

Relationship among Academic Stress, Depression and Mental Health of Final Year Students of Tertiary Institutions in Sokoto Metropolis

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Abstract

This study examined the relationship among academic stress, depression and mental health of final year students of tertiary institutions in Sokoto metropolis. Three research questions and three hypotheses guided the study. The population of the study was 12,294 students while 378 students were selected as the sample. Three set of instruments were used for data collection: Adopted Version of Student Academic Stress Scale (SASS) to measure academic stress, adopted version of Students' Depression Inventory (SDI) to measure students' depression and adapted version of Mental Health Inventory (MHI) to measure mental health. The results of the findings showed that there was significant relationship between academic stress and mental health of final year students. It was also found, among other findings, that there is significant relationship between depression experienced by final year students in tertiary institutions in Sokoto metropolis and their mental health. Based on the findings, recommendations were made including the need for students to be taught effectively the coping strategies and techniques that could help them handle or reduce depression related issues. Such strategies and techniques include reflexology, massage, exercise, deep breathing, take a vacation in your mind etc.

Keywords: Academic, Stress, Depression, Mental, Health

Introduction

Academic stress has been a topic of interest for many years because it is constant for students. Academic stress is a form of strain, inconvenience or disturbance experienced by students during the course of their academic pursuit. It is a pressure from school environment that can cause internal tensions in students.

Students experience high stress as a result of academic commitments, poor study habits and ineffective time management skills. The combination of the many sources of stress (stressors) such as planning for the future, struggling with examination and assignments and meeting the demands of the school can be an overwhelming experience for many students. Thus, students become tensed, disturbed and worried because of academic demands and pressure (Adeoye, 2009). The importance of performing adequately on tests without second chances or alternative ways of raising one's grade may cause stress. Academic stress, to students, is an unpleasant experience but academic success which is a positive and desirable outcome is embedded in it. According to Dyson and Renk (2006), attending school can be a time of considerable anxiety and stress as well as a rewarding experience for students. So, at another level, or viewed from another perspective, academic stress can be regarded as eustress (good or positive stress) because it envelopes academic achievement, and adds values, excitement and fulfillment to a student's life. Hence, academic stress is a part of self-discovery, growth and use of one's potential (Ogunye, 2007).

Academic stress is a product of a combination of academic related demands that exceed the adaptive resource available to an individual (Kadapatti & Vijayalaxmi, 2012). Krishan (2014) defined academic stress as a demand related to academics that taxes or exceeds the available resource (internal or external) as cognitively appeared by the student involved. According to her, academic stress echoes individual's perception of academic frustration, academic conflict, academic pressure and academic anxiety which are synonymous with the components of academic stress.

Depression is an important factor in mental and emotional health. It is a common problem experienced by all individuals in our society particularly adults. Depression is a sign of frustration which shows that certain mental and emotional aspects of a person's life are embanked. Depression occurs so frequently in the populations such that some authorities have estimated that at least 12% of the adults have heard or will have an episode of depression of sufficient clinical severity (Aaron, 2006). Depression, to Comer (1992), is a low sad state in which life seems bleak and it challenges overwhelming. The main characteristics of depression according to this definition are lack of interest or pleasure in most or all of usual activities. Depression is emotional reaction over the happenings in the environment which directly or indirectly affects an organism by disrupting the normal functions.

Depression is therefore a state of low mood and aversion to activity, that can have a negative effect on a person's thought, behaviour, feelings, and world view and physical well-being. Depressed people may feel sad, anxious, empty, hopeless, worried, helpless, worthless, guilty, irritable, hurt or restless. Shehu (2006) viewed depression as a state of deep feeling of intense and pervasive dejection and hopelessness, usually accompanied by apathy and a feeling of personal worthlessness. It includes sadness and obsessive discouragement as may be experienced by normal people and the mentally disordered person. In mainstream abnormal psychology, that is the branch of psychology that essentially studies maladaptive behaviours and disorders, depression is an important factor in mental and emotional health. It is a common problem experienced by all individuals in our society, particularly adults.

Mental health is an integral and essential component of health. The World Health Organization (WHO, 2012) constitution states: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." An important consequence of this definition is that mental health is described as more than the absence of mental disorders or disabilities. Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community. In this positive sense, mental health is the foundation for individual well-being and the effective functioning of a community (WHO, 2012).

Boyle (2011) defined mental health as "emotional, behavioral, and social maturity or normality; the absence of a mental or behavioral disorder; a state of psychological well-being in which one has achieved a satisfactory integration of one's instinctual drives acceptable to both oneself and one's social environment; an appropriate balance of love, work, and leisure pursuits." Nordqvist (2009) says, "Mental health also refers to our cognitive, and/or emotional wellbeing - it is all about how we think, feel and behave. An individual's mental health can affect his/her daily life, relationships and even physical health. Mental health also includes a person's ability to enjoy life, which is to attain a balance between life activities and efforts to achieve psychological resilience." Quite simply, mental health refers to a person's health of the mind (Kozier, 2008), and the impact of social, cultural, physical and educational activities can all affect someone's mental health (Kitchener & Jorm, 2002).

Several empirical studies have been conducted on the relationship among academic stress, depression and mental health students. Example of such studies include: A study conducted by Muhammad and Rabia (2015), on how perceived stress can influence academic performance, analyzing the role of some critical stressors. The purpose of the study was to assess the impact of stressors on academic performance of students of management sciences. The sample consists of 155 students from three universities located in Islamabad out of which response rate was 94 per cent. Results indicate that two main stressors of course load and social support affect the academic performance of students of management sciences. Study conducted by Ibrahim, Mohtar, Sabo, Abdul-Rahim and Ariffin (2015) titled stress and academic programme type: Perspective on Polytechnic Students in Nigeria was carried out in Kaduna Polytechnic (Federal). The population of the study comprised of the students of 2014/2015 academic session and 250 students sample size randomly selected based on proportionate population of each department. The first finding of the study showed that students, irrespective of their college units of study and academic programmes, do experience stress. The second finding of the research indicated that academic programmes do influence the students' level of stress.

Gul, Unal, Alaettin and Didem (2009) in their study titled "Prevalence of depression, its correlates among students, and its effect on health-related quality of life in a Turkish university." A cross-sectional survey was conducted between 1st December 2007 and 31st January 2008 at Osmangazi University, Eskisehir, in western Turkey. The study group consisted of 822 students. It was found that, in those with depression, all the mean domain scores of SF-36 scale were lower than those without depression ($P < 0.05$, for each one). They further concluded that the prevalence of depression among the university students in Turkey was widespread, affecting negatively the HRQoL of the students. For prevention and control of depression, depression information and knowledge need to be addressed by health education programmes.

Hysenbegasi, Hass and Rowland (2005) conducted a study aimed at investigating the relationship between depression and its treatments and the academic performance of undergraduate students. The primary outcomes of interest were the student's grade point average (GPA), an objective, observer generated measure of academic productivity, and the students' self-reported academic performance. Depressed students reported a pattern of increasing interference of depression symptoms with academic performance peaking in the month of diagnosis and decreasing thereafter with the lowest levels reported in months 4

through 6 post-diagnosis, each of which is significantly less than the month of diagnosis. They further discussed their findings that there was a significant relationship between depression and academic performance which was robust to the variety of analyses employed within this study.

Research Questions

The following research questions guided the study:

1. Is there any relationship between academic stress and mental health of final year students in tertiary institutions in Sokoto metropolis?
2. Is there any relationship between depression and mental health of final year students in tertiary institutions in Sokoto metropolis?
3. Is there any relationship between among academic stress, depression and mental health of final year students of tertiary institutions in Sokoto metropolis?

Research Hypotheses

The following null hypotheses were postulated and guided this study:

Ho1 There is no significant relationship between academic stress and mental health of final year students of tertiary institutions in Sokoto metropolis.

Ho2 There is no significant relationship between depression and mental health of final year students of tertiary institutions in Sokoto metropolis.

Ho3 There is no significant relationship among academic stress, depression and mental health of final year students of tertiary institutions in Sokoto metropolis.

Methodology

The researchers used a descriptive correlational research design in this study. The population of the study is 12,294 comprising of all final year students in all the tertiary institutions in Sokoto metropolis which are categorized under university (Federal and State), College of Education (State), Polytechnic (State), School of Nursing and Midwifery (Federal) and State School of Nursing, Sokoto. The sample of this study consisted of 378 final year students of the six tertiary institutions within the Sokoto metropolis. The selection of the samples from these institutions was done through the use of the Research Advisors (2006) table for determining sample size in research. Proportionate sampling technique was used in getting various sample size of the institutions thus allowing for equal chance in the selection procedure (i.e Population of each institution multiply by sample size of the table then divide by the total population). Also, simple random sampling technique was used to select samples from each of the institutions under study.

Table 1: Sample of Students

<i>Name of Institution</i>	<i>Population</i>	<i>Samples</i>
1. Usmanu Danfodiyo University, Sokoto	5180	159
2. Sokoto State University, Sokoto	435	13
3. Umaru Ali Shinkafi Polytechnic, Sokoto	2250	69
4. Shehu Shagari College of Education, Sokoto	4,325	134
5. School of Nursing and Midwifery, Sokoto	74	02
6. State School of Nursing, Sokoto	30	01
Total	12,294	378

Source: 2017/2018 Final year students list of the institution Board

The instruments that were used in collecting data for this research are as follows: Adopted version of Busari's (2012) Student Academic Stress Scale (SASS) to measure academic stress; adopted version of Suleiman (2016) Students' Depression Inventory (SDI) to measure students' depression; and adapted version of Balaji (2013) Mental Health Inventory (MHI) to measure mental health.

According to Busari (2012), the development and validation of SASS has content and construct validity value. The preliminary validation of SASS was done on 750 university students from South West Nigeria in 2011 with a coefficient alpha of not less than .80. But when the validation was carried out on 600 participants, the coefficient alpha rose to .92. Therefore, the researchers adopted it for use. According to Busari (2012), the reliability estimates of SASS were computed using factor analysis and a reliability coefficient of 0.80 was obtained. Thus SASS is highly reliable and valid as the scale measures what it is actually supposed to measure. These suggested that the instrument is reliable and therefore adopted for the study.

The depression inventory questionnaire was adopted from Suleiman (2016) who adapted it from Becks Depression Inventory. The original Becks Depression Inventory consists of 21 symptoms items described in simple sentences which were modified by Suleiman (2016) to 20 symptoms items. Each item has 4 different questions (1-4) to which the respondent ticks or circles the one that best describes his/her feelings. For this study, the researchers adopted the instrument to measure students' depression. To ascertain the validity of the questionnaire, Suleiman subjected the instrument to experts and lecturers as well as his supervisors in the Department of Educational Psychology and Counselling, Ahmadu Bello University, Zaria in 2016 to peruse, and their observation were that the issue of sexual feeling among secondary school students as an item

should be removed and also some words like feeling flue which is an American way of feeling sad should be replaced with a simpler and familiar words. And thus the observations and suggestions were used to rewrite and modify the items of the questions by Suleiman (2016). Thus, their independent judgment ascertained the instrument to have construct and content validity, and therefore, the current researchers adopted the instrument for use in this study. Suleiman (2016) adopted the reliability of the instrument established by Miller and Seligman who used the Becks Depression Inventory (BDI) as an instrument for measuring depression. Miller and Seligman sample comprised of 120 college students; 56% were female and 44% were male and test-retest reliability coefficient was found to be .74. Internal consistency yielded a Cronbach's alpha of .92 for the outpatients and .93 for the students. Item total correlation, which was performed on the scores of both samples, yielded significant correlations at .05 level for both groups on all items. A sub sample (26 patients) of the clinical sample was retested with the Becks Depression Inventory (BDI) one week after the first administration. The test-retest reliability values were calculated and yielded an average correlation of 0.93. Thus, the current researchers adopted the instrument as reliable and used in this study.

The Mental Health Inventory was adapted from Balaji (2013), by the researchers, to measure respondents' feelings and views in relation to their mental health. The instrument is made up of two (2) parts. Part A deals with Bio – data which seeks to elicit personal information from the respondents while part B deals with the statements on mental health and is made up of fifty four (54) items. The instrument was designed on four (4) point likert scale of always, most of the times, sometimes and never. The validity of the MHI was done by giving it to experts in Faculty of Education, Usmanu Danfodiyo University, Sokoto since the instrument was not designed locally; more so, it was used for a similar study on foreign students. The experts went through the items and made few adjustment such as items no. 4 which states 'I have affection and attachment with my neighbours' was changed to 'I feel am accepted among my friends;' item no. 34 which states 'I am not able to concentrate fully in my works' was adjusted to 'I couldn't concentrate fully in my studies;' item no. 37, which says 'I fully cooperate in the important functions of my community' was changed to 'I fully cooperate with my friends in important issues;' item no. 48 which was 'I feel that this world is a place good enough for passing life', was changed to 'I feel that the school is a place good enough to actualize your ambition;' and lastly item no. 53 that says 'I feel that my intimacy with my group community is increasing gradually' was adjusted to 'I feel that my intimacy with my colleagues gets better gradually'. Thus, their independent judgment ascertained the construct and

content validity. Therefore, the researchers adapted the instrument for use. The reliability of the MHI was obtained by administering the questionnaire to fifty (50) respondents and re-administering the same questionnaire after an interval of four (4) weeks to ensure they did not exactly remember their previous responses and the factors to be measured were relatively stable and constant. After the test, the scores of the two tests were correlated and analyzed using Pearson product moment correlation co-efficient 'r' and reliability co-efficient 'r' of .75 was obtained and the questionnaire is adjudged to be reliable for the study.

Ho1 and Ho2 were tested using Pearson Product Moment Correlation statistics, this was used to test the relationship between the two variables while Ho3 was subjected to Multiple Regression analysis to predict which one of the variables is a predictor of the dependent variable. The analysis was carried out by using statistical Package for Social Science (SPSS) Version 20.0.

Presentation of Results

Ho1: There is no significant relationship between academic stress and mental health of final year students of tertiary institutions in Sokoto metropolis.

Table 2: Relationship between Academic Stress and Mental Health of Final Year Students

Variables	N	Mean	Std. Deviation	r-Cal	P-value	Decision
Academic Stress	378	39.55	29.85	.177	.001	Significant
Mental Health	378	38.90	28.08			

From the result on table 2, academic stress and mental health of final year students of tertiary institutions in Sokoto metropolis were positively related and significant, $r\text{-Cal} = .177$, and $p = .001$. This indicates that there was significant relationship between academic stress and mental health of final year students of tertiary institutions in Sokoto metropolis because the p-value (.001) is less than the .05 level of significance. Therefore, the hypothesis which says there is no significant relationship between academic stress and mental health of final year students of tertiary institutions in Sokoto metropolis was rejected. This means that academic stress experienced by final year students in tertiary institutions in Sokoto metropolis largely affects their mental health.

Ho2: There is no significant relationship between depression and mental health of final year students of tertiary institutions in Sokoto metropolis.

Table 3: Relationship between Depression and Mental Health of Final Year Students

Variables	N	Mean	Std. Deviation	r-Cal	P-value	Decision
Depression	378	34.86	8.04	.427	.000	Significant
Mental Health	378	38.90	28.08			

From the result on table 3, depression and mental health of final year students of tertiary institutions in Sokoto metropolis were positively related and significant, $r\text{-Cal} = .427$ $p = .000$. This indicates that there was significant relationship between depression and mental health of final year students of tertiary institutions in Sokoto metropolis because the $p\text{-value}$ (.000) is less than the .05 level of significance. Therefore, the hypothesis which says there is no significant relationship between depression and mental health of final year students of tertiary institutions in Sokoto metropolis was rejected. This means that depression experienced by final year students in tertiary institutions in Sokoto metropolis affects their mental health.

Ho3: There is no significant relationship among academic stress, depression and mental health of final year students of tertiary institutions in Sokoto metropolis.

Table 4: Academic Stress and Depression as Predictors of Mental Health

Variables	R	R ²	Adjusted R ²	SE	F	β	T	P-value
Academic Stress	.172	.031	.029	27.67	12.174	.177	3.489	.001
Depression	.445	.198	.192	25.25	30.811	.809	4.59	.000

Dependent Variable: Mental Health

A look at the squared part correlations revealed that academic stress accounted for 3.1% of the variance in mental health ($R^2_{\text{adj}} = .029$, $F(1, 377) = 12.174$, $p < .05$) and depression accounted for 19.8% of the variance in mental health ($R^2_{\text{adj}} = .192$, $F(3, 375) = 30.811$, $p < .05$). Although academic stress is a related variable to mental health, analysis of regression coefficients indicated that depression, $\beta = .809$, $t = 4.59$, $p < .05$ emerged as a better predictor of mental health than academic stress. Thus, the hypothesis that says there is no significant relationship among academic stress, depression and mental health of final year students of tertiary institutions in Sokoto metropolis was rejected. This means that academic stress and depression experienced by final year students of tertiary institutions in Sokoto metropolis affect their mental health than academic stress.

Discussion of Findings

Finding from hypothesis one indicated that there is a significant relationship

between academic stress and mental health of final year students of tertiary institutions in Sokoto metropolis. The findings by Muhammad and Rabia (2015) was in affirmation with the finding of this study, as they found out that two main stressors of course load and social support affect the mental health of students of management sciences. However, Ibrahim, Mohtar, Sabo, Abdul-Rahim and Ariffin's (2015) finding showed that students irrespective of their college units of study and academic programmes do experience stress. Stress on students' mental health cannot be over emphasized because it has direct bearing on the overall well-being of the students when students are faced with different stressors. This finding can be linked to cognitive relational theory (transaction theory) which sees stress as relationship between the person and the environment that is appraised as exceeding his/her resources and endangering his/her wellbeing.

The result from hypothesis two reveals significant relationship between depression and mental health of final year students of tertiary institutions in Sokoto metropolis. The finding agreed with Gul, Unal, Alaettin and Didem's (2009) finding who concluded that the prevalence of depression among the university students in Turkey was wide-spread, and therefore affecting the mental health of the students. According to Hysenbegasi, Hass and Rowland (2005), non-availability of the treatment data from other health care providers, the treatment variable used within the regression models represents an imprecise proxy for the totality of treatment methods received by depressed subjects from a variety of on-campus and off-campus health care providers. Another challenge to the interpretation of this data is the interrelatedness of depression and school performance. Because of this, it was not possible to evaluate the extent to which the association between depression and academic performance is driven by causality in either direction. This finding can be linked to psychodynamic theory of depression of Sigmund Freud and Carl Abraham where they stated that difficulty sleeping, loss of appetite, inability to find pleasure in life, and general withdrawal are common features of depression.

Hypothesis three tested the relationship among academic stress, depression and mental health of final year students of tertiary institutions in Sokoto metropolis. The test was conducted with multiple regression analysis and the result revealed that depression experienced by final year students of tertiary institutions in Sokoto metropolis largely affects their mental health than academic stress. The finding of this study is in agreement with Gul, Unal, Alaettin and Didem (2009) who found depression as a better predictor of mental health of students. Serby and Yu (2003) maintained that major depression significantly affects a person's

family and personal relationship, work or school life, sleeping and eating habits, and general health. Its impact on functioning and well-being has been compared to that of chronic medical condition such as diabetes. According to him, a person exhibits a very low mood, which pervades all aspects of life and an inability to experience pleasure in activities that were formerly enjoyed. This finding can be traced to behavioural theory of depression where it was suggested that for some people, the rewards for positive behaviour starts to dwindle and they respond by performing fewer and fewer positive behaviour and developing a depressed style of functioning.

Conclusion

From the findings and discussion of the results, it was concluded that depression is more related to mental health of final year students in tertiary institutions in Sokoto metropolis; there is significant relationship between academic stress and mental health as well as significant relationship between depression and mental health of final year students in tertiary institutions in Sokoto metropolis.

Recommendations

1. Counsellors in the various tertiary institutions should give students group counselling on stress related issues and how to minimize or avoid them. This could be handled through recreational programmes like deep breathing exercises, chewing gum and music.

2. Students should be taught the coping strategies and techniques that could help them handled or reduce depression related issues. Such strategies and techniques include reflexology, massages, exercise, deep breathing, take a vacation in your mind etc.

3. Since depression was found to be a better predictor of mental health than academic stress, students should be assisted by counsellors in the various tertiary institutions by organizing group counselling on depression related issues and how to minimize or get rid of them wherever possible. This could be handled through recreational programmes such as fitness training that would make one relax like Yoga, meditation, massage, Bio feedback and music.

References

Adeoye, A. B. (2009). Effectiveness of Rational-Emotive-Behaviour and Reality Therapies on Academic Stress of Sandwich Undergraduates, Oro Campus of University of Ado-Ekiti Nigeria. An Unpublished PhD thesis, University of Ilorin.

- Aaron, B. (2006). Cognitive therapy of depression. Retrieved September, 20th2007 from <https://www.amazon.com/Cognitive-Depression-Guilford-Psychology-Psychopathology/dp/0898629195>
- Balaji, R. (2013). Appendices. Retrieved January 28th 2016 from <https://www.statisticssolutions.com/mental-health-inventory-mhi/>
- Boyle, A. (2011). Mental Health and You. Retrieved on 30/10/16 from <http://mental-health/content/mental-health-and-you?page=0.1>
- Busari, A. O. (2012). Identifying Difference in Perception of Academic Stress and Reaction to Stressors Based on Gender among First Year University Students. *International Journal of Humanities and Social Sciences*, 2(4), 121-135.
- Comer, R. L. (1992). *Abnormal psychology*. New york: W.H. Freeman & company.
- Dyson, R. & Renk, K. F. (2006). Adaptation to university life: Depressive symptoms, stress, and coping. *Journal of Clinical Psychology*, 1(62), 1231–1244.
- Fraenkel, R. J. & Wallen, E. N. (2000). *How to design and evaluate research in education* (4th ed). Sanfrancisco:McGraw-Hill.
- Gul, A., Unal, A., Alaettin, U. & Didem, A. (2009). Prevalence of depression, its correlates among students, and its effect on health-related quality of life in a Turkish university. *Upsala Journal of Medical Sciences*, 114(3), 170-177.
- Hysenbegasi, A., Hass, S. L. & Rowland, C. R. (2005). The impact of depression on the academic productivity of university students. *Journal of Mental Health Policy and Economics*, 8(3), 145-151.
- Ibrahim, Y. S., Mohtar, S., Sabo, M. A., Abdul-Rahim, M. K. I. & Ariffin, A. S. (2015). Stress and Academic Programme Type: Perspective on Polytechnic Students in Nigeria. *American Journal of Public Health Research*, 3(6), 214-220.
- Kadapatti, M. G. & Vijayalaxmi, A. H. M. (2012). Stressors of Academic Stress. A Study of Pre-University Students. *Indian Journal of Science Resources*, 3(1), 171-175.
- Kitchener, B. A. & Jorm, A. F. (2002). Mental health first aide manual. Retrieved May 21, from <http://en.wikipedia.org/wiki/Mentalhealth>
- Kozier, B. (2008). Fundamentals of Nursing Concepts, Process and Practice. Retrieved on 30/10/16 from <http://en.wikipedia.org/wiki/mentalhealth>.
- Krishan, L. (2014). Academic Stress among Adolescent in Relation to Intelligence and Demographic Factors. *American International Journal of Research in Humanities, Arts and Social Sciences*, 5(1), 123-129.
- Muhammad, Z. & Rabia, S. (2015). "How Perceived Stress Can Influence Academic Performance: Analyzing The Role of Some Critical Stressors." A paper presentation to the Department of Leadership and Management Sciences, Faculty of Contemporary Studies, National Defence University Islamabad.
- Nordqvist, C. (2009). What is Mental Health? What is Mental Disorder? Retrieved on 30/10/16 from <http://www.medicalnewstoday.com/articles/154543.php>.
- Ogunye, B. G. (2007). Impact of emotional intelligence training on academic stress and self-efficiency among senior secondary students. An unpublished dissertation, University of Ibadan.

- Research Advisors (2006). Table for determining sample size. Retrieved on 15/2/2017 from www.researchadvisors.com/tools/samplesize.htm.
- Serby, M. & Yu, M. (2003). Overview: Depression in the Elderly. *The Mount Sinai Journal of Medicine*, 70(1), 38-44.
- Shehu, S. (2006). A study of teachers perception and response to stress- induced Depression among Senior Secondary School Students in Kano State. An unpublished PhD thesis, Usmanu Danfodiyo University, Sokoto.
- Suleiman, J. (2016). Influence of Depression on the Academic Performance of Senior Secondary School Students in Kaduna state. An unpublished M.Ed. Dissertation, Ahmadu Bello University, Zaria.
- World Health Organization (WHO) (2012). Mental Health. Retrieved on 6/16 2016 from www.who.int/mental_health/media/investing_mnh.pdf