
ASSESSMENT OF DEPRESSION AMONG STUDENTS IN TERTIARY INSTITUTIONS IN SOUTHWEST AND SOUTH- SOUTH GEO-POLITICAL ZONES OF NIGERIA

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Abstract

The study sought to determine the prevalence, symptoms and management of depression among students in tertiary institutions in South-West and South-South Geo-political zones of Nigeria. The study is a descriptive cross-sectional one. The stratified random sampling method was used to select the respondents from the population of the study. A Depression Assessment Scale Questionnaire (DASQ) was administered to the students. The data were analyzed using frequency counts, percentages and t-tests of independent samples. The study found that students in the tertiary institutions studied showed signs of depression as 46% were mildly depressed, 52% were moderately depressed, and 2% of the respondents had severe depression. Further analysis of levels of depression among the students according to their age indicated that students who were below 17 years had the lowest level of depression (6%), while students who were 20 years old recorded the highest level of depression (23%). Other age differences were at 18 years 21%, 19 years 17% and 17 years 12%. The study also found a statistically significant difference in the degrees of depression between males (27%) and females (73%). The commonest symptoms of depression among students are withdrawal, low self-esteem, lack of enthusiasm and panic attacks. The study concluded that students in tertiary institutions in the socio-political zones are depressed. It was therefore recommended among others that both individual and group counselling should be made a priority in our institutions of higher learning.

Keywords: Depression, prevalence, causes, symptoms, management, Universities.

Introduction

The rising prevalence of suicide amongst students in tertiary institutions and the burden of depression among all age groups have continued to constitute enormous concerns worldwide. University students are faced with many problems such as accommodation, interpersonal relationships, competition and difficulties in academic studies, economic stress, and struggles in making important decisions (Sobocki, Lekander, Borgstrom, Strom & Runesson, 2017). These problems could culminate into varying degrees of stress. A stressful and rigorous academic programme or

curriculum such as the one run in most Universities could contribute to the occurrence of psychological stress and depression among students (Sidana, Kishore, Ghosh, Gulati, Jiloha, & Anand, 2012).

Depression is characterized by persistent sadness and a loss of interest in activities that one "usually enjoys" and these could be accompanied by the inability to carry out other daily activities, for at least two weeks. Globally, the total number of people with depression was estimated to exceed 300 million in 2015 (World Health Organization, WHO- 2016) Depression occurs at every age and in every country of the world. Depression was ranked by the World Health Organization (WHO) in 2015 as the single most significant contributor to global disability. Lewinsohn, Rohde and Seeley (2018) stated that depression has continued to increase at a rather alarming rate among all age groups and equally constitutes enormous health concerns worldwide. This may be due to the increasing burden of adverse environmental factors in addition to genetic vulnerability. In a global context, the prevalence of depression among first-year university medical students has been reported as being moderate to severe/extremely severe (63.6% for depression and 78.4% for anxiety). According to the World Health Organization (2018), individuals with severe mental illnesses – moderate to severe depression, bipolar disorder, schizophrenia and other psychotic disorders – generally have a life expectancy of 10–20 years shorter than the general population. Such an assertion suggests that the issue is of importance, particularly among university students who are more susceptible to depression.

Adeniyi, Okafor and Adeniyi (2012) on their part found that data on the precise prevalence and level of depression among adolescents in Nigeria appears to be quite scanty, but the prevalence of students experiencing severe depressive symptoms in their study (5.7%) is quite similar to that reported by Daban and Gobir (2018) which showed a prevalence level of 58% among University students, the findings from this study, however, is higher in percentage than the one carried out by Aluh, Okonta & Odili (2019) which showed a prevalence of 25.2%. Also, Adewuya, Ola and Aloba (2016) reported a prevalence of major depressive disorder of 6.9% among a group of Nigerian adolescents with females having a significantly higher prevalence than males.

Although the exact cause of depression is still being debated by scholars, Scholten (2013), identifies the family history of depression, the specific type of brain chemistry, and stressful or traumatic life events as factors that could play major roles in the occurrence of depression. Generally, then the most likely cause of depression has been pinned down to a combination of genetic, biological, environmental, and psychological factors (National Institute of Mental Health, NIMH, 2012). Genetically, magnetic resonance imaging has shown that depressed people's brains look different from those who are not depressed just as it has been found that specific types of depression run in some families and psychologically, stressful occurrences, difficult relationships, and trauma could trigger depression (NIMH, 2011).

Biological factors that might have some effects on depression include genes, hormones, and brain chemicals. Depression often runs in families, which suggests that individuals may inherit genes that make them vulnerable to developing depression, although many of them may inherit the vulnerability, a great number of them may never suffer a depressive illness, research has found that there are some hormonal changes before and during a depressive episode and certain parts of the brain are

affected, in general depression is caused by an imbalance in brain chemistry. (Schimelpfening, 2020).

Environmental stress in childhood is one of the most significant risk factors for adolescent and adult-onset depression episodes. Studies have shown that children with inadequate parental relationships, poor academic functioning and who had experienced mistreatment before age eleven had a high-risk profile for depression. (Schimelpfening, 2020).

Cognitive behavioural therapists argued that the root of depression in human beings can be traced to negative cognitions about the self, the world, and the future. Negative cognitions would make an individual interpret events in his/her life in a skewed manner such as dichotomous thinking patterns, selective abstraction, over-generalization of happenings or personalization of occurrences and so on. These manners of interpreting events tend to lead to a pessimistic explanatory style and thereby resulting in major or minor depression. (Beck, Arria, & Calderia, 2019).

Students in Universities, in particular, are susceptible to depressive symptoms because the academic environment is associated with several demanding challenges and several stressful events, which include regular attendance at lectures, completion and submission of term/seminar papers, writing of examinations, fieldwork and so on (Adlaf, Gliksman, Demers, & Newton-Taylor, 2012). These researchers are of the view that undergraduate students are in the age span wherein the rates of psychological distress and disorder are elevated. Depressive symptoms have not only been found among undergraduate students but also graduate students as the study by Eisenberg, Gollust, Golberstein and Hefner (2017) revealed that 11.3% of graduate students reported being depressed as against 13.8% of undergraduates.

Depression symptoms can vary from mild to severe and can include, feeling sad or having a depressed mood, loss of interest or pleasure in activities once enjoyed, changes in appetite — weight loss or gain unrelated to dieting, trouble sleeping or sleeping too much, loss of energy or increased fatigue, increase in purposeless physical activity (e.g., hand-wringing or pacing) or slowed movements and speech (actions observable by others) feeling worthless or guilty, difficulty thinking, concentrating or making decisions, thoughts of death or suicide (Higuera, 2020)

Some coping strategies can be used to tackle depression and these could be grouped into self-help and assisted help. The self-help includes exercising daily, getting enough sleep, eating healthy food and abstinence from alcohol. The assisted help is achieved by seeing the doctor or psychologist, taking prescribed anti-depressant drugs, Psychotherapy/talk therapy, Cognitive Behavioural Therapy (CBT) or Electroconvulsive Therapy (ECT) (Parikh *et al* 2009).

The development of depression among tertiary students is paramount to academic excellence. It is, therefore, not surprising that the depression status of students has become a concern of the public. A cursory survey of existing studies revealed the fact that statistics on the prevalent levels of depression among university students from developed nations could be easily reached, while the same could not be said of students from developing countries, especially Nigeria with a population of over 150 million and about 100 public and private universities. (Born, Shea & Steiner 2012)

The Newspapers, Social media and Televisions have recently been agog with reports of university students committing suicide, evidence has shown that a good number of them left suicidal notes before committing the act and all the notes that were seen by the authorities bordered on how depressed they were before they decided to take their lives. In the Vanguard Newspaper 2019, the death of a student was reported, he took his life by drinking Sniper, in 2021 it was also reported that another student took her life by hanging, The Guardian newspaper in 2019 reported a case of a student committing suicide by jumping from the faculty building. There are so many more reports of this alarming trend. This action is quite worrisome and there is a need to find out if indeed depression is prevalent among our University students in the South-West and South-South geo-political zones of Nigeria, and if there is, what are the symptoms look out for and how can these youths be helped. This study therefore aimed at assessing depression concerning prevalence, symptoms, age and gender differences of depression among students in tertiary institutions in Nigeria.

Research Question

What are the levels of depression among students of tertiary institutions in South-West and South-South geo-political zones?

Hypotheses

- i. There is no significant difference in the symptoms associated with depression as perceived by students in tertiary institutions in South-West and South-South geo-political zones of Nigeria
- ii. There is no significant difference in the age of students associated with depression in tertiary institutions in the South-West and South-South geo-political zones of Nigeria.
- iii. There is no significant gender difference in the level of depression in female and male students in tertiary institutions in the South-West and South-South geo-political zones of Nigeria.
- iv. There is no significant difference in the levels of depression between students in tertiary institutions in the South-South Zone and those in the South-West Zone.

Methods

The researchers adopted the survey research design. The target population for the study consisted of all undergraduate students in tertiary institutions in the South-South and South-West geo-political zones in Nigeria. A sample of 572 participants was initially selected for the study. However, only 192 students met the benchmark of the Center for Epidemiologic Studies Depression Scale (CES-D) by Radloff 1977, and the Multidimensional Scale of Perceived Social Support (MSPSS) by Frison and Eggermont (2015). Both instruments were merged and used; as none of the instruments could single-handedly provide all the required information. The simple random sampling technique was used to select twelve universities, while the Google form was used to administer the instrument for easy accessibility. From the instrument administered, students who scored 80% and above were considered to have a High level of Depression, 60% - 79% were considered to be moderately

depressed while students who scored between 50% - 59% were considered to have a mild form of depression.

The data obtained were analyzed using frequency count and percentages to answer the research questions while a t-test of the independent sample was used to test the stated hypotheses at a 0.05 level of significance.

Results

Table 1: Level of Depression among University Students in zones in Nigeria

Prevalence of Depression	Frequency	Percentage (%)
Mildly Depressed	88	46
Moderately Depressed	100	52
Highly Depressed	4	2
Total	192	100

Table 1 shows the level of depression among undergraduate students of tertiary institutions in Zones. Among the respondents studied, the majority, 100 (52%) were found to be moderately depressed, 88 (46%) were mildly depressed and only 4 (2%) respondents were found to be highly depressed.

Table 2: Rating of Symptoms associated with depression among University Students in both Geo-Political Zones

S/N Symptoms associated	With depression (%)			
	(%)	(%)	(%)	(%)
Worrisome	32(16.7)	36(18.8)	60(31.2)	64(33.3)
Loss of Appetite	44(22.9)	56(29.1)	48(25.0)	44(22.9)
Low Self Esteem	24(12.5)	60(31.3)	64(33.3)	44(22.9)
Lack of Concentration	4(2.1)	32(16.6)	96(50.0)	60(31.3)
Fear	20(10.4)	16(8.3)	84(43.8)	72(37.5)
Crying Spells	48(25.0)	24(12.5)	56(29.2)	64(33.3)
More Introverted	12(6.2)	56(29.2)	60(31.3)	64(33.3)
Feeling Sad	0(0)	4(20.1)	96(50.0)	92(47.9)
Feeling Unloved	36(18.8)	40(20.8)	48(25.0)	68(35.8)
Anxiety	4(2.1)	36(18.8)	64(33.3)	88(45.8)
Feeling of Hopelessness	20(10.4)	84(43.8)	68(35.4)	20(10.4)

Table 2 presents the symptoms of depression experienced among students in tertiary institutions in Nigeria. The result shows that the student's responses varied according to items. The result revealed that the commonest symptoms of depression among students are lack of concentration and a feeling of sadness, with both of them scoring the highest response of 96 (50.0%) most or all of the time, followed by anxiety with 88 (45.8%) and a feeling of hopelessness with 84 (43.8%). Others are feeling unloved with 68 (35.4%) while crying spells, low self-esteem and self-introversion got 64 (33.3%) responses.

Table 3: Prevalence of Depression among University Students according to their Age

Prevalence of Depression	Age	Frequency	Percentage
Mild Depression	Below 17years	12	6.3%
	17yrs	16	8.3%
	18yrs	16	8.3%
	19yrs	16	8.3%
	20yrs	16	8.3%
	Above 20years	12	6.3%
Moderate Depression	Below17years	0	0%
	17yrs	8	4.2%
	18yrs	24	12.5%
	19yrs	16	8.3%
	20yrs	28	14.6%
	Above 20years	24	12.5%
High Depression	Below 17years	0	0%
	17yrs	0	0%
	18yrs	0	0%
	19yrs	0	0%
	20yrs	0	0%
	Above 20years	4	2.1%
Total		192	100%

Table 3 represents the prevalence of depression among subjects of study according to their age. From the results the age of students that showed a high prevalence of depression are students of age 20 years with 28 of them (14.6%) with moderate depression and 4 (2.1%) recording high depression. Aged 18 years recorded the next highest level of depression with 24 (12.5%) while those below 17 years showed zero level of moderate depression and zero level of high depression.

Table 4: Prevalence of Depression among University Students according to their Sex

Prevalence of Depression	Sex	Frequency	Percentage
Mild Depression	Male	36	18.8%
	Female	52	27.0%
Moderate Depression	Male	16	8.3%
	Female	84	43.8%
High Depression	Male	0	0%
	Female	4	2.1%
Total		192	100%

Table 4 shows that female students recorded the highest level of depression with 43.8% (84) of them recording a prevalence of moderate depression. 27.0% (52) of them recorded mild depression and 2.1% (4) of them have high depression. While only 36 (18.8%) of males recorded a mild level of depression, with 8.3% (16) showing signs of moderate depression and zero males with high depression.

Table 5: Prevalence of Depression among University students according to their Geo-Political zones

Prevalence of Depression	Mildly Depressed	Moderately Depressed	Highly Depressed
South -West	47 (49%)	48 (50%)	1
South- South	47 (49%)	49 (51%)	0

Table 5 shows that the level of prevalence of depression recorded in the two Geo-political zones is the same, with the result showing an insignificant difference of 1% in favour of students in the South-South zone. The 1% of highly depressed prevalence was however recorded in the South-West zone.

Discussion of findings

The findings revealed that over 50% of the sample size depicted signs of depression and this is an alarming number. This agrees with the study of Lewinsohn *et al* (2018) which states that depression has continued to increase at a rather alarming rate.

The findings also revealed that over 40% of students showed moderate rating symptoms of depression, and this corroborates with the report of Adlaf *et al* (2012), which said that undergraduate students are in the age span wherein the rates of psychological distress and disorder are elevated.

Furthermore, the study also revealed that most of those found to be depressed fell into the age bracket of 20 years, with a lower level of depression among the very young (17 years).

Analysis of the gathered data further revealed that there is a significant difference in the age grade of students with depression as the findings showed that students of age 20 years showed the highest level of prevalence of depression, while students of age 17 and below showed the lowest level of depression, this could be attributed to the fact that University students are faced with many problems such as accommodation, interpersonal relationships, difficulties in academics and peer pressure. At the age of 20 years, most students are about to graduate and they are faced with the pressure of ensuring that their GPA is high enough to make good grades and the uncertainty of what the future holds. While the low number of students (17years) showing little or no sign of depression, could be attributed to the fact that at 17years, most of the students are still very new to the university system and as such, they have not fully grasped the reality of what university education entails. This study agrees with that of Sidana, Kishore, Ghosh, Gullati, Jiloha and Annand (2012) who pointed out that a stressful and rigorous academic programme or curriculum such as the one run in most Universities could contribute to the occurrence of psychological stress and depression among students.

Analysis of the gathered data also revealed that there was a significant difference in the prevalence of depression for male and female students as the majority of the students who recorded the prevalence of mild and high depression was higher than the female students. This could be a result of hormonal changes in women which have been proven to be a major source of emotional changes. Neiane *et al* (2017). This supports the study by Sagud, Hotujac, Mihaljevic-Pele and Jakovljevic (2002), which

opines that the duration of feelings of being depressed is longer and the severity greater in females than in males. The findings also agree with a cross-sectional study by Born, Shea & Steiner (2012) on the prevalence and impact of depression among 7,357 medical students in South Korea which associated an increasing rate of depression with the female gender, hormonal effects, the fact that the females may face additional stressors including sexual harassments and also that they tend to have better health-seeking behaviour and volunteer their symptoms more easily may have accounted for the higher prevalence of depression among the female students in the study

The study did not show any significant difference among students according to their geo-political zones, as the difference in prevalence was minimal. The results showed an insignificant level of 1% difference in favour of students in the South-South zone, which showed a slightly higher number of students showing signs of being moderately depressed.

Conclusion

The study concluded that depression is prevalent among students in tertiary institutions in Nigeria, with female students showing a higher level of depression than male students and that age plays a factor in the prevalence of depression among the students, with students aged twenty years and above showing a higher prevalence of depression.

Recommendations

In line with the findings of the study, it is recommended that;

- i. Counsellors should be employed in all Nigerian schools (from primary to tertiary level) so that students can share their concerns with them early enough before they graduate from tertiary institutions. The students should be encouraged to participate in both individual and group counselling.
- ii. Counsellors should organize motivational talks where the students would be made aware of the current trends in society; this would make them realize that they are not alone in their present seemingly experience of depressed state.
- iii. Students should be encouraged to pursue extracurricular activities of interest to help ease off their depressed state in tertiary education.
- iv. Helplines and sites should be developed for the students to log in, where they would be able to ask questions anonymously and get answers to their questions, thereby giving them the boldness to talk about issues they ordinarily would shy away from.
- v. Educators should be sensitive to the personality and mood changes of their students to be able to pick up early symptoms of depression and to be able to help manage it immediately.
- vi. Educators should be exposed to workshops and seminars on psychoanalysis; this will give them the knowledge on how to diagnose symptoms of students' depression to enable them to make referrals.

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