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# EMOTIONAL INTELLIGENCE IN DEPRESSION: NAVIGATING SELF-AWARENESS, COPING, AND SOCIAL DYNAMICS

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#### **Abstract:**

This study delves into the lived experience of a 33-year-old single woman diagnosed with depressive disorder, exploring her self-awareness, coping strategies and social interactions. Through an in-depth interview, the informant revealed a profound understanding of her emotions, physical manifestations of depression, and behavioral patterns. Her adeptness in managing mood and emotions, primarily through social avoidance, sheds light on the intricate relationship between grief, socialization and mental health. The informant's proactive approach in seeking help via therapy and religious practices highlights the integration of modern and Islamic methodologies in managing her condition. Despite her functional capabilities at work, her hesitation toward socializing and starting new relationships signifies ongoing healing and selfcontrol. The study underscores the multifaceted nature of depression management, emphasizing the need for comprehensive approaches encompassing self-awareness, coping mechanisms, religious practices, and the intersection between personal and professional spheres. Future research could explore the efficacy of combining religious practices with therapeutic interventions and delve into cultural nuances affecting individuals' readiness for new relationships amidst mental health challenges.

#### **Keywords:**

Depression, Self-awareness, Social Avoidance, Emotional Intelligence

#### Introduction

Understanding Emotional Intelligence (EI) has become pivotal in unraveling the intricate connections between psychological well-being and human experience. As we delve into the labyrinth of emotions, it becomes evident that EI, a multifaceted construct encompassing awareness, regulation, and understanding of emotions, plays a pivotal role in the lives of individuals grappling with various mental, psychological, or emotional challenges. The landscape of mental health is diverse, with individuals navigating a spectrum of conditions, from diagnosed disorders to personal struggles. Within this tapestry, the concept of EI offers a lens through which to comprehend the nuanced interplay between emotional well-being and these challenges (Sharfras Navas , M. Vijayakumar, 2022). In this exploration, we embark on a journey through the complexities of EI, examining its profound implications for those who are diagnosed or self-identify with mental, psychological, or emotional issues. EI, often regarded as the ability to recognize, comprehend, and manage one's own emotions, as well as understand and influence the emotions of others, takes on a unique significance in the context of mental health.

For individuals diagnosed with conditions like anxiety, depression, bipolar disorder or any other psychological challenge, the terrain of emotions can be tumultuous. Here, EI acts as a compass, guiding individuals through the tumult, enabling them to navigate their emotional landscapes more effectively (Horwitz, 2020). It becomes a crucial toolkit, offering strategies to regulate overwhelming emotions, fostering resilience amidst adversity, and cultivating a deeper comprehension of their emotional states. Moreover, for those who self-identify with emotional struggles or find themselves grappling with psychological complexities, EI unveils pathways toward self-discovery and growth (Fiske & Taylor, 2013; Horwitz, 2020). It offers insights into recognizing triggers, understanding emotional responses, and fostering a more empathetic relationship with oneself.

Yet, this relationship between EI and mental health is not unidirectional. Just as EI influences how individuals cope with their challenges, the presence of these challenges may also mold and shape one's Emotional Intelligence. The symbiotic nature of this relationship invites a deeper examination, exploring how mental, psychological, or emotional issues may impact the development and application of EI. In essence, EI emerges as both a guiding beacon and a reflective mirror in the realm of mental health, intertwining with and illuminating the experiences of individuals navigating these multifaceted terrains.

#### **Literature Review**

Daniel Goleman's model of EI comprises five primary clusters, each representing essential facets crucial for emotional competence (Goleman, 2006). At the foundation lies self-awareness, encompassing mindfulness, emotional self-awareness, and accurate self-assessment. Managing mood and emotion involves regulating one's emotions, cultivating resilience, and adaptability. Internal Self-Motivation emphasizes intrinsic drive, optimism, and a commitment to personal goals. Interpersonal and Social Skills encompass effective communication, collaboration, and empathy, enabling adept relationship management. Empathy, pivotal in Goleman's framework, involves understanding others' emotions and perspectives, fostering trust and deeper connections. These clusters collectively offer a comprehensive framework for developing EI, pivotal for personal growth, effective leadership, and harmonious social interactions.

EI intertwines intricately with mental health, shaping how individuals perceive, understand, and manage their emotions amidst various psychological challenges. EI acts as a guiding compass, aiding individuals in navigating the complexities of mental health by fostering a deeper comprehension and regulation of emotions (Romanelli et al., 2006). For instance, individuals diagnosed with conditions like anxiety, depression, or bipolar disorder often grapple with intense emotional states. Here, EI offers valuable tools, enabling them to recognize triggers, manage overwhelming emotions, and cultivate resilience amid tumultuous mental landscapes. Those adept in EI may exhibit greater emotional resilience, bouncing back from setbacks and coping more effectively with the emotional toll of their conditions.

Moreover, for individuals grappling with psychological challenges or undergoing emotional struggles, EI serves as a vital skill set. Understanding one's emotions, being able to articulate feelings, and recognizing the impact of these emotions on thoughts and behaviors are central tenets of EI. Such self-awareness can aid in seeking appropriate support, practicing self-care, and making informed decisions regarding mental health management. The bidirectional relationship between EI and mental health is noteworthy. While EI influences how individuals cope with mental health challenges, these challenges can also shape and mold one's EI. Experiencing and navigating psychological complexities may contribute to the development of heightened emotional awareness, empathy, and coping strategies, enhancing EI skills (Fiske & Taylor, 2013).

In addition to the above, EI intertwines profoundly with mental health, encompassing not only emotional awareness and regulation but also social cognition. Social cognition, a pivotal component of EI, refers to the capacity to understand, interpret, and navigate social interactions, which significantly impacts mental health experiences (Pajares et al., 2009). Within the realm of mental health, social cognition plays a crucial role in interpersonal relationships and overall well-being. Individuals facing mental health challenges often encounter difficulties in interpreting social cues, understanding others' perspectives, and forming meaningful connections(Fiske & Taylor, 2013). This can lead to social isolation, feelings of alienation, and exacerbation of existing psychological distress. EI, as a composite of social cognition, offers tools to bridge these gaps.

It encompasses empathy, enabling individuals to grasp others' emotions and perspectives, fostering deeper connections and reducing feelings of isolation. Moreover, adept social cognition skills facilitate effective communication, conflict resolution, and social problem-solving, vital elements in navigating support networks and seeking appropriate mental health resources. For instance, individuals with high EI and developed social cognition may better recognize when to seek help, effectively communicate their needs, and navigate social support systems. Furthermore, they can comprehend and respond to the emotions of others, fostering more supportive and empathetic relationships, which are integral for maintaining positive mental health.

Conversely, mental health challenges themselves can influence social cognition. Conditions like schizophrenia, autism spectrum disorders, or social anxiety may impede social cognitive abilities, affecting one's emotional understanding and interpersonal skills, thereby impacting EI. (Kong et al., 2019; Pepper et al., 2018; Sharfras Navas, M. Vijayakumar, 2022). In essence, the inclusion of social cognition within EI underscores its significance in the realm of mental health. By bolstering social cognitive skills, EI offers a pathway to enhancing interpersonal

relationships, seeking and providing support, and navigating the social complexities inherent in mental health experiences.

Based on the above-mentioned context, individuals with unstable mental characteristics often encounter profound challenges in socializing and communication due to the intricate interplay between their mental health condition and social cognition. Conditions like borderline personality disorder, certain forms of bipolar disorder, or severe anxiety can lead to emotional volatility and unpredictability, affecting how individuals perceive and interact in social settings (Bateman et al., 2018). One significant challenge arises from emotional dysregulation, where intense and rapidly shifting emotions make it challenging to convey consistent emotional cues or responses during social interactions (Tyrer et al., 2015). This unpredictability can lead to confusion, discomfort, or misunderstandings among peers.

Moreover, cognitive distortions or impairments commonly associated with certain mental health conditions can hinder accurate social perception and interpretation. For instance, individuals may misinterpret neutral or positive social cues as negative, leading to feelings of rejection or isolation (Fiske & Taylor, 2013). This misinterpretation can fuel social anxiety, making interactions distressing and prompting avoidance behaviors, further exacerbating social isolation (Sergi et al., 2021). Difficulties in maintaining stable and meaningful relationships also stem from unstable mental characteristics. The fear of abandonment or perceived rejection, prevalent in some conditions, can trigger intense emotional reactions, leading to conflicts or withdrawal. Additionally, the fluctuating self-image common in certain disorders can result in difficulties expressing oneself authentically, causing challenges in establishing rapport or building trust (Jefferies & Ungar, 2020).

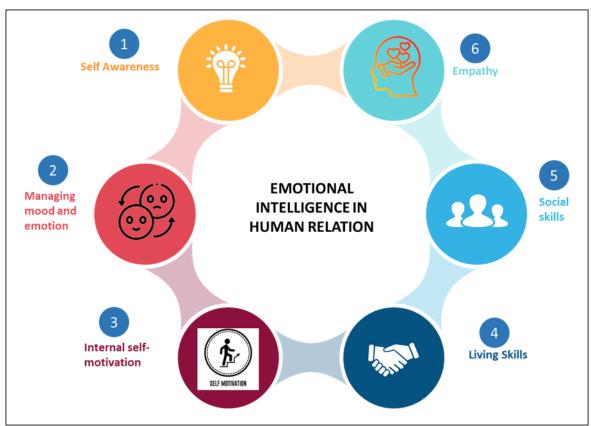
Communication poses another significant hurdle. Incoherent thoughts, racing speech, or struggles in organizing thoughts (as seen in conditions like schizophrenia or bipolar disorder during manic episodes) can impede effective communication (Pepper et al., 2018; Tyrer et al., 2015) This can lead to disjointed conversations, making it challenging for others to comprehend or engage with the individual, thus fostering social disconnection. The combination of emotional dysregulation, cognitive distortions, challenges in maintaining stable relationships, and communication difficulties creates a multifaceted barrier to socializing and effective communication. Addressing these challenges often requires a comprehensive approach that integrates therapeutic interventions, social skills training, and support systems tailored to the individual's specific mental health needs, aiming to mitigate these barriers and foster more fulfilling social interactions.

However, it's essential to note that possessing high EI does not immunize individuals from mental health issues. Mental health challenges can still arise despite strong emotional competencies (Avey et al., 2011). Yet, cultivating EI offers a means to navigate these challenges more adeptly, fostering a better understanding of oneself and others, and facilitating more effective coping mechanisms. In summary, EI serves as a critical ally in the realm of mental health. Its role extends beyond mere emotional regulation, influencing how individuals perceive, interpret, and respond to their psychological experiences. By fostering emotional awareness, regulation, and empathy, EI plays a pivotal role in shaping how individuals navigate the intricate terrain of mental health.

## Theory and its Relation to the Research Theme

Based on the main cluster developed by Daniel Goleman, this study manages to develop a research theme guided by his emotional intelligence theory. The reason is that every qualitative research approach starts with themes. Since themes are the perceptions, experiences, thoughts, values, and emotions that participants or respondents in a research study have within their heads, they cannot be observed (Kamarul Azmi Jasmi, 2001)(Merriam & Tisdell, 2017). Finding themes, or significant or intriguing patterns in the data, and using these themes to address the research or make a point about a problem are the objectives of a thematic analysis. A strong thematic analysis does much more than just summarize the data; it analyses and makes meaning of it (Tobi, 2017; Wimmer & Dominick, 2003).

Based on the above-mentioned context this research aims to explore the interplay between EI components and their influence on social integration and mental health support for individuals facing unstable mental characteristics based on research themes including, (i) self-awareness, (ii) managing mood and emotion, (iii) internal self-motivation, (iv) living skills, (v) social skills and (vi) empathy as illustrates in Figure 1 below:



**Figure 1: Research Themes For This Study** 

Source: Adapted and adopted from (Goleman, 2006)

#### **Research Questions**

Based on the research themes that were developed and identified, the research questions for this study are as below:

- RQ1: How does heightened self-awareness influence the recognition of emotional triggers and their impact on social interactions among individuals facing unstable mental characteristics?
- RQ2: What are the specific challenges individuals with unstable mental characteristics encounter in regulating emotions during social interactions?
- RQ3: How does internal self-motivation influence the setting and pursuit of social engagement goals in individuals dealing with mental health challenges?
- RQ4: What are the primary barriers individuals with unstable mental characteristics face in maintaining functional independence and adaptability in social settings?
- RQ5: What specific social challenges arise for individuals with mental instability, and how do these challenges impact the development and maintenance of relationships?
- RQ6: How does the presence or absence of empathy influence the formation and sustainability of supportive social relationships for individuals facing mental health challenges?

#### **Research Objectives**

To answer the research questions, the research objectives for this study are as follows:

- RO1: To examine the correlation between heightened self-awareness and the recognition of emotional triggers, and aiming to understand its impact on social interactions among individuals facing unstable mental characteristics.
- RO2: To investigate the specific challenges individuals with unstable mental characteristics encounter in regulating emotions during social interactions, exploring effective strategies to improve emotional regulation in social contexts.
- RO3: To analyze the influence of internal self-motivation on setting and pursuing social engagement goals among individuals dealing with mental health challenges, and aiming to understand how optimism and resilience impact sustained social connections.
- RO4: To identify barriers hindering functional independence and adaptability in social settings for individuals with unstable mental characteristics, and seeking effective interventions that improve social adaptation amidst mental health challenges.
- RO5: To explore the social challenges faced by individuals with mental instability and their impact on relationship development, and aiming to ascertain effective social skill-building interventions that foster meaningful connections and reduce social isolation.
- RO6: To examine the role of empathy in forming and sustaining supportive social relationships for individuals facing mental health challenges, and aiming to propose interventions that enhance empathy within this population for a more empathetic social environment

#### Methodology

The qualitative approach through interviews stands as an invaluable method to explore the intricate relationship between EI and the experiences of individuals grappling with mental, psychological, or emotional challenges. Utilizing semi-structured interviews, this methodology aims to delve deeply into the lived experiences of participants, allowing them to articulate the complexities of their emotional landscapes and the role of EI within these contexts. The qualitative nature of this study acknowledges the subjective nature of experiences (Merriam, 2009), allowing for a nuanced comprehension of the interplay between EI and mental, psychological, or emotional challenges. Through the voices and narratives of participants, this approach seeks to elucidate the intricate relationship between EI and the multifaceted dimensions of human experiences amidst these challenges.

Participants were proposed to be selected through purposive sampling, ensuring diversity in diagnosed conditions or self-identified challenges. A series of open-ended questions were developed, designed to unravel nuanced insights regarding the participants' understanding and application of EI amidst their struggles. The interview protocol proposes to explore various facets, including participants' perceptions of their emotional experiences, strategies employed to manage emotions (Merriam, 2009; Othman Lebar, 2017), the perceived impact of their conditions on EI, and how EI manifests in their coping mechanisms and daily lives. In addition to the above, taking note that the snowball sampling, complementing purposive sampling (Sekaran & Bougie, 2016; Tobi, 2017), this study take into accounts that the important leveraging initial participants to refer other potential subject and/or person in order to meet the sampling framework that has been set for this study. Therefore, based on the references made by the first informant, we are able to identify informants who could really be approached to obtain information to achieve the objectives of this study. The initial informant for this study is described in Table 1 below:

**Table 1: Detailed Information About The Informant For This Study** 

Informant	Gender	Age	Occupation
Informant/She	Female	33	IT Specialist

In order to meet the requirements of scientific research, an ethical consideration remains paramount throughout the process for this paper including but not limited to ensuring confidentiality, informed consent, and the opportunity for participants to withdraw at any point (Hawa & Santhiram, 2000; Merriam, 2009; Othman Lebar, 2017). Interviews will be recorded, transcribed, and analyzed thematically, allowing for the emergence of patterns, connections, and rich narratives within the data. As a result of obtaining information from the snowball technique, this study presents the informant's background as a Muslim woman, from Johor Bahru, aged 33, with a bachelor's degree in Information Technology, working in the IT field as a consultant by developing software in a private company and living in Kuala Lumpur for eight years. The informant was diagnosed with depressive disorder three years ago. Depressive disorders or mental health disorders affect how a person feels, thinks, and acts (Fiske & Taylor, 2013; Sergi et al., 2021). She is currently undergoing treatment from a psychiatrist from private hospital to help her to deal with psychological stress, depression and mental illness.

## **Finding and Discussion**

Based on an interview conducted with the informant who agreed to participate voluntarily in this study, the following are the findings. The results of the study are divided into themes as below:

#### Self-awareness

Based on interview and observations, we discovered that informant B is fully aware that she is suffering from depression due to memories that bind and burden her feelings and mind. In the context of depression, a female client's self-awareness often involves recognizing and describing her feelings in a multifaceted manner. This awareness can encompass various dimensions:

## Identification of Emotions

The informant was a female with high self-awareness and recognized a range of emotions within herself, including persistent sadness, hopelessness, or a lack of interest in activities she once enjoyed. She might articulate feelings of worthlessness or guilt, acknowledging these emotions as part of her experience. When we asked what the cause of her depression was, she explained that she had relationship problems and had broken up with her fiancé three years earlier. She had been in love since school days but could not establish a marriage with the man she loved. In a clearer context, the informant lost a loved one and it left a deep disappointment in her emotional health. Furthermore, her engagement was broken when the covid 19 epidemic hit Malaysia and the whole world. This added to her sadness in life.

## Physical Manifestations

Beyond emotions, she became aware of physical manifestations related to her depression, such as changes in appetite, sleep disturbances, fatigue, or psychomotor agitation or retardation. Recognizing these physical symptoms as linked to her emotional state contributed to her self-awareness. The informant explained again, when she was depressed, she would hold something in her hand in order to reduce the feeling of depression. Overall, her self-awareness within the context of depression involves recognizing the emotional, physical, and behavioral aspects of her condition. This awareness allows her to articulate her feelings and symptoms more clearly, facilitating a proactive approach towards seeking help and implementing coping strategies to manage her depression.

## Managing Mood And Emotion

## Triggers And Patterns

Through self-reflection, the informant identified triggers that exacerbate her depressive symptoms, like stressful situations, specific thoughts, or social interactions. Additionally, she may notice patterns in her mood fluctuations throughout the day or in response to certain events. At the same time, the informant still needed time to adapt to the surrounding community. This is because she is still in a state of grief and avoids socializing to protect her own feelings. It can be said that the approach of not mingle around with the community can help her stay away from the negative aura; subsequently she is able to manage mood and emotion accordingly. She told us that:

"I purposely avoid all the activities whether official events or family matters i.e. birthday party, corporate function and wedding in hometown. This is to avoid the awkward situation when faced with the question of when I want to get married".

This study agrees with Fiske and Taylor (2013) that the social motive that most obviously drives social cognition is understanding the need for socially shared cognition. To put it simply, socially shared understanding is the need to believe that one's views correspond to those of one's group. Being socialized is interacting with and being a part of other people, having fun in their presence, confiding in them and/or allowing two-way communication and cooperating to share their thoughts and insights. We asked the informant whether or not the approach was effective. She replied that so far, the method (avoidance) was the best way for her to cope with depression and subsequently to manage her mood and emotions rather than being disturbed.

## Impact on Functioning

The Informant admitted that she is fully aware and acknowledges that the current depression affects her daily functioning including but not limited to her ability to concentrate, make decisions, or engage in social activities. She also recognizes a decrease in productivity or an increase in self-isolation due to her emotional state. As she herself says:

"I am comfortable being alone and isolating myself from people. I think I'm safer that way, because no one bothers me...".

When we asked the informant how she functions at the workplace, she replied that her work demands do not require meeting with external clients from the organization. She only deals with internal clients who are relevant to the computer programming associated with her job's terms of reference (JTOR). Therefore, according to her, from the professional aspect, depressive disorder does not prevent her from functioning and contributing to the company and subsequently carrying out her responsibilities as an employee.

Based on the above, the nature of work is an essential aspect of an employee's mental health for any organization since it can distress productivity and job satisfaction. Based on the above statement, we found that the informant managed to control her mental state professionally. According to Fiske and Taylor (2013), people's tendency to see themselves in a positive light in pretty much controlled environments is well documented. They will have high self-esteem benefiting both mental and physical health. It is known as enhancing self. More generally, self-enhancement is the tendency to attribute positive qualities to oneself and encourage people to participate in social life especially at the workplace (Fiske & Taylor, 2013)

### Seeking Help

Importantly, a self-aware female client might recognize the need for support and intervention. Acknowledging the severity of her feelings, she might actively seek therapy, medication, or engage in self-care practices to manage her depression. In this aspect, the informant has explained, when she still felt sad and depressed a few weeks after her relationship broke up with a loved one, she began to realize that she was suffering from a depressive disorder and tried to get expert help to help her think cognitively. She is currently seeking treatment for depression including talking therapies. She further added that she did not take antidepressants at the moment. She explained:

"So far, I can cope with my problems. I make therapy appointments when I need to vent. An hour or two is enough for me to talk to someone. I haven't taken medicine yet, so far, I'm okay".

Islam does not rebuff modern medical science as long it is consistent with Islamic teaching. It should be emphasized that many Muslims around the world are also affected by various issues and problems in life that can cause them to experience mental disorders (Najam et al., 2019)(Mashitah & Lenggono, 2020). In fact, a combination of modern medicine and Islamic therapy can help a patient to improve his/her mental well-being (Najam et al., 2019; Rafique et al., 2019). Hence, seeking help early for someone that has a mental health issue is highly recommended as it can make a big difference in an individual's daily life. The first is when someone has thoughts, emotions or behaviors that are out of control, especially when it is affecting their relationships with family members, colleagues at workplace or their sense of well-being.

## Internal Self-Motivation

Internal self-motivation can be pivotal in managing depressive disorders. In this particular context, Informant B is slowly improving herself by establishing routines, even small ones, fostering a sense of accomplishment. It is important to note that the informant B is setting achievable goals, maintaining a good rapport with her immediate family especially her elder sister, nieces and nephews. She often visits her sister's house in Shah Alam and spends quality time with them. It is also important to note that though Informant prefers to be alone, she spends a lot of that time reciting the al-Qur'an and zikr to Allah SWT. This study is of the view that Informant is a person who practices Islam by always praising Allah in the sadness and disappointment she faces. She explained:

"I will recite the Quran and do a lot of prayers and dhikr if I feel sad; it helps me feel calm".

Based on the information given by the informant, the findings in this study are the same as the results of the quasi-experiment conducted by Mashitah and Lengono (2020) that reciting the Quran can calm the reader from sadness and despair. Quran recitation is the best Islamic psychotherapy technique that could alter a patient's behavior (Mashitah & Lenggono, 2020). This study also asserts that the influence of religion is also a vital feature in a person's spiritual aspect that can bring positive values to the follower. Thus, this study supports previous studies that Quran recitation therapy is effective in reducing the level of depression in patients.

#### Living Skills

Under the theme of life skills, the Informant is able to manage her emotions, mental and physical health, financial aspect and her relationships at the workplace. Since she is already working, she has no problems financially. Despite the cost of undergoing the therapy, she can afford to pay for her treatment. She said:

"My company does not cover the treatment bill. I pay for it myself".

The informant actually gets her treatment from a private hospital and has to pay for it at a relatively higher cost as compared to a government hospital. At the government hospital's specialist clinic, patients who are Malaysian citizens only need to pay a one-time cost of RM5.00.

#### Social Skills

As explained before, Informant B felt socializing with the community was a challenge for her. However, she tries to improve it especially with her immediate family and colleagues at the workplace. However, this study is of the opinion that Informant B needs more time to treat her frustration and depression. We also asked if Informant B is ready to start a new relationship in order to be happy and she answered:

"At this juncture, hmmm.. not now.. I don't think about it anymore.. not now..".

Based on cues from Informant's body language, it's evident that she isn't currently open to a new relationship. In the context above, this study argues that Informant delays her desire to establish a new relationship perhaps because she is practicing self-control. Control treats do sometimes occur under scars resources (Fiske & Taylor, 2013) such as disappointment, lingering sadness, anger and so on that influences someone to delay, revoke, and/or redefine the relationship. This paper is of the view that the pressure to defer any new relationship through socializing is indeed to be expected. Therefore, delayed marriage isn't an issue; rather, entering a troubled or challenging marriage poses a concern.

## **Empathy**

From an empathetic perspective, Informant only stated that all good things should happen to her and her family in the present and future. Not much was revealed by her regarding her feelings of empathy. Nevertheless, this study strongly believes that her willingness to come to be interviewed and participate in this study voluntarily is a manifestation of empathy.

#### **Conclusion**

Based on the comprehensive findings from Informant B, it is evident that her self-awareness about her depressive disorder plays a pivotal role in understanding and managing her condition. Her identification of emotions, recognition of physical manifestations, and behavioral patterns showcase a deep comprehension of her struggles. The Informant's approach to managing her mood and emotions through avoidance, although effective for her, highlights the complexity of social interactions and the impact of grief on socialization. The informant's proactive steps in seeking help, primarily through therapy and religious practices, illustrate her internal self-motivation and the integration of both modern and Islamic approaches to mental well-being. Additionally, her ability to sustain daily functioning at work while acknowledging the limitations imposed by depression, underlines the nuanced relationship between mental health and professional life. However, the Informant's hesitation toward socializing and starting new relationships reflects a need for continued healing and self-control. This, coupled with her self-reliance in funding her treatment despite the lack of company coverage, showcases her commitment to managing her mental health despite financial constraints.

In conclusion, the Informant's journey highlights the multidimensional nature of managing depression, encompassing self-awareness, coping mechanisms, religious practices, and the interplay between personal and professional life. This study emphasizes the importance of recognizing and addressing mental health issues while integrating diverse approaches for holistic well-being. For future research, exploring the efficacy of combining religious practices, such as Quran recitation, with modern therapeutic interventions in managing depression could be beneficial. Investigating the long-term impact of self-reliance in funding mental health treatment on individuals' financial well-being and mental health outcomes could also offer

valuable insights. Furthermore, understanding the social and cultural nuances affecting individuals' readiness for new relationships amidst mental health challenges could be an area of interest for future studies. Such research would contribute to enhancing support systems and interventions tailored to individuals managing depressive disorders within diverse contexts.

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