



Relationship between Depression and Substance Abuse

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ABSTRACT

This study investigates the interplay between depression and substance abuse, revealing that affected individuals are predominantly male, unemployed, and married. A sample of 100 depression-diagnosed patients from the Muzaffarnagar District was examined, equally split between those with and without substance abuse histories. Depression severity was measured using the Hamilton Depression Rating Scale (HDRS), a benchmark tool in clinical settings. Substance abuse was assessed through the WHO ASSIST questionnaire. The findings, presented as percentages and grounded in relevant research, underscore the demographic tendencies within this vulnerable population. The finding of the above study is that respondents with substance abuse will mostly be male, married and unemployed

Keywords: Substance Abuse, Depression, Male, Female, Employment, Unemployment, Married, Unmarried.

DEPRESSION

Depression is a prevalent mental health condition marked by enduring feelings of profound sadness, despair, and a diminished interest or pleasure in activities once found enjoyable. It significantly impacts a person's emotional, cognitive, and behavioral functioning, often resulting in various psychological and physical issues that can severely disrupt daily life.

Symptoms of depression may include:

- A persistently low or despondent mood
- Disinterest in or withdrawal from previously enjoyable activities
- Chronic fatigue or reduced energy levels
- Impaired concentration or decision-making abilities
- Noticeable changes in appetite or body weight

- Disturbances in sleep patterns, such as insomnia or excessive sleeping
 - Overwhelming feelings of worthlessness or inappropriate guilt
 - Recurrent thoughts of death or suicidal ideation
- The severity of depression can range from mild to debilitating, necessitating timely and appropriate intervention to mitigate its profound impact on an individual's life.

SUBSTANCE ABUSE

Substance Abuse is the excessive and harmful use of alcohol or drugs, leading to significant physical, mental, and social impairments. It involves compulsive use despite adverse consequences, often resulting in addiction.

Symptoms include:

- Intense cravings for the substance
- Inability to control usage
- Neglect of responsibilities
- Engaging in dangerous activities, like driving while intoxicated
- Withdrawal symptoms when not using
- Increased tolerance requiring more to achieve the same effect
- Continued use despite knowing the risk

Comorbidity of depression and substance abuse

involves the simultaneous presence of both conditions in an individual. Those with depression may use substances such as alcohol or drugs to alleviate their symptoms, which can, in turn, worsen their depression and lead to addiction. On the other hand, substance abuse can exacerbate or trigger depressive episodes. This interplay complicates treatment and often results in more severe health issues, necessitating a coordinated approach to care.



HYPOTHESIS

DEPRESSION respondents with Substance abuse will mostly be male , married and Unemployed.

❖ **Koeltl-Glaser, J. K., & Newton, T. L. et.al (2001)** gave review of literature on "The Impact of Marriage on Depression: Evidence from Longitudinal Data" published *Journal of Marriage and Family* This study uses longitudinal data to explore the relationship between marriage and depression. It concludes that while marriage can provide emotional support, the stressors associated with marital relationships can also contribute to higher levels of depression, especially in individuals with existing mental health issues.

❖ **Kuehner et al. (2003)** gave a review on Gender Differences in Depression: Findings from Epidemiological Studies synthesizes evidence from epidemiological studies on gender differences in depression. The author discusses variations in the prevalence, symptom presentation, and risk factors for depression between men and women. The findings suggest that while women are more likely to experience depression, men may be less likely to seek help or report emotional distress. Understanding these gender differences is crucial for developing tailored prevention and intervention strategies.

❖ **Hasin et al. (2005)** conducted a study on "Gender Differences in the Comorbidity of Depression and Substance Abuse" to examine gender differences in the comorbidity of depression and substance abuse. Utilizing data from a large community sample, the researchers found that men were more likely to engage in substance abuse as a coping mechanism for depression, whereas women tended to experience internalizing symptoms of depression. These gender-specific patterns of comorbidity have important implications for treatment planning and intervention strategies, highlighting the need for gender-sensitive approaches to address the unique needs of individual with comorbid depression and substance abuse

❖ **Tsuang, M. T., & Lyons, M. J et al (2006)** conducted a study on "Unemployment and Health Outcomes Among People with Dual Disorders" published in *American Journal of Psychiatry* This study assesses the relationship between unemployment and health outcomes among individuals with dual disorders, including depression and substance abuse. It shows that unemployment rates are higher among individuals with dual disorders compared to those with single disorders. The study provides evidence that the

combined effects of addiction and depression significantly impact employment status

❖ **Choi, S. Y., & Hahm, H. C et al (2011)** conducted a study on "The Role of Comorbid Substance Abuse in Employment Outcomes for Depressed Individuals" in the *Journal of Substance Abuse Treatment*

This study explores employment outcomes specifically for individuals with co-occurring substance abuse and depression. The findings show that individuals with both conditions are significantly less likely to be employed compared to those with depression alone. The study highlights how the combination of addiction and depression exacerbates employment difficulties.

❖ **Svanum, S., & Berk, R. A. et al. (2013)** conducted a study on "Marital Status and Comorbidity of Depression and Substance Use Disorders" published in *Journal of Substance Abuse Treatment*

This research investigates marital status among individuals with both depression and substance use disorders. It finds that a significant portion of individuals with comorbid conditions are married. The study suggests that marriage may be associated with unique stressors and dynamics that influence the prevalence and treatment of both disorders.

RESEARCH DESIGN

The primary objective of this cross-sectional study was to analyze the prevalence of depression with and without substance abuse in a specific population at a given time. Conducted in Muzaffarnagar, Uttar Pradesh, the study sampled 100 patients from four clinics and a de-addiction center, comprising 50 patients with substance abuse and 50 without. Purposive sampling was employed to ensure a representative mix of psychiatric diagnoses and demographic factors among the participants.

FOR SCREENING SUBSTANCE ABUSE

The WHO ASSIST tool is a screening tool developed by the World Health Organization (WHO) to help identify individuals who may be at risk for substance use disorders. "ASSIST" stands for **Alcohol, Smoking, and Substance Involvement Screening Test**.

The tool consists of a series of questions designed to assess patterns of substance use and associated problems. It provides a score that indicates the level of risk, ranging from low to high.



FOR SCREENING DEPRESSION

The **Hamilton Rating Scale for Depression (HAM-D)** is a widely used tool for assessing the severity of depression in individuals. It consists of a series of questions related to symptoms such as mood, sleep disturbances, appetite changes, and cognitive difficulties. Each item is rated based on the patient's condition over the past week, helping to quantify the level of depression.

The HAM-D is useful for both clinical assessments and research purposes. It assists healthcare providers in monitoring changes in depressive symptoms over time and evaluating the effectiveness of treatment interventions.

INSTRUCTIONS GIVEN WERE AS FOLLOWS:

“Please read each statement carefully There are no right or wrong answers. Do not spend too much

time on any one statement. This assessment is not intended to be a diagnosis. If you are concern about your results in any way, please speak with a health professional.”

PROCEDURE

Data was collected from patients with depression, both with and without substance abuse, across four clinics in Muzaffarnagar, Uttar Pradesh, under psychiatric supervision.

In a calm and well-lit environment, patients were first asked for their consent to participate, with assurances of confidentiality. Once consent was obtained, they received instructions about the study and were provided with questionnaires and a demographic form. The collected data was then analyzed for the study.

Table 1 Distribution of Depression Respondents With Substance Abuse and Depression Respondents Without Substance Abuse on the basis of Employment (N-100)

Occupation	With Substance Abuse	Percentage	Without Substance Abuse	Percentage	Total	Percentage
Employed	20	40 %	28	56 %	48	48 %
Un-employed	30	60 %	22	44 %	52	52 %
Total	50	100 %	50	100 %	100	100 %

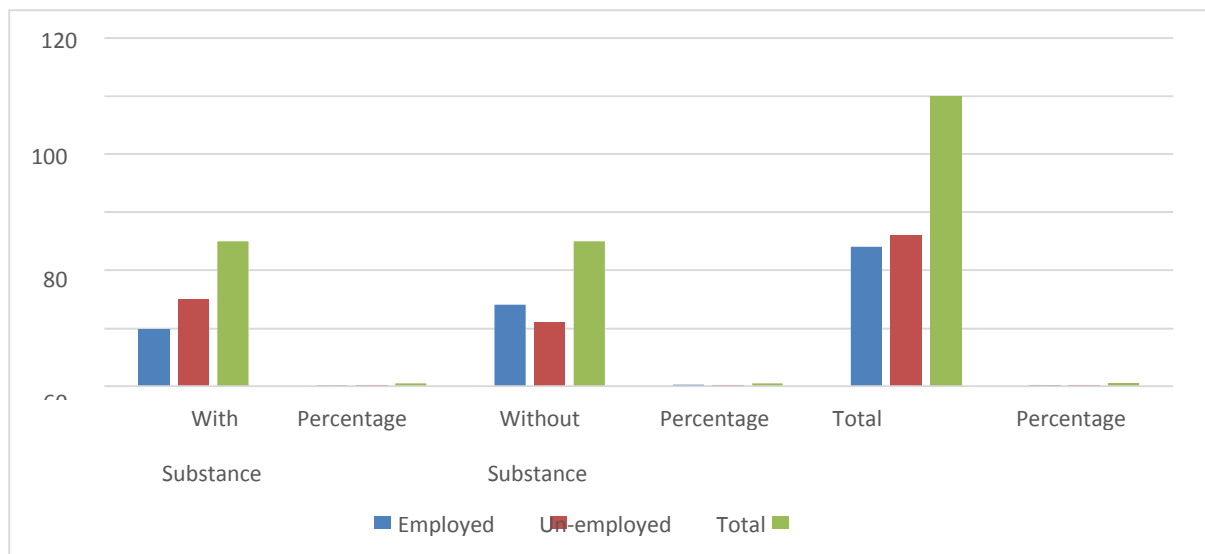


FIGURE 1



The above figure shows the distribution of depression respondents with Substance Abuse and depression respondents Without Substance Abuse based on employment through Graphical representation

There was total 100 respondents out of which 50 respondents with Substance Abuse and 50 respondents without Substance Abuse.

There were 50 respondents with Substance Abuse out of which 60 % were unemployed and 40 % were employed whereas from the rest 50 respondents without Substance Abuse there were 56 % of the respondents who were Employed and 44 % of respondents who were Un employed In total 52% of the respondents were Unemployed and 48 % of the respondents were employed.

The hypothesis stating that Respondents with Substance Abuse will be more unemployed as compare to respondents Without Substance Abuse . Which is proved by the table 1 and Figure 1 which shows that 60 % of the respondents with Substance Abuse were unemployed and 40 % of the respondents were employed, where as 56% of the respondents without Substance Abuse were employed and 44% of respondents were unemployed.

Hence, the hypothesis is proved that respondents with Substance abuse were more unemployed as compare to respondents without Substance Abuse.

This is previously proved by few research work such as:

❖ Tsuang, M. T., & Lyons, M. J (2006) "Unemployment and Health Outcomes Among People with Dual Disorders" published in American Journal of Psychiatry

This study assesses the relationship between unemployment and health outcomes among individuals with dual disorders, including depression and substance abuse. It shows that unemployment rates are higher among individuals with dual disorders compared to those with single disorders. The study provides evidence that the combined effects of addiction and depression significantly impact employment status

❖ Choi, S. Y., & Hahm, H. C (2011)"The Role of Comorbid Substance Abuse in Employment Outcomes for Depressed Individuals" in the Journal of Substance Abuse Treatment

This study explores employment outcomes specifically for individuals with co-occurring substance abuse and depression. The findings show that individuals with both conditions are significantly less likely to be employed compared to those with depression alone. The study highlights how the combination of addiction and depression exacerbates employment difficulties.

Table 2 Distribution of Depression Respondents With Substance Abuse Depression Respondents Without Substance Abuse on the basis of Gender (N= 100)

<u>Gender</u>	<u>With substance Abuse</u>	<u>Percentage</u>	<u>Without Substance Abuse</u>	<u>Percentage</u>	<u>Total</u>	<u>Percentage</u>
<u>Male</u>	<u>50</u>	<u>50 %</u>	<u>5</u>	<u>5 %</u>	<u>55</u>	<u>55 %</u>
<u>Female</u>	<u>0</u>	<u>0 %</u>	<u>45</u>	<u>45 %</u>	<u>45</u>	<u>45%</u>
<u>Total</u>	<u>50</u>	<u>50 %</u>	<u>50</u>	<u>50 %</u>	<u>100</u>	<u>100%</u>

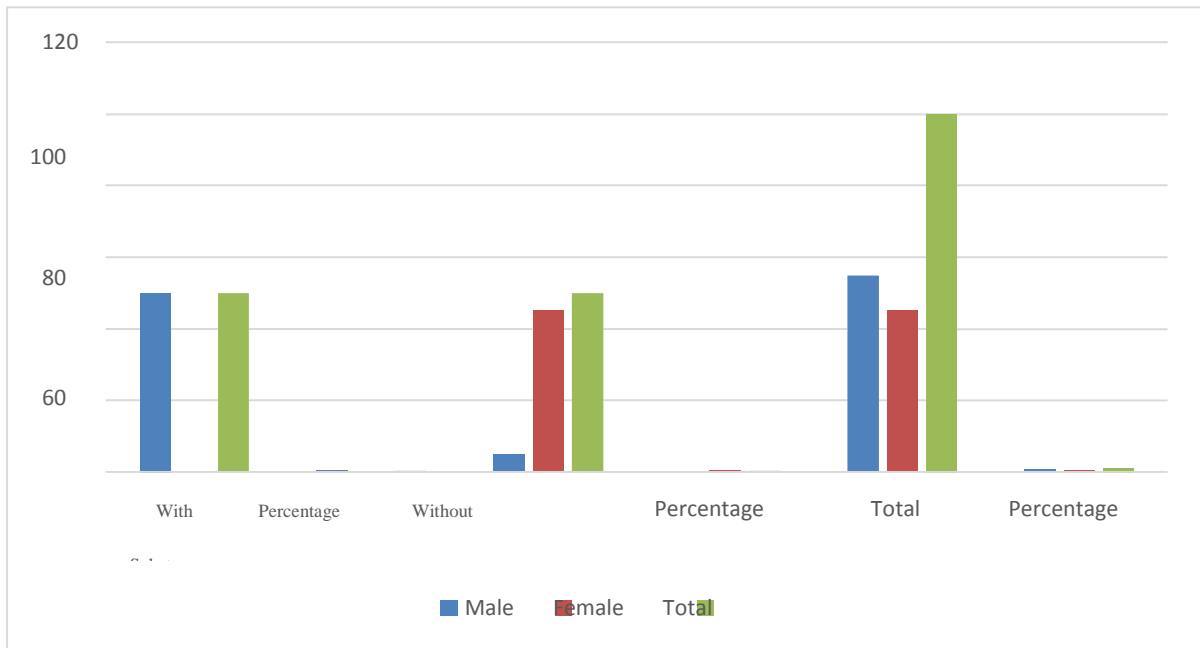


FIGURE 2

The above table 2 shows the distribution of depression respondents with substance Abuse and respondents without Substance Abuse based on gender through Graphical representation

There was total 100 respondents out of which 50 respondents with Substance Abuse out of which all 50 were males and 50 respondents without Substance Abuse out of which 45 were females and 5 were males.

In total 55% of the respondents were males and 45% of the respondents were females.

The hypothesis stating that respondents with substance abuse will be mostly males

Which is proved by the table 2 and Figure 2 which shows that 100% of the respondents with substance Abuse were males, whereas 45% of the respondents without substance abuse were females and 5% of the non-addictive respondents were males.

This is previously proved by few research work such as:

❖ Hasin et al. (2005) conducted a study on "Gender Differences in the Comorbidity of Depression and Substance Abuse" to examine gender differences in the comorbidity of depression

and substance abuse. Utilizing data from a large community sample, the researchers found that men were more likely to engage in substance abuse as a coping mechanism for depression, whereas women tended to experience internalizing symptoms of depression. These gender-specific patterns of comorbidity have important implications for treatment planning and intervention strategies, highlighting the need for gender-sensitive approaches to address the unique needs of individuals with comorbid depression and substance abuse

❖ Grant, B. F., & Dawson, D. A. (2006) "Gender Differences in the Prevalence and Treatment of Substance Use Disorders" in American Journal of Psychiatry

This study explores gender differences in the prevalence of substance use disorders and their comorbidity with depression. It finds that men are more likely to develop substance use disorders compared to women. Furthermore, men with substance use disorders are also more likely to experience co-occurring depression, highlighting a gender disparity in this dual diagnosis.



Table 3 Distribution of Depression Respondents With Substance Abuse and Depression Respondents Without substance Abuse on the basis of Marital Status (N=100)

<u>MaritalStatus</u>	<u>With SubstanceAbuse</u>	<u>Percentage</u>	<u>Without Substanceabuse</u>	<u>Percentage</u>	<u>Total</u>	<u>Percentage</u>
<u>Married</u>	<u>23</u>	<u>46%</u>	<u>32</u>	<u>64%</u>	<u>55</u>	<u>55%</u>
<u>Unmarried</u>	<u>27</u>	<u>54 %</u>	<u>18</u>	<u>36%</u>	<u>45</u>	<u>45%</u>
<u>Total</u>	<u>50</u>	<u>100 %</u>	<u>50</u>	<u>100 %</u>	<u>100</u>	<u>100%</u>

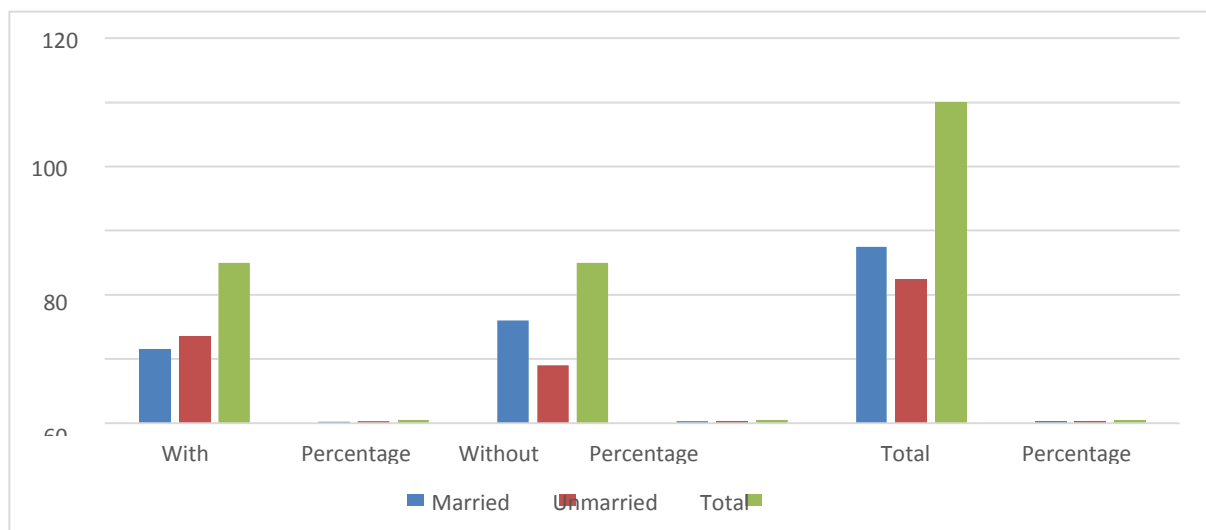


FIGURE 3

The above table 3 shows the distribution of depression respondents with Substance Abuse and respondents without Substance Abuse based on Marital Status

There was total 100 respondents out of which 50 respondents with Substance Abuse and 50 respondents without substance Abuse

From respondents with Substance abuse 54% were unmarried and 46% of the respondents were married whereas from respondents without Substance abuse 64% of the respondents were married and 36 % were unmarried

In total 55% of the respondents were married and 45% of the respondents were unmarried

The hypothesis stating that a respondents with Substance abuse will be mostly married as compare to respondents without Substance abuse

Which is proved by the table 3 and Figure 3 which shows that 54% of the respondents with Substance abuse were unmarried and 46% were married, where as 64% of the respondents without Substance Abuse were married and 36 % were unmarried.

This is previously proved by few research work such as:

❖ Koeltl-Glaser, J. K., & Newton, T. L et.al (2001) gave review of literature on "The Impact of

Marriage on Depression: Evidence from Longitudinal Data" published *Journal of Marriage and Family* This study uses longitudinal data to explore the relationship between marriage and depression. It concludes that while marriage can provide emotional support, the stressors associated with marital relationships can also contribute to higher levels of depression, especially in individuals with existing mental health issues.

❖ Svanum, S., & Berk, R. A.et.al (2013) "Marital Status and Comorbidity of Depression and Substance Use Disorders" published in *Journal of Substance Abuse Treatment*

This research investigates marital status among individuals with both depression and substance use disorders. It finds that a significant portion of individuals with comorbid conditions are married. The study suggests that marriage may be associated with unique stressors and dynamics that influence the prevalence and treatment of both disorders.

MAJOR FINDINGS

Respondents with comorbid substance abuse are mostly males, married and unemployed.

The Hypothesis stating that "Addictive Depression respondents will mostly be males, unemployed and



married” is accepted.

CONCLUSION

The result also shows that the Depression respondents with Substance Abuse will mostly be male, married and unemployed as compared to Depression Respondents without Substance abuse

This is because Depression respondents with Substance Abuse are often more likely to be male, married, and unemployed due to several interrelated factors. Men may be more prone to substance abuse as a coping mechanism and face societal pressures that contribute to both addiction and depression. Being married can sometimes lead to stressors that exacerbate addiction and depression, while unemployment increases financial strain and social isolation, both of which can fuel substance abuse and deepen depressive symptoms. These factors together create a more challenging environment for managing both addiction and depression.

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