DEPRESSION AS PREDICTOR OF JOB PERFORMANCE AMONG EMPLOYEES OF FEDERAL UNIVERSITY OYE EKITI, EKITI STATE, NIGERIA
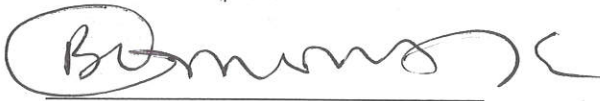
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BEING A PROJECT SUBMITTED TO THE DEPARTMENT OF PSYCHOLOGY, FACULTY OF SOCIAL SCIENCES, FEDERAL UNIVERSITY OYE EKITI IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE AWARD OF BACHELOR OF SCIENCE (BSc) DEGREE IN PSYCHOLOGY

AUGUST, 2016

CERTIFICATION

I certify that this study was carried out by Lawal Afeez Oladipupo PSY/12/0690 of the Department of Psychology, Federal University Oye Ekiti under my supervision.

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DEDICATION

This dissertation is dedicated to the Almighty God for His grace, provision, and protection and for seeing me through this project; through him all things are possible. To my beloved parents, Mr. & Mrs. D. Lawal, I know this dream is yours too. To Mrs. Akinyemi for her guidance, and support toward the fulfillment of this project and to my colleagues, friends, for all the intellectual exchanges we shared.

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List of Abbreviations

FUOYE	Federal University Oye Ekiti
SPSS	Statistical Package for Social Sciences
DSM-V	Diagnostic Statistical Manual-V
AET	Affective events theory
BA	Behavioral activation
CBT	Cognitive-Behavioral Therapy
LGA	Local Government Areas
HPQ	Health Productivity Questionnaire
BDI	Beck Depression Inventory
SSCE	Senior Secondary School Certificate
NCE/OND	Nigerian Certificate in Education/Ordinary National Diploma
BSC/HND	Bachelor of Science/Higher National Diploma
MSC	Master of Science
PHD	Doctor of Philosophy

ABSTRACT

The employees of the Federal University Oye Ekiti are individuals who provide labor to the organization. The aim of the study was to predict the influence of depression on job performance among University employees of the Federal University Oye Ekiti.

The study is a cross sectional study and was conducted in Federal University Oye Ekiti involving 206 participants that included. Self-administered questionnaires were used to collect data from the participants. Respondents were surveyed with Beck Depression Inventory (BDI), a measure of depression symptom severity, the Health Productivity Questionnaire (HPQ), and items on demographics. Data was then analyzed using statistical software SPSS 20.0.Version.

The result indicated that about 48 (23.3%) of participants were depressed on their jobs, minor levels of depression symptom severity were associated with decrements in job performance, the result showed a relationship between depression and job performance ($P< 0.05$). There was no association between job performance and socio-demographic characteristics ($P> 0.05$). Abstinence from work as a variable was found to be significantly influencing job performance and there was a significant negative relationship between abstinence from work and job performance ($P<0.05$).

However, there is a negative relationship between the severity of depression symptoms and work function, and suggests that even mild levels of depression are associated with loss of productivity in work place . Depression on one's job can affect not only job performance but also relationship with others and personal health. It was conducted that organizations need to understand that mental state of an employee, this may help to reduce depressive symptoms for good job performance.

CHAPTER ONE

INTRODUCTION

1.1 Background to the study

Employee job performance is one of the most important factors for maintaining and increasing productivity for companies (Elangovan, & Xie, 1999), job performance is globally an important issue in organizations and it is the major factors that determine organizational productivity, an employee's poor performance can decrease the productivity of an organization while individual good performance can increase the productivity of an organization. However, job performance is an important issue within an organization.

Job performance is a multi dimensional concept, but has been scholarly defined. Oduwole (2004) equally provides a generic definition of job performance as how one carries out the task, duties and responsibilities associated with a particular job. The author shed more light by stating that job performance can also be referred to as achievements in terms of goals set. It is also considered as an output of a staff on the job, measurable in terms of quality and quantity of job performed or done. Campbell (1990) also defined job performance as an individual-level variable, or something a single person does. This implies that there is a level of job performance that is expected by every organization from its employees, and these definitions differentiate it from comprehensive constructs such as organizational performance or national performance, which are higher-level variables. Nevertheless, job performance can also be defined as work related activities expected of an employee and how well those activities were executed. Job

performance is whether a person performs a job well or not, and it must be directed toward organizational goals that are relevant to the job or role. (sackett, zedeck, & fogli, 1998) Therefore, job performance does not include activities where effort is expended toward achieving peripheral goal. For example, the effort put toward the goal of getting to work in the shortest amount of time is not performance, except where it is concerned with avoiding lateness (Campbell, 1990). The concept of job performance and depression has not been widely researched in the field of organizational/industrial psychology this study aims to know how depression can determine employee's job behavior in the organization. However, when an employee is emotionally disturbed, the performance of that employee tends to reduce, the association between emotional intelligence and job performance becomes more positive as cognitive intelligence decreases, an idea first proposed in the context of academic performance (Petrides, Frederickson, & Furnham, 2004).

Depression is widely understood as a state of low mood and aversion to activity that can affect a person's thoughts, behavior, feelings and sense of well being (DSM-V). National Mental Health Association (2004) observed that depression interferes with the ability to work, sleep, eat study and enjoy activities. Depression could therefore, be number one obstacle to the employee's success in his/her workplace, because they may not be able to put in their best. Employee state of being is an area of research that has not really captured the attention of researchers from the discipline of organizational behavior. The major aim and objective of any organization is to ensure sustainable growth and organizational development. The way and manner in which employee behave in their work place go a long way in explaining the level of organizational growth and development.

According to Michael Mazaar in his book Global Trends (2005), "Depression is now, in terms of victims and economic impact, the world's second most insidious illness behind heart disease. It is estimated that 330 million people worldwide suffer from depression." Notwithstanding, in order to include depression, it must be clearly defined and must be specific. Thus, depression is more than just sadness, depression begins with stress, which is when the perceived demands of the job are greater than the person's perceived ability to cope.

Dong (2000) emphasized that depression can seriously affect someone's ability to work effectively and it may be so bad that he or she will have to stop work completely for a time. Stoner & Perrewe (2006) opined that individuals who are experiencing depressed mood at work do not feel mentally motivated to be company. The researchers explained further that individuals high in depressed mood at work will perform fewer organizational citizenship behaviours. Dong (2000) also argued that individuals higher in depression may have a pessimistic view of the self, the world, and the future and more likely to focus on the negative aspects of the events than individuals lower in depression. Employees with depression may experience a lack of interest and pleasure in daily activities, significant weight loss or gain, insomnia or excessive sleeping, lack of energy, inability to concentrate, feelings of worthlessness or excessive guilt and recurrent thoughts of death (Lindsay 2016). Though, employee depression is a big problem in any industrial settings which affects organizational productivity, employees in an organization are the back bone of firm growth and success both locally and in a competitive global market. It is necessary to examine the concept of depression to have better knowledge of how it affects overall organizational growth and success. Some studies suggested that cognitive dysfunction and other symptoms of depression such as insomnia, emotional distress and fatigue, had more significant effect on work-related outcomes than actual illness (Banerjee et al., 2014; Gilbert &

Marwaha, 2013; McIntyre et al., 2015). Depression is a big threat to organizational employee's efficiency, this behaviour can lead to low job morale and dissatisfaction of organizational goals therefore limit the level of growth of the organization. Example of forms of behaviour that are against the interest of the organization include withdrawal, absenteeism etc. Depression creates a big problem for organization when the employees are not happy on their job. Various factors have been reported to be related to depression, the present study aimed at examining how well depression will predict the performance of organizational employees.

Nevertheless, role conflicts within an organization also have its impact on job performance, this conflict usually occur when an employee is tasked to act a role and faces difficulties while performing the duties, experiencing role conflict within the work place may also lead to workplace bullying which can decrease the performance of an employee. When companies undergo organizational change workers often experience either a loss or a gain in areas of a workers job, thus changing the expectations of the worker. Change is often very stressful for workers. Workers who might have lost a degree of power may feel like they lost their authority and begin to lash out at other employees by being verbally abusive, purposefully withholding work related items, or sometimes even physically to withhold their status and all aforementioned events can lead to depression.

1.2 STATEMENT OF THE PROBLEM

Depression is a big problem that requires close monitoring by personnel management department in an organization on their employees state of being. According to Tse et al., (2014), it was shown that ongoing symptoms play a major role in employment outcomes of people with depression, it was also estimated that decreased functioning could partly explain low

employment rates of people experiencing depression. It was pointed out that of those who find or remain on their job; some of them do not work at their full capacity. Schoeyen et al., (2013), found out that persistence of severe clinical symptoms rather than cognitive dysfunction determined the occupational outcomes. Evidence from Tse et al., (2014) and Schoeyen et al., (2013) has shown negative relationship between depression and occupational productivity, high level of depression can not only cripple the performance of the employees but can also lead to low productivity in an organization, due to several investigations on depression and job performance, this prompted the study.

1.4 General objective

The general objective of this study is to investigate the effect of depression on job performance and loss of productivity.

Specific objectives

The aims of this study are,

  ➢ To add to existing body of knowledge on depression and job performance,
  ➢ To describe the impact of depression on work performance and the degree to which impaired work performance is worsened by exposure to psychological injury,
  ➢ To identify the influence of gender and job category on job performance of employees,
  ➢ To explore the influence of depression on employee's absenteeism.

1.7 SIGNIFICANCE OF THE STUDY

Finding from this research study contributes to the understanding of whether depression can forecast the performance of University employees on their job, second contribution is that, since it is perceived that University employee's performance can be predicted by depression, the study

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therefore shed light on those possible challenges such as age, gender difference, educational level, and final contribution is to examine the difference in productivity of employees based on their job category.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

Globally, Depressive Disorder is the fourth leading cause of Disability Adjusted Life Years (DALY – measured by lost years of healthy life to disability and/or premature death), and is second only to heart disease in "developed" countries (Murray & Lopez, 1996). Only one in ten will ever seek treatment, although the great majority, even those with the most severe cases, can be helped. However, depression can strike anyone regardless of age, background, socio-economic status, or gender. Depression is the most prevalent mental disorder to cause absenteeism from work: on average, depression is generally associated with a doubling of annual sick days from approximately 1 day per month for most workers to approximately 2 days per month among depressed workers (Wells et al., 1989; Kessler et al., 1999; 2001; 2003; Wang et al., 2003). High stress, post-traumatic stress disorder, phobias, sleep disturbances, and increased depression (Salin, 2003), unhappiness, anxiety, withdrawal, and undue cautiousness, affect job performance (Hoel & Cooper, 2003), at the organizational level, it adversely affects employee commitment, job satisfaction, absenteeism, and turnover (Oghojafor, et al., 2012). Nevertheless, depression may influence employee's abstinence from their work place. The causes of absenteeism are in general multi-faceted, and are influenced not only by the health status of individuals, but also by the social insurance system, the work environment, biological factors, attitudes and commitment to work, macroeconomic conditions and other social and psychological determinants (Brown & Sessions 1996; Yianiv, 1995). Hoque & Islam (2003) found that job satisfaction contributes negatively to absenteeism, thus the lower the satisfaction

levels, the higher absenteeism amongst the sample of workers. Clegg (1983) and Goldberg & Waldman (2000) also found that there is no relationship between the job satisfaction and work absenteeism. Depression in the workplace should not be taken lightly. When this illness strikes any employee, it greatly affects their productivity, their effectiveness on the job, and relationship with other employees and customers.

Depression and Job performance

Arne Beck et al (2011) reported monotonic relationship between depression symptom severity and productivity loss, even minor levels of depressive symptoms were associated with decrements in work function, employee's job employment statuses, and health, were also associated with a loss of productivity. Rose (2003), identified that the stress in work environment reduces the intention of employees to perform better in jobs with the increasing level of stress, the employees thinking demoralize and his tendency to work well also decreases. No doubt stress is necessary for increasing performance of employees but up to a certain level. In this study the employees do their job regularly but due to workloads and time constraints their performance reduces. Warraich et al (2014) found that workload, role conflict and inadequate monetary have decreases job performance among employees, the study shows negative relationship of workload, role conflict and inadequate monetary reward with job performance among employees. Indeed, several studies have found that specific depressive symptoms were more strongly associated with decreased work productivity, particularly poor concentration /distractibility and sleep disturbance/increased fatigue (Lerner et al, 2004; Adler et al., 2004). Bender & Farvolden (2008) explained that depression is a risk factor for job loss and subsequent unemployment, depressed employees observed over 6 months have four to five times more new unemployment compared with those with other chronic illness such as rheumatoid arthritis. Also,

depression results in increased job turnover rates, with the most common result being that the affected individual takes a lower-paying job. Factors suspected to influence job loss for depressed individuals include poor job performance, discrimination, job accommodation barriers, and treatment quality. Depressed employees experience broad impairment in many workplace functions and have a fold increase in impaired work performance equivalent to 5 hours of lost work per week (Stewart, Ricci, & Chee 2003). Depression cannot be treated only as a problem for the individual employee, suffering from the condition also constitutes a fundamental issue for the employer and co workers. Wilkins & Beaudet (2004) reported that employees who experience job strain, job insecurity, physical demands, or low co-worker's support are at risk of psychological distress, depression in the workplace has a significant effect on the productivity and profitability of corporations. Risk factors for depression are found at both the individual and organizational levels and, therefore, successful intervention is required at both levels. They conclude that a continuum of risk reduction and health promotion, early detection and intervention will be most effective in managing this complex condition.

Demographics, depression and job performance

Research results have been found for the variable of age. As age increases, so as organizational commitment increases, young employees were found to be less committed to their work than older ones (Hrebiniak & Alutto 1972, Stevens et al. 1978). Several studies have found negative relations between age or experience and occupational stress (Indik, Seashore, & Slesinger, 1964;; Rosse & Rosse, 1981; Sheridan & Vredenburgh, 1978). Ndifuna (1992) conducted research using Makerere University lecturers. Results indicated that age positively correlated with organizational commitment whereas tenure and number of dependents negatively correlated with it. It was observed that sex and marital status significantly influenced organizational

commitment. Males showed more commitment than female whereas married lecturers showed more commitment than unmarried ones. There are at least two explanations for these relations (Indik et al., 1964). One is selective withdrawal, the idea that voluntary turnover is more probable among people who experience more stress, that certain characteristics dispose some people to experience more stress, and that people are differentially likely to quit according to those characteristics. As a result, the people who remain with the organization longer are those with more stress-resistant traits. The other explanation is adaptation. It assumes that people eventually develop coping mechanisms to deal with stress. Because this takes time, senior organizational members should be more fully adapted and, therefore, should experience less stress. However, Type A behavior pattern is another potential correlate of stress. It is a behavioral syndrome that includes aggressiveness, competitiveness, impatience, and a sense of urgency in overcoming obstacles to task performance (Ivancevich & Matteson, 1984). This suggests that Type A persons act in ways which produce more stressful events for themselves and find the events more intensely stressful. In support of this possibility, Ivancevich et al., (1982) found that Type A nurses reported more work overload, more time pressures, and more role conflict. Hogan and Hogan (1982) suggested that self-esteem is also related to stress. They argued that people have deep-seated needs for social approval. Accordingly, events that represent social rejection are stressful. Furthermore, people high in self-esteem should feel less threatened by rejection and, therefore, less vulnerable to stress from such events. Also some studies relating to variable of gender showed weak correlations between sex and organizational commitment (Stevens, Beyer and Trice 1978). In their study conducted on personal and role related factors in the development of organizational commitment, Herbiniak and Alutto (1972) found that females were less likely to change their organization compared to their male coworkers, Hrebiniak and

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Alutto (1972) also found that religious affiliations of employees were significantly related to organizational commitment.

2.2 THEORETICAL BACKGROUND

Affective events theory (AET)

Affective events theory (AET) is a model developed by organizational psychologists Weiss & Cropanzano (1996) to explain how emotions and moods influence job performance and job satisfaction, the model explains the linkages between employees' internal influences (e.g., cognitions, emotions, mental states) and their reactions to incidents that occur in their work environment that affect their performance, organizational commitment, and job satisfaction. Weiss and Cropanzano (1996) explained that managers need to understand how workers are impacted emotionally by events at work. The model states that there is a relationship between the employees' internal influences (such as emotions) and their reactions to incidents that happen during their workday that affect their job performance and satisfaction. The relationships between components associated with work (e.g., tasks, autonomy, job demands, and emotional labor) and their impact on job outcomes support AET. Tasks that are considered challenging, rewarding, or that provide an opportunity to develop new skills induce positive affect and increase job satisfaction. Alternatively, tasks that are rated as routine, boring, or overwhelming are associated with negative affect (e.g., low self-esteem, low self-confidence) and concerns over job evaluations. This may lead workers to engage in planned quitting behaviors.

The degree of autonomy workers have in their jobs affects their productivity, satisfaction, and intention to quit. Research shows that the ability to make decisions and influence what happens

on the job has the greatest impact on job satisfaction, particularly among young male workers. Job autonomy even trumps income's effect on job satisfaction. Alternatively, work overload significantly reduces job satisfaction among middle-aged women and men but does not significantly impact job satisfaction among young male workers. These differences between the age and gender of workers indicate differences in career phase, where young (male) workers are more likely to put up with or expect work overload, while middle-aged workers tend to be approaching their peak and may expect some concessions (e.g., based on track record, merit, or currency to the organization).

Likewise, work flexibility affects job satisfaction. In fact, the flexibility to decide when work is performed ranks number one among women and number two or three among men in determining the characteristics of a satisfying job. Similar to job autonomy, job flexibility is more important than income when evaluating job satisfaction. Flexibility to determine one's work schedule is an important contributor to job satisfaction across the spectrum of low- and high-income jobs. Work flexibility empowers employees by reducing the incidence of work-family conflicts and engagement in planned quitting to improve overall quality of life. Positive affect is a fringe benefit of work flexibility that pays rich dividends to both employees and their employers, empowering the former and improving the ability of the latter to retain workers.

Workers' mood influences their job performance and job satisfaction. Hedonic tone explains most of the variation in how an event at work affects a worker's internal state (i.e., mood) and how this state is expressed to others. Even though positive events are reported three to five times more often, negative events have approximately five times the impact on mood. An inverse relationship exists between hedonic tone and work affect, with hedonic tone negatively related to

work performance and positively related to work withdrawal. Nevertheless, workers are likely to be selfless and more altruistic when positive events occur, such as compliments, open acknowledgement of a job well-done, and promotions (which, in turn, seem to improve job performance). Negative events at work, however, are likely to cause negative mood in employees, resulting in negative work behaviours such as work slowdowns, work withdrawal, and absenteeism. However, the theory explains that there are both positive and negative occurrences during the workday that can affect an employee's emotions, job performance and job satisfaction. AET is about how the work environment emotionally affects workers and does not take into account any outside influences. However, the view of this theory is that our mental state is the determinant of our job related activities, negative affection can leads to poor performance in work activities of an employee, while positive affection can leads to good performance in work related activities of an employee. It basically means that a happy employee is a productive employee, and employees performance can be impaired if it is paired with any saddened or negative stimulus.

Expectancy theory

Expectancy theory is about the mental processes regarding choice or choosing and explains the processes that an individual undergoes to make choices. In the study of organizational behavior, expectancy theory is a motivation theory first proposed by Victor Vroom (1964). "This theory emphasizes the needs for organizations to relate rewards directly to performance and to ensure that the rewards provided are those rewards deserved and wanted by the recipients." Vroom (1964) defines motivation as a process governing choices among alternative forms of voluntary activities, a process controlled by the individual. The individual makes choices based on estimates of how well the expected results of a given behavior are going to match up with or

eventually lead to the desired results. Motivation is a product of the individual's expectancy that a certain effort will lead to the intended performance, the instrumentality of this performance to achieving a certain result, and the desirability of this result for the individual, known as valence.

Expectancy theory (or Expectancy theory of motivation) proposes an individual will behave or act in a certain way because they are motivated to select a specific behavior over other behaviors due to what they expect the result of that selected behavior will be. In essence, the motivation of the behavior selection is determined by the desirability of the outcome. However, at the core of the theory is the cognitive process of how an individual processes the different motivational elements. This is done before making the ultimate choice. The outcome is not the sole determining factor in making the decision of how to behave. Expectancy theory puts forth the premise that employees will put forth an amount of work and commitment equal to what they expect to receive in return. Commission compensation structures leverage this theory by allowing employees to earn as much money as they desire, completely based on their job performance. Making sure that employees always expect future pay raises and potential job promotions can keep them working hard to achieve personal goals. However, if employees expect little compensation and no growth opportunities in return for their work, they may put forth only minimal effort until they eventually look to a new employer for new opportunities while employees with more compensation and growth opportunities may put more effort towards achieving the goals of the organization. Thus, lack of motivation, inadequate support from the organization can lead to undesired outcome which has an effect on mental state and this may affect the productivity of the employees.

Behaviourist theory

Behaviourism emphasizes the importance of the environment in shaping behaviour. The focus is on observable behaviour and the conditions through which individuals' learn behaviour, namely classical conditioning, operant conditioning and social learning theory. Therefore depression is the result of a person's interaction with their environment. For example, classical conditioning proposes depression is learned through associating certain stimuli with negative emotional states. Thus, with the explanation of this' behavioural approach on depression, it indicates that depression will have a negative effect on job activities. Behavioral activation (BA) is an idiographic and functional approach to depression. It argues that people with depression act in ways that maintain their depression and locates the origin of depressive episodes in the environment. But BA theories do not deny biological factors that contribute to depression, that it is ultimately the combination of a stressful event in an individual's life and their reaction to the event that produces a depressive episode. Individuals with depression may display socially aversive behaviors, fail to engage in enjoyable activities, ruminate on their problems, or engage in other maladaptive activities. According to BA theory, these behaviors most often function as avoidance mechanisms while the individual tries to cope with a stressful life event, resulting in a decrease in positive reinforcers or perceived control. Rumination is particularly important in the onset of depression. There are two main coping mechanisms, rumination and distraction. Ruminators spend time focusing on the stressful event and their feelings, while distractors engage in activities that distance them from the event and their feelings. Ruminators are much more likely to become depressed than distractors. Thus, in organizational settings, due to ruminator's weak coping mechanisms they mental state tends to report productivity loss in an organization and distractors that pays less attention to their feelings and the events tends to report

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normal or good productivity in an organization. Also, deficits in social skills and positive social interactions have been empirically proven to be main contributors to the maintenance of depression. Individuals with depression typically interact with others less frequently than non-depressed persons, and their actions are typically more dysfunctional. One theory of social skills revolves around the lack of interaction seeking behaviors displayed by the depressed individual. This lack of interaction results in social isolation that furthers the development of a negative self-concept, loneliness, and isolation. According to Lewinsohn (1974), depressed people are precisely those people who do not know how to cope with the fact that they are no longer receiving positive reinforcements like they were before. For example, a child who has newly moved to a new home and has consequently lost touch with prior friends might not have the social skills necessary to easily make new friends and could become depressed.

An alternative social skills theory attributes problems within interactions with the maintenance of depression. The "pro-happiness social norm" causes people to approach social interactions with the expectation of a positive exchange; however, individuals with depression typically violate these expectations. The lack of responsiveness displayed by individuals with depression becomes annoying to their interaction partners, causing the interaction partners to either avoid interactions with the depressed individual or to approach them more negatively in future interactions, generating a self-fulfilling prophecy of continued negative social interactions for both individuals. The depressed individual often sends ambiguous social cues that result in a misinterpretation by their interaction partner, such as a lack of responsiveness that can be interpreted as personal aversion. This misinterpretation leads to a decrease of positive interactions, resulting in a further decreased in social interactions, facilitating the maintenance of depression. Operant conditioning states that depression is caused by the removal of positive

reinforcement from the environment (Lewinsohn, 1974). Certain events, such as losing your job, induce depression because they reduce positive reinforcement from others (e.g. being around people who like you). Depressed people usually become much less socially active. In addition depression can also be caused through inadvertent reinforcement of depressed behaviour by others. For example, when a loved one is lost, an important source of positive reinforcement has been taking away and will leads to inactivity. The main source of reinforcement is now the sympathy and attention of friends and relatives.

However this tends to reinforce maladaptive behaviour i.e. weeping, complaining, and suicidal intent. This eventually alienates close friends leading to less reinforcement, increasing social isolation and unhappiness. In other words depression is a vicious cycle in which the person is driven further and further down. Also if the person lacks social skills or has a very rigid personality structure they may find it difficult to make the adjustments needed to look for new and alternative sources of reinforcement (Lewinsohn, 1974). So they get locked into a negative downward spiral. However, this theory help to understand that employee's mental state can be influenced because of what they interact with in the organization. in relation to job performance with behavioural approach on depression, employees get depressed on due to the presence or pairing of negative or undesired activities with the job, when a reinforcing stimuli is out of reach or taken away which was the stimulator of the employee, it will decrease the work activities of the employee and find the job stressful or undesired due to lack of what the stimuli impacted on the individual.

Cognitive theory

Cognitive theories rose to prominence in response to the early behaviourists' failure to take thoughts and feelings seriously. The cognitive movement did not reject behavioural principles, however. Rather, the idea behind the cognitive movement was to integrate mental events into the behavioural framework. Cognitive Behavioural theories (sometimes called "cognitive theories") are considered to be "cognitive" because they address mental events such as thinking and feeling. They are called "cognitive behavioural" because they address those mental events in the context of the learning theory that was the basis for the pure behavioural theory described earlier. The rise in popularity of cognitive behaviourism continues today; it forms the basis of the most dominant and well-research formed of psychotherapy available today: Cognitive-Behavioural Therapy, or CBT. Cognitive behavioural theorists suggest that depression results from maladaptive, faulty, or irrational cognitions taking the form of distorted thoughts and judgments. Depressive cognitions can be learned socially (observationally) as is the case when children in a dysfunctional family watch their parents fail to successfully cope with stressful experiences or traumatic events. Or, depressive cognition can result from a lack of experiences that would facilitate the development of adaptive coping skills.

According to cognitive behavioural theory, depressed people think differently than non-depressed people, and it is this difference in thinking that causes them to become depressed. For example, depressed people tend to view themselves, their environment, and the future in a negative, pessimistic light. As a result, depressed people tend to misinterpret facts in negative ways and blame themselves for any misfortune that occurs. This negative thinking and judgment style functions as a negative bias; it makes it easy for depressed people to see situations as being much worse than they really are, and increases the risk that such people will develop depressive

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symptoms in response to stressful situations. However, unlike the behavioural approach that explained that employee's interaction with the organization is the determinant of their mental state, this approach focus on employee's ability to process information. The way an employee evaluate information can determine the mental state of the employee which will have an impact on their day to day activities. Sometimes, when the organization is going through transformation because of the goals of the organization, employee might misinterpret organizational related information (task or roles) thereby developing a negative or saddened mental state and the presence of emotion will impair the job activities the employee executes.

Aaron beck's cognitive theory of depression

Different cognitive behavioural theorists have developed their own unique twist on the Cognitive way of thinking. According to Dr. Aaron Beck, negative thoughts, generated by dysfunctional beliefs are typically the primary cause of depressive symptoms. A direct relationship occurs between the amount and severity of someone's negative thoughts and the severity of their depressive symptoms. In other words, the more negative thoughts you experience, the more depressed you will become. Beck also asserts that there are three main dysfunctional belief themes (or "schemas") that dominate depressed people's thinking: i) I am defective or inadequate, ii) All of my experiences result in defeats or failures, and iii) The future is hopeless. Together, these three themes are described as the Negative Cognitive Triad. When these beliefs are present in someone's cognition, depression is very likely to occur (if it has not already occurred).

An example of the negative cognitive triad themes will help illustrate how the process of becoming depressed works. Imagine that you have just been laid off from your work. If you are

not in the grip of the negative cognitive triad, you might think that this event, while unfortunate, has more to do with the economic position of your employer than your own work performance. It might not occur to you at all to doubt yourself, or to think that this event means that you are washed up and might as well throw yourself down a well. If your thinking process was dominated by the negative cognitive triad, however, you would very likely conclude that your lay off was due to a personal failure; that you will always lose any job you might manage to get; and that your situation is hopeless. On the basis of these judgments, you will begin to feel depressed. In contrast, if you were not influenced by negative triad beliefs, you would not question your self-worth too much, and might respond to the lay off by dusting off your resume and initiating a job search.

Beyond the negative content of dysfunctional thoughts, these beliefs can also warp and shape what someone pays attention to. Beck asserted that depressed people pay selective attention to aspects of their environments that confirm what they already know and do so even when evidence to the contrary is right in front of their noses. This failure to pay attention properly is known as faulty information processing. Particular failures of information processing are very characteristic of the depressed mind. For example, depressed people will tend to demonstrate selective attention to information, which matches their negative expectations, and selective inattention to information that contradicts those expectations. Faced with a mostly positive performance review, depressed people will manage to find and focus in on the one negative comment that keeps the review from being perfect. They tend to magnify the importance and meaning placed on negative events, and minimizes the importance and meaning of positive events. All of these manoeuvres, which happen quite unconsciously, function to help maintain a depressed person's core negative schemas in the face of contradictory evidence, and allow them

to remain feeling hopeless about the future even when the evidence suggests that things will get better. Irrational thought can also be one of it, because when an employee is not putting things into normal stages of life, depression can develop. Nonetheless, this approach support cognitive processing but focus more on the negative interpretations held by an individual, employees thought on their job related activities can determine their performance, the belief an employee has towards a particular job might influence how the job will be executed. Employees with positive belief about an organization will find the job related activities more enthusiastic than those who interpret who interpret it in negative dimension. This theory shed light on the schemas of employees as one of the determinants of their day to day work activities.

2.3 THEORETICAL CONCEPTUALIZATION

Situations: loss, isolation, conflict, and stress.	Thoughts: negative thinking habits, harsh self-criticism, unfair and unrealistic thoughts.	Emotions: discouragement, sadness, irritability/anger, numbness, and anxiety.	Actions: social withdrawal, reduced activity level, and poor self-care.	Physical State: altered sleep, low energy, agitation, and changes in brain chemistry.

Depression

Job performance

Fig 2.1

Job performance is a work related activities expected of an employee, work activities can be decreased with the above listed factors. Those factors leads to depression, can also determine the extent by which an employee will perform on work related activities. It may affect social support, family relationships, employment, and finances. Depression can affect the whole body, including general aches and pains, headaches, inability to sleep or excessive sleep, sad or blank facial expression, and weight loss or gain due to change in appetite. People also describe feeling surreal, feeling in a fog, under a dark cloud, having "clouds behind my eyes" or "plaque on my brain." Each of these areas is connected to all the others. However, changes in one area produce changes in the others, when depression first develops, negative changes in one area often cause the others to get worse as well and affect performance. However, when you are working on getting better, changing one area leads to improvements in the others and enhance your work related activities.

2.4 RESEARCH QUESTIONS

The following research questions were tested

- What is the influence of depression on job performance?

- What is the influence of demographic characteristics on job performance?

- What is the influence of depression on work abstinence?

2.5 HYPOTHESES

The following hypotheses was be tested

- There will be a significant influence of depression on job performance.

- Demographic characteristics of respondents will significantly influence job performance.

- Depression will significantly influence work abstinence.

2.6 OPERATIONAL DEFINITION OF TERMS

Depression

A condition in which an employee feel very sad, hopeless, and unimportant and is unable to live in a normal way. People with depressed mood can have difficulty concentrating, remembering details, and making decisions, fatigue and decreased energy, feelings of guilt, worthlessness, and/or helplessness, feelings of hopelessness and/or pessimism, Insomnia, early-morning wakefulness, or excessive sleeping, Irritability, restlessness, loss of interest in activities or hobbies once pleasurable, including sex, overeating or appetite loss, persistent aches or pains, headaches, cramps, or digestive problems that do not ease even with treatment, persistent sad,

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anxious, or "empty" feelings, thoughts of suicide, and suicide attempts (National institute of mental health)

Job performance

Job performance is defined as whether an employee executes their job duties and responsibilities well in the organization (Campbell 1990).

CHAPTER THREE

METHODOLOGY

3.1 Research design

This is a cross sectional study, involving the use of questionnaire containing information on depression, work abstinence and job performance. This study examines the relationship between the variables under consideration, and there was no experimental manipulation of variable. The independent variable is depression and the dependent variable is job performance.

3.2 Research setting

The research was conducted in Ekiti state. Ekiti state is a state in the south-Western part of Nigeria that was carved out of the territory of the old Ondo state in October, 1996. It has 16 Local Government Areas (LGA).

It has estimated population of about 2,384,212 (2006 census). Oye is a town and headquarter of Oye Local Government Area was carved out from the defunct Ekiti North Local Government on 17th May, 1989.

There are no distinctive ethnic groups in the local government as a greater percentage of the people residents are of the Yoruba Language race. Nearly all the people speak Yoruba language with negligible dialectical variations. The town served as the study area and the population was Federal University Oye. The reason why the setting was used as the study area is because it was easier for the researcher to get participants. This also reduced the researchers' fatigue which can influence the study. The University employees were examined in their various offices.

3.3 Study participants

The participants consist of the Academic and Non-Academic staff of Federal University Oye staff in Ekiti state.

Sample size determination

Sample size of 206 was calculated based on a previous study in the United State by Debra et al (2003) that showed prevalence rate of 15% employees having depressive symptoms in an organization. The sample size was determined by single proportion sample size formula. Using

$N = Z$ d×p× (1-p)/d² Bamboye, E.A. (2012)

Where,

Zd= value of the standard normal distribution corresponding to a significant level α (1.96 for 2 tailed test at 0.05 level)

P = Proportion (15% = 0.15) of people with depression in the workplace found by Lerner et al (2003).

d = degree of precision or absolute deviation from the true value (0.05) 95% conference interval

Therefore n = 1.96²×0.05 (1-0.15) / 0.05²

n = 195.9216 approximately 196.

If response rate is assumed to be 95% allowing for 5% response rate

n = 196×100/95 = 206.31

3.4 Inclusion criteria

Academic and Non-Academic employees (stationed employees)

3.5 Exclusion criteria

Security officers, gardeners and cleaners (non-stationed employees)

3.6 Research instrument

This instruments used in this study comprises of Health Productivity Questionnaire (HPQ), and Beck Depression Inventory (BDI) and an added questions were added to examine respondents demographic characteristics.

The section A contained 7 items demographic characteristics which were age, gender, religion, job category, marital status, and level of education. The second section, B contained 21 items on depression developed by Aaron Beck (1961). The third section, C contained 18 items on job performance adapted from HPQ, developed by World Health Organization (2002).

Health Productivity Questionnaire (HPQ)

The HPQ is a survey instrument which is usually self-administered by the respondent. It measures employee's health issues and their rate of performance (or ability) to perform specific job demands in the last 2 weeks. Responses to the 50 items are combined into two health and productivity scales. These capture the multidimensionality of job roles and also reflect an important characteristic of many health illnesses, in that they may result in limitations in performing some activities but not others. This instrument work performance section was adapted for this study and the health section was discarded, because the study focus is on depression and not health illnesses though poor health can result in depression but the researcher

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was more interested in depression. The questionnaire takes 10–15 min to complete but the section adapted takes about 7 min. According to De Campos MC, et al (2013), the adaptation process followed the Process of Translation of World Health Organization data for the evaluation of the psychometric properties were collected in a teaching public hospital of Ribeirão Preto in 2011. The evaluated psychometric properties were: face validity and content (group of experts), reliability by Cronbach's alpha and test-retest stability. In the evaluation of psychometric properties, the internal consistency of the HPQ adapted version, Cronbach's alpha was 0.94 for the section A and 0.86 for section B of the instrument. In analyzing the agreement of test-retest stability, the agreements were positive and statistically significant. Thus, the HPQ adapted version proved valid and reliable in the sample studied.

Beck Depression Inventory (BDI)

The Beck depression inventory (BDI) (Beck, 1976) was used in the study to measure the level of depression among the employees of Federal University Oye Ekiti. The BDI is an American paper and pencil test comprising of 21 items with four possible responses in an ascending magnitude. The participants indicate by circling the degree to which they experience each of the 21 cardinal symptoms of depression. The lowest is zero (0) and indicates no depression, while the highest score of (3) indicates the highest level of depression. The overall scoring method of the version of Beck depression inventory consist of 21 items with 0-9 score judge as no depression, 10-18 mild moderate depression, 19-29 moderate severe depression and 30-63 severe depression, 63+ indicate more severe depression symptoms and it takes approximately 5 to 10 minutes to complete.

The (BDI) was developed in America and has been found to be culturally relevant and accepted in Nigeria. Previous studies (Akinowo 1990; Jegede 1985). Hence, the reliability of the instrument and validity has been demonstrated in Nigeria Culture (Awaritefe, 1988; Akinowo, 1985; Akinowo, 1990). It was found to be culturally relevant, culturally free and was validated and used by Jegede (1985) with the reliability coefficient of 0.68 $p< .05$ for Ibadan area. Hence, the reliability of the BDI inventory has been established in Nigeria.

3.7 Sampling procedure

The sampling method used in this research was the multi-stage random sampling. Random sampling was used to select a sufficient number of departments that constitutes the participants from each stratum.

The first stage- There are five faculties and two non-academic units in Federal University Oye Ekiti, with the use of balloting technique, three faculties were selected together with one non-academic unit which are faculty of agriculture, engineering, sciences and Departmental units. Faculty of agriculture has 7 departments, faculty of engineering has 7 departments, faculty of science has 10 departments and Department has 31 units.

Second stage- Departments are randomly selected from their faculty, 4 departments were selected from the faculty of agriculture, 4 from faculty of engineering, 4 from faculty of science for the academic staff selection. Also, for non-academic staff selection, 4 departments were randomly selected from the faculty of engineering, 4 from non-academic department, and 4 from faculty of science respectively. The multi-stage random sampling technique was three stages. The administration took place in Federal University Oye Ekiti the procedure for administration occurred at the various offices of the respondent and was assisted by research assistants. The

questionnaires were administered to the participants in each section and they were reimbursed with a pen each for participating in the study. The populations were actually induced but the inducements were not so large to compromise the integrity of the voluntary informed consent.

3.8 Data analysis technique

206 questionnaires were analysed. Quantitative data from the returned questionnaires were coded and entered into a Microsoft Excel spreadsheet (Microsoft Office, 2007). The data was analyzed after the coding of completed questionnaire, it was analyzed by using Statistical Package for Social Sciences version 20, chi-square was used to analyzed the demographics characteristics of the respondents, t-test of independent analysis was used for socio-demographic variables and job performance, correlational analysis was used for relationship between depression and work abstinence, regression analysis was used to test for prediction between depression and job performance, and in order to test for the statistical significance the p-value of 0.05 was used.

3.9 Ethical consideration

Ethical approval to conduct the study was obtained from the State Ministry of Health and the school authority before conducting the study. Informed consent was obtained from the participants without use of force, the aims and objectives of the study as well as procedure were explained to the respondent. They were told that information received from them (participants) is confidential and be used for research purpose. They were told that they can decline without any penalty.

CHAPTER FOUR
RESULTS

Table 1: Demographic Information of respondents

Variable	n (%)
Age category	
21-30	44 (21.4)
31-40	130 (63.1)
41-50	27 (13.1)
51-60	5 (2.4)
Gender	
Male	99 (48.1)
Female	107 (51.9)
Religion	
Christian	194 (94.2)
Islam	12 (5.8)
Job category	
Academic staff	71 (34.5)
Non-academic	135 (65.5)
Marital status	
Married	175 (85.0)
Separated	2 (1.0)
Divorced	1 (0.5)
Widowed	1 (0.5)
Never married	27 (13.1)
Educational level	
Primary	3 (1.5)
Secondary/SSCE	2 (1.0)
NCE/OND	24 (11.7)
B.Sc/HND	100 (48.5)
M.Sc	60 (29.1)
Ph.D	16 (7.8)

4.1: Demographic characteristics of study participants.

The study comprised of Academic and Non-Academic staff. There were 99 (48.1%) males and 107 (51.9%) females. The mean of the respondents was 26 to 56 years (35.60), about 60% of the respondents were between the ages of 26 to 35 years, and 40% respondents were between the ages of 35 to 56 years. The participants age ranged from 26 to 56 years, 175 (85%) were married, 2(1%) separated, 1(0.5%) divorced, 1 (0.5%) widowed, and 27 (13.1%) were single. Half of the respondents103 (50%) had B.Sc / HND grade, 60 (29.1%) had M.Sc grade, 25 (12.1%) had NCE / OND grade, 16 (7.8%) had Ph.D grade and 2 (1.0%) had SSCE grade. Also, 194(94.2%) of the respondents were Christians and 12 (5.8%) of the respondents were Muslims.

Table 2: Showing the response rate of respondents on BDI (depression scale)

VARIABLE	n (%)
Depression (Sadness Level)	
I do not feel sad	173 (84.0)
I feel sad	29 (14.1)
I am sad all the time	2 (1.0)
I am so sad and unhappy	2 (1.0)
Discouragement Level	
I am not particularly discouraged about the future	195 (94.7)
I feel discouraged about the future	9 (4.4)
I feel I have nothing to look forward to	2 (1.0)
Failure	
I do not feel like a failure	194 (94.2)
I feel I have failed more than the average person	9 (4.4)
As I look back on my life, all I can see is a lot of failure	2 (1.0)
I feel I am a complete failure	1 (0.5)
Feeling Of Satisfaction	
I get as much satisfaction out of things as I used to	150 (72.8)
I don't enjoy things the way I used to	50 (24.3)
I don't get real satisfaction out of anything anymore	4 (1.9)
Non response	2 (0.0)
Feeling of Guilt	
I don't feel particularly guilty	153 (74.3)
I feel guilty a good part of the time	44 (21.4)
I feel quite guilty most of the time	8 (3.9)
Non response	1 (0.5)
Feeling of being Punished	
I don't feel I am being punished	168 (81.6)
I feel I may be punished	22 (10.7)
I expect to be punished	3 (1.5)
I feel I am being punished	10 (4.9)
Non response	3 (1.5)
Feeling of Disappointment	
I don't feel disappointed in myself	194 (94.2)
I am disappointed in myself	10 (4.9)
I am disgusted with myself	1 (0.5)
Non response	1 (0.5)

4.2.1: Response rate of respondents

It is significant to note that some 14.1% of the respondents have the feeling of sadness in their selves and few 4.4% of the respondents have the feeling of discouragement and failure, also 24% of the respondents said they don't enjoy things the way they used to just 3% different from those with feeling of guilt and 10% of them reported feeling of being punished and 4.9% were disappointed in themselves.

Table 2:1 Showing the response rate of respondents on BDI (depression scale)

Feeling of Killing Oneself

I don't have any thoughts of killing myself	198 (96.1)
I have thoughts of killing myself, but I would not carry them out	6 (2.9)
I would kill myself if I had the chance	1 (0.5)
Non response	1 (0.5)

Crying

I don't crying any more than usual	169 (82.0)
I cry more now than I used to	9 (4.4)
I used to be able to cry, but now I can't even though I want to	25 (12.1)
Non response	3 (1.5)

Feel Irritated

I am no more irritated by things than I ever was	154 (74.8)
I am slightly more irritated now than usual	36 (17.5)
I am quite annoyed or irritated a good deal of the time	12 (5.8)
Non response	4 (1.9)

Loss of Interest in People

I have not lost interest in other people	128 (62.1)
I am less interested in other people than I used to be	56 (27.2)
I have lost most of my interest in other people	21 (10.2)
I have lost all of my interest in other people	1 (0.5)

Decision Making

I make decisions about as well as I ever could	154 (74.8)
I put off making decisions more than I used to	28 (13.6)
I have greater difficulty in making decisions more than I used to	24 (11.7)

Feel Unattractive

I don't feel that I look any worse than I used to	178 (86.8)
I am worried that I am looking old or unattractive	23 (11.2)
I feel there are permanent changes in my appearance that make me look unattractive	3 (1.5)
I believe that I look ugly	1 (0.5)
Non response	1 (0.5)

Working

I can work about as well as before	55 (27.4)
It takes an extra effort to get	74 (36.8)
started at doing something	3 (1.5)
I have to push myself very hard to do anything	69 (34.3)

4.2.1: Response rate of respondents

About 2.9% of the respondents have the feeling of killing their selves and few 4.4% of the respondents have the feeling of crying, also 17.5% of the respondents said they were irritated and 27.2% have lost interest in other people, 28% of the respondents said they have problem with decision making, 11% said they feel unattractive and 36.8% reported that it takes them an extra effort to get started at doing something.

Table 2:2 Showing the response rate of respondents on BDI (depression scale)

Sleeping

I can sleep as well as usual	122 (59.2)
I don't sleep as well as I used to	48 (23.3)
I wake up 1-2 hours earlier than usual and find it hard to get back to sleep	35 (17.0)
I wake up several hours earlier than I used to and cannot get back to sleep	1 (0.5)

Tiredness

I don't get more tired than usual	142 (68.9)
I get tired more easily than I used to	56 (27.2)
I get tired from doing almost anything	5 (2.4)
I am too tired to do anything	2 (1.0)
Non response	1 (0.5)

Appetite

My appetite is no worse than usual	153 (74.3)
My appetite is not as good as it used to be	47 (22.8)
My appetite is much worse	2 (1.0)
I have no appetite at all anymore	3 (1.5)
Non response	1 (0.5)

Loss of Weight

I haven't lost much weight, if any, lately	176 (85.4)
I have lost more than five pounds	23 (11.2)
I have lost more than ten pounds	2 (1.0)
I have lost more than fifteen pounds	3 (1.5)
Non response	2 (1.0)

Worry about Health

I am no more worried about my health than usual	156 (75.7)
I am worried about physical problems like aches, pains, upset stomach, or constipation	38 (18.4)
I am very worried about physical problems and it's hard to think of much else	5 (2.4)
I am so worried about physical problems that I cannot of anything else	5 (2.4)
Non response	2 (1.0)

Less Interest in Sex

I have not noticed any recent change in my interest in sex	141 (68.4)
I am less interested in sex than I used to be	50 (24.3)
I have almost no interest in sex	8 (3.9)
I have lost interest in sex completely	6 (2.9)
Non response	1 (0.5)

4.2.2: Response rate of respondents

About 23.3% of the respondents have been struggling with their sleep, 27.2% said they get tired easily, 22.8% have lost their appetite, 11.2% have lost their weight, 18% worry over their health, and 24.3% have lost interest in sex.

Table 3: Descriptive Statistics on working hours

	N	Minimum	Maximum	Sum	Mean	Std. Deviation
Time work begins	203	7.00	10.00	1639.00	8.0739	.37159
Time work ends	202	3.00	6.00	828.00	4.0990	.42332
Number of hours worked in the past 7 days	202	8.00	97.00	11040.00	54.6535	15.85942
Expected number of hours in 7-day week	200	20.00	97.00	10706.00	53.5300	12.46580
Number of hours working in the past 28 days	200	50.00	1568.00	44297.00	221.4850	127.99332

4.3: Showing the overall working hours of respondents

With the mean of 8.07, this means most of the respondents begin their work at 8.00 am, none of them begins after 10.00 am. Most of them close by 4.00 pm. The average number of hours spent at work in the past 7 days for most of them is 54.65, though the expected is 53.53 hours of work.

Table 4: Descriptive analysis showing the level of depression among respondents

Levels of depression	Frequency	Percentage (%)
No depression	158	76.7%
Mild Depression	42	20.4%
Moderate Severe Depression	6	2.9%
Severe Depression	____	____
More Severe Depression	____	____
Total	206	100%

4.4: The respondents level of depression ranging from no depression to more severe depression.

There were 158 (76.7%) of no depression among respondents, 42 (20.4%) mild depression among respondents, 6 (2.9%) moderate depression among respondents, 0 (0%) of severe depression among respondents, and 0 (0%) of more severe depression among respondents.

Table 5: Correlations among the Study Variables

Variable N=206	M (SD)	A	1	2
1. Depression	5.96 (5.79)	.83	-	
2. Absenteeism	1.37 (2.76)	-	.09	-
3. Job performance	52.05 (6.18)	.79	-.30**	-.18*

$^*p < .05$ (2-tailed) ^{a} Cronbach alpha

$^{**}p < .01$ (2-tailed)

4.5: The correlation among the study variables

The result of correlation analyses between study variables are presented in table 1 above. There was a significant negative correlation between depression and job performance [r (205) = -.30, p < .0001]. However, depression was not statistically related to absenteeism [r (205) = .09, p = .22]. Additionally, absenteeism and job performance were found to be negatively related to each other [r (205) = .0, p = -.18].

Table 6: Relative Importance Index Analysis on Job Performance

Ratings on Job Performance	1	2	3	4	5	SUM	∑FX	MEAN	RII	RANKING
Higher performance than most workers on job	4	9	47	94	52	206	799	3.879	0.776	7th
Lower performance than most workers on job	2	4	31	91	78	206	857	4.160	0.832	6th
Doing no work when supposed to be working	3	4	25	66	108	206	890	4.320	0.864	3rd
Not carefully working as should	3	2	21	87	93	206	883	4.286	0.857	4th
Quality of work	1	4	22	73	106	206	897	4.354	0.871	2nd
Concentration on work	8	4	20	76	98	206	870	4.223	0.845	5th
Health problems limiting amount of work	3	2	16	56	129	206	924	4.485	0.897	1st

4.6: Contributing factors to job performance

The most contributing factor is health problem with RII of 0.897, followed by Quality of work with RII of 0.871 while higher performance than most workers on job comes last with RII of 0.776

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Table 7: The prediction of depression on job performance

ANOVA[b]

Model		Sum of Squares	Df	Mean Square	F	P-value
1	Regression	23.717	2	23.717	18.845	0.001
	Residual	255.483	202	1.259		
	Total	279.200	204			

4.7: The prediction of depression on job performance

Hypothesis stated was, there will be a significant influence of depression on job performance. The result in table 2 above shows that depression symptoms significantly predict job performance (F, (1) 203) = 18.84; P<.05). This means that employees with depression symptoms significantly reported poor job performance while employees with no depressive symptoms significantly reported good job performance. Therefore, this hypothesis is supported.

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Table 8: Showing the influence of socio-demographic variables on job performance

T-test: Difference between male and female employees on their job performance

Variable	Male		Female		$t_{(204)}$	95%CI	Cohen's d
	M	SD	M	SD			
Job performance	52.18	6.45	51.93	5.92	.28	[-1.46, 1.95]	-

4.8: Influence of gender on job performance

The result in table 4 above shows that difference in job performance scores between male (n = 101, M = 52.18, SD = 6.45) and female employees (n = 105, M = 51.93, SD = 5.92) were not statistically significant, t (204) = .28, p = .78, 95% CI [-1.46, 1.95]. This means that being male or female does not determine levels of job performance. Therefore, this hypothesis is not supported.

Table 9: Showing the influence of socio-demographic variables on job performance

T-test: Difference between younger and older employees on their job performance

	Younger employees		Older employees				
Variable	M	SD	M	SD	t (198)	95%CI	Cohen's *d*
Job performance	51.88	5.99	52.30	6.56	-.48	[-2.19, 1.33]	-

4.9: Influence of age on job performance

The result in table 5 above shows that difference in job performance scores between younger employees (n = 120, M = 51.88, SD = 5.99) and older employees (n = 82, M = 52.30, SD = 6.56) were not statistically significant, t (200) = -.48, p = .63, 95% CI [-2.19, 1.33]. This means that age does not determine levels of job performance. Therefore, this hypothesis is not supported.

Table 10: Showing the influence of socio-demographic variables on job performance

T-test: Difference Academic and Non-Academic employees on their job performance

	Academic staff		Non academic staff				
Variable	M	SD	M	SD	t (204)	95%CI	Cohen's *d*
Job performance	52.15	5.50	52.00	6.52	.17	[-1.63, 1.94]	-

4.10: Influence of job category on job performance

The result in table 6 above shows that difference in job performance scores between academic staff (n = 71, M = 52.15, SD = 5.50) and non academic staff (n = 135, M = 52.00, SD = 6.52) were not statistically significant, t (204) = .17, p = .87, 95% CI [-2.19, 1.33]. This means that job category does not determine levels of job performance. Therefore, this hypothesis is not supported.

Table 11: Showing the influence of socio-demographic variables on job performance

T-test: Difference Non-graduates, Graduates and Post-graduate employees on their job performance

	Non graduates		Graduates		Post-graduate				
Variable	M	SD	M	SD	M	SD	$F_{(2, 203)}$	95%CI	η^2
Job performance	50.59	6.96	52.05	6.25	52.58	5.76	1.03	[-1.63, 1.94]	-

4.11: Influence of educational level on job performance

The result in table 7 above shows that difference in job performance scores among non graduates (n = 27, M = 50.59, SD = 6.96), graduates (n = 103, M = 52.5, SD = 6.25) and postgraduates (n = 76, M = 52.58, SD = 5.76) were not statistically significant, F (2, 203) = 1.03, p = .36. This means that education does not determine levels of job performance. Therefore, this hypothesis is not supported.

Table 12: Showing the influence of depression on work abstinence

T-test: Depressive symptoms level influence on work abstinence

No depression, Mild depression, Moderate severe depression, Severe depression & More severe depression							
Variable	M	SD	M	SD	t $_{(96)}$	95%CI	Cohen's d
Work absenteeism	1.17	2.17	1.70	3.49	-.92	[-1.66, .61]	-

4.12: the influence of depression on work abstinence

The result in table 2 above shows that difference in work absenteeism scores between participants level of depression (n = 58, M = 1.17, SD = 2.17), (n = 40, M = 1.70, SD = 3.49) were not statistically significant, t (96) = -.92, p = .36, 95% CI [-1.66, .61]. This means that depression does not determine work absenteeism. Therefore, this hypothesis is not supported.

Table 13: Descriptive analysis showing information on hours of work among respondents

Variable	n (%)
Regular schedule	178 (86.4)
Rotating schedule	8 (3.9)
Irregular schedule	19 (9.2)
Non response	1 (0.5)
Time work begins	
7.00 am	3 (1.5)
8.00 am	186 (90.3)
9.00 am	10 (4.9)
10.00 am	4 (1.9)
Non response	3 (1.5)
Time work ends	
5.00 pm	5 (2.4)
4.00 pm	176 (85.4)
6.00 pm	17 (8.3)
12.00 noon	4 (1.9)

4.13: The schedule and hours of work among the respondent

There were 178 (86.4%) of regular schedule employees among respondents, 8 (3.9%) of rotating schedule among respondents, 19 (9.2%) of irregular schedule employees among respondents, and 1 (0.5%) of no response among respondents. Most of the respondent's 186 (90.3%) starts work at 8:00. AM and end at 4:00, while others start work at 7:00 AM, 9:00 AM, 10:00 AM and end work at 12:00 PM, 5:00 PM and 6:00 PM.

Table 14: Descriptive analysis on work experience among respondents

Variable   N (%)

Any special work success or achievement	
Yes	105 (51.0)
No	99 (48.1)
Non response	2 (1.0)
Work success details	
General / Joint success	22 (10.7)
Unit / department success	28 (13.6)
Individual success	21 (10.2)
Non response	135 (65.5)
Any special work failure	
Yes	10 (4.9)
No	193 (93.7)
Non response	3 (1.5)

4.14: Respondents work experience

The respondents reported work achievement and work failure with yes 105 (51%) and no 10 (4.9%) and 5 (2.5) no response.

Table 15: Regression analysis showing prediction number

of hours spent in a week on overall job performance

	Df	SS	MS	F	Significance F
Regression	2	5.323557	2.661779	1.956094	0.144065969
Residual	203	276.2347	1.360762		
Total	205	281.5583			

	Coefficients	Standard Error	t Stat	P-value
Intercept	7.994715397	0.366616	21.80681	4.27E-55
hrs7days(x1)	0.012060559	0.006516	1.850796	0.065652
Exphrs7days(x2)	-0.004670791	0.008169	-0.57174	0.568127

4.15: Hours spent in week on job performance

Since the P-value 0.1440 is greater than 0.05 level of significance, it can be concluded that number of hours spent in a week and the expected hours do not have effect on job performance of workers

Table 16: T-test, comparison of means between number of hrs/week and

Expected number of hrs/ week working

	hrs7days(x 1)	Exphrs7days(x 2)
Mean	54.50485437	53.34466
Variance	248.06583	157.8367
Observations	206	206
Df	410	
t Stat	0.826520057	
P(T<=t) two-tail	0.408989872	
t Critical two-tail	1.96576684	

4.16: Hours of work per week and expected number of hour's week working

Since the p-value 0.4089 is greater than 0.05 level of significance, it shows that there is no significant means difference between the number of hours at work per week and the expected number of hours at work per week.

CHAPTER FIVE

DISCUSSION, CONCLUSION, RECOMMENDATION

5.1 Discussion

The findings of this study have limited generalizability and may need to be confirmed by further research in other organizations. However numerous studies related allow for direct comparison with this study. With this limitation in mind, the study evaluated the influence of depression on job performance among the employees of Federal University Oye Ekiti and the results indicated a significant relationship.

Participants reported depressive symptoms and abstinence from their place of work. During the course of this study, variables such as depression, work abstinence were seen to have a significant influence on job performance. This is not surprising, in that these findings are in line with the affective event theory proposed by Weiss & Cropanzano (1996), which outline the following as factors that influence job performance, organizational commitment, and job satisfaction: cognitions, emotions, mental states, and reactions to incidents that occur in their work environment that can affect employees' performance. It was found out during the course of this study that the factors responsible for poor performance were not the same factors that triggered absenteeism among workers, but depression and work abstinence both adversely affected employee's work production.

The study showed that (23.3%) of participants were depressed on their job, while (76.7%) were not depressed on their job. Hypothesis one examined depression on job performance to the extent of those who have depressive symptoms will significantly report poor job performance in an

organization. The result derived from regression analysis revealed that depression significantly predicted job performance. However, this means that presence of depressive symptoms will result in poor job performance while absence of depressive symptoms will result in good performance of an employee. These findings are underpinned by the findings of Wang et al (2003) workplace study where it was found that depression significantly impaired ability to focus on tasks. Arne Beck et al (2011) also reported monotonic relationship between depression symptom severity and productivity loss, even minor levels of depressive symptoms were associated with decrement in work function, employee's job employment statuses, and health, were also associated with a loss of productivity. Therefore the hypothesis is supported.

Hypothesis two investigated socio-demographic variables on job performance that differences on respondent's characteristics will significantly influence their job performance. The result obtained t-test of independent indicated that socio-demographic variables have no significant influence on job performance. However, in this study socio-demographic variables have no significant impact on the functioning of an employee in an organization, being a male of female makes no difference on how an employee will execute job related task. The socio-demographic variables on job performance in this study is contrary to other findings from Ndifuna (1992) that found out age positively correlated with organizational commitment, also, Herbiniak and Alutto (1972) found that females were less likely to change their organization compared to their male coworkers. However, regardless of findings from other studies, this study found out that socio-demographic variables have no significant influence on job performance.

This study also reveal that 178 (86.4%) of respondents were on regular schedule, 8 (3.9%) of respondents were on rotating schedule, 19 (9.2%) of respondents were on irregular schedule, and

1 (0.5%) of no response among respondents. Most of the respondent 186 (90.3%) starts work at 8:00. AM and end at 4:00, while others start work at 7:00 AM, 9:00 AM, 10:00 AM and end work at 12:00 PM, 5:00 PM and 6:00 PM. Hypothesis three examined depression on work abstinence, that presence of depressive symptoms will significantly influence work abstinence. The result obtained from correlational analysis indicated that depression have no significant influence on work abstinence. The result of this study is contrary to findings from Hoque & Islam (2003) which found that job satisfaction contributes negatively to absenteeism, thus the lower the satisfaction levels, the higher absenteeism amongst the sample of workers, but supported by findings from Clegg (1983) and Goldberg & Waldman (2000) which found that there is no relationship between the job satisfaction and work absenteeism. However, being depressed does not make an employee abstain from work, because some employees might be depressed and still be present in their assigned station in an organization.

5.2 Conclusion

Depression on one's job can affect not only job performance at work but also career decisions, relationships with others and personal health. The aim of this study was to predict how depression affected job performance among employees of Federal University Oye Ekiti. By employing a cross-sectional approach, socio-demographics, and the relationship between level of depression and job performance were accessed using the instrument among Fuoye employees of 206 and it was a self administered questionnaire.

The findings of this study showed a relationship between depression and job performance among FUOYE employees. However, other factor found to influence job performance was work abstinence. No association was found between socio-demographic characteristics and job performance.

Three hypotheses were generated for the study out of which one was accepted and two were rejected, the following are the main findings from this study;

1. The study found a significant relationship between depression and job performance among the organization employees surveyed. 23% of the employees were depressed on their job.

2. The study found that socio-demographic variables have no significant influence on job performance ($p=0.001$).

3. The study found that depression have no significant influence on work abstinence ($p=0.000$).

4. Factors found to be significantly associated with job performance were, depression and work abstinence ($p=0.000$).

5. Quarter of participants (23.3%) was depressed on their job while (76.7) were not depressed.

5.3 Recommendations

This study helps to understand that mental health plays a big role in determining the extent of an individual's job performance, also this study shows that in any job related behavior, mental health should be accessed before an individual decides to execute the task given. Finally, mental health of policy makers can also be accessed before assigning to a post because it is job related activities. Based on the findings of this study, the following are recommended: Organizations need to understand that mental state of an employee; this may help to reduce depressive symptoms for good job performance. Measuring employee's job performance should not be based on mental health alone. Rather, other health variables other than mental health may be of significance in determining job performance among employees. Improving the work environment so that it provides a context in line with the aspirations of employees which is likely to improve job performance and consequently have a positive effect on individual, and organization.

The findings also revealed that if not managed effectively, work presence problems will affect the job performance of an employee and also the organization at large. Thus, effective programmes to reduce work related stress which can lead to depression and work abstinence should be implemented.

5.4 LIMITATIONS

This study was challenged with some limitations. These include the following: The study's variable of interest was only predicted with one variable among health variables. However, there are some other variables that may be of significance in examining job performance of employees.

The study instrument items were too much for the respondents especially the depression scale, this made the instrument to be excessive and time consuming for the respondents.

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APPENDIX

INFORMED CONSENT FORM

This study is being conducted by Lawal Afeez Oladipupo, an undergraduate student in department of psychology, Federal University Oye Ekiti. The study is self sponsored as part of the requirement for the degree in B.sc pure and applied psychology.

I am conducting a research to explore how depression can predict job performance among the employees of the Federal University of Oye Ekiti. The information you provide will help us understand how depression can predict job performance. Please note that your answers will be confidential and NOT release to anyone else. Result obtained from this result will be made available to authorities for prompt intervention.

Your participation in this study will not cost you anything. Your honest answers will be highly appreciated. You are free to refuse and withdraw at any given time if you choose to. We will greatly appreciate your help in responding to the questions and also taking part in the study.

Consent: now that the study has been well explained to me and I fully understand the consent of the study process. I will be willing to take part in the study.

_____   _____

Signature of participant/date   Signature of researcher/date

SECTION A

DEMOGRAPHIC CHARACTERISITICS

Please tick as appropriate for the selected answer(s) that best apply.

1. How old were you as at last birthday? Age (in complete years) _____

2. Gender: Male ( ) Female ( )

3. Religion: Christianity ( ) Islamic ( ) Traditional ( )

4. Job category: Academic staff ( ) Non- Academic ( )

5. Marital status: Married ( ) Separated ( ) Divorced ( ) Widowed ( ) Never Married ( )

6. What is the highest grade or level of school that you have completed?

Primary ( ) Secondary/SSCE ( ) NCE/OND ( ) BSC/HND ( ) MSC ( ) PHD ( )

SECTION B

Please tick as appropriate for the selected answer(s) that best apply.

7.　　0. I do not feel sad.

　　　1. I feel sad

　　　2. I am sad all the time and I can't snap out of it.

　　　3. I am so sad and unhappy that I can't stand it.

8.　　0. I am not particularly discouraged about the future.

　　　1. I feel discouraged about the future.

　　　2. I feel I have nothing to look forward to.

　　　3. I feel the future is hopeless and that things cannot improve.

9.   0. I do not feel like a failure.   ☐

    1. I feel I have failed more than the average person.   ☐

    2. As I look back on my life, all I can see is a lot of failures.   ☐

    3. I feel I am a complete failure as a person.   ☐

10.   0. I get as much satisfaction out of things as I used to.   ☐

    1. I don't enjoy things the way I used to.   ☐

    2. I don't get real satisfaction out of anything anymore.   ☐

    3. I am dissatisfied or bored with everything.   ☐

11.   0. I don't feel particularly guilty.   ☐

    1. I feel guilty a good part of the time.   ☐

    2. I feel quite guilty most of the time.   ☐

    3. I feel guilty all of the time.   ☐

12.   0. I don't feel I am being punished.   ☐

    1. I feel I may be punished.   ☐

    2. I expect to be punished.   ☐

    3. I feel I am being punished.   ☐

13.   0. I don't feel disappointed in myself.   ☐

    1. I am disappointed in myself.   ☐

    2. I am disgusted with myself.   ☐

    3. I hate myself.   ☐

14.   0. I don't feel I am any worse than anybody else. ☐

         1. I am critical of myself for my weaknesses or mistakes. ☐

         2. I blame myself all the time for my faults. ☐

         3. I blame myself for everything bad that happens. ☐

15.   0. I don't have any thoughts of killing myself. ☐

         1. I have thoughts of killing myself, but I would not carry them out. ☐

         2. I would like to kill myself. ☐

         3. I would kill myself if I had the chance. ☐

16.   0. I don't cry any more than usual. ☐

         1. I cry more now than I used to. ☐

         2. I cry all the time now. ☐

         3. I used to be able to cry, but now I can't cry even though I want to. ☐

17.

         0. I am no more irritated by things than I ever was. ☐

         1. I am slightly more irritated now than usual. ☐

         2. I am quite annoyed or irritated a good deal of the time. ☐

         3. I feel irritated all the time. ☐

18.

    0. I have not lost interest in other people. ☐

    1. I am less interested in other people than I used to be. ☐

    2. I have lost most of my interest in other people. ☐

    3. I have lost all of my interest in other people. ☐

19.

    0. I make decisions about as well as I ever could. ☐

    1. I put off making decisions more than I used to. ☐

    2. I have greater difficulty in making decisions more than I used to. ☐

    3. I can't make decisions at all anymore. ☐

20.

    0. I don't feel that I look any worse than I used to. ☐

    1. I am worried that I am looking old or unattractive. ☐

    2. I feel there are permanent changes in my appearance that make me look ☐

        unattractive.

    3. I believe that I look ugly. ☐

21.

    0. I can work about as well as before. ☐

    1. It takes an extra effort to get started at doing something. ☐

    2. I have to push myself very hard to do anything. ☐

    3. I can't do any work at all. ☐

22.

    0. I can sleep as well as usual. ☐

    ☐

1. I don't sleep as well as I used to.

2. I wake up 1-2 hours earlier than usual and find it hard to get back to sleep. ☐

3. I wake up several hours earlier than I used to and cannot get back to sleep. ☐

23.

0. I don't get more tired than usual. ☐

1. I get tired more easily than I used to. ☐

2. I get tired from doing almost anything. ☐

3. I am too tired to do anything. ☐

24. 0. My appetite is no worse than usual.

1. My appetite is not as good as it used to be. ☐

2. My appetite is much worse now. ☐

3. I have no appetite at all anymore. ☐

25. 0. I haven't lost much weight, if any, lately. ☐

1. I have lost more than five pounds. ☐

2. I have lost more than ten pounds. ☐

3. I have lost more than fifteen pounds. ☐

26. 0. I am no more worried about my health than usual. ☐

1. I am worried about physical problems like aches, pains, upset stomach, or ☐

constipation.

2. I am very worried about physical problems and it's hard to think of much else. ☐

3. I am so worried about my physical problems that I cannot think of anything else. ☐

27. 0. I have not noticed any recent change in my interest in sex. ☐

1. I am less interested in sex than I used to be. ☐

☐

2. I have almost no interest in sex.

3. I have lost interest in sex completely. ☐

SECTION C

Instructions: Please tick as appropriate for the selected answer(s) that best apply.

28. Your work is best scheduled as a regular schedule (roughly the same hours every day), a rotating schedule (e.g., working a day shift some days and a night shift other days), or an irregular schedule (e.g., unpredictable hours controlled by situations or workload)?

Regular schedule ☐

Rotating schedule ☐

Irregular schedule ☐

29. What time do you usually begin work? ☐ ☐ ☐ : ☐   AM/PM

30. What time do you usually end work? ☐ ☐ ☐ : ☐   AM/PM

31. How many people do you personally supervise on your job? (If more than 97, enter 97.)

☐ ☐ NUMBER OF PEOPLE (00-97)

32. About how many hours altogether did you work in the past 7 days? (If more than 97, enter 97.)

☐ ☐ NUMBER OF HOURS (00-97)

33. How many hours does your employer expect you to work in a typical 7-day week? (If it varies, estimate the average. If more than 97, enter 97.)

☐ ☐

SECTION D

INSTRUCTION: please think of your work experiences over the past 4 weeks (28 days). In the spaces provided below, write the number of days you spent in each of the following work situations.

34. In the past 4 weeks (28 days), how many days did you.....?

		Number of days 00-28
A	...miss an entire work day because of problems with your physical or mental health? (Please include only days missed for your own health, not someone else's health.)	
B	...miss an entire work day for any other reason (including vacation)?	
C	...miss part of a work day because of problems with your physical or mental health? (Please do not include entire work days missed. Please include only days missed for your own health, not someone else's health.)	
D	...miss part of a work for any other reason (including vacation)? (Please do not include entire work days missed.)	
E	...come early, go home late, or work on your day off?	

35. Think of (all) the (insert exact number if possible) days in the past four weeks (28 days) when you missed either a full day of work or a partial day of work. Count partial days as whole days.

How many of these (insert exact number if possible) days did you...

Number of days 00-28

72

F	...not receive pay?	
G	...get paid as part of regular salary?	
H	...use earned sick leave (while receiving regular pay)?	
I	...use earned vacation time (while receiving regular pay)?	
J	...get paid as short-term or long-term disability?	
K	...get paid as a result of an injury at work?	

36. About how many hours altogether did you work in the past4 weeks (28 days)?

☐ ☐ ☐

37. In the past 4 weeks (28 days), did you have any special work success or achievement?

Yes ☐   No ☐

38. If you answered YES to the above question, please describe what happened.

_____

_____

39. In the past 4 weeks (28 days), did you have any special work failure?

☐ ☐
Yes   No

40. If you answered YES to the above question, please describe what happened.

_____

_____

_____

41. The next questions are about the time you spent during your hours at work in the past 4 weeks (28 days). Select the response for each question that comes closest to your experience.

		All of the time	Most of the time	Some of the time	A little of the time	None of the time
a.	How often was your performance higher than most workers on your job?					
b.	How often was your performance lower than most workers on your job?					
c.	How often did you do no work at times when you were supposed to be working?					
d.	How often did you find yourself not working as carefully as you should?					
e.	How often was the quality of your work lower than it should have been?					
f.	How often did you not concentrate enough on your work?					
g.	How often did health problems limit the kind or amount of work you could do?					

42. On a scale from 0 to 10 where 0 is the worst job performance anyone could have at your job and 10 is the performance of a top worker, how would you rate the usual performance of most workers in a job similar to yours?

Worst performance   Top performance

1	2	3	4	5	6	7	8	9	10
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

43. Using the same 0-to-10 scale, how would you rate your usual job performance over the past year or two?

Worst performance   Top performance

1	2	3	4	5	6	7	8	9	10
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

44. Using the same 0-to-10 scale, how would you rate your overall job performance on the days you worked during the past 4 weeks (28 days)?

Worst performance   Top performance

1	2	3	4	5	6	7	8	9	10
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

45. How would you compare your overall job performance on the days you worked during the past 4 weeks (28 days) with performance of most other workers who have similar type of job? (Select only one in the options below.)

You were a lot better than other workers ☐

You were somewhat better than other workers ☐

You were a little better than other worker ☐

You were about average ☐

You were a little worse than other workers ☐

You were somewhat worse than other workers ☐

You were a lot worse than other workers ☐

That completes the survey. Thanks very much for your participation.

FEDERAL UNIVERSITY OYE-EKITI
FACULTY OF HUMANITIES & SOCIAL SCIENCES
DEPARTMENT OF PSYCHOLOGY

Head of Department:
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Professor of Industrial & Organizational Psychology
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Km 3, Oye-Afao Road
Oye-Ekiti, Ekiti State, Nigeria.
Website: www.fuoye.edu.ng

17 February 2016

Dear Sir/Ma,

LETTER OF INTRODUCTION

This is to certify that __Lawal Afeez Oladipupo__ ———————— with Matriculation Number __PSY/12/0690__ ———————— is a 400 level (Final year) undergraduate student in the Department of Psychology, Federal University Oye-Ekiti, Ekiti State. He/She is currently carrying out a research work on the topic __Depression as predictor of Job performance among Federal University Oye Ekiti employees__

as part of the requirements for the award of Bachelor of Science (B.Sc) degree in Psychology.

Kindly render to him/her the necessary assistance needed towards the completion of the research study.

Thank you for your cooperation.

Benjamin Omolayo, PhD
Professor & Head,
Department of Psychology
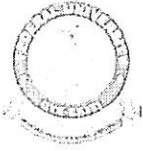
FEDERAL UNIVERSITY OYE-EKITI

OFFICE OF THE REGISTRAR

INTERNAL MEMORANDUM

To: Prof. Benjamin Omolayo	From: Registrar
HOD, Psychology	
Date: 11th March, 2016	Ref.: FUOYE/REG/PSY/043/ 02

RE: LETTER OF INTRODUCTION

I refer to your letter to the Registrar received on Thursday 3rd of March, 2016 by which you introduced your final year undergraduate student, Mr. Lawal Afeez Oladipupo and requested that necessary assistance be granted him in conducting his research work titled "Depression as the Predictor of Job Performance among Federal University Oye-Ekiti Staff.

I hereby write to convey approval to conduct the research in the University while wishing him success with his research work.

Thank you.

Faith T. Oluwatade
Admin Officer (Registrar's Office)
For: Registrar

MINISTRY OF HEALTH

Phase III, State Secretariat Complex, Ado - Ekiti, Ekiti State, Nigeria.

All Communications should be addressed
To the Permanent Secretary quoting

Our Ref: MOH/PRS/15/116

Date: 11th April, 2016

Lawal Afeez Oladipupo,
Department of Psychology,
Faculty of Humanities and Social Sciences,
Federal University, Oye- Ekiti.

RE: PERMISSION TO CARRY OUT A RESEARCH WORK

Further to your application dated 30th March, 2016 seeking approval to conduct a research titled: Depression as the predictor of job performance among FUOYE staff, I have been directed to convey the position of the State Ministry of Health to you;

2.   Sequel to the request and having studied your proposed methodology, I am pleased to inform you that your request has been approved.

3,   However, you are to note that the national code for health research requires compliance with institutional guidelines, rules and regulations as it is expected that, a copy of the research report be forwarded to the State Ministry of Health for official use.

Mrs. M.O Arogundade
For: Permanent Secretary

STAFF STATISTICS BASED ON DEPARTMENTS AND UNITS IN THE UNIVERSITY

FACULTY OF AGRICULTURE

DEPARTMENT	JUNIOR	SENIOR	TECNOLOGIST	TOTAL (NON ACADEMIC STAFF)	ACADEMIC	TOTAL
DEAN'S OFFICE	1	1	-	2	-	2
FACULTY OFFICE	1	8	-	9	-	9
AGRICULTURAL ECONOMICS & EXTENSION	1	2	1	4	12	16
ANIMAL PRODUCTION & HEALTH	1	4	1	6	10	16
CROP SCIENCE & HORTICULTURE	1	3	1	5	12	17
FISHERIES & AQUACULTURE	1	3	-	4	12	16
FOOD SCIENCE & TECHNOLOGY	1	2	1	4	13	17
SOIL SCIENCES	1	4	1	6	9	15
WATER RESOURCES MANAGEMENT & AGRO-METEOROLOGY	-	3	1	4	10	14
UNIVERSITY FARMS	4	18	-	22	-	22
TOTAL	12	48	6	66	78	144

FACULTY OF ENGINEERING

DEPARTMENT	JUNIOR	SENIOR	TECNOLOGIST	TOTAL (NON ACADEMIC STAFF)	ACADEMIC	TOTAL
DEAN'S OFFICE	1	1	-	2	-	2
FACULTY OFFICE	6	8	-	14	-	14
AGRICULTURAL & BIORESOURCES ENGINEERING	1	6	5	12	11	23
CIVIL ENGINEERING	4	3	2	9	9	18
COMPUTER ENGINEERING	2	4	-	6	13	19
ELECTRICAL & ELECTRONICS ENGINEERING	1	5	4	10	17	27
MATERIALS AND METALLUGICAL ENGINEERING	5	3	3	11	12	23
MECHANICAL ENGINEERING	2	2	4	8	10	18
MECHATRONICS ENGINEERING	1	3	2	6	5	11
TOTAL	23	35	20	78	77	155

FACULTY OF ART

DEPARTMENT	JUNIOR	SENIOR	TECNOLOGIST	TOTAL (NON ACADEMIC STAFF)	ACADEMIC	TOTAL
DEAN'S OFFICE	2	5	-	7	-	7
FACULTY OFFICE	4	7	-	11	-	11
ENGLISH & LITERARY STUDIES	1	5	-	6	16	22
THEATRE & MEDIA ARTS	7	8	3	18	15	33
TOTAL	14	25	3	42	31	73

	JUNIOR	SENIOR	TECNOLOGIST	TOTAL (NON ACADEMIC STAFF)	ACADEMIC	TOTAL
GROUND TOTAL	49	108	29	186	186	372

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FACULTY OF SOCIAL SCIENCES

DEPARTMENT	JUNIOR	SENIOR	TECNOLO GIST	TOTAL (NON ACADEMIC STAFF)	ACADEMIC	TOTAL
DEAN'S OFFICE	1	6	-	7	-	7
FACULTY OFFICE	2	8	-	10	-	10
DEMOGRAPHY & SOCIAL STATISTIC	1	6	2	9	8	17
PSYCHOLOGY	1	5	-	6	11	17
SOCIOLOGY	1	5	-	6	11	17
ECONOMICS & DEVELOPMENT STUDIES	-	6	-	6	18	24
GENERAL STUDIES (GST)	-	7	-	7	10	17
TOTAL	6	43	2	51	58	109

FACULTY OF SCIENCES

DEPARTMENT	JUNIOR	SENIOR	TECNOLO GIST	TOTAL (NON ACADEMIC STAFF)	ACADEMIC	TOTAL
DEAN'S OFFICE	1	4	-	5	-	5
FACULTY OFFICE	3	8	-	11	-	11
ANIMAL & ENVIRONMENTAL BIOLOGY	3	4	2	9	11	20
BIOCHEMISTRY	1	4	3	8	15	23
COMPUTER SCIENCE	-	4	5	9	15	24
GEOLOGY	3	5	2	10	7	17
GEOPHYSICS	1	5	2	8	10	18
CHEMISTRY	3	5	7	15	12	27
MATHEMATICS	1	4	2	7	13	20
MICROBIOLOGY	4	5	5	14	12	26
PHYSICS	2	4	8	14	12	26
PLANT SCIENCE & BIOTECHNOLOGY	5	3	2	10	7	17
TOTAL	27	55	38	120	114	234

UNIVERSITYLIBRARY

DEPARTMENT	JUNIOR	SENIOR	TECNOLO GIST	TOTAL (NON ACADEMIC STAFF)	ACADEMIC	TOTAL
UNIVERSITYLIBRARY	27	15	0	42	5	47

DEPARTMENT	JUNIOR	SENIOR	TECNOLO GIST	TOTAL (NON ACADEMIC STAFF)	ACADEMIC	TOTAL
GROUND TOTAL	109	221	69	399	363	762

DEPARTMENT/UNIT	JUNIOR	SENIOR	TECNOLOGIST	TOTAL (NON ACADEMIC STAFF)	ACADEMIC	TOTAL
GROUND TOTAL (B/F)	109	221	69	399	363	762
VICE -CHANCELLOR'S OFFICE	3	11	-	14	-	14
DEPUTY VICE-CHANCELLOR OFFICE	2	8	-	10	-	10
ACADEMIC PLANNING	1	27	-	28	-	28
PROCUREMENT	4	7	-	11	-	11
INFORMATION AND PROTOCOL UNIT	2	13	-	15	-	15
REGISTRAR'S OFFICE	5	14	-	19	-	19
PERSONNEL AFFAIRS DIVISION	3	19	-	22	-	22
ACADEMIC AFFAIRS	1	19	-	20	-	20
COUNCIL AFFAIRS	2	9	-	11	-	11
SPORTS	1	5	-	6	-	6
SIWES	-	4	-	4		4
DIRECTORATE OF DISTANCE LEARNING	-	2	-	2	-	2
BURSARY	9	60	-	69		69
INTERNAL AUDIT	2	23	-	25	-	25
HEALTH CENTRE	33	44	-	77	-	77
INNOVATION AND RESERCH CENTRE	7	22	-	29	-	29
PRE-DEGREE	4	12	-	16	-	16
LEGAL UNIT	1	6	-	7	-	7
NHIS	-	5	-	5	-	5
LIPERD	-	6	1	7	-	7
CEDSS	3	17	-	20	-	20
ICT	8	20	-	28	-	28
SECURITY	59	15	-	74	-	74
MAINTENANCE	44	13	-	57	-	57
PHYSICAL PLANNING UNIT	4	28	-	32	-	32
STUDENT AFFAIRS	33	27	-	60	-	60
GUIDANCE AND COUNSELING UNIT	2	12	-	14	-	14
DEVELOPMENT AND FUND RAISING	1	4	-	5	-	5
REVENUE YEILDING	1	6	-	7	-	7
SERVICOM	1	6	-	7	-	7
UNIVERSITY LIAISON OFFICE, ABUJA	6	8	-	14	-	14
GROUND TOTAL	351	693	70	1114	363	1477