The aim of this study is to explore research projects to demonstrate some of the problems connected with health consequences of unemployment. There is a growing body of evidence that unemployment can influence physical and mental health. This review essay focuses on health consequences of economic recession and unemployment. The author explores some important Hungarian events which serve as a historical context of the whole topic to later analyse the mental effects of unemployment. Concerning the mental consequences of this phenomenon, anxiety, depression, and low self-esteem often occur among unemployed people. Learned helplessness is well known in the literature as well. The author makes an attempt to interpret the topics above and the stages unemployed people undergo. Numerous psychological theories of unemployment are known such as frustration theory, life-span developmental theory, deprivation theory, agency restriction theory, and the vitamin model, which try to explain the importance of work in people’s life. In this paper the author tries to emphasise the possibility of a crisis originating in the economic recession and affecting not only individual life but also the whole society.

**Keywords:** unemployment, economic recession, mental health, contextual effects, theories of unemployment

**Psychologische Folgen von wirtschaftlicher Rezession und Arbeitslosigkeit:** Die vorliegende Studie will Forschungsprojekte vorstellen, die sich mit den Auswirkungen von Arbeitslosigkeit auf die Gesundheit befassen. Es erweist sich immer deutlicher, dass sich Arbeitslosigkeit auf die körperliche und seelische Gesundheit auswirkt. Auch die vorliegende Studie untersucht den Themenbereich von wirtschaftlicher Rezession und Arbeitslosigkeit. Die Autorin behandelt einige wichtige Ereignisse in Ungarn, die den historischen Kontext des Themas darstellen, und kommt dann zu den psychischen Auswirkungen von Arbeitslosigkeit. Bei arbeitslosen Men-

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Hungarian turning points from 1989 as for political and sociological aspects. In this paper the author uses the conclusions arrived at from research projects to demonstrate some problems of unemployment. At first, some Hungarian historical events are shown in order to later analyse health consequences of unemployment. It is important to bear in mind that there are not too many Hungarian representative research projects relating to unemployment and health. In spite of this fact the author tries to summarise these Hungarian results.

In 1989 Hungarian society relinquished socialism, which according to many people provided a relatively good quality of life. Hungarian society gave up the earlier regime and embarked on the transition to a new regime of capitalism. After this ‘transition’ some people had to contemplate finding a job. After two years of the transition, unemployment became one of the biggest problems in society and in the Hungarian political system. As a consequence of unemployment, people did not feel sure about their economical situation and tried to avoid this extremely unpleasant phenomenon. People started to choose individual values rather than collective values. The Hungarian economy changed and the private sector became more legal. It is a well known fact that the earlier economy based on the Soviet model became defunct. Millions of people were affected by these changes. Some of them were integrated into the ‘black economy’ while keeping their main legal job. More and more people became unemployed and felt insecure in their personal lives (KÖLLÖ 1993). The change of the Hungarian political system was one of the most important barriers in Hungarian history. Another very important event which had a major influence on the nation’s life was when Hungary became a part of the European Union. In October 2009 the economic recession began. Recessions cause a significant decline in resources available to the economy because customers spend less money, generating competitive rivalry in the market. Initially, the behavior of consumers changes during recessions. They have less money to spend and cut back personal spending in response to the overall decline in economic activity. Typically, they are more careful in their purchases, more sensitive to prices,
and feel increased anxiety (Pearce & Michael 2006). Moreover, according to the literature, the risk of suicide is higher because of the recession, therefore we need to focus on both the recession and unemployment as well as their main psychological consequences.

2. Unemployment

2.1. Definitions

Unemployment is a permanent stress situation which requires the person affected to adapt. An unemployed person is in a frustrating situation, which is a consequence of his/her social, physical losses and failure, affected by the feeling of worthlessness. There is no absolute agreement concerning the definition of unemployment among countries and even within a country. Different institutions sometimes adhere to different definitions of unemployment (Hollederer 2002). Jahoda (1981) considers all those unemployed who do not have a job but would like to have one, or who have to rely on financial support in order to survive as long as they do not have a job. The definitions above show that unemployment is a complex, multidimensional construct, involving not only situational but also motivational, medical and legal aspects.

2.2. Unemployment: a stressor, a psychosocial crisis or something else

When we read about stress and crisis we often think that unemployment is both a stressor and a psychosocial crisis. A crisis is a turning point: an important, recessive situation. From a psychological point of view, crisis is a traumatic and stressful change in a person’s life. It contains a danger and also a possibility (Csürke et al. 2009). Physical and psychological stressors and stress responses can set the stage for, worsen, or even directly cause almost any kind of physical illness, not only those considered as psychosomatic. Most generally, however, stress is viewed as an ongoing interactive process that takes place as people adjust physically and psychologically to their environment. When we see unemployment as a psychosocial crisis we have to admit that this phenomenon is a big change and a challenge as for a person’s psychosocial balance or state. This balance means that people are able to integrate into society by having work and suitable adaptation strategies. Any unexpected event, like job loss, can have a harmful effect on the previously formed balance. This can be explained by the fact that the person sustaining the loss would like to use his/her adaptation skills but there is nothing to adapt to. These circumstances lead to the development of a psychosocial crisis. If people’s earlier development was healthy and they learnt the basic adaptation strategies, they would solve this problem and control this new situation involving a temporary
social vacuum. However, if their earlier development was problematic, the crisis will be more serious.

3. Psychological theories of unemployment


There are different theories concerning unemployment. In this part of the article the author’s aim is to give a relatively brief summary of them to serve as a ‘frame’. The psychological response to unemployment could be described in terms of the following discrete stages:

– At first there is a shock, which is followed by an active hunt for a job, during which the individual is still optimistic and still maintains an unbroken attitude.
– Secondly, when all efforts fail, the individual becomes pessimistic, anxious, and suffers active distress; this is the most crucial stage of all.
– Finally, the individual becomes fatalistic and adapts to the new state but with a narrower scope and now with a broken attitude (EISENBERG & LAZARSFELD 1938).

3.2. Stages theory 2.

According to ARNETZ et al. (1987), an unemployed person experiences different emotions in the different stages of unemployment. The stages: 1. danger of job loss, 2. the job loss itself, 3. ‘honeymoon’ – the first six months of the unemployment period without financial problems, 4. period of a difficult financial situation, 5. permanent unemployment period without hope of finding a job. In the first and second stages the psychological and the psycho-physiological stress level is very high, but the financial situation is not a problem. The social support is appropriate, and the unemployed person chooses rational coping strategies. In the period of the first stage (danger of job loss) the anxiety level is higher. The person anticipates the difficult financial situation, which induces maladaptive psycho-physiological responses, psycho-pathological reactions, depression or other harmful behavior. At this point, problems of the circulatory system and immune system are anticipated. As for ego defense mechanisms, some people think magically, archaically, and try to interpret events according to some higher power, such as God. Some do not dare to confront their unemployment situation, therefore they do not feel this phenomenon so deeply. There are some authors who describe a brief reactive psychosis as a consequence of unemployment. In addition to the growing serum cortisol level, the unemployed person can be characterised by weaker immune competence (LÁZÁR 2006). In the third stage of unemployment the person does not have any financial problems, the first shock disappears, and
spiritual life is in harmony. This is a period without stress in which the person is characterised by physiological, social and mental balance. In the fourth stage, health deteriorates and stress levels are higher because of the poor financial situation of the unemployed person. Lack of self evaluation, behaviour problems and social isolation are important at this stage, which result in a poor quality of life. The last period of unemployment can be characterised by immune-suppressive phenomena (LÁZÁR 2006).

3.3. Frustration theory

According to this theory, frustration always leads to aggression, and aggression always presupposes the existence of frustration (DOLLARD et al. 1939). Reactions to job loss can be explained by the frustration-aggression theory (CATALANO et al. 1993). Anomy and deviant behavior patterns can occur if a person is not socialised appropriately. Hence a good social environment and social support are important agents for personality development.

3.4. Life-span developmental theory

ERIKSON (1959) proposed eight stages, each with associated conflicts that need resolution for healthy psychosocial development. In relation to adolescence, some researchers have reported evidence suggesting that youth unemployment sets back healthy psychological development, as predicted by the theory as it prevents the acquisition of occupational identity (GURNEY 1980).

3.5. Deprivation theory

This theory is based on Freud’s view that work represents our strongest link to reality. JAHODA (1981) applied it and proposed a theory that distinguishes between the manifest benefits of employment (earning a living) and the assumed latent benefits that serve to maintain links with reality. She identifies five latent benefits: time structure, social contacts, external goals, status and identity, enforced activity. Marienthal research of Jahoda and Lazarsfeld proved this theory (BÁNFALVY 2003).

3.6. Agency restriction theory

The theory assumes that people are agents who strive to assert themselves, initiate and influence events and are intrinsically motivated. According to the agency
restriction theory, the negative consequences of unemployment arise because they inhibit the exercise of personal agency (Fryer & Payne 1984).

In short, agency theory assumes that people are fundamentally proactive and independent, whereas deprivation theory, by contrast, assumes them to be fundamentally reactive and dependent.

3.7. The vitamin model

This model assumes that nine features of the environment (opportunity for control, opportunity for skill use, externally generated goals, variety, environmental clarity, availability of money, physical security, opportunity for interpersonal contact, and valued social position) affect mental health in an analogous manner to the way vitamins affect physical health (Warr 1987).

4. Unemployment and health

4.1. Cognitive and emotional responses to unemployment

Evaluation of unemployment depends on the educational level of the unemployed person, self evaluation, and some contextual elements like gender, social support, age, income and employment status (Béland et al. 2002). Worry, fear, hostility, aggression, sorrow, depression, loneliness are among the emotional responses to unemployment. Sometimes the above factors have a special order. For example, worry and fear appear mainly around job loss. These emotions can turn to anger if the unemployed person does not find a job. Hostility means that the employed person thinks unemployment is not his/her fault and the person blames another person. If the stress is permanent the negative feelings turn inward and feelings of helplessness or low self esteem can appear. Further stress can lead to depression and loneliness. Unemployed people experience lower activity levels and some feel isolated.

4.2. Unemployment and mental health

Unemployment is a prolonged stress-generated factor which results not only in mental problems but also in psychosomatic diseases. Unemployment can also cause high blood pressure (Brenner 1971).

According to Székely (2003), unemployment has many consequences such as material effects, changes in the daily routine, psychological effects, addictions and mental effects. It affects social life and political activity. Unemployment means lower income, which leads to poverty (Aiken et al. 1968). The daily routine and activity level also changes. Many people are not able to utilise their time (Fagin &
Among the psychological effects of unemployment, depression and anxiety are important (Winefield & Tiggemann 1990). Unemployed people can be characterised by resignation and apathy (Jahoda et al. 1999). Self-esteem decreases (Leventman 1981; Feather 1982). Self and identity change, unemployment generates social stigma. As a consequence of persistently elevated unemployment rates in many Western countries, a cultural change has been assumed to have taken place since the 1970’s, characterised by what is called a ‘normalisation’ of unemployment, meaning that being unemployed has become more socially acceptable and less stigmatising (Schaufeli & Van Yperen 1992; Sheeran et al. 1995), possibly resulting in weaker differences between unemployed and employed persons in more recent studies. The structure of time and activity is missing in the case of unemployed people (Jahoda 1987). Concerning addictions, the consumption of alcohol increases (Catalano et al. 1993) as does heavy smoking (Lee et al. 1991). Physical health also deteriorates (Stokes & Cochrane 1984; Kessler et al. 1988). High blood pressure can appear among unemployed people (Brenner 1971). According to Platt & Kreitman (1984, 1985, 1990), the risk of suicide increases because of unemployment. They can become socially isolated from each other (Jahoda et al. 1999). Family relationships usually deteriorate and the number of divorces increases (Liem & Liem 1988). Political activity decreases as a result of unemployment (Jahoda et al. 1999).

There are many personality factors which influence the lives of the unemployed. According to Schaufeli et al. (1992), positive self-esteem helps the lives of the unemployed. In spite of this fact, unemployed people with low self-esteem are more flexible in accepting any work opportunities. As a consequence, they have more chances of finding a job (Schamir 1986). They structure their time better and it is easier for them to cope with unemployment (Feather 1989). Payne (1988) found that neuroticism correlates with bad experiences of being unemployed. According to Kirchler (1985), people who are introverted and neurotic cannot adapt to or cope with unemployment. Concerning the ego defense system, people with more mature defense mechanisms are less likely to become unemployed (Valllant 1995).

5. Hungarian studies concerning the health consequences of unemployment

In the following part of the article the author focuses on the most important conclusions of the available research projects. There are very few Hungarian studies in this field, but the results of Hungarian representative studies are equivalent with studies in the literature from other countries. According to Ungváry (1993), problems of the circulatory system are more frequent and the risk of death is higher amongst unemployed people. Addictions, mental problems, behaviour disorders and suicide attempts are frequent in this population. Unemployment affects the immune system. Moreover, the risk of sclerosis multiplex rises because of unemployment. Léder et
al. (2002) examined the psychosomatic effects of unemployment in Budapest, Pest and Borsod County. According to the results, differences can be seen among the different regions regarding the following variables: depression, coping strategies, social support, life goals, neurosis and general health state. LÁZÁR (1993) tried to explore the connection between unemployment and the risk of different illnesses. He says perception of unemployment depends on the person’s coping strategies, gender, age and health status. The way one experiences unemployment can be different. Lázár emphasises the following consequences of unemployment: high blood pressure (like BRENNER 1971), risk of circulatory problems, addictions, smoking, psychiatric problems. He admits that some problems appear before job loss: permanent anxiety, which is built in the work itself, higher pressure regarding responsibility, reductions in feelings of autonomy, self evaluation and the number of social relationships. Myocardial infarction, malignant tumor, infections, digestive problems, depression, aggression, neurotic/psychotic reactions, accidents, social isolation can be frequent among unemployed people. 9 months after the starting point of unemployment lymphocites do not react so strongly to PHA and PPD mitogens. Lázár proved that cytotoxic activity is higher during the first period of unemployment, but immune functions marked by serin esterase activity decrease in cases of permanent unemployment. In a Hungarian research project by LÉDER et al. (2002) it was proved that there were significant differences between unemployed and active worker populations. The following variables were examined: addictions, coping strategies, social support, vital exhaustion, neurosis, hostility, depression, suicide thoughts and people’s need for medical health services and psychosomatic status. Results of the unemployed people were worse concerning almost all variables than the results of active workers except for the need for medical health services. Active workers needed these services more frequently. The rate of unemployed people is 2.5% among people with higher education. This rate is much higher among people with lower education. Social support is stronger among active workers. Quality of life for young unemployed persons is worse than active workers according to SUSÁNSZYK et al. (2008). Young unemployed persons tend to feel depression and deal with suicide when they are confronted with a difficult life situation. They are characterised by mental instability and negative cognitions concerning the future. These health conditions have a bad influence on the possibility of finding a job.

6. Summary and conclusion

As it is widely demonstrated in the literature, work is an organic element of life. In modern society, work and employment are so closely related that unemployment causes great damage for most of those who are left without a job (ALLEN 1986; JAHODA 1982; WARR 1987). The article presented an attempt to summarise some pieces of useful and interesting information about one of the most dangerous problems in life, which is unemployment. The reason the author concentrated on this
topic was to emphasise a possibility of a national health problem – a crisis of both the individual and society, originating in the economic recession and unemployment, which affects not only the whole Hungarian society but also people’s mood almost all over the world. The second reason this article was written was to inspire the researchers. More research projects are needed in Hungary. It would be useful to study the psychological aspects of unemployment and compare the results with the literature from different countries.

References


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