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INFLUENCE OF DEMOGRAPHIC FACTORS AND UNEMPLOYMENT ON MENTAL HEALTH AMONG YOUTHS IN SOUTH-EAST, NIGERIA

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ABSTRACT: This study examined how demographic factors and unemployment affect the mental health of youths in Southeast Nigeria. Data were collected across the five states in the region; from 160 participants, with half of them unemployed and the other half employed. The age range of the participants ranged from 15 – 29 years, with a mean of 22.40 and a standard deviation of 3.39; while the mean for gender was 63 with a standard deviation of 0.49. A purposive sampling technique was adapted for the study, and the Symptom Distress Checklist 90 (SCL-90) was used to assess the mental health of the participants. The data were analysed with t-tests and multiple regression analysis. The study found that unemployed youths had higher levels of psychological distress compared to their employed counterparts ($M = 182.91$, $SD = 47.10$; $t(399) = 11.10$, $p < .001$). Age ($\beta = -1.36$, $p > .05$), gender ($\beta = -.76$, $p > .05$), length of unemployment ($\beta = .81$, $p > .05$), and education level ($\beta = .64$, $p > .05$) did not significantly predict mental health problems. However, when looking at gender differences, unemployed males experienced more distress ($M = 203.48$, $SD = 26.35$) than unemployed females ($M = 147.90$, $SD = 33.84$; $t(199) = 18.84$, $p < .001$). These findings emphasize the need for mental health support and policies targeting unemployed youths in the region.

Keywords: Youths, Demographic Factors, Unemployment, Mental Health, Southeast Nigeria

INTRODUCTION

The growing concern of youth unemployment in Nigeria, particularly in the southeast region, raises various issues, including its association with mental health problems (Osita et al., 2022). International Labour Organization (1998) defines youth unemployment as joblessness for individuals aged 16 to 24, but Nigeria's new Youth Policy (2019) extends the age range to 15-29. Rising unemployment rates in Nigeria exacerbate social and public health concerns among youths, with observable factors associated with mental health issues. Unemployed youths are being affected disproportionately particularly in the areas concerning their social and economic lives (Virk et al., 2024), as a consequence emanating from this experience in southeast Nigeria, the unemployed youths are likely to manifest symptoms such as identity crisis, self-confusion, and alienation, leading to a loss of balance and meaninglessness in life. (Virk, et al., 2024).

The Nigeria Bureau of Statistics (2020) highlights the alarming levels of unemployment in the southeast region, especially in states such as Imo and Abia, suggesting potentially significant impacts on the mental health of young people in these areas. This emphasizes the urgent need

for policies and programs addressing unemployment's root causes and providing support, including mental health services.

Examining unemployment data from the National Bureau of Statistics (NBS) between the third quarter of 2018 and the fourth quarter of 2020 reveals concerning trends in south-eastern, Nigeria. Imo State saw a substantial increase in unemployment, from 28.2% in 2018 to 56.64% in 2020, making it the highest in the region. Abia state followed, with a 50.07% unemployment rate in 2020 compared to 31.6% in 2018. The states of Anambra, Ebonyi, and Enugu also experienced significant increases in unemployment rates during this period. The cumulative figures for 2018–2020 indicate that 4 out of every 10 youths in focus were without a job, reflecting a worsening situation with severe implications for mental health (NBS, 2018, 2020).

Despite promises to address the issues of limited access to formal education, re-examining global forces driving youth's unemployment and ensuring diversity, equity and inclusion, governments appear overwhelmed by economic challenges. (Falola, 2021; Fergusson et al., 2021). Long-term unemployment contributes to physical and psychological health disturbances among individuals, additionally, unemployed youths face endemic factors such as anxiety, depression, high blood pressure, alcohol consumption, and increased crime rates. (Artazcoz, et al., 2004).

This study explores how demographic factors and unemployment profoundly impact young people's mental health, leading to increased health problems, unhealthy behaviours, and substance abuse which significantly affect their quality of life.

The Latency Deprivation Model and the Agency Restrictions Model are classic models proposed by Jahoda (1982) and Fryer (1986) respectively. Both models explain the psychological effects of unemployment. According to the latency deprivation model, work provides psychological benefits such as social identity and purpose, which are lost during unemployment, resulting in depression and anxiety. As far as we know, Marie Jahoda's work is the most cited theory concerning this topic. This theoretical psychological model was created to provide answers as to whether employment is beneficial for our well-being and the reason. The theory argues that employment not only provides manifest functions but also provides the latent functions (Paul et al., 2023) . In addition to tangible benefits such as income, employment fulfils psychological needs such as time structure and social contact, which are lost when unemployed, contributing to negative well-being (Artazcoz, et al., 2004). Research on unemployment in the last three decades has convincingly indicated that unemployment leads to psychological distress and that re-employment improves mental health (Wilson & Finch, 2021). In other words, there seems to be a link between unemployment and poor mental health.

Other researchers have examined the latent benefits of employment separately and reported their effects on psychological wellbeing. Jahoda (1982) contended that the primary latent benefit lies in the time structure, asserting that the absence of this benefit was "perceived as a significant psychological burden." Several studies have indicated that individuals without employment experience less structured and directed use of time compared to those who are employed (Paul & Batinic, 2010). Moreover, consistent evidence has emerged linking time structure with psychological well-being. Various researchers have connected lower levels of structured and purposeful time utilization with reduced self-esteem, increased depression, and heightened psychological distress. In a comprehensive study on the functions of work by Aitken et al., (2021), it was concluded that time structure acted as a buffer, mitigating the

adverse effects of unemployment (Creed & Macintyre, 2001). Regarding activity levels, unemployed individuals have been found to engage in fewer activities than the general population. Numerous studies have also demonstrated a correlation between activity levels and well-being among unemployed individuals. Zechmann & Paul (2019) found that unemployed individuals who allocated more time to competence-serving activities such as household chores, socializing, and active leisure and less time to idling and passive leisure exhibited better psychological well-being.

The Agency Restrictions Model proposed by Fryer (1986) underscores how unemployment diminishes an individual's sense of agency and control, leading to negative psychological consequences such as low self-esteem and hopelessness. Fryer argues that beyond financial strain, unemployment undermines one's sense of control over life. In a study by Lucas et al. (2004), unemployment resulted in a 38% decrease in happiness even after income changes were considered. Both the Latency Deprivation Model and the Agency Restrictions Model underscore the detrimental impact of unemployment on mental well-being, with the former focusing on social identity and purpose and the latter on control and agency. These models suggest different policy approaches; the Latency Deprivation Model recommends fostering social engagement, while the Agency Restrictions Model suggests interventions to restore a sense of control, such as job training or entrepreneurship support (Osita, et al., 2022).

The models discussed here offer crucial insights into the intricate link between unemployment and mental health, underscoring the necessity for a holistic support approach for unemployed people. Studies by Artazcoz et al., (2004), Wilson and Finch (2021), and Organisation for Economic Co-operation and Development (OECD) (2008), indicate that unemployment exposure leads to psychological distress. For instance, Wilson & Finch (2021) reported that unemployed individuals exhibit significantly greater levels of anxiety, depression, and other symptoms than do employed individuals which unarguably can leave the individual feeling helpless.

Industrial psychologists have extensively researched the psychological impact of unemployment for more than 60 years, spanning from the Great Depression to the present. Studies consistently show that unemployment negatively affects psychological well-being, with unemployed individuals reporting higher levels of distress, lower self-perceived mental health and different factors contributing to worsening mental and physical health (Li & Nowrouzi-kia, 2024; Paul & Batinic, 2010; Vicky, et al., 2019) and depression (Guan, et al., 2022; Breslin & Breslin 2013) and lower self-esteem (Alvero et al., 2019) than their employed counterparts. Zubair, et al., (2016) reported that demographic factors such as age, gender and duration of unemployment did not significantly affect the mental health of unemployed individuals. Similarly, Borgonovi & Maclean (2014) found in a systematic review that while demographic factors might play a role, overall evidence does not support their significant influence on the mental health of unemployed individuals. Connelly et al. (2003), in their meta-analytic review of the mental health effects of unemployment observed that demographic factors did not have a significant effect on the mental health of unemployed individuals. In a study by Browning et al. (2018) examining the relationship between unemployment and psychological distress, focusing on gender differences, the results suggested that unemployment was more strongly associated with psychological distress in men than in women. Men tended to experience a greater level of distress when facing unemployment due to various social and cultural factors that influence traditional gender roles. In another study, Li et al. (2020) investigated the gendered pathways through which job loss leads to

psychological distress. The study revealed that women were more likely to experience psychological distress as a result of job loss due to the additional stressors they faced, such as financial instability and difficulties balancing work and family responsibilities. Men, on the other hand, were more inclined to experience distress related to loss of social identity and self-esteem tied to their employment status. These studies (Browning et al., 2018; Li et al., 2020) collectively point out the complex interplay between gender, unemployment, and mental health outcomes, emphasizing the need for gender-sensitive approaches in addressing the mental health impacts of unemployment.

Statement of the Problem

The study aims to examine the influence of demographic factors, such as age, gender, duration of unemployment and levels of education, along with unemployment, on the mental health of youths in the southeast region of Nigeria. By examining the interplay between these variables, the research aims to provide insights into the specific challenges faced by young individuals in terms of mental well-being, and the potential consequences of unemployment in this context. Understanding these factors can contribute to the development of targeted interventions and policies to support the mental health needs of Southeast youths in Nigeria.

Objectives

This study therefore sought to examine the impact of demographic factors and unemployment on the mental health of selected sample of southeast youths in Nigeria. Specifically, the study examined:

i) mental health problems among unemployed youths in the region.
ii) factors that contribute to the mental health problems of the youths in the region.
iii) the impact of gender on the mental health of unemployed youths in the region

In view of the above objectives, the following hypotheses were tested in the study:

i) Unemployed youths will significantly score higher on mental health problems than employed youths in the southeast region of Nigeria
ii) Age, gender, level of education, and length of unemployment will contribute significantly to mental health problems among unemployed youths in the southeast region of Nigeria.
iii) Unemployed male youths will suffer more mental health problems than their female counterparts

METHODS

Design

The research design employed in this study is a cross-sectional design. High-density rural and low-density areas were selected as study locations in each state. The study involved collecting data from a representative sample of youths in the Southeast region of Nigeria. The proportional sampling method was adopted in selecting our sample size. Data was collected using structured questionnaire that included measures of demographic factors, unemployment

status and mental health indicators. The questionnaire was administered directly to the participants.

Participants

The population of youths studied comprised youths aged between 15 and 29 years with a mean of 22.40 and a standard deviation of 3.390, who reside in both high and low density areas of each of the five states. From this population of youths, a sample of 160 participants was drawn from each state using the purposive sampling approach. The participants were in their early adulthood, full of energy and ready to work but did not have jobs through which they could earn income or were readily working for those in the control group. Participants were sampled proportionately. A total of 800 participants were recruited voluntarily, ensuring confidentiality and anonymity.

Data collection

A simple random sampling technique was used to select two locations in each of the five states noted for high rural and inner-city youth density. After obtaining the necessary permission and approval, the data were personally collected by the first and second authors and three trained assistants using a purposive method. Data collection was performed simultaneously at all locations in the five states to avoid diffusion and multiple participation.

The study was conducted in accordance with the ethical standards of the 1964 Declaration of Helsinki and its later amendments. Approval for our research protocols was obtained from the Research Ethics Review Committee of the University of Agriculture and Environmental Sciences Umuagwo, Imo State, which is the research base. The coverage of such approval covers data collection across the five states in southeast, Nigeria.

Participation in the study was voluntary, and written informed consent was obtained from each participant prior to their participation. The collection and handling of the data were performed to ensure the confidentiality and anonymity of the participants and their responses.

A two-section instrument (questionnaire) was used for data collection. The first section collected information on the demographic factors of interest from the respondents for example on age, gender, unemployment status and level of education, marital status and socio-economic status. Unemployment status was assessed based on current employment status and duration of unemployment.

Mental health problems were measured using the Symptom-Distress Checklist 90 (SCL-90). This 90-item inventory was developed and normed by Derogatis et al., (1997) to assess 10 primary categories of symptoms associated with distress among psychiatric outpatients and with the experience of anguish arising from problems living among people in the general population. The ten (10) categories include:

A Somatisation – body pain, discomfort and dysfunction
B Obsessive-Compulsive – irresistible thoughts. Impulses and actions
C Interpersonal Sensitivity – discomfort in social situation
D Depression – loss of vital energy, interest and motivation
E Anxiety – restlessness, nervousness and tension

F Hostility – feelings of anger, hatred, repression and unfriendliness
G Phobic Anxiety – irrational fear and avoidance of objects, places and situations
H Paranoid ideation – suspiciousness, distrustfulness and blaming others
I Psychoticism – hallucination, delusion and externally manipulated thoughts
J Neuroticism – poor sleep and appetite, feelings of unwellness

The SCL-90 was normed among a population of 1002 psychiatric outpatients, 423 psychiatric patients, 973 adult non-patients, 973 adolescents and 806 normal children aged 13 – 19 adolescent non-patients; all samples included males and females. The alpha internal consistency reliability coefficients of the inventory ranged from .77 (Psychoticism) to .90 (depression), and the test-retest co-efficient ranged from .78 (Hostility) to .90 (phobic anxiety in a psychiatric population.

Data Analysis

Statistical analysis involved percentage/frequency distribution for demographic data, t-tests for the first and third hypotheses, and multiple regression analysis for the second hypothesis. SPSS Statistical Grad Pack 27.0 was used for computation.

Results

Table 1 Descriptive Statistics for Respondents' Profile

Variables	N	%	Mean	Standard Deviation
Age				
15 years – 21 years	333	41.63		
22 years – 29 years	467	59.37		
Gender				
Male	431	53.87		
Female	369	46.13		
Educational Qualification				
Primary Certificate	155	19.37		
Secondary Certificate	200	25.00		
Tertiary Certificate	321	40.13		
Vocational Certificate	124	15.50		
Duration of Unemployment (months)				
2-11	180	22.50		
12-21	141	17.63		
22-31	120	15.00		
32-41	280	35.00		
42-48	79	9.875		
Mental Health			194.17	28.56
Age			22.40	3.39
Gender			63	0.49
Duration of Unemployment (months)			9.76	5.98
Level of Education			2.6	0.77

The demographic variables in Table 1 show that a majority of respondents (58.38%) were aged between 22 and 29 years, with more males (53.88%) than females (46.13%). In terms of

education, 40.13% had tertiary education, while vocational qualifications were held by the fewest respondents (15.5%). Regarding unemployment duration, 35% were unemployed for 32-41 months, 9.88% for 42-48 months, and 22.5% for 2-11 months.

Table 2: The Differences between Unemployed and Employed Youths' Mental Health Problems in the Southeast Region of Nigeria

Employment status	Mean	N	SD	T	df	Sig. (2-tailed)
Unemployed Youths	216.81	400	31.82	11.10	398	.000
Employed Youths	182.91	400	47.10			

A t-test was conducted to determine whether a significant difference existed in the mean mental health problems between unemployed and employed youths in Nigeria's Southeast Region. The mean difference among unemployed youths (M = 216.81, SD = 31.82) was significantly greater than that among employed youths (M = 182.91, SD = 47.10), with a t value of 11.10 (df = 398, $p < .001$). This suggests that unemployed youths in the southeast region have greater mental health problems than their employed counterparts, supporting the first hypothesis.

Table 3: Zero-order correlation matrix showing the relationships among variables of the study: mental health problems, age, gender, length of unemployment and level of education among unemployed and employed youths in the southeast region of Nigeria

	Mental Health	Age	Gender	Length of Unemployment	Level of Education
Mental Health	1	-.051	-.046	.010	.016
Age		1	.040	.451**	.318**
Gender			1	.005	-.152**
Length of Unemployment				1	.033
Level of Education					1

**. The correlation is significant at the 0.01 level (2-tailed).

Table 4. Regression Analysis Showing the Predicting Strength of Age, Gender, Length of Unemployment and Level of Education on Mental Health Problems

Predictors	R	R^2	Adjusted R	F	df	B	B	t	p
Constant						205.93		20.37	.000
Age						-.69	-.08	-1.36	.176
Gender	.083	.007	-.003	.692	4,395	-2.25	-.04	-.75	.455
Length of Unemployment						.22	.05	.81	.417
Level of Education						1.29	.04	.64	.521

Table 4 shows the results of testing the second hypothesis of this study regarding predictors of mental health problems among unemployed youths in Nigeria's Southeast Region. However, age ($\beta = -1.36$, $p > .05$), gender ($\beta = -.76$, $p > .05$), length of unemployment ($\beta = .81$, $p > .05$), and level of education ($\beta = .64$, $p > .05$) did not significantly predict mental health problems.

Overall, the model summary indicated that these predictors accounted for only 8.3% of the variation in mental health problems among unemployed youths in the region. Therefore, while mental health issues might increase among younger individuals and females and with longer periods of unemployment and higher education levels, these increases were not statistically significant. Consequently, hypothesis two, regarding the prediction of mental health problems, is rejected.

Table 5: T test on mental health problems among unemployed male and female youths in the southeast region of Nigeria

	Mean	N	Std. Deviation	t	Df	Sig. (2-tailed)
Unemployed Male Youths	203.48	200	26.35	18.84	198	.000
Unemployed Female Youths	147.90	200	33.84			

The t test results (Table 5) comparing mental health problems between unemployed male and unemployed female youths in Nigeria's southeast region revealed a significant difference. The prevalence of mental health problems was significantly greater among unemployed male youths ($M = 203.48$, $SD = 26.35$) than among unemployed female youths ($M = 147.90$, $SD = 33.84$, $t(198) = 18.84$, $p < .001$). This suggests that unemployed males in the Southeast Region have greater mental health problems than unemployed females. Thus, the third hypothesis is accepted.

Discussion

This study investigated the influence of demographic factors and unemployment on the mental health of youths in the Southeast Region of Nigeria. The findings of the study have provided insight into the immense contributions of the variables studied. A statistically significant mean difference between unemployed and employed youths was established. The study further showed that the prevalence of mental health problems among unemployed youths was significantly greater than that among employed youths.

This finding also supports earlier findings that unemployment among young people is associated with increased mental health symptoms. For example, Jahoda (1982) suggested that work provides individuals with some dimensions of psychological benefits, including a sense of social identity, purpose and mastery. According to the author, when unemployment occurs, individuals will begin to lose those psychological benefits, which invariably may lead to negative psychological outcomes. Therefore, we can infer from this finding that once unemployment continues unabated, the mental and emotional wellbeing of individuals becomes more severe. Hence, according to Fryer's model it becomes necessary to grant the individual some level of agency control to rediscover himself. In further supporting our findings, the research of Industrial Psychologists demonstrated that unemployment has deleterious effects on the mental wellbeing of individuals. For example, Wilson & Finch (2021) believes that unemployment experience leaves individuals with a sense of helplessness, while Li et al. (2024) contrasted unemployed and employed individuals in terms of mental health and reported that unemployed individuals had a greater level of psychological distress. They also reported lower levels of self-esteem (Álvaro, et al., 2019).

The above studies support the finding of our study that unemployment can have detrimental effects on mental health. When individuals lose their jobs, they often experience a range of negative emotions, such as stress, anxiety, depression and a loss of self-esteem. These emotional reactions can contribute to the development or exacerbation of mental health problems. (Browning et al, 2018). The loss of social support and social interaction among unemployed individuals could be a possible explanation for the high prevalence of mental health problems among unemployed individuals. Employment provides individuals with a sense of purpose, structure and a network of colleagues and friends. When individuals become unemployed, they may face social isolation, which leaves them with feelings of loneliness and further affects their mental wellbeing.

For the second hypothesis, a regression analysis was conducted to examine the impact of demographic factors of unemployed youths on their mental health. However, the results of the analysis did not reveal any significant predictors of mental health problems according to the demographic factors of the unemployed participants. This finding suggests that, based on the available data and the variables included in the analysis, there is no evidence to support a significant relationship between unemployment and mental health along demographic lines. This finding was supported by earlier studies, for example, Alvaro et al., (2019), who examined the relationship between unemployment, and psychological distress and found that the effects of unemployment on mental health were not significantly affected by demographic factors. Connelly et al. (2003), in their meta-analytic review supporting the finding of our study, affirmed that the mental health of unemployed youth is not affected by their demographic factors. Another study that provided support for the findings of our study was that of Borgonovi et al., (2014), whose systematic study revealed that while demographic factors may influence the relationship between unemployment and mental health, holistic evidence does not support a significant influence of demographic factors on the mental health of unemployed individuals.

Through the zero-order correlation analysis, we found a significant positive correlation between age and duration of unemployment as well as between age and level of education. These findings indicate that as individuals grow older, they tend to experience longer periods of unemployment and have higher levels of education. The positive correlation between age and length of unemployment suggests that as individuals age, they may face more challenges in finding employment or may be more likely to experience long-term unemployment. This could be attributed to various factors, such as changing job market demands, increased competition, or limited job opportunities for older individuals.

Similarly, a positive correlation between age and level of education indicates that as individuals age, they are more likely to have higher levels of education. This could be due to factors such as pursuing higher education in life, acquiring additional qualifications or skills or the evolving educational opportunities available to individuals over time. However, these findings may be based on the specific sample and methodology used in the study.

Further findings from the zero-order correlation analysis revealed that gender had a significant inverse relationship with level of education. This means that a correlation exists between being male or female (in our own case, female) and the amount of education one obtains. This relationship indicates that as one variable (gender) increases, or vice versa. By implication, females tend to have a higher level of education, while males tend to have lower levels of education. This finding could have various implications for health and educational policies, social norms and opportunities for the employment of individuals based on their gender.

The unemployed male youths scored significantly higher than the unemployed female youths on their mental health problems. There could be various factors contributing to this finding. Notably, mental health can be influenced by societal expectations, cultural norms, economic factors and individual experiences. Therefore, the higher scores for mental health problems among unemployed males could be due to factors such as coping mechanisms, stigma, lack of support and societal expectations. The combination of these factors can contribute to higher mental health problem scores among unemployed males in the Southeast Region of Nigeria than among unemployed females. This finding is consistent with the work of Browning et al. (2018), who examined the relationship between unemployment and psychological distress and focused on gender differences. They found that unemployment was more strongly associated with psychological distress in men than in women. According to the authors, men are noted to face a greater level of distress when facing unemployment due to various social and cultural factors. In another study consistent with our findings, Li et al. (2020) investigated the gendered pathway through which job loss leads to psychological distress. They found that men were more inclined to experience distress related to loss of social identity and self-esteem tied to their employment status.

In conclusion, this study generally highlights the importance of addressing the psychological impact of unemployment and implementing strategies to support individuals in maintaining their mental health during periods of unemployment. The findings further revealed a greater psychological burden among unemployed youths, particularly males, which reveals the need for targeted mental health programs and policies to support unemployed youths and improve overall mental health in the region.

Recommendations

Based on the findings above, the following recommendations are made:

1. In consideration of unemployment and mental health. The Government needs to address the mental health needs of unemployed youths. The Government should provide access to mental health services, counselling and support programmes specifically tailored for this group.
2. Healthcare providers should make Interventions more universally accessible, aiming to reach a wider audience without the risk of excluding individuals based on demographic characteristics.
3. Our society should note that men seem to suffer more mental health problems than women do. Therefore, it becomes necessary to dismantle the stigma surrounding men's mental health. Creating safe spaces where men feel comfortable seeking help and expressing their emotions is essential

Beyond the above specific recommendations, on a general note, certain policy implications should be noted from this study for example; since adverse change in employment status has the potential to trigger mental health problems and mental health challenges also increase the risk of unemployment, it is therefore necessary to assist the unemployed or laid –off workers in finding new jobs and managing their mental health.

Secondly, the Government should realize that financial difficulties are among the pathways from unemployment to mental health challenges, access to employment insurance benefits

should be put in place to reduce the incidence of mental health problems among the unemployed or laid-off workers, while reemployment is being facilitated.

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