

Full Length Research Paper

Depression and coping strategies among students in the university of Ghana

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This study examined the prevalence of depression of the students at the University of Ghana, the perceived causes and the coping strategies they use. Three hundred and twelve students were drawn from Legon and Accra City Campuses of the University of Ghana through stratified sampling. A self designed questionnaire and Beck's Depression Inventory was used to collect the data. MANOVA, ANOVA, t-test and Regression Analyses were used to analyze the results which revealed that students had mild depression and their major stressors were related to the academic load. The stressors affected mostly Level 300 students and those on Study leave. The stressors accounted for 43% of the signs of depression in them. Females had more signs of depression whilst level 400 students had the least signs. The commonly used coping strategy was the cognitive. The recommendations centred mainly on addressing academic problems and organizing stress management workshops for them.

Keywords: Depression, coping strategies, students, University of Ghana.

INTRODUCTION

Background and Statement of the Problem

Depression is a mental disorder in which the individual exhibits prominent and persistent sadness that significantly interferes with functioning. The mood change appears to be disproportionate to any cause and may continue for an extended period. The average depressive episode lasts about 9 months (Kaplan, Sadock and Grebb, 1994). The severity of the condition ranges from mild to severe (Angst and Merikangas, 1977). WHO (2003) has shown that the prevalence of this condition is very high and has identified it as the 4th leading cause of disease worldwide. It is also estimated that by the year 2020 the leading health problem in the world would be depression due to the shifts into cities, political and social violence.

It has also been noticed that as many as one-half of the depressed people are not recognized or diagnosed. In fact, the global burden of diseases developed by WHO to assess the impact of diseases, ranks mental disorders as

the second cause of lost of productive life which is second to heart diseases. It goes without saying that numerous individuals including the students who are not diagnosed or untreated will not be able to participate fully in activities that lead to their personal and national improvements.

It can be seen that students in the university are at the peak of stressors that can precipitate the onset of the condition. This is due to the increase of student intake which has risen more than what the human and infrastructural resources on the University campus can handle. Furthermore, due to the new educational reforms students now enter the university at younger ages and are not experienced enough to handle their problems which can result in depression. Lastly, due to the increased student populations and the attendant work load, most students do not get individual counseling as expected when their psycho-social problems arise. This myriad of factors is enough to predispose the students to depression.

It is also noted that if depression is not properly handled it can lead to poor physical and psychological health. Apart from that it has a telling effect on one's work output.

Due to the undesirable effects of depression on

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students, the University has a Counseling and Placement Centre, Hall Tutors and other personnel to help students address stressors that could result in depression on campus and contribute towards the alleviation of mental problems and maintaining good mental health of the students on campus. However, little attention is given to them. Unfortunately, despite the gravity of this problem and the fact that depression is the most easily treatable mental disorder condition, the general public and the University students tend to consider depression as a social stigma and the affected people often feel that seeking professional help indicates weakness and they will be termed lazy (WHO, 2003)

This study therefore aims at finding out the prevalence of depression, types of precipitants and the coping strategies the students use to minimize its effects. The study concludes by looking at the way forward in improving the practices of the supportive groups to render better services to the students.

The Significance of The Study

It is anticipated that the results of this study will be used by the University and Corporate Authorities, as well as Education Policy makers in Ghana (Africa) to plan depression management programs for students in tertiary institutions in order to facilitate improved and effective teaching-learning interaction in schools. This is necessary because numerous studies have proved that when depression is not well managed it can lead to health problems, poor academic performance of the students and the general economy is also affected adversely.

Objectives of the Study

The study has the following objectives. In the first place it is aimed at determining the stressors that precipitate depression in students in the University of Ghana. The study would also examine the prevalence of depression on the students. Another objective is to find out the coping strategies that the students use to minimize the stressors and their undesirable effects on them. The last objective is to examine the effect of biographical variables such as age, gender and marital status of the students on the effects of stressors and the coping strategies.

Hypotheses of the Study

The following hypotheses are to be tested and verified:

1. The Students will perceive workload as the main cause of depression than the other causes in the University. These include health problems, social problems and thinking problems.

2. There will be a significant difference in the reported levels of stressors, signs and coping strategies of depression among the different biographical variables of the students in the University. These variables are gender, level, age, marital status, residential status, religion and occupation of the Students.

3. The Students will report using more cognitive coping strategies than the other ones in the University in managing depression. The other ones include: medical, physical, social and spiritual.

4. There is a significant relationship between the types of stressors and the signs of depression reported by the students.

5. There is a significant relationship between the types of coping strategies and the signs of depression reported by the students.

Literature Review

Prevalence of Student Depression

Numerous studies have consistently showed that the prevalence of depression on University students is very high. Mclennan (1992) has shown that during the school year up to 78% of all students suffer some of the symptoms of depression. He also showed that at any given time, from 16-25% of the student population is experiencing such symptoms. Shives (1994) in a survey among college students reported that they got depressed from one to twice a month. These episodes lasted from a few hours to several days.

Effects of Depression on Students

The condition has a lot of problems for the students. It affects their academic work, motivation resulting in lower grades (Lyubomirsky et al., 2003). It also causes global problems for the students like decreased quality of life and increased chances of committing suicide (Simpson et al., 1996). Studies have shown that one of the commonest reason why students visit the university counseling centre is as a result of depression (Benton et al., 2003; Surtees et al., 1998). They reported that up to 40% of the students who visit these centres have problems of depression and many students seeking university counseling for other issues are also doing through depression

Causes of Depression in Students

The main cause of depression in university students is due to the university environment which presents many challenging and demanding situations like adjusting to new environments, mastering new skills, and frequent academic stress (Shives 1994). A study carried on

student depression revealed that even though the signs were mild, it was chronic and caused ongoing impairment in them including suicidal tendencies (Beck and Young, 1978).

Part of the onset of depression in University students has to do with their age. This is because many mental illnesses develop during the late adolescence and early adulthood and since they lack the life experiences to deal with their problems, depression can easily overwhelm them at this time (Lyubomirsky et al., 2003).

According to Rosenthal and Schreiner (2000) depression in students is mostly aggravated by lack of sleep in students and the use of alcohol or other substances as coping strategies to mask their emotional pain. From the researchers' observation as lecturers, it may be argued that the above precipitants are common in the University of Ghana.

Coping Strategies

On the coping strategies, it was realized that the students use mostly the cognitive methods as compared to the other ones. According to Fletcher and Payne (1982) physical and social methods are palliative stress management strategies but they are utilized mostly after school remedies. In view of this, Kyriacou (1987) is of the views that since the stressors are experienced in the school; efforts should be made to alleviate them during school hours. The present study thus sought to find out the coping methods used by students.

METHODOLOGY

Research Setting

The study was carried out at the main campus and the Accra City Campus of the University of Ghana. This is to ensure that the subjects for the study are representative of the students' perceptions of depression.

Sample Size and Sampling Method

A sample size of 312 was randomly selected from the 23,602 students from the main campus and Accra City campus in the University of Ghana. Through a systematic random sampling method, 100 students from each of the four levels were chosen for the study.

Research Design

This was a cross-sectional study to seek the views of the students in the University of Ghana on the types of

precipitants of depression they face and the coping strategies they use in the University to minimize them.

Instruments

The data was collected with the aid of three types of questionnaires. The first part was constructed by the researchers on a likert scale on the precipitants of depression for students. The reliability level was .705 for the selected sample.

The second part of the questionnaire was a standardized inventory on depression by Aaron Beck (1978) called BDI. It is a widely used self-report inventory of depressive signs with good internal consistency and test- retest reliability. It has a cronbach alpha of 0.85. After using it on the students the level was .773.

The third part of the questionnaire is self constructed on the coping mechanisms of students to minimize depression which also yielded a cronbach alpha level of .701.

RESULTS

Introduction

The study has three objectives as stated earlier and five hypotheses were formulated on the research objectives. A significance level of .05 was used to test the hypotheses. The LSD post hoc tests were used to reveal significant differences in the samples because of the unequal sample sizes of the subjects in the study. The eta squared effect sizes were used to determine the magnitude of the differences in the dependent variables in the study with reference to the Cohen (1988) norms. The analyses are presented below:

The first hypothesis states that the Students will perceive academic load as the main cause of depression than the other causes in the University. These include health problems, social problems and thinking problems.

This hypothesis was aimed at identifying the main types of stressors perceived by the students and ranking them by severity. The MANOVA Test was used and there was a significant omnibus result $F(3, 837) = 241.43, p < .01, \eta^2 = .464$. LSD post hoc test was then used to rank them. A summary of the results are shown below in Table 1.

The analysis in Table 1 indicates that Academic Load is the highest perceived stressor of depression in them whilst Health problem is the least. Thinking problems

Table 1. MANOVA, Effect Size and Post-hoc Results on Causes of Depression

Student		N(312)				
STRESSOR	Mean	SD	F	df	Sig	η^2
Academic Load	1.43	.60				
Social Problems	.82	.64				
Health Problems	.34	.38				
Thinking Problems	.91	.61				
Average Stressors	.88		241.43	3,837	.000	.464

Note Average stress checklist scaled 1-5, with 1 representing the absence of stressors and 5 representing stressors all the time.

*Summary of LSD Post hoc analysis

1st Academic Load

2nd Thinking Problems

3rd Social Problems

4th Health Problems

Table 2. Analysis of Variance and Effect Size on the biographical variables of the students on Stressors, Signs and Coping Methods

VARIABLE	Total Stressors		Total Signs		Total Coping	
	Sig	Effect size	Sig	Effect size	Sig	Effect size
Age	ns	nil	ns	nil	ns	nil
Religion	ns	nil	ns	nil	ns	nil
Gender	ns	nil	.004	.034	ns	nil
Level	.045	.030	.008	.049	ns	nil
Marital Status	ns	nil	ns	nil	ns	nil
Residence	ns	nil	ns	nil	ns	nil
Occupation	.016	.031	ns	nil	ns	nil

*Summary of analysis

1. Total stressors-Level and Occupation are significant

2 Total Signs-Gender and Level are significant

3 Total Coping-None of the variables is significant

came in second followed by social problems which took the third position. The aggregate effect size of the differences between them is large (.464).

The next hypothesis tested is as follows.

2. There will be a significant difference in the reported levels of stressors, signs and coping strategies of depression among the different biographical variables of the students in the University. These variables are gender, level, age, marital status, residential status, religion and occupation of the Students.

This hypothesis attempts to find out if there is a difference in the reported levels of stressors, signs and types of coping strategies used among the students in the University with regards to their following biographical variables: gender, level, age, marital status, residential status, religion and occupation. An ANOVA was used to

test this hypothesis. A summary of the statistical analysis can be seen above in Table 2.

The results above show that for the total stressors of depression, biographical variables like level and occupation were significant. With regards to total signs of depression, it was gender and level which yielded significant differences in the responses. For the total coping methods none of the biographical variables was significant. Since the sample sizes of the Students are unequal LSD post hoc test was used to reveal the differences in tables 2a, 2b and 2c below:

The results show that Level 300 students reported the highest stressors and the effect size was small (.03).

The results show that students on study leave reported the highest stressors and the effect size was small (.031)

The results show that females reported more total signs of depressions than the males and the effect size was small (.034). The students also scored an average of 16.14 on the Beck's Depression Inventory suggesting that they manifest mild symptoms of depression

Table 2a. ANOVA, Effect Size and Post Hoc Test on Stressors by Levels

LEVEL	N	Mean	SD	df	F	Sig.	η^2
100	68	22.6	7.9				
200	98	20.6	8.5				
300	28	26	9.0				
400	72	21.4	11.1				
Total	265	21.88	9.27	3,262	2.73	.045	.030

*Summary of LSD Post hoc analysis
Level 300 has the highest stressors and the rest have similar stressors

Table 2b. ANOVA, Effect Size and Post Hoc Test on Stressors by Occupations

OCCUPATION	N	Mean	SD	df	F	Sig.	η^2
Student/work	18	21.44	7.32				
Student/Leave	28	26.6	14.1				
Student	228	21.3	8.5				
Total	266	21.88	9.28	3,263	4.23	.016	.031

*Summary of LSD Post hoc analysis
Students on study leave experience more signs of depression than the other students

Table 2c. t- test and Effect Size of the Reported Total Signs of Stress used by Gender

GENDER	N	M	SD	t	df	Sig	η^2
Male	98	13.8	8.1	.122			
Female	145	17.7	10.4	-2.538			
Total		16.14	2.80	-2.88	238	.004	.034

Table 2d. ANOVA, Effect Size and Post Hoc Test on the Reported Signs of Depression.

LEVEL	N	Mean	SD	df	F	Sig.	η^2
100	55	17.53	8.8				
200	89	17.57	12.6				
300	29	18.14	9.6				
400	67	12.46	7.7				
Total	240	16.14	10.4	3,239	4.052	.008	.049

*Summary of LSD Post hoc analysis
Level 400 has the least signs of depression and the rest have similar signs

according to Beck's norms ie 10-18 reflects mild levels of depression.

The results show that Level 400 students reported the least signs of depression and the rest of the levels have similar signs of depression and effect size was small (.049)

3. The Students will report using more cognitive coping strategies than the other ones in the University in managing depression. The other ones include: medical, physical, social and spiritual.

This hypothesis was aimed at identifying the main types

Table 3. The MANOVA, Effect Size and LSD Comparisons on the Types of Coping Strategies Used by Students in the University

Students						
N(312)						
COPING METHOD	Mean	SD	F	df	Sig	η^2
Physical Method	1.39	.81				
Social Method	1.63	.61				
Spiritual Method	1.68	.84				
Cognitive Method	1.77	.67				
Medical Method	.57	.60				
			156.6	4,1140	.000	.355

Note Average stress checklist scaled 1-5, with 1 representing the absence of stressors and 5 representing stressors all the time.

*Summary of LSD Post hoc analysis

1st Cognitive Method

2nd Social & Spiritual Methods

3rd Physical Method

4th Medical Method

Table 4a. ANOVA Results for the Types of Stressors as Predictors on Average Signs of Depression Perceived by Students at the University of Ghana

Model	Sum of Squares	df	Mean Square	F	Sig	R ²
Regression	20.513	4,185	5.128	34.148	.000	.425
Residual	27.783		.150			
Total	48.296					

Note Predictors: AS, AHP, AAL, ASP

Dependent Variable: ASIGNS

of coping methods used by the students and ranking them by severity. The MANOVA Test was used and there was a significant omnibus result $F(4, 1140) = 156.6$, $p < .01$, $\eta^2 = .355$. LSD post hoc test was then used to rank them. A summary of the results are shown above in Table 3

The analysis in Table 3 indicates that the cognitive is the highest perceived coping method of depression among the students whilst the medical method is the least. Social and Spiritual methods came in second followed by physical method which took the third position. The aggregate effect size of the differences between them is large (.355).

4. There will be a significant relationship between the types of stressors reported by the students and the signs of depression they perceive.

This hypothesis was aimed at identifying the predictive role of the various stressors in contributing to the signs of depression in the students in the University. A Simultaneous Regression was done with the five various stressors as predictors and the average signs of

depression as the dependent variable. The Regression Analysis has been shown below:

As shown in the Table 5a below, when the predictors were regressed onto the dependent variable, (average signs) it was found that they accounted for almost 43% of the variance in the average signs of depression which was statistically significant at .05 alpha level $R^2 = .425$, $F(4, 185) = 34.148$, $p < .001$. A follow up multiple regression was done to find out the significant predicting variables for the average signs of depression. This is shown in Table 4b below:

As can be seen in Table 4b, it appears that only Social Problems $t(4, 185) = -4.133$, $p > .05$ does not contribute to predicting the perceived depression sign in the students. All the other stressors exert a significant influence on the signs of depression in the students.

5. There is a significant relationship between the types of coping strategies and the signs of depression reported by the students.

This hypothesis was aimed at identifying the effects of the various coping strategies used by the Students in the

Table 4b. Multiple Regression Results for the Types of Stressors on the Average Signs of Depression

PREDICTOR	B	Std. Error	Beta	t	Sig
AAL	-.315	.076	-.396	2.595	.000
ASP	-.125	.089	-.145	-4.133	.163
AHP	-2.80	.098	-.229	-2.864	.005
AS	1.418	.208	1.116	6.815	.000

Dependent Variable: ASIGNS

Table 5a. ANOVA Results for the Types of Coping Strategies as Predictors on Average Signs of Depression Perceived by Students at the University of Ghana.

Model	Sum of Squares	df	Mean Square	F	Sig	R ²
Regression	2.158	5,191	.432	1.573	.169	.040
Residual	52.398		.274			
Total	54.556					

Note Predictors: ACM, ASPCM, AMCM, ACCM, ACM
Dependent Variable: ASIGNS**Table 5b.** Multiple Regression Results for the Types of Coping Strategies on the Reduction of Average Signs of Depression

PREDICTOR	B	Std. Error	Beta	t	Sig
ASCM	.765	.083	.022	.398	.585
ASPCM	-4.522	.074	.201	3.378	.743
ACCM	-2.421	.074	.116	2.021	.021
AMCM	9.627	.078	.469	7.894	.902
ACM	.313	.214	.233	1.461	.146

Note Predictors: ACM, ASPCM, AMCM, ACCM, ACM
Dependent Variable: ASIGNS

University in reducing depression on them. A Multiple Regression was done with the five various coping methods as predictors and the average signs of depression scored on the Beck's Depression Inventory as the dependent variable. The Regression Analysis has been shown below:

As shown in the Table 5a above, when the predictors were regressed unto the dependent variable, (average signs) it was found that they accounted for 4% of the variance in it which was not statistically significant at .05 alpha level, $R^2 = .04$, $F(5,191) = 1.573$, $p = .169$. A follow up multiple regressions was done to find out the significant predicting variables for the reduction of the average signs of depression. This is shown in Table 5b above:

Table 5b demonstrates that only those Students who reported using cognitive coping strategies had the signs of depression reduced. The rest of the methods did not have any statistical significant impact in reducing the manifestations of depression in the students.

DISCUSSION

The first objective was to find out the perceived level of depression among the students in the University of Ghana. The students' responses indicated that averagely they had mild depression. They mean score was 16.14 which indicates mild depression according to norms of Beck's Depression Inventory. This finding tends to agree with most findings that depression is common among students. A study carried on student depression revealed that even though the signs were mild, it was chronic and caused ongoing impairment in them including suicidal tendencies (Beck and Young, 1978).

The explanation is offered by Wiechers (1993). He holds the view that when a person's self-concept is threatened as in the case of stressors of depression, the brain gives messages to the body to prepare itself to fight or flee. It is not always possible, however, because individuals in certain professions (such as students) are supposed to control their emotions. The problem that

arises is that the body is physiologically prepared for a reaction that is psycho-socially unacceptable. Thus the reaction is prohibited or blocked. In the long term, this suppression of emotions may result in psychosomatic changes in the body. This is because the flood of hormones, like adrenaline, thyroxin and cortisol, which rush through the body when one is under stress, temporarily halt normal functions. When considering the demands made by universities on the students, stress gradually builds up and where this is allowed, it may be like a blown-up balloon causing distressing symptoms for the individual like depression and somatoform disorders.

The second objective was aimed at finding out the main perceived stressors of depression encountered by the students and ranking them in their degree of severity. The results indicated that the students experienced them at moderate levels (average 0.88). They were ranked in the following order: Academic Load, Thinking Problems, Social Problems and Health Problems. The effect size was large (.464). Studies tend to support the present finding that the main cause of depression in university students is due to the university environment which presents many challenging and demanding situations like adjusting to new environments, mastering new skills, and frequent academic stress. (Vredenburg, O'Brien, Krames, 1988)

The fact that the academic load is leading is partly explained by the fact that the Lecturer-student ratio is high coupled with the increased intake of students with no expansion of University facilities. This situation comes with a lot of stressors that can precipitate depression like poor ventilation, no spaces for lectures and tutorials, non availability of teaching-learning materials and inadequate supervision and attention from the few lecturers.

The first observation is that the main precipitant for depression is the academic load and the effect size was large. These come with a whole lot of problems. These include ill physical and psychological health of the student. These precipitants gradually build up and where this is allowed, it may be like a blown-up balloon causing distressing symptoms for the individual called psychosomatic diseases. It also affects the academic performance of the students.

The next objective is concerned with the types of coping strategies commonly used by the Students. It was realized that the most commonly reported coping strategy is the cognitive method. This is closely followed by the social and spiritual methods which are equally used. The physical coping method was third whilst the medical one was last. This agrees with the sequence of stress management reported by Kyriacou (1987) who found out that the most frequently used coping strategies were: trying to keep things in perspective, trying to avoid confrontation and relax after work. Dunham (1984). Kloska and Ramersat (1985) also found out that the most frequently used coping strategy involve social support and the explosion of feelings among their colleagues.

The third objective is aimed at identifying the predictive role of the various stressors in contributing to the manifestations of depression in the students in the University. A Simultaneous Regression was done with the five various stressors as predictors and the five manifestations being the dependent variables and it was found that they accounted for almost 43% of the variance in the total manifestations which was statistically significant. A follow up multiple regression was done to find out the significant predicting variables for the total manifestations. The findings revealed that only Social Problems does not contribute to predicting the total manifestations in the students. All the other stressors exert a significant influence on the signs of depression in them.

The fifth objective is aimed at finding out the relationship that exists between the types of coping strategies used and the corresponding stress reduction. It was found that the total methods used accounted for 4 % reduction in depression. This indicates that either the students are using inadequate or wrong methods in managing the stress. It was also realized that only the cognitive method had the depression reduced. According to Payne and Furnham (1987) the physical and social methods are palliative and should be used frequently. Since stress is experienced in the workplace, the stress management methods should be practiced during the school hours (Kyriacou, 1987).

The last objective attempts to find out if there is a difference in the reported levels of stressors, signs and types of coping strategies used among the students in the University with regards to their following biographical variables: gender, level, age, marital status, residential status, religion and occupation. An ANOVA was used to test this hypothesis.

The results showed that for the total stressors of depression, biographical variables like level and occupation were significant. The results showed that Level 300 students and those on study leave reported the highest stressors but the effect size was small (.031). This is probably explained by the fact that Level 300 students have problems of choosing subjects which is crucial at that level. Those on study leave have a lot of problems because most of them join the University at Level 200 and do not have the academic foundations at Level 100. These are mostly aged and are beset with family and other social responsibilities that could serve as precipitants for depression

With regards to total signs of depression, it was gender and level which yielded significant differences in the responses. The results show that females reported more total signs of depressions than the males and the effect size was small (.034). It also shows that Level 400 students reported the least signs of depression and the rest of the levels have similar signs of depression and effect size was small (.049). Level 400 students exhibited least signs of depression partly due to the fact they are

used to the system due to their long stay in the university. The females reported more signs of depression than their male counterparts because according to the findings of Moore (2000) women are often better than men at seeking help when it all gets too much. They talk over their feelings with friends or partners and see the physician when they feel stressed rather than wait for physical problems to develop. According to her study, oxytocin boosted by estrogen encourages women to tend to themselves and others' needs and seek out support from good friends in times of strain. Men on the other hand, have been conditioned not to show emotions so they go to the counselor only when the medical symptoms of stress emerge like chest pains, headache etc. Some don't even bother to express it but would rather try to escape their stressors by excessive drinking or resorting to smoking.

IMPLICATIONS and RECOMMENDATIONS

The first observation is that the commonly reported precipitant of depression is the academic load among the students and the effect size was large. Academic load is operationally defined to include the availability of lecturers, lecture theatres, learning materials, grading system and time table problems. The fact that the academic load is leading is partly explained by the fact that there is an increased intake of students with no expansion of University facilities. In view of this the University authorities should expand the existing academic facilities by:

- constructing spacious classrooms, libraries, laboratories and demonstration rooms to accommodate all the students during lectures and tutorials
- Providing good ventilation, lighting and sound system in the classrooms.
- Providing the libraries with fast ICT facilities and current books and journals for students to do research

The findings that the stressors accounted for 43% of the signs of depression in the students calls for more counseling of the students at both departmental and hall levels. Course advisors and hall masters/mistresses should be encouraged to listen to students and do counseling on regular basis for them. They should also be trained on basic counseling skills. Difficult cases should be referred to the Placement and Counseling Centre.

Furthermore, the findings of the study that Level 300 students and those on study leave have high precipitators of depression than their colleagues and that the students in general use inappropriate coping manifestations call for the attention of the counselors in the Counseling and Placement Centre.

On the coping strategies, it was realized that the students use mostly the cognitive methods as compared to the other ones and that the coping strategies used by

the students only reduced the stress by 4%. This implies that they were using wrong or inadequate coping strategies. Based on this, the following recommendations are necessary:

- All students should be educated on the causes, signs and the various coping methods of depression
- The need to carry out the coping mechanisms correctly and during school hours instead of after school should be emphasized.
- The findings of this study should also be made available to students in the other Universities in Ghana
- Special counseling sessions should be organized for Level 300 students and those on study leave

CONCLUSION

This was a cross-sectional survey method which was aimed at finding out the reported stressors for depression in the students in the University of Ghana. It is also aimed at finding out the prevalence of the condition on them and the coping strategies they use to minimize it. The sample for the study included 312 students from the Legon and Accra City campuses of the University of Ghana drawn through stratified sampling. The results revealed that students had mild depression and their major stressors were related to the academic load. The stressors affected mostly Level 300 students and those on Study leave. The stressors accounted for 43% of the signs of depression in them. Females had more signs of depression whilst level 400 students had the least signs. The commonly used coping strategy was the cognitive. Based on the findings above, recommendations were made to the University authorities to expand existing academic facilities, recruit more lecturers and the Counseling and Placement Centre in the University to institute preventive and treatment modalities for the students in the University of Ghana.

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