

IMPACT OF DEPRESSION ON SECONDARY SCHOOL STUDENTS' ACADEMIC ACHIEVEMENT IN JOS METROPOLIS OF PLATEAU STATE, NIGERIA: IMPLICATIONS FOR COUNSELLING

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Abstract

The aim of this study was to assess the impact of Depression on Secondary School students' Academic Achievement in Jos Metropolis, Plateau State, Nigeria and its implications for counselling. The study used descriptive Survey design. A population of 651 private and public secondary school students were used and a sample of 200 respondents was selected using simple random, stratified and purposive sampling techniques. Two instruments were used to generate the relevant data in the study. They were adopted and modified, Beck Depression Inventory (BDI), and researcher designed instrument titled "Academic Achievement Test (AAT)" were used as instruments for data collection. Face and content validity of the questionnaire was ascertained by experts in the Department of Educational Foundations, University of Jos and its reliability of internal consistency was determined using Cronbach Alpha method. Mean and Standard deviation were used to answer the research questions. ANOVA and t-test analysis were used to test the hypotheses. The findings revealed a significant relationship between depression and academic achievement of students in Jos Metropolis, Plateau state Nigeria, that there is no significant class difference in depression and in academic achievement of male and female secondary school students in Jos Metropolis, Plateau State, Nigeria. The study concluded that depression can have negative impact on the academic achievement of secondary school students in Jos Metropolis, Plateau state Nigeria. According to the study, depression is universally linked to perceived poor academic performance and students experiencing academic failure often report feelings of anger, shame, disappointment and hopelessness. The study recommended that depression should be seen as a disease, and awareness should be raised to sensitize the

population on early recognition of signs, appropriate support and therapy, and subsequent rehabilitation of depressed individuals. Professional school psychologists and counsellors should be involved in rendering psychological support, and coping strategies should be taught in secondary schools to help teachers and students recognize both onset and symptoms of depression.

Keywords: depression, secondary school students, academic achievement, counseling, learned helplessness, cognitive behavioural therapy

Introduction

Depression is a serious condition that is also, unfortunately, a common one. The World Health Organization characterize depression as one of the most disabling disorders in the world affecting roughly one in five women and one in the men as some point in their lifetime. It is estimated that 21% of women and 12% of men in the U.S will experience an episode of depression at some an episode of depression at some point in their lifetime. Depression is a real illness that impacts the brain. Anyone suffering from depression will tell that it is not imaginary or an only “all in the head”. Depression is more than just feeling “down”. It is a seriously illness caused by changes in brain chemistry because research has shown that other factors contribute to the onset of depression, including genetics, changes in hormone levels, certain medical conditions, stress, grief or difficult life circumstances. Any of these factors alone or in combination can precipitate changes in brain chemistry that lead to depression's many symptom (WHO, 2001).

Depression does not discriminate. Men and women of every age, educational level and social and economic background suffer from depression. There is no area of life that does not suffer when depression is present. Marriage, parenting, friendship, careers, finances, every aspect of daily living is compromised by the disease. Once an episode of depression can be even more server when it occurs in combination with other medical illness such as diabetes, stroke or cardiovascular disease, or with related disorders such as anxiety or substance abuse.

Depression is more then feeling unhappy or fed up for few days. Sometimes it is being misunderstood as trivial or something imagined and fake. However, this is a wrong assertion because depression is real with real symptom. It is neither a sign of weakness snap out of on their own by putting themselves together. The good news is that it is treatable with adequate cure and coping mechanism once the individual is engaged in the right cognitive behavioural mechanism, treatment and supports. The onset of depression is the leading cause of mobility in adolescent taking a massive tool on the quality of life in young adults' population especially those of schooling age (Palmissano, 2018). It occurs frequently among the age group of 10 and 18 giving rise to the onset of chronic and more persistent depression in adulthood. Yet depression is significantly under diagnosed in young people partially because clinician are taught to look out for symptoms of adult depression which may present differently in young students (Neavin, Joyce &Swinktak, 2018). Moreover, a student experiencing persistent boredom or disinterest in daily activities because of depression can become agitated and difficult to manage behaviourally. Unfortunately, because those adolescent do not always seem sad, they are more likely to be labelled as troublesome by teachers add parents and rarely get treated for the underlying cause of their behaviours,

Furthermore, the effect of social stress on the depressed students often correlates with bullying and suicide with the latter becomingthe third leading cause of death in the world (WHO, 2017). Depression is a common mental illness worldwide with more than 264 million people of all ages affected. It is the leading cause of disability worldwide and a major contributor to the overall global burden of mental disorder. It is different from usual mood fluctuation and short lived emotional responses to everyday life challenges but has a long lasting with moderate or

server intensity to disrupt normal life, thereby affecting an individual's ability to function at work, school, and society. Depression is also known as the leading cause of suicide with close 800,000 people dying yearly (Global Data Base, 2018). Depression is classified as a mood disorder. It is described as feelings of sadness or loss or anger that interferes with a person's everyday activities (APA, 2003). It is an ongoing problems which consists of episodes during which the symptoms last for at least two weeks. According to American Psychiatric Association (2013), depression is a common and serious medical illness that negatively affects how an individual feels thinks and acts.

Depression leads to a variety of emotional and physical problems thereby decreasing individual's interest in activities once enjoyed. The death of a loved one, failure in exam or ending of a relationship are different experience to endure with a normal feeling of sadness of grief in response however it is not the some as having depression. This is because in grief, painful feelings come in waves often mixed with positive memories of the situation while in depression, mood and interest are decreased for up to two weeks with a feeling of worthlessness and self-loathing (APA, 2013). The word depression comes from a Latin word "Depressio" which means sinking. It is a mood disorder that varies from normal transient low mood in daily life to clinical syndrome with severe and significant duration with associated signs and symptoms marked differently for normalcy. Depression is also known as a disease characterized by decayed mood as its main symptomology. Other symptoms include; painful experience, bad humor, anguish, panic attacks, performance delay of various psychic and cognitive functions, tendency to isolation, demotivation, apathy, hopelessness, negative thoughts, delusions, state of dejection and unhappiness. As estimated by World Health Organization, depression is the second longest illness in terms of mobility with 2% of school children and 5% of adolescents suffering the disorder (WHO, 2017).

Depression can affect anyone regardless of social status, age, ethnic group, socio-economic status, parental upbringing among others. Everyone at some point has experienced a sad mood. This short period of sadness is not uncommon as humans struggle with the pressures of everyday life seven as financial pressure, martial pressure, raising, kids, occupational difficulties amongst others. However, when this sadness goes beyond two weeks, it becomes of great concerns because of its significantly health consequences. There are nine symptoms of depression which include; a sad depressed mood, loss of interest and pleasure in regular activities, loss of energy, negative self-concept and feelings, worthlessness and guilt, difficulty concentrating and recurrent thoughts of death (Davidson and Neale, 2001). Research has it that is secondary schools, the symptoms are more of somatic like social withdrawal and irritability manifesting in behaviours like fearlessness, physical complaint and clinging behaviours.

Depression and other affective disorders are areas primarily ignored in education especially by the public schools. A large number of secondary schools students are affected by depression which invariably affects their academic achievement. This is seen in the way they skip school and academic activities, feel hopeless, difficulty in concentration, attention deficient, despondency, decrease in class activity, pessimism and sadness which severely disrupt and adversely affects their life sometimes to such extent that suicide is attempted (Iyer, & Khan, 2012). As an emotional problem with feelings of hopelessness and helplessness, depression is a prevalent problem among secondary school students across the world with a devastating effect on students, though it is treatable. Untreated depression also interfere in day to day activities of students with students ignoring their own successes and traits while exaggerating their faults and failures. Research has shown that students who believe that others are better than them are more likely to develop depression. Thus, if teachers and peers view and treat a student as someone not academically and socially capable and competent, there maybe a greater risk of depression. Depression is also associated with anxiety, attention deficient hyper activity disorder and substance abuse.

Depression is a mood disorder affects a person's ability to perform life activities including academic achievement performance (Hysenbegasi, Hass & Rowland, 2005). It is common for people who suffer from depression to engage in self-blame, experience confusion and a feeling of hopelessness. It has been found that loss of interest aspect of depression is associated with lower grade point, anxiety and poor academic performance (Eisenberg, 2009). Thus, time and efforts are needed to help students achieve better feat in their academic. This is because the desire of success is dependent on an individual's concept of himself and the different interpretation given to situations thus a student who sees himself as a top ranking scholar may set as his goal the attainment of the highest grade in the class while those who see themselves as hopeless and helpless with low self-esteem may see themselves as failures thus performing poorly in school (Sylieman, 2017).

Secondary education in Nigeria is considered as that sector of the education pyramid that usually comes immediately after primary education. It also comes before tertiary education. It is at this age of education that students are prepared for the polytechnics, college of education and Universities. Within the framework of the National Policy on Education (FRN, 2014). Secondary school shall last for six years, broken into two distinct parts that are perfectly correlated with the ground works of the first three years of Junior Secondary School (JSS) dovetailing into the next three years of Senior Secondary School (SSS). The aims and objectives of Secondary School Education make it clear that the future of any nation depends quite considerably on the quality of education it provides for its citizens. To achieve the above objectives it is pertinent that the academic achievement of the students is as high as possible.

The commonly used yard stick for ascertaining how much learning or knowledge a student must have acquired is through academic achievement in subjects. According to Pandey (2008), academic achievement is the performance of the students in the subjects they study in the school. It is directly related to students' growth and development of knowledge in educational situation where teaching and learning take place. Students academic achievement refers to students performance or attainment in a subject. It also means cognitive score (Nwana, 2007). Academic achievement is the extent to which a student has attained a short or long term educational goals (Mohammed, 2010). Some factors are associated with academic achievement of students. These factors include among others, school environment, study habit, academic endeavours and test anxiety. Students who are academically successful with high level of socio-emotional intelligence are more likely to be employed have stable employment than those with less education (Regier 2011). Academically, successful students have high self-esteem, lower level of depressing and anxiety, less likely to abuse alcohol and engage in substance abuse.

Report on gender differences in depressive prevalence rate vary widely. Typical estimates suggest that as many as 13% women and 5% men experience depression during their lifetime (Hasion, Godwin, Stinson & Grant, 2015). Women experience depression more frequency than men do. This discrepancy between rates of depression in men and women has been observed to be independent of race ethnicity, social class and country of residence (Ustin, Ayuso, Chatterji, Mathers& Murray, 2014). Rapkin, Mikaciah, Maotakef- Iman, and Rasgon (2012) explained that it possible that female hormones may participate in mood through some current unknown mechanisms. Mood disturbance can be associated with hormonal changes in women, including postpartum depression and mood change accompanying menopause. Most researchers on gender difference in academic performance revealed varying results. Studies by Wandeo (2003) reported that there are difference between the males and females when it comes to mathematical, spatial and verbal abilities. Karger (2014) also reported that women are often diagnosed with depression twice as men, and their disease follows a more chronic course. Gender here refers to the social and cultural roles assigned to males and females in any given society. It is not biologically determined rather it is socially constructed.

There are different categories of depression like major depression persistent depression, manic depression, depressive psychosis and prenatal/postnatal depression. Others include, premenstrual dysphonic disorder, seasonal depression, situational depression, and a typical depression. The causes of depression are complex with most experts suggesting a link to genetics biology. Others are traumatic life event, social situation family circumstance environment, difference in the brain, substance misuse, stresses of puberty, negative thought patterns, and medical condition. This study will make its own contribution by assessing the effects of depression on secondary schools students academic achievement.

Statement of the Problem

Secondary school students cans experience depression due to a combination of factors, including academic pressure, such as high expectations from parents, teachers and themselves. Social relationships or hormonal change or and family issues such as problems at home (parental conflict or neglect) can affect a student's mental health. Also students experiencing or witnessing traumatic events, like abuse or loss of a loved one can increase the risk of depression. Students who may not have developed healthy coping mechanisms to manage stress and emotions, or sleep deprivation or excessive social media use can lead to unrealistic comparisons and decreased self-esteem. Other factors are body image issues and low self-esteem related to physical appearance can contribute to depression. Students may also be more susceptible to depression due to family history or genetic factors. Early identification of signs of depression by teachers, and parents and intervention through counselling services and support systems in schools can help reduce the prevalence of depression among secondary school students in Jos Metropolis, Plateau State, Nigeria enhancing high academic achievement.

Aim and Objectives of the Study

The aim of the study was to investigate and Impact of Depression on Secondary School Students' Academic Achievement in Jos Metropolis of Plateau State, Nigeria: Implication for Counselling. Specifically, the study objectives include to;

1. Find out the level of depression of secondary schools students in Jos Metropolis of Plateau State, Nigeria.
2. Establish the academic achievement mean score of secondary school students based on levels of depression in Jos Metropolis.
3. Determine depression mean score of secondary school students based on age in Jos Metropolis.
4. Establish depression mean score of secondary school students based on gender.
5. Find out depression mean score of secondary school students based on school type in Jos Metropolis of Plateau State.

Research Questions

The study was guided by the following research questions;

1. What is the level of depression of secondary school students in Jos metropolis of Plateau State?
2. What is the academic achievement mean score of Secondary School students based on level of depression in Jos Metropolis?
3. What is the depression mean score of secondary school students based on age in Jos metropolis of Plateau State?
4. What is the depression mean score of secondary school students-based gender in Jos metropolis of Plateau State?
5. What is the depression mean score of secondary school studentsbasedon school type in Jos metropolis of Plateau State?

Hypotheses

The following hypotheses were formulated and tested at 0.05 level of significance in the study:

1. There is no significant difference between the academic achievement mean score of Secondary School students based on level of depression in Jos Metropolis
2. There is no significant difference in the depression mean score of secondary school students based on age in Jos metropolis of Plateau State.
3. There is no significant difference in the depression mean score of secondary school students based on gender in Jos metropolis of Plateau State.
4. There is no significant difference in the depression mean score of secondary school students based on school type in Jos metropolis of Plateau State

Theoretical/Conceptual Framework

The study was anchored on two theories of Cognitive Behavioural Therapy (CBT) and Learned helplessness theory. Aaron T. Beck is an American psychiatrist who is widely regarded as the father of cognitive therapy and Cognitive Behavioural Therapy (CBT). He was born in 1921 in Rhode Island and graduated from Brown University in 1942. Beck earned his medical degree from Yale Medical School in 1946 and spent most of his career studying psychoanalysis. While working as a psychiatrist at the University of Pennsylvania, Beck struggled to find a way to help his depressed clients' better capture their emotions. He developed CBT in the 1960s and 1970s, which is a form of structured talk therapy that helps recognize and change negative thought patterns and behaviours. Since then, this revolutionary treatment has been found to be effective in over 2000 clinical traits for a wide range of problems. Beck died in 2021 at the age of 100.

Cognitive Behavioural Therapy (CBT) is a form of psychological treatment that has been demonstrated to be effective for a range of problems including depression, anxiety disorders, alcohol and drug use, marital problems, eating disorders, and severe mental illness such as schizophrenia. CBT is a type of psychotherapy that helps individuals recognize and change negative thoughts patterns and behaviours. It is a structured goal-oriented type of talk therapy that focuses on current problems and finding solutions for them. CBT combines Cognitive Therapy and Behavioural Therapy, which are two therapeutic approaches that help people learn to replace negative thought patterns with more realistic and less harmful thoughts better. CBT treatment usually involves efforts to change thinking patterns and behavioural patterns. The following are the principles of CBT. Psychological problems are based on faulty or unhelpful ways of thinking, gaining a better understanding of the behavior and motivation of others, using problem-solving skills to cope with difficult situations and learning to develop a greater sense of confidence in one's own abilities.

Cognitive Behavioural Therapy (CBT) has been the most widely researched psychotherapy approach to treating depression in adolescent CBT teachers coping skills and helps depressed adolescent to shift their thoughts, feelings and behaviours. Research has shown that CBT helps reduce depressive symptoms in teens and is effective in reducing suicidality. CBT can be just as effective as medication in treating teen depression and it teaches teens skills that they can use for a lifetime. CBT interventions for depressed adolescent with diagnoses of major depression or dysthymia. CBT can help teens to identify negative thoughts and cognitive distortions and replace them with more realistic and positive thoughts. The main target is CBT is to modify and change maladaptive cognition and behaviours that constitute the core processes of depression.

The second theory is learned helplessness theory learned helplessness theory is a psychological concept that describes a state of mind where an individual feels unable to control or change a situation, even when opportunities for change become available. This state of mind is characterized by a lack of motivation, feelings of helplessness and low self-esteem. Learned helplessness can occur after a person has experienced a stressful situation repeatedly, leading them to believe that they are unable to control or change the situation, so they do not try. The theory of learned helplessness was first conceptualized and developed by American psychologist Martin E.P Seligman in the late 1960s and '70s. Seligman coined the term learned helplessness to describe the expectation that outcomes are uncontrollable.

Learned helplessness has since become a basic principle of behavioural theory, demonstrating that prior learning can result in a drastic change in behavior and seeking to explain why individual may accept and remain passive in negative situations despite their clear ability to change them learned helplessness can lead to increased feelings of stress and depression and is often linked with post-traumatic stress disorder (PTSD). Learned helplessness is considered a type of thought disorder that can contribute to or worsen symptoms of several mental health conditions, including PTSD or depression. The following are the principles of learned helplessness: expectation of uncontrollability, motivation, consequence and strategies for overcoming. Learned helplessness model of depression predicts that depressives should tend to perceive reinforcement as response-independent in skill task. Depressed subject perceptually distort the outcomes of skilled responding as being response-independent and the may under certain conditions, show deficits at learning the consequence of responses. These deficits may reflect learned helplessness and are specific to depression. Depressions occurs when a person learns that their attempts to control their environment are futile. They develop a sense of helplessness and hopelessness, leading to depression. However, it is possible to overcome learned helplessness by developing ways to decrease feelings of helplessness, identifying negative thoughts and behaviours that contribute to learned helplessness and replacing them with more positive and beneficial ones.

Method and Procedure

Research Design

The study adopted a descriptive survey design. This method is best suited for the study because it provides a numeric description of trends, attitude or opinions of population by studying a sample of that population (Nworgu, 2016).

Population of the Study

The population of the study comprised all SSI and II students in both private and public secondary schools in Jos Metropolis, Plateau State, Nigeria.

Table showing lists of some selected private secondary schools in Jos Metropolis, Plateau State:

1. Canaan High School
2. Covenant Child Academy
3. ECWA Staff School
4. Hillcrest International School
5. Hosanna International College
6. Benchmark Scholar's Hub
7. Mount Carmel Christian School
8. Rantya Model School
9. Adonai Vine School-AVS
10. Garram Children's School and Orphanage

Public secondary schools in Jos Metropolis, Plateau State, Nigeria (selected):

1. Government Secondary School, Sabon-Gida
2. Princeton Science/Technical College Namu
3. Government Senior Secondary School, Rot-Norong
4. Sheik Abubakar Gumi Memorial Private Secondary School, Nassarawa, Gwong
5. Joshua Generation Foundation Secondary school, Alheri, Jos.
6. Government Secondary School, KyanRikkos Jos
7. Government Secondary School, Lamingo Jos
8. Government Secondary School Chwel-Nyap Jos
9. Saint Paul's Academy, Jos
10. Redeemed People's Academy, Jos

Sources: Plateau State Universal Basic Education Board (PLSUBEB)

These lists are not exhaustive, but they provide a representative sample of schools in each category. This population will comprise all the male and female secondary students in Jos Metropolis, Plateau State, Nigeria.

Sample

The sample of the study will be 200 respondents. The sample will be made up of 100 male and 100 female secondary school students selected from the population using purposive sampling techniques. The researcher used Krejcie and Morgan (1970) 's table for determining sample size from the population.

Sampling Techniques

Five schools each from both private and public were purposely chosen for the study using purposive sampling technique. While 20 secondary students were randomly selected for the study through simple random sampling technique, meaning 10 schools each from both private and public.

Instrument for Data Collection

Two instruments were used to generate the relevant data in the study. They will be an adopted and modified Beck Depression Inventory (BDI), Beck, steer Grabin (1988) and researcher designed instrument titled “Academic Achievement Test (AAT).

Description of the Instrument

Beck's Depression Inventory (BDI) consisting of 21 symptoms items described in simple sentences will be modified to 20 symptom item. The language of the instrument was modified to the level of the students' proficiency in English Language. The inventory consists of 21 items each with four set of statement describing the state of mood of a person. The students are supposed to tick the statement which describes their mood. The options are score 0-3 (the first statement is scored zero (0), second statement is scored 1, third is scored 2, and the forth is scored (3). The total lowest score for the inventory is zero (0) while the highest possible score for the inventory would be sixty-three (63). According to Modabber-Nia, Tehrani, Moosawi, Asli and Fallahi (2007) and Beck et al., (1988), persons score on the standard Inventory can be interpreted as follows:

Total Score	Level of Depression
1-10	These ups and downs are considered normal
11-16	Mild mood disturbance
17-20	Borderline Clinical depression
21-30	Moderate depression
31-40	Severe depression
Over-40	Extreme depression

However, in this study the general mood depression of students will be considered and not in levels. Academic achievement test will be containing test on English and Mathematics containing 25 questions each.

Procedure for the Development of Instrument

The Beck Depression Inventory (BDI) is a widely used self-report inventory designed to assess the presence and severity of depressive symptoms. The inventory contains 21 self-report items which individuals complete using multiple choice response formats. The BDI takes approximately 10 minutes to complete and can be used for ages 13 to 80. The validity and reliability of the BDI has been tested across populations worldwide. The language of the instrument was modified to the level of the students proficiency in English language.

Also, a researcher-designed instrument titled Academic Achievement test on English Language and Mathematics containing 25 questions each. These were shown to experts in Guidance and Counselling, Research, Measurement and Evaluation, and Educational Technology. Observation made by the experts were put into considerations. Corrections were then made and effected in the final draft of the instrument.

Validity

The instruments were subjected to both face and content validation by three experts from Guidance and Counselling, Educational Psychology and Research Measurement and Evaluation all from the department of Educational Foundations, Faculty of Education, University of Jos. The corrections made by these experts will be included in the modification of the items and will be incorporated in the final instrument.

Reliability

The consistency for the BDI ranges from 0.73-0.92 with a mean of 0.86 (Beck et al., 1988). The BDI demonstrates high internal consistency with an alpha co-efficient of 0.86 and 0.81 for psychiatric and non-psychiatric populations respectively (Beck et al., 1988). The reliability of the modified inventory to be used in this study will be 0.89 Cronbach Alpha. While the reliability co-efficiency of the academic achievement test will be determined using Cronbach Alpha and a reliability co-efficient of 0.89 will be obtained.

Procedure for Data Collection

The researcher will obtain an introductory letter from the Department of Educational Foundations, Faculty of Education, University of Jos, for the purpose of introducing the researcher to the school principals of the sampled schools for the study. Before the instrument will be administered, a brief instruction regarding the instrument and how they showed be answered will be given to the participants. The participants will also be assured that the information gathered should be treated with utmost confidentiality and used for the purpose of the study only. The instrument will be administered and gathered at the spot in each school.

Training of the Research Assistant

Two Research assistants will be trained by the researcher to assist in administering the instrument to the respondents.

Administration of instrument

The schools will be visited and the instrument will be administered and collected immediately.

Method of Data Analysis

The research questions were answered with mean and standard deviation while the hypotheses were tested at 0.05 level of significance using Pearson Product Moment Correlation (r) and t-test of independent sample using SPSS Version 17. Statistical tools such ANOVA, t-test for independent sample, mean and standard deviation were used to test the hypotheses. While parentage, mean and standard deviation were used to answer the research questions.

Results

Answering Research Questions

Research Question One: What is the level of depression of secondary school students in Jos metropolis of Plateau State?

Table 2

Level of Depression of Secondary School Students in Jos Metropolis of Plateau State

Level of depression	N	%
Mild	14	3.6
Moderate	70	18.1
Severe	302	78.2
Total	386	100

Table 2 reveals the result on Level of depression of secondary school students in Jos metropolis of Plateau State. From the result, 14(4%) of the students have mild depression, 70(18%) of them have moderate depression, while 302(78%) of them have severe depression. This implies that majority of the students have severe depression.

Research Question Two: What is the academic achievement mean score of Secondary School students based on level of depression in Jos Metropolis?

Table 3

Academic Achievement Mean score of Secondary School Students based on Level of Depression

Level of depression	N	Mean	Standard Deviation
Mild	14	77.21	7.587
Moderate	70	54.80	7.264
Severe	302	41.20	9.013
Total	386	44.97	11.893

Table 3 presents the result on academic achievement mean score of Secondary School students based on level of depression in Jos Metropolis. From the table, students with severe depression had a lower achievement mean score of 41.20 with standard deviation of 9.01, followed by those with moderate depression having a mean score of 54.80, with standard deviation of 7.26. Those with mild depression had a higher mean score of 77.21 and standard deviation of 7.59, indicating that students who are less depressed achieved better than those who are severely depressed.

Research Question Three: What is the depression mean score of secondary school students based on age in Jos metropolis of Plateau State?

Table 4
Depression Mean Score of Secondary School Students based on Age

Age	N	Mean	Standard Deviation
12-16	52	48.79	12.46
17-20	174	64.42	9.47
21 and above	160	66.22	10.06
Total	386	63.06	11.62

Table 4 shows the result on depression mean score of secondary school students based on age in Jos metropolis of Plateau State. From the table, students within the age range of 21 and above have a higher depression mean score of 66.22 with a standard deviation of 10.06, followed by those within the age range of 17 to 20 having a mean score of 64.42 and standard deviation of 9.47. The least is within the age range of 12 to 16, with a mean score of 48.79 and standard deviation of 12.46. This implies that, the higher the age the more depressed the students

Research Question Four: What is the depression mean score of secondary school students-based gender in Jos metropolis of Plateau State?

Table 5
Depression Mean Score of Secondary School Students based Gender

Gender	N	Mean	Standard Deviation	Mean Difference
Male	185	61.29	14.695	3.4
Female	201	64.69	7.476	
Total	386			

Table 5 presents the result on the depression mean score of secondary school students-based gender in Jos metropolis of Plateau State. From the result, male students had a depression mean score of 61.29 and standard deviation of 14.70, while female students had a mean score of 64.69 and standard deviation of 7.48 with a mean difference of 3.4. This implies that female students have a slightly higher depression mean score than the male students. This implies that the depression mean score of male and female students is almost same.

Research Question Five: What is the depression mean score of secondary school students based on school type in Jos metropolis of Plateau State?

Table 6
Depression Mean Score of Secondary School Students based on School Type

School Type	N	Mean	Standard Deviation	Mean Difference
Private	126	55.57	12.499	11.12
Public	260	66.69	9.217	
Total	386			

Table 6 presents the result on the depression mean score of secondary school students based on school type in Jos metropolis of Plateau State. From the result, private school students had a depression mean score of 55.57 with standard deviation of 12.50, while public school students had a mean score of 66.69 with a standard deviation of 9.22 and a mean difference of 11.12. This implies that public school students have are more depressed than private school students.

Test of Hypotheses

Hypothesis One: There is no significant difference between the academic achievement mean score of Secondary School students based on level of depression in Jos Metropolis

Table 7
ANOVA Result on Academic Achievement of Secondary School Students Based on Level of Depression

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	31257.740	2	15628.870	288.310	.000
Within Groups	20761.889	383	54.209		
Total	52019.630	385			

Table 7 reveals the ANOVA result on difference between the academic achievement mean score of Secondary School students based on level of depression in Jos Metropolis. The result shows that $F(2, 383) = 288.31$, $P < 0.05$, since the p-value of 0.000 is less than 0.05 level of significance, the null hypothesis was rejected, it was concluded that there significant difference between the academic achievement mean score of Secondary School students based on level of depression in Jos Metropolis.

Hypothesis Two

There is no significant difference in the depression mean score of secondary school students based on age in Jos metropolis of Plateau State.

Table 8
ANOVA Result on Depression of Secondary School Students Based on Age

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	12509.239	2	6254.620	60.630	.000
Within Groups	39510.390	383	103.160		
Total	52019.630	385			

Table 8 presents the ANOVA result on difference between the **depression** mean score of Secondary School students based on age in Jos Metropolis. The result shows that $F(2, 383) = 60.63$, $P < 0.05$, since the p-value of 0.000 is less than 0.05 level of significance, the null hypothesis was rejected, it was concluded that there significant difference between the **depression mean score** of Secondary School students based on age in Jos Metropolis.

Hypothesis Three

There is no significant difference in the depression mean score of secondary school students based on gender in Jos metropolis of Plateau State

Table 9**Summary of t-test Result on Depression of Secondary School Students Based on Gender**

Gender	N	Mean	Standard Deviation	DF	t	P-value	Decision
Male	185	61.29	14.70	384	-2.89	0.004	Reject HO
Female	201	64.69	7.48				

Table 9 shows the t-test result on difference between the depression mean score of Secondary School students based on gender in Jos Metropolis. From the result, male students had a depression mean score of 61.29 and standard deviation of 14.70, while female students had a mean score of 64.69 and standard deviation of 7.48. The result further reveals that $t(384) = -2.89$, $P < 0.05$, since the p-value of 0.004 is less than 0.05 level of significance, the null hypothesis was rejected, it was concluded that there is a significant difference between the depression mean score of male and female Secondary School students in Jos Metropolis.

Hypothesis Four: There is no significant difference in the depression mean score of secondary school students based on school type in Jos metropolis of Plateau State

Table 10**Summary of t-test Result on Depression of Secondary School Students Based on School Type**

School Type	N	Mean	Standard Deviation	DF	t	P-value	Decision
Private	126	55.57	12.499	384	-9.85	0.000	Reject HO
Public	260	66.69	9.217				

Table 10 shows the t-test result on difference between the depression mean score of Secondary School students based on school type in Jos Metropolis. From the result, private school students had a depression mean score of 55.57 with standard deviation of 12.50, while public school students had a mean score of 66.69 with a standard deviation of 9.22. The result also shows that $t(384) = -9.85$, $P < 0.05$, since the p-value of 0.000 is less than 0.05 level of significance, the null hypothesis was rejected, it was concluded that there is a significant difference between the **depression mean score** of private and public Secondary School students in Jos Metropolis.

Discussion

The findings on Level of depression of secondary school students in Jos metropolis of Plateau State revealed that majority of the students have severe depression in Jos metropolis.

The findings on the academic achievement mean score of secondary school students based on level of depression in Jos Metropolis showed that students who are less depressed achieved better than those who are severely depressed. That there significant difference between the academic achievement mean score of Secondary School students based on level of depression in Jos Metropolis. The findings is also in consonnate with the reports of previous studies by Jones (2008) who reported that depression affects students grade down ladder; depression affects students academic achievement (Eisenberg, Gollust, Golberstein& Halpern, 2007) and students

success is negatively related with depression (Field, 2011), as students' depression increase, their academic achievement decrease. American College of Health Association (2012) reported that almost 30% of College students were found to be depressed and found it difficult to perform functions. The findings was consistent with the study carried out by Hysenbegasi,, Hass and Rowland (2005) which found out that depression had significant impact on the academic productivity of secondary school students.

Depression has a negative impact on the academic achievement of the secondary schools and university students. Studies conducted in Nigeria, South Africa and the United States has found that depression is universally linked to academic performance, with students experiencing depression often exhibit confusion and avoidance in their studies. Depression can lead to a loss of interest in learning, doubt about its importance, and reduce concentration, all of which can compromise learning effectiveness. Depression can also cause feelings of anger, shame, disappointment and hopelessness which can compound the effect of academic failure, including additional financial stress and increase workloads.

According to Chen and Lei (2000), students especially adolescent with depression are vulnerable to educational underachievement. Students with symptoms of depression are predisposed to focus their attention on interfering, irrelevant thoughts, leaving little sustained attention, almost 30% of college students were found to be depressed and found it difficult to perform functions available for cognitive tasks which lead to academic failure. As many of the school activities and home-work depend on the ability to sustain attention and concentration. Depression, which disrupts concentration and attention in school is likely to undermine academic achievement.

The result on depression mean score of secondary school students based on age in Jos metropolis of Plateau State indicated that, the higher the age the more depressed the students. That there significant difference between the depression mean score of Secondary School students based on age in Jos Metropolis.

Furthermore, the findings on the depression mean score of male and female secondary school students revealed that the depression mean score of female students had a higher depression mean score than male students. That there is a significant difference between the depression mean score of male and female Secondary School students in Jos Metropolis.

The findings on the depression mean score of private and public secondary school students revealed that public school students have are more depressed than private school students. That there is a significant difference between the **depression mean score** of private and public Secondary School students in Jos Metropolis.

Conclusion

Depression can have negative impact on the academic achievement of secondary schools students in Jos Metropolis, Plateau state Nigeria, according to study. The found out that depression is universally linked to perceived poor academic performance and students experiencing academic failure often report feelings of anger, shame, disappointment and hopelessness. The study also highlighted the compounding effect of academic failure including the additional financial stress of having to re-register and increased workloads, which can have significant implications on mental health. The study recommends that professional school psychologists and counselor should render psychological services to students and coping strategies should be taught in secondary school to help teachers and students recognize both onset and symptoms of depression. The study has implications for counseling and highlight the need for early intervention to prevent depression from affecting academic performance.

Recommendations

Depression is a significant issue among secondary school students in Nigeria, with studies reporting a prevalence of mild to moderate depression in 21.2% of Nigerian adolescents. Depression can have a negative impact on academic achievement and it is important to address the issue through counseling and other interventions. Recommendations were made:

1. **Integration of mental health service:** School counselling services should be integrated with mental health services to address depression and its impact in academic achievement.
2. **Early identification and intervention:** Counsellors should be trained to identify early signs of depression and provide interventions to prevent academic underachievement.
3. **Cognitive- Behavioural Therapy:** Counsellor can use cognitive-behavioural therapy (CBT) to help students manage depressive symptoms and improve academic performance.
4. **Academic support:** Counsellor should provide academic support and strategies to help students with depression catch up on missed schools work and improve their academic achievement.
5. **Parent involvement:** Counsellor should engage parents in the counselling process to raise awareness about depression and its impact on academic achievement.
6. **Group counselling:** Group counselling sessions can be conducted to provide social support and skills training for students with depression.
7. **Referral services:** Counsellors should have access to referral services for students who require more intensive mental health services.
8. **Teacher training:** Counsellors can provide training for teachers to recognize signs of depression and provide appropriate support.
9. **School-wide initiatives:** counsellors can lead school-wide initiatives to promote mental health awareness and reduce stigma.
10. **Follow-up and evaluation:** Counsellor should conduct regular follow-up sessions and evaluate the effectiveness of counselling interventions to ensure students receive appropriate support.

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