

## RELATIONSHIP BETWEEN THE ‘TYPE D’ PERSONALITY AND ‘DEPRESSION’: A REVIEW

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### ABSTRACT

*At any given moment, 3–9% of teens fit the criteria for ‘Depression’, and by the end of adolescence, up to 20% of teenagers report having had ‘Depression’ at some point in their lives. (Goyal et al., 2009). Depressive episodes and sleep issues are known to result from ‘Type D’ personality, which not only has an unpleasant influence on people’s physical health but may also harm their overall well-being and, ultimately, how well they perform at work. Reviewing the relevant material on ‘Type D’ (distressed) personality and discussing its implications on ‘Depression’ were the goals of this study. For this study, a computerized search for literature that showed the relationship between the ‘Type D’ personality and ‘Depression’ was made and literature from the year 2012 to 2021 was made part of this study. The study from the literature showed that individuals having ‘Type D’ were more likely to suffer from ‘Depression’.*

**Keywords:** ‘Type D’ personality, Depression

One in five children and teens can be diagnosed with an emotional, mental health, or behavioural condition (WHO, 2021) thus it is critical to address the mental health issue. These issues affect 1 in 10 young people and are severe enough to interfere with their ability to perform at both home and school (Kessler, Berglund, Demler, Jin, Merikangas and Walters, 2005). According to estimates, 80 percent of kids who are dealing with mental health issues do not receive the appropriate assistance (Kessler, Berglund, Demler, Jin, Merikangas and Walters, 2005).

Understanding students’ mental health is crucial because mental health issues may be treated, and early diagnosis and intervention have proven effective in preventing them (Falissard, 2016).

One of the most prevalent mental diseases in the world, ‘Depression’ may affect people of all ages, even newborns (Keren and Tyano, 2006). According to statistics from the World Health Organization, ‘Depression’ affects 4.4% of people worldwide (Geneva: World Health Organization; 2017). According to Son and Kirchner, (2000), the onset of ‘Depression’ is exhibiting a decline in age

and an increase in the number of teenagers and even young children displaying depressive symptoms.

According to Bagby, Quilty and Ryder (2008), depressed people have personality traits that are very different from those of non-depressed people. It has been shown that analyzing a person’s personality can yield knowledge that is useful for both diagnosis and therapy.

Social inhibition and a range of negative affectivity are characteristics of a ‘Type D’ personality. Social restraint can be compared to conscious emotional restraint (Denollet, 2005). They constantly display anxiety, discontentment, and unpleasant feelings. They experience uneasiness among strangers and coworkers, which results in them having few friends and social ties (Radsepehr, Shareh and Dehnabi, 2016). People with ‘Type D’ personalities experience stress and instability in their daily lives. Students with ‘Type D’ personalities are more likely to have physical and mental health issues, which lowers their levels of self-actualization and accomplishment (Mols and Denollet, 2010)

Studies on the impact of ‘Type D’ personality on clinical and psychological outcomes have exploded

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in recent years. Negative affectivity is a consistent propensity to feel unpleasant emotions (Watson and Pennebaker, 1989) and social inhibition refers to the consistent propensity to restrain the expression of feelings and actions during social engagement (Denollet, 2013). Negative affectivity and social inhibition are likely to occur more frequently together in people with 'Type D' personalities (Denollet, 2005). People who score highly on negative affectivity are likely to feel unpleasant emotions, but those who score highly on social inhibition try to suppress the feelings out of apprehension of being rejected or criticized by others.

The quick and simple-to-use DS14 questionnaire may be used to test the 'Type D' personality. The DS14 questionnaire has 2 dimensions namely Negative Affectivity (NA) and Social Inhibition (SI). The negative affectivity dimension is represented by 7 items that include items such as "I often feel unhappy". The Social Inhibition dimension includes the questions such as "When socializing, I do not find the right things to talk about". The Beck 'Depression' Assessment (BDI), a self-report rating inventory with 21 items, assesses depressive symptoms and typical attitudes (Beck, Ward, Mendelson, Mock and Erbaugh, 1960)

Several studies have been conducted that show that 'Type D' individuals are more likely to suffer from 'Depression'. Here in this article, we aim to review the studies that have shown that there is a relationship between 'Type D' and 'Depression'.

## Methodology

The terms "Type D' personality," "Depression'," "Negative affectivity," and "Social inhibition" were used to search research and review articles from both domestic and international publications. The reports acquired were examined in light of publications discovered that showed a link between 'Depression' and 'Type D' personality.

## Result

Gogheri, Samavi and Najarpourian (2021) studied the correlation between 'Type D' personality and 'Depression'. The sample consisted of 236 healthy persons aged 20 to 60 (130 females and 100

men), who were chosen using the stratified random sampling approach for the descriptive correlational investigation. Participants in the study completed the 'Type D' (DS14) Personality Scale and Beck 'Depression' Inventory-short form (BDI-13). To examine the data, structural equation modeling (SEM) was used. As a result of upsetting people's emotions and making them feel bad about themselves, it appears that 'Type D' personality can produce cognitive distortions in people, which can then lead to 'Depression'.

Domagalska, Rusin, Razzaghi and Nowak (2021) studied 412 high school educators from Poland's Silesian Province. Respondents between the ages of 36 and 45 made up the largest group of teachers. Teachers with troubled personalities are shown to experience sleeplessness and despair substantially more frequently. The current study's findings suggest that to lower the prevalence of depressive disorders among teachers, preventative measures aimed at minimizing psychosocial risk factors in the workplace should be put in place.

In Delhi, 'Type D' and 'Depression' among medical students were researched by Bharti et al. in 2021. 380 undergraduate students in total were chosen using simple random sampling. To acquire data, Denollet's DS14 and PHQ19 were administered. To conduct the analysis, SPSS 20.0 was used. Out of 380 pupils, 116 were deemed to have 'Type D' personalities. At Vardhman Mahavir Medical College and Safdarjung Hospital in Delhi, a substantial correlation between 'Type D' and 'Depression' was discovered.

Son and Kirchner (2000) sought to determine if 'Type D' 'Depression' and non-adherence to medication were related after successful percutaneous coronary intervention. For this study, the Korean version of the DS-14 was used to measure 'Type D' personality. The standardized Korean version of the patient health questionnaire was used to assess 'Depression' in the pupils. This investigation utilized Choi et al. The PHQ-9 is a nine-item survey with scores ranging from 0 to 3, with higher scores indicating more severe depressive symptoms. Using SPSS version 23, the statistical analysis was conducted. 'Type D' and 'Depression'

have been linked, even though their combined impact on medication non-adherence was not determined to be substantial.

Khan and Khokhar (2017) carried out a descriptive cross-sectional study to investigate the relationship between 'Depression' and 'Type D' personality among Delhi college-bound students. 500 students from 5 Co-ed institutions on Delhi University's North Campus received the DS-14 to study 'Type D' personality. PHQ9 was given out to treat 'Depression'. 422 replies in all were received. SPSS 21.0 was used to conduct the statistical analysis. The link was examined using a Chi-square test with a 95% level of confidence. The correlation between 'Type D' and 'Depression' was also shown to be statistically significant, indicating that 'Type D' and 'Depression' were both frequent among students.

Kir (2017) attempted to look at the connection between 'Depression' in the general young population and social inhibition, which is a characteristic of 'Type D'. 209 psychology students were used as the sample population for this study. The Social Inhibition Questionnaire (SIQ-15), created by Denollet and Duijndam, was used to assess social inhibition. PHQ-9 was employed as a depressive symptoms' indicator. According to the Student's T-Test, there is a correlation between strong social inhibition and a higher 'Depression' score. Additionally, a strong link between social inhibition and 'Depression' was revealed by the regression analysis. Additionally, a strong association between social inhibition and sadness was revealed by Pearson correlation analysis. High levels of social inhibition in healthy people increased the chance of anxiety symptoms turning into depressive symptoms, which has a severe impact on health.

The relationship between 'Depression' and 'Type D' personality was examined by AL-Qezweny, Utens, Dulfer, Hazemeijer, Van Geuns, Daemen and Van Domburg (2016). The DS-14 personality scale, which initially assessed 'Type D' personality, was given to the participants to complete. The Hospital Anxiety 'Depression' Scale, sometimes known as HADS, was developed to measure 'Depression' to establish a baseline. According to the study, 'Type D' people were shown to be more depressed than

non-'Type D' people. 'Depression' is 3.69 times more likely to occur in 'Type D' patients. Following a 10-year follow-up, it was discovered that the fold increase was 2.72. As a result, 'Type D' can be used as a predictor to show who is at a higher risk of developing 'Depression' and anxiety.

Van Dooren, Verhey, Pouwer, Schalkwijk, Sep, Stehouwer, Henry, Dagnelie, Schaper, Van der Kallen, Koster, Schram and Denollet (2016) sought to determine if 'Type D' is a risk factor for 'Depression' in the general population. Negative affectivity, social inhibition, 'Type D' personality, depressive illness, and depressive symptoms were evaluated in a total of 712 individuals. 49 percent of the participants indicated poor social inhibition and negative affectivity. 12 per cent solely reported having a pessimistic outlook, while 17 per cent had 'Type D'. Depressed disorders and depressive symptoms were shown to be substantially more common in people who had previously had their 'Type D' personality traits evaluated. Hence, it may be said that having a 'Type D' personality might make one more susceptible to 'Depression'.

To determine the prevalence of 'Type D' personality among second-year undergraduate medical students, Nagari, Muppuru, Rani and Lakshmi (2015) performed research. To determine the prevalence of 'Type D', they also employed the DS14 questionnaire. 152 second-year students from Sri Venkateswara Medical College in Tirupathi in total were chosen. 55.3 percent of pupils were found to exhibit negative affectivity, and 76.3 percent to have social inhibition. According to this study, 'Type D' personality is common among college students.

Iqbal and Dar (2015) used the Beck 'Depression' scale, a 21-item questionnaire with 4 points ranging from 0 to 3, to evaluate 35 men and 42 women. The positive and negative affect schedule, a 20-item self-reported scale with a range of 1 to 5, was used to evaluate positive and negative affect. Using SPSS 20.0, statistical analysis was carried out. The findings demonstrated a strong correlation between negative affectivity and depressive symptoms.

'Depression' and 'Type D' personality among medical undergraduate students were examined by Gupta and Basak (2013). According to the study,

medical students' sadness is a natural result of academic strain. 'Depression' might be viewed as being determined by 'Type D'. A total of 150 Midnapore Medical College undergraduates both male and female, were chosen for this purpose. The Becks 'Depression Scale and the DS14 were used to measure 'Depression' and 'Type D' personality, respectively. Fisher's 2-sample t-test was used to determine whether there was a significant difference between the scores. In 70% of the instances, 'Type D' personalities were found to have negative affectivity rates of 15.3% and social inhibition rates of 23.3%. The pupils may have 'Type D' personality, since 31% of them indicated both negative affectivity and social inhibition.

Mommersteeg, Denollet and Martens (2012) investigated the relationship between 'Type D' personality, depressive symptoms, and work-related health outcomes in the Dutch population. A total of 1598 people were recruited for the study. To ensure that the data is inclusive of all genders and age categories, quota sampling was utilized. The DS-14 was used to evaluate 'Type D' personality, while the Beck 'Depression' Inventory was utilized to analyze depressed symptoms. In addition to having strong connections to burnout and tiredness, 'Type D' personality and 'Depression' were discovered to have substantial relationships.

A study on Korean teenagers was undertaken by Lee et al. in 2012 to identify the traits of the 'Type D' personality. A Korean version of the DS-14 was administered to the population to ascertain the prevalence of 'Type D' and the correlation between 'Type D' and markers of mental health in Korean students. We collected data on 4899 students, ages 13 to 18, from 12 different schools. The Beck 'Depression' scale was used to evaluate 'Depression'. According to the findings, 'Type D' teenagers experienced higher mental health issues.

### Conclusion and Discussion

This systematic review shows that 'Type D' may have a detrimental impact on the health condition of otherwise healthy people from the general community as well, even though the bulk of studies on 'Type D' personality has focused on medical groups. The state of mental health was negatively

impacted by 'Type D' personality. Numerous research revealed that general population members with 'Type D' personalities had greater signs of discomfort, despair, and anxiety than non-'Type D' individuals. A similar higher susceptibility to mental health issues was observed in the medical population, working individuals well as 'Type D' individuals as well.

There may also be a connection between 'Type D' personality and health-related issues in the workplace. Compared to non-'Type D' employees, 'Type D's missed more days of work, were more likely to have vital tiredness or post-traumatic stress disorder, thought their jobs were more demanding, had greater degrees of burnout, and displayed a poorer feelings of personal success.

Thus, the term 'Type D' personality refers to a wide personality construct that is prevalent in a significant portion of the general population and is not merely a mental state that people acquire in response to the diagnosis of a medical problem (Mols and Denollet, 2010). Future research on the prevalence of work-related issues, as well as the general public's mental and physical health, may consider this to be a key susceptibility factor.

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