by these two characteristics. A closer look at these characteristics reveals that respondents within the age bracket (41-50), middle-aged academic staff, tend to work for more hours and this may have been the reason for depression among them. Also, the significance of monthly income on workload suggests that academic staff remuneration is not commensurate to the load of work they do weekly considering the number of hours they expend on the job (Eaton et al., 2001; Jokela and Keltikangas-Järvinen, 2011; Razali et al., 2019).

In order to determine the association between socio-economic factors and respondents who are wrongly placed in their job, it is shown in (Table 6) that marital status is insignificant towards wrong job placement. However, all other characteristics (age, educational level,

years in service and monthly income) are significant at p-values 0.009, 0.007, 0.043 and 0.036 respectively. Academic staff within the age group 41-50 with respective "Yes" and "No" responses of 32.9% and 57.9% maintain that they are wrongly placed in their current job. Compared with other educational level, Master's degree holders affirm "Yes" and "No" with 33.0% and 61.2% responses for wrong placement, respectively. Also, 40.8% among academic staff who have spent between 6 and 10 years on the job maintain they are wrongly placed while 57.2% do not. Finally, 34.9% of staff who earn between ₦100,000 and ₦150,000 monthly believe that they are wrongly placed, 55.8% are satisfied with their placement while 9.3% are ignorant of the wrongness of their current placement.

Conclusion and Recommendations

This study examines different factors that account for depression among academic staff of various tertiary institutions in Nigeria. Two major factors are examined, each with other three (3) sub-factors. These factors are: Personal or Relational Factor under which Feeling of Loneliness or Sadness, Mental Health Challenge and Family Crisis or Challenge are examined.

The other factor is professional or job factor which equally has Nature of Job Employment, Job Workload and Wrong Job Placement examined under it. Thus, in all, six (6) factors were assessed in the research.

Among the socio-economic characteristics, "Monthly Income" of these academic staff is the most significant towards their respective factors (Razali et al., 2019; Wu et al., 2023), followed by "Age". Different p-values of 0.001 (monthly income on family crisis), 0.000 (monthly income on nature of job employment), 0.020 (monthly income on job workload) and 0.036 (monthly income on job wrong placement) were obtained in the study. Thus, apart from providing better and encouraging remuneration, it is recommended that efforts should be made by governments and stakeholders involved to improve on financial commitment made available for training, re-training, research and productivity for these academic staff in order to forestall or greatly reduce depression among them.

The study also reveals that family crisis or challenge of academic staff, as a personal or relational factor, is influenced by the years they have spent in service. When compared to other factors, academic staffs (30.4%) who have spent above 20 years in service responded "Yes" while 17.9% who have spent between 1 and 5 years responded "Yes". This suggests that the longer academic staff have stayed in service, the more they are likely going to face crisis or challenges in their different families, and this means that the solution to depression among academic staff is not necessarily staying longer in service. The recommendation, among others, can however be that academic staff at different institutional types (Universities, Polytechnics, Colleges of Education or Monotechnics) should be retired at most at 65 years of age. Almost all the socio-economic characteristics (age, educational level, years in service and monthly income) with p-values 0.009, 0.007, 0.043 and 0.036 respectively are significant on feeling of being wrongly placed in the current job of these academic staff. Hence, the study therefore reveals that the most prevalent factor of depression is *Wrong Job Placement*. It is hereby advised and recommended that governments and stakeholders involved in recruitment, appointment, selection or job placement process should be God-fearing, fair and objective. Factors such as politicians' polarization, nepotism, favouritism, qualifications' misrepresentation, bribery, corruption and such like should not come to play in academic staff placement. This will help not only to give fulfillment and satisfaction to the academic staff but also maintain academic standards and greatly enhance quality academic output that can bring about the long awaited true and meaningful change to the society.

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