Research Article

Overcoming Depression: Stories of Terminated Employees amidst COVID-19

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ABSTRACT

COVID-19 virus caused drastic changes in people's lives, especially in terms of employment. Employees were greatly impacted by this pandemic, as there were terminated from their jobs. This study investigated how depression affects terminated workers and how they manage it throughout the pandemic.

A qualitative design was employed to perform this study. A structured type of interview was conducted on five samples using an online platform. To establish the number of samples required for the investigation, convenience sampling was used. The data was analyzed in-depth using a narrative technique, which resulted in the study's findings and conclusions. Five (5) terminated employees such as professional photographer, construction worker, hairdresser, driver, and varsity coach were among the participants.

The participants in this study were found to experience depression due to family financial issues caused by the loss of a job during the pandemic. Participants reported feelings of sadness and loneliness, as well as inability to think, low self-esteem, insomnia and hypersomnia, a lack of ambition to accomplish anything, and suicidal or negative thoughts. Accordingly, through their families' emotional support, the participants have been able to overcome their depression.

Keywords: *COVID-19, psychological impact, depression, terminated employees, mental health, narrative*

Background

On December 31, 2019, COVID-19 was discovered for the first time in Wuhan, China. The virus then spread to other countries. It weakens the economy and many people become ill (World Health Organization, 2021).

International Labor Organization Monitor (2021) reported that 114 million people lost their job over 2020. According to averages from the first three quarters of 2019 and the first three quarters of 2020, approximately 9.6 million Americans (ages 16 to 64) lost their jobs (Bennett, 2021).

Moreover, COVID-19's second wave hit India's labor market in April 2021, resulting in at least 7.35 million job losses (Nanda, 2021). In April 2021, a surge in COVID-19 variant infections prompted increased public health restrictions and highlighted concerns about the pandemic's long-term economic consequences, with Canada's labor market losing 207,000 jobs (Canadian Press, 2021). Because of the impact of the COVID-19 outbreak in Japan, nearly 100,000 employees have been terminated or had their work contracts canceled (The Japan Times, 2021). The number of Americans experiencing depressive symptoms is significantly rising. According to some experts, up to 50% of Americans may be suffering from some form of mental illness (Ward, 2020).

According to Parker, Igielnik, & Kochhar (2021), 70 percent of jobless people believe being unemployed has made them more worried. Moreover, half of those polled claimed they were struggling with mental health issues such as anxiety and depression. Since losing their employment, 81 percent claimed they have felt adrift, battled more with loved ones, or had other mental troubles.

According to the Philippine Statistics Authority, the unemployment rate in the Philippines fell to 7.1 percent in March 2021, resulting in 3.44 million unemployed Filipinos. The unemployment rate in the most recent labor force survey is lower than the 8.8% reported in February 2021, which corresponded to 4.2 million Filipinos (Rivas, 2021).

The employment rate of CALABARZON dropped to 83.3 in April 2020 compared to 93.3 percent in January of the same year. For the second quarter of the year, the unemployment rate in CALABARZON is predicted to be 16.7% of the estimated 6.4 million workforces. It was the highest rate since April 2019 when compared to the prior quarter's unemployment rate. The pandemic condition could be a major contributor to the sudden growth. In addition to the unemployed who stayed jobless during the reference period, several establishments were temporarily shuttered owing to community quarantine or lockdown, and many workers lost their employment due to retrenchment (Philippine Statistics Authority, 2020). In Laguna, due to layoffs or firm closures, 25,421

people lost their jobs, either temporarily or permanently (Cinco, 2021).

Workplace termination usually leads to despair. People may be unhappy and irritated after losing their job at first, but as time passes, despair about finding new work might set in, leading to depression (Banyan Mental Health, 2020). Employees struggled with emotional, social, and financial issues. They felt fear, anxiety, alertness, and grief because of the epidemic. Apart from mental health difficulties, people found it difficult to engage in social activities because of health procedures implemented in public areas. Domestic migration includes 80-90 percent of key informants returning home to save money on rent, some updating their skills, others taking lower-paying jobs or changing careers just to make ends meet, and nearly 90-100 percent of telecommunications workers finding new ways and opportunities by engaging in online business (Danay, Danay, Escarilla, & Maming, 2021).

Aims of the Study

The COVID-19 pandemic brought extreme effects in the Philippine economy especially in terms of job termination which caused mental health problems such as depression. The purpose of this study is to determine how terminated employees overcome depression. Specifically, it answered the following questions.

1. When did the terminated employees realize that they are depressed?
2. What symptoms or manifestations of depression did the terminated employees experience?
3. How do the terminated employees deal with depression during the pandemic?

Literature Review

Stolove, Galatzer-Levy, & Bonanno (2017), supported that job loss has been related to depression and, as a result, a drop in long-term labor market participation. The chance of being jobless increases dramatically when depression sets in following a job loss. However, the high rates of resilience observed, as well as the downstream benefits of reemployment, allay substantial worries about the impact of widespread unemployment on the current global economic recovery.

According to the study of Galecki, Orzechowska, Talarowska, and Zajaczkowska (2013), patients with depression, in contrast to healthy people, are more likely to adopt avoidance and denial methods in stressful situations and have more difficulty discovering positive elements of stressful events.

In the study conducted by Andreeva, Brenner, and Hanson (2015), job loss consistently predicted serious depression in both men and women, with males having a somewhat larger effect size. In women, but not in men, surviving a layoff is related to eventual serious depression. When companies decline, women with major depressions are more likely to be fired, although men's health has no bearing on job loss.

Further, based on the result of the survey of Spanish National Health of 2006 and 2011, Farre, Fasani, and Mueller (2018) found out that unemployed people are clearly in worse health than those who are employed. They are less self-assured, appear overwhelmed by their problems, and have significantly more mental disorders diagnosed. However, because these are simple correlations, they provide no information about the underlying causality direction. Unemployment can cause mental disorders like depression or chronic anxiety, but it's also possible that poor mental health causes job loss or inability to find work.

During the COVID-19 pandemic, Xiong, Lipsitz, Nasri, Lui, Gill, Phan, and McIntyre (2020) investigated the psychological condition of the public and discovered risk factors. There was a high proportion of negative mental symptoms in almost all the studies. In high-, middle-, and low-income nations alike, the COVID-19 pandemic is posing an unprecedented danger to mental health. In addition to flattening the viral transmission curve, mental health prevention must be a top priority. There is an immediate need for a government strategy that combines viral risk reduction with mental health protection.

People who lose their employment abruptly, according to Fuller (2021), are less inclined to associate with their friends and family because they are humiliated or embarrassed, which leads to isolation, depression, and even more isolation. It may be difficult to socialize with friends who are working while attempting to find work, especially during a pandemic.

Gen Psych (2020) said that job loss-related complicated grief manifests as in preoccupation with the lost job, disbelief, or inability to accept the loss, resentment, and a sense that life is meaningless without the prior career (CG). Gen Psych also said that CG symptoms may arise alongside depression and/or anxiety symptoms after a job loss. Despite the similarities in symptoms between CG, depression, and anxiety, factor-analytic research has shown that these symptoms comprise different concepts.

Crayne (2020) explained that people who have been jobless for a long period are more likely to acquire alcoholism, depression, anxiety, and suicide, among other problems. Even though research has shown that interventions may be designed and implemented to assist the newly unemployed in finding work, such programs are unlikely to be accepted at the scale necessary to address the current problem. Furthermore, no economic recovery, no matter how large, will be able to absorb the millions of newly unemployed promptly. The fact that the bulk of persons affected by this wave of job losses are in low-paying jobs and come from poor backgrounds makes them even more vulnerable to the consequences.

The psychological effects on women, the young, and those who lost their jobs during the health crisis were the most severe. The possibility of an economic collapse because of the virus concerned Spaniards in particular. We identified factors linked to improved mental health, such as being pleased with health-related information, engaging in recreational activities, and having a positive attitude toward one's health. These findings might be utilized to help people in Spain and throughout the world cope with the COVID-19 epidemic by developing mental treatments (Rodríguez-Rey, Garrido-Hernansaiz, & Collado, 2020).

Moreover, Dawel, Shou, Smithson, Cherbuin, Banfield, Calear, & Batterham (2020) reasoned that the pandemic's financial hardship, rather than job loss, was a primary predictor of poor mental health. These findings demonstrate that restricting work and social disruption, as well as increasing community

access to mental health services, are important policy targets for lowering pandemic-related mental health and wellbeing consequences. Innovative and inventive strategies are necessary to meet these community needs while continuing to implement key public health regulations to prevent the spread of COVID-19.

Brenner & Bhugra (2020) also opined that an upsurge in anxiety, sorrow, and other stress-related symptoms has been reported all around the world on account of the SARS-CoV-2 (COVID-19) pandemic. Individual-level difficulties like self-isolation, confinement, sadness, survivor guilt, and other factors, as well as broader social and economic concerns like unemployment, insecure employment, and related poverty, are all understandable causes for this increase. This anxiety is exacerbated by a slew of unknowns. Worries and losses are significant drivers of state anxiety, which can have long-term mental health consequences. Governments and politicians have a responsibility to protect the physical health and well-being of their people. It is critical to focus on economic and social rehabilitation while putting in place preventative measures to avert diseases and eventual fatality. A worldwide pandemic needs a well-coordinated medical and financial response.

Physical health as well as every part of their psychological well-being was affected by the coronavirus infection (COVID-19), from preventing disease to coping with the disturbance of their usual life to the pain they suffered when the virus killed people they cared about. Humans are inherently sociable animals, according to scientists and intellectuals, with a strong urge to engage with others, particularly in times of sadness. Despite instructions to be socially detached, the yearning to belong as well as the significance of minimizing loneliness during uncertain times often drives individuals to connect. Psychotherapist support may relieve stress, depression, and anxiety. Finally, we look at the expanding influence of online communities and the various ways in which these communities have aided individuals in improving their psychological well-being throughout the COVID-19 crisis (Marmarosh, Forsyth, Strauss, & Burlingame, 2020).

Prime, Wade, & Browne, (2020) expressed that because of issues associated with social instability, such as financial insecurity, care duties, and confinement-related stress, the COVID-19 pandemic poses a severe danger to the well-being of children and families such as crowding, changes to the structure, and routine. Contextual risk permeates the structures and activities of family systems; therefore, the consequences of these issues are likely to be long-lasting. The proposed conceptual framework is based on systemic theories of human development and family functioning, and it links COVID-19-related societal disturbance to child adjustment via a cascading process that involves caregiver well-being and family dynamics such as organization, communication, and beliefs. An instance of the role of family dynamics in risk buffering as well as fostering resilience via shared family values and strong links are provided within the context of COVID-19. Finally, the ramifications for clinical practice and research are investigated.

In both natural and man-made disasters across the world, fear, anxiety, despair, and post-traumatic stress disorder were all frequent psychological symptoms. Disruptions in daily routine because of restrictive measures, social isolation, job loss, and financial concerns, as well as worry about loved ones' well-being, the treatment process, and illness information, might all be underlying causes for these symptoms. Actions targeted at assisting sick and restricted people, as well as therapies directed at the public and populations at higher risk of mental health harm, should be included in psychological distress strategies. Amid global calamities and health catastrophes, telemedicine and digital psychiatry represent the future of medicine, but they must be enhanced (Talevi, Pacitti, Socci, Renzi, Alessandrini, Trebbi, & Rossi, 2020).

Regardless of whether individuals come into direct touch with the sick, the pandemic has an impact on the county's economy, social values, and psychological stress. The results demonstrate that the avoidance behavior differs significantly between locales. Furthermore, there is a substantial change in Hypochondriasis Symptoms after exposure to COVID-19. Negative behaviors include

indifference, nihilism, sadness, government blaming, and fear while positive includes information, composure, compliance, and health consciousness (Nicomedes & Avila, 2020).

According to Martinez, Co, Lau, & Brown (2020), despite high rates of psychological suffering, Filipinos around the world have a widespread avoidance and negative attitude toward formal help-seeking. They prefer to rely on close family and friends for help. Filipinos' attitude of resiliency and self-reliance sometimes prevents them from requesting assistance. Other aspects include distress perception, social support, financial capacity, and previous positive experiences with institutional assistance.

To mitigate the effects of the COVID-19 epidemic on the health of Filipino slum residents, a variety of mitigation and response methods were used. Despite the national government and corporate sector's lack of proper social services and other crisis-mitigation laws and practices, as well as the distinctive Filipino qualities and individual efforts they displayed and accomplished, their resiliency and survival were unaffected. To put it another way, the COVID19 sickness and other natural calamities are the fault of the government, as well as people and families. Individual and group efforts are necessary, and all stakeholders participating in the process must collaborate (Tanucan & Bojos, 2021).

The level to which the program enhanced adaptive coping, non-reactivity, resilience, and well-being, as well as lowered stress, depression, and anxiety symptoms, was revealed by Hechanova, Alianan, Jocson, and Villasanta (2021). Adaptive coping, notably seeking emotional and instrumental support, active coping, and religious coping, showed substantial gains. Nonreactivity, psychological well-being, and resilience, as well as depressive symptoms, all improved significantly as a consequence of the study.

In the aftermath of COVID-19, worldwide economic instability has led to millions of people losing their jobs. As a result, these same people will be dealing with the agony of job loss in the present, as well as the stress of job hunting in the future. This post aims to raise awareness of the psychological harm that job loss and job search may cause, as well as to encourage psychologists to think about work-life issues in the aftermath of the epidemic (Crayne, 2020).

Methodology

The researchers used qualitative research design in the form of narrative research for in-depth analysis of the sample's experiences needed in completing this study. Narrative research is a broad phrase that involves a range of methodologies that rely on people's written or spoken words or visual representations. Individual lives are often the emphasis of these techniques, as conveyed through their tales (Smit, 2021).

The study focuses on five samples from local which were analyzed to understand the implications of depression towards the life of an unemployed person and how they overcome it. The participants include five (5) unemployed workers. It includes a professional photographer, construction worker, hairdresser, driver, and varsity coach.

Convenience sampling was used in this study. Convenience sampling is a research strategy in which the researchers' collect data from a pool of respondents who are easily accessible. It is the most often used sampling technique because it is extremely quick, simple, and cost-effective. Participants are often gracious and willing to participate in the study.

The data necessary in finishing the study was collected by noting the sample's response to the structured type of interview from a private message and video meeting through social media platforms. In this manner, it ensures the authenticity of the data collected and avoids information bias in the study.

The data from the interview focuses on the experiences and stories of the participants regarding depression. To complete the study, narrative analysis of the collected data from the online interview was utilized which were used to formulate findings of the study and conclusions.

Results and Discussion

The results from the interview comprised mainly of the experiences and stories of the participants. Narrative analysis of the gathered data from the interview was utilized.

Q1: When did the terminated employees realize that they are depressed?

Participant 1 (professional photographer) said that "*I started feeling depressed when I lost my job as a photographer, and I am unable to provide my family's needs.*" Participant 2 (construction worker) answered that "*I became frustrated. I can't even think of any good or happy memories or thoughts.*" Participant 3 (hairdresser) said that "*It started when my contract has been terminated and we are having a financial problem.*" Participant 4 (driver) said that "*I felt depressed when I lost my job because of the pandemic and our family was barely surviving. I noticed that my family especially my children are suffering because of financial problems.*" Participant 5 (varsity coach) confessed that he felt something was off in early January, "*I do not have the vigor. I see a lot of people feeling so hopeful for 2021, I didn't feel like celebrating. I see friends going on vacations, moving to new homes, buying new stuff, getting promoted. I was happy for them, but I couldn't shrug off the feeling that I was left out. I spent the holiday alone, looking out from my window, watching distant fireworks, and listening to faint cheers from neighbors.*"

The stories above show the thought and feelings of the participants in the question. The question that they answered was about when they realized that they are depressed. Participants 1,3, and 4 began to feel depressed when their families suffer from financial problems because of the pandemic now that they are jobless. Participants 2 and 5 started to feel depressed when they felt unhappy in everything they were doing after losing their job. This analysis can be connected to what Banyan Mental Health (2021) revealed that because of job loss or contract termination, the participants started to experience depression as well as Stolove, Galatzer-Levy, & Bonanno (2017), supported that job loss has been related to depression. While Andreeva, Brenner, and Hanson (2015) said that job loss consistently predicted serious depression in both men and women. Disruptions in daily routine because of restrictive measures, social isolation, job loss, and financial concerns, as well as worry about loved ones' well-being, the treatment process, and illness information, might all be underlying causes for these symptoms (Talevi, Pacitti, Socci, Renzi, Alessandrini, Trebbi, & Rossi, 2020).

Q2: What symptoms or manifestations of depression did the terminated employees experience?

Participant 1 (professional photographer) said that "*I feel constantly worried about where to earn money to spend for my family's needs.*" Participant 2 (construction worker) said that "*I overthink a lot- about what it will be tomorrow, next day, or in the next week, I didn't even realize that it is morning already and I haven't slept or even taken a nap yet.*"

Participant 3 (hairdresser) said that "*I constantly doubted myself that I can still provide for my family. I keep thinking that maybe I should just disappear in this world.*" Participant 4 (driver) said that "*I feel like my life is tragic now. I feel melancholic and I'm constantly worried about where I will get food for my family and when we can have our next meal. I feel desperate because I always notice how my children suffer because of the pandemic.*"

Participant 5 (varsity coach) told that "*I usually start my day with yoga and meditation as that's the only form of exercise ever since the lockdown started. For some reason, it all just stopped. I didn't feel like getting up from bed in the morning. And then it progressed to just staying there for long hours, sometimes the entire day. Even preparing and eating meals felt like a chore. Sometimes I eat only once a day. I want the day to be over. I like it when it's dark. Sleeping consumed me. The kind of sleep where everything shuts down. I don't dream nor have nightmares. I just feel like everything stops and I don't feel anything. And it was addicting. I would sleep all day and hate it whenever I'm awake.*" He also added that" *There's also a lot of guilt, embarrassment, and feeling of failure. It used to be easier to process these thoughts but suddenly, I truly felt like I was reduced to nothing. I would spiral down as I drowned in my thoughts. Crying happens instantaneously almost all the time.*"

The above stories are the symptoms they experienced which indicate that they are experiencing depression. Participants 1, 2, 3, and 4 experience overthinking and worrying over where to earn money to provide for their

family's needs. Participant 3 doubted himself and thought that it is better to disappear. Participants 4 and 5 felt extreme sadness. Participant 5 felt a lot of emotions such as guilt, embarrassment, and failure and even sleeping for a long time and not having the will to live. This agrees with the idea of Farre, Fasani, and Mueller (2018) who opined that the participants also feel overwhelmed by the problems and less- assured. Likewise, it is related to what Gen Psych (2020) said that participants also feel a sense that life is meaningless and experience resentment. Xiong, Lipsitz, Nasri, Lui, Gill, Phan, and McIntyre (2020) averred a high proportion of negative mental symptoms in almost all the studies concerning job loss. According to Fuller (2021), these people are less inclined to associate with their friends and family because they are humiliated or embarrassed, which leads to isolation, and depression. Crayne (2020) explained that people who have been jobless for a long period are more likely to acquire alcoholism, depression, anxiety, and suicide, among other problems.

Q3: How do the terminated employees deal with depression during the pandemic?

Participant 1 (professional photographer) said that "*I woke up one day and I told myself that I should not be defeated on my depressive feelings. I look for other jobs and luckily I have found one.*" Participant 2 (construction worker) said that "*I opened up with my Family, regarding what I'm going through, and they taught me to motivate myself. Also, I learned to get enough sleep that helped me lessen the stress I felt and so that my mind will work properly. As a result, I was able to get things right and started to love my work again like a new excited employee.*" Participant 3 (hairdresser) said that "*I started healing and getting better because of my family. I started looking for ways that I can do to earn money and right now I'm doing online selling and selling foods near our house.*" Participant 4 (driver) said that "*I cannot let my family down; I have to be strong and to provide for them.*"

Participant 5 (varsity coach) said that "*When people ask me how I'm feeling, I usually tell them the truth. I don't hide and cower away. I guess it helps. I get to acknowledge my predicament as it is. And through the process, I find out*

that there are genuinely concerned about me. Whenever I feel like it's way too much, there are people whom I get to call and talk to right away. It's been difficult but somehow I remain afloat."

The stories above show how the participants handle their depression during a pandemic. Participants 1, 3, and 4 realized that they must fight the negative feeling they are feeling and find ways to provide for their family's needs. Participants 2 and 5 opened the depression they are experiencing to other people especially to their families which helps them to stand up. This analysis can be related to what Martinez, Co, Lau, & Brown (2020) had stated. Because of financial difficulty, participants chose to seek help from family and friends instead of seeking professional help. They prefer to seek moral support from their loved ones to overcome depression. Prime, Wade, & Browne, (2020) expressed that contextual risk permeates the structures and activities of family systems; therefore, the consequences of these issues are likely to be long-lasting, the role of family dynamics in risk buffering as well as fostering resilience via shared family values and strong links is provided within the context of COVID-19.

Conclusion

When participants' families encounter financial difficulties because of the pandemic now that they are unemployed, they become despondent. Participants got depressed after being terminated from their jobs and they were dissatisfied with all they accomplished (Banyan Mental Health, 2021; Stolove, Galatzer-Levy, & Bonanno, 2017; Andreeva, Brenner, and Hanson, 2015; Talevi, Pacitti, Socci, Renzi, Alessandrini, Trebbi, & Rossi, 2020).

Overthinking and worrying about where to earn money to meet their family's needs are among the symptoms they encountered. Participants had doubts and believed that it would be better to vanish, and they felt extremely unhappy and had suicidal or negative thoughts. They were filled with self-doubt, sleeplessness or excessive sleeping, and hollow sensations. They experienced a variety of feelings, including remorse, embarrassment, and failure, as well as sleeping for lengthy periods and losing their will to live. They could not stop sobbing or

were crying spontaneously due to their desolation. They also started to lose interest in the things they used to like before the pandemic (Farre, Fasani, and Mueller, 2018; Gen Psych, 2020; Xiong, Lipsitz, Nasri, Lui, Gill, Phan, and McIntyre, 2020; Fuller, 2021; Crayne, 2020).

Finally, the researchers concluded that having a supportive family can aid in handling depression. Unemployed employees cope with depression with the aid of their families. As a result, they will be able to stand up and seek a solution to the family's difficulties once more. To overcome depression, they sought moral support from their loved ones. The role of family dynamics in risk mitigation and resilience building through shared family values and strong ties is highly significant (Martinez, Co, Lau, & Brown, 2020; Prime, Wade, & Browne, 2020).

Recommendations

When faced with a job loss, assess oneself to identify what field to apply for. Look for open opportunities, as well as possibilities and resources that might provide a family with an income. Government and community support and resiliency are highly significant. Employment hiring suggestions and support must be institutionalized in a particular locality to assist them with job openings and recruitment, whether in person or virtually aside from social amelioration programs.

It is critical to sustaining good mental health. When a person is unemployed, he or she must take care of himself and his mental health. Local mental health and livelihood support must be initiated by the community leaders, politicians, and other concerned entities. Moral support from friends and family, as well as sharing one's ideas and feelings with family, peers, and another group, can be beneficial. Community counselors must be considered as a local position in city/barangay to address all forms of psychosocial needs.

Family members who are working should use the information gathered from the results of this study to give not just moral but also financial assistance. It is also a good idea for individuals to check on each member of the family to see whether they experience depression. Support those who are dealing with negativity, low self-esteem, or other personal issues. Institutionalizing support groups in the company or industry, academe or educational institutions, community, and religious organizations is also recommended. Peer counseling is highly encouraged.

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