

WOLKITE UNIVERSITY



**ASSESSMENT OF ANXIETY AND DEPRESSION SYMPTOM (IN CASE
OF MEDICAL ENGINEERING AND TECHNO COLLEGE FIRST YEAR
WOLKITE UNIVERSITY STUDENT)**

COLLEGE OF EDUCATIONAL AND BEHAVIORAL SCIENCE

DEPARTMENT OF PSYCHOLOGY

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PREPARED BY: AGEGNEHU MOLLA

ADVISOR: TEMESGEN MELAKU. (MSC)

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ABSTRACT

The study was conducted on assess the prevalence of anxiety and depression symptoms among first year students in medical health and engineering and technology College in wolkite university. The main objective of this study is to assess to assessed the prevalence of depression and anxiety particularly gender and age difference and the existence of anxiety and depression among Wolkite university student. Both primary and secondary data were used to accomplish this study. the quantitative and Quantitative data would be collected through standardized scale of beck`s anxiety and depression close ended questioner and assessed the depression and anxiety scale, which was adopted from different literature quantitative data collection instrument would be used for these study. Then analyze the data with regarded to the objectives of the studied descriptive statics such as, frequency, percentage, were employed to determined the demographic characteristics of the respondent prevalence of anxiety and depression and significant gender difference in the development depression and anxiety among participants of the studied it was analyzed, interpreted and present. Finally the researcher made finding, showed that The prevalence of depression and anxiety in first year female students were highly affected by anxiety and depression stress due to the college life can have dramatic consequence for the mental health and well binge of university student`s anxiety and depression are the most dominant screened mental health problem among university students.

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CHAPTER ONE

INTRODUCTION

1.1. BACK GROUND OF THE STUDY

Depression means a common mental disorder that presents with depressed mood, loss of interest or pleasure, decreased energy, feelings of guilt or low self-worth, disturbed sleep or appetite, and poor concentration. Moreover, depression often comes with symptoms of anxiety. These problems can become chronic or recurrent and lead to substantial impairments in an individual's ability to take care of his or her everyday responsibilities. Anxiety means an Unpleasant emotion characterized by a general sense of danger, dread, and Physiological arousal, a state of alarm in response to a vague sense of being in danger.

Anxiety is an Unpleasant emotion characterized by a general sense of danger, dread, and Physiological arousal, a state of alarm in response to a vague sense of being in danger,

Anxiety symptoms, In anxiety, the main feeling is insecurity, either related to an expected situation of fear or as a general feeling (Parker & Eysers, 2010). Anxiety related to fear is often accompanied by mental activation (e.g. fear of dying, getting angry, losing control) and physical activation like freezing, being startled, heart rate and blood pressure changes

increased vigilance (Rosen & Schulkin, 1998). These are both called normal adaptive anxiety. In contrast, pathological anxiety is when there is no real mental or physical hazard or when the reaction is not in proportion to the current threat. But there is a lack of study about the prevalence of anxiety and depression in university students in developing counters in general and in Ethiopia particular.

Sever stress reactions may therefore result as a nature of their appraisal and response to wards the change, manifesting as differing mental health problem (sample & Aunola, 2007).

The mental health of university students is increasing concern globally, because of different factors student are becoming vulnerable to different psychological disorders.

Despite being one of the leading causes of disability worldwide, fewer than 10% of depressed individuals in low-resource settings have access to treatment. Mounting evidence suggests that no specialist workers are capable of providing counseling and case management at the

community level. They often use brief psychiatric screening instruments as clinical tools to identify cases and monitor symptoms over time. In order for such tools to be used in diverse settings, they must demonstrate adequate reliability and validity in addition to cross-cultural relevance. To be used to guide routine care they also need to be flexibly adapted and sensitive to change

Depression is the most common and disabling mental illness in the globe. It accounts for about 6.5% of the burden of diseases in Ethiopia. Regardless of its severity and relapse rate, there are no synthesized evidences about its prevalence and potential risk factors in Ethiopia. The aim of this review was thus to synthesize scientific information about the prevalence and potential risk factors of depression in Ethiopia

The higher prevalence of major depression among females than males has been consistently observed among adults in the general population (Weissman & Klerman, 1977; Lynn & Martin, 1997; (Cyranowski et al., 2000); Kendler et al.

Depression is a chronic mental health condition that affects millions of individuals worldwide which is characterized by loss of interest or pleasure, feelings of guilt or low self-worth: disturbed sleep or apatite, low energy, and poor concentration, insomnia or hyper someone and occasionally suicidal thoughts. Depression often occurs as a result of adverse life events, such as; the loss of a significant person, object, relationship or health. However; it can also occur due to no apparent cause. These problems can become chronic or recurrent and lead to sub sagittal impairment in an individual ability to take care of there every day responsibilities (WHO, 2012).

The increasing of this different mental disorder among college students move away from home, for the first time and need to develop entirely new social contacts and are expected to take responsibility for their own needs. They may have difficulty adjusting to more rigorous academic expectation and the need to learn to deal with individuals of differing cultures and beliefs. (Seyedfat, emitafreshi & hagani, 2009).

Men and women both experience depression but their symptoms can be very different. Because men who are depressed may appear to be angry or aggressive instead of sad, their families, friends, and even their doctors may not always recognize the anger or aggression as depression

symptoms. In addition, men are less likely than women to recognize, talk about, and seek treatment for depression

a woman has a depressive disorder, it interferes with daily life and normal functioning, and causes pain for both the woman with the disorder and those who care about her.

1.2 Statement of the problem

In recent years depression and anxiety have afflicted university student at alarming rates. the top reason that university students seek counseling several other studies have found that the mobile phone addiction as well as excess smart phone use is also associated with increase sleep disturbance depression and anxiety, almost 50% of university students indicate they woke up at night to answer text message this shows that nearly half of fireth student are affect with depression and anxiety (zeleke bisrat .2017)

Therefore, the present study will be conducted to assess anxiety and depression among first year under graduate university students, in Wolkite University Ethiopia.

Evidence suggests that university students are vulnerable to mental health problem so that it is increasingly became public concerns in many societies (Stanley & manthorpe, 2001). Previous studies showed that high rates of psychological morbidity, especially depression and anxiety among university students all over the world (Adewuya,et al ,2006; Nerdrum et al,2006;Ovuga et al,2006;Voelker,2003). Edwards and Holden (2001) found that among college students seeking counseling service, anxiety and depression where ranked first and third respectively as presenting problems; academic and work related concerns were ranked second as the presenting problem. In addition to these preeti Sharma and nadeem (2013) has conducted research on a total of 661 nursing students to examine the prevalence of depression, anxiety and symptoms of stress among baccalaureate nursing students in Hong Kong and found that 35.8%, 37.3% and 41.1% respectively.

Studies indicated that the prevalence of depression and anxiety among university student is different across gender. For instance, Kessler, mcgongel, Swartz, blazer, & nelson (1993) had concluded that females typically have higher prevalence depression than male. These, more research is needed to determine the magnitude of anxiety and depression among university

students. My research it will be create awareness in university students about anxiety and depression.

Therefore, this is study seeks to address this gap in knowledge and filling the gap on prevalence of anxiety and depression by focusing on university student in Wolkite University.

1.3 Research questions

1. To what extent anxiety symptom is prevalent among first year students in medical health and engineering and Technology College?
2. To What extent depression symptom is prevalent among first year students in medical health and engineering college?
3. Is there gender difference in the mean score of anxiety symptom among students?
4. Is there gender difference in the mean score of depression symptom among students?

1.4 Objective of the study

1.4.1 General objective

The main objective of this study is to assess the prevalence of anxiety and depression symptoms among first year students in medical health and engineering and technology College?

1.4.2 Specific objective

The specific Objective of this research are:-

- To assess prevalence of depression symptom among Wolkite university first year student.
- To assess if there is gender difference in the mean score of depression among students.
- To examine if there is gender difference in the mean score of anxiety among students
- To assess prevalence of anxiety symptom among first year student medical health and engineering and technology college.

1.5 Significance of the study

This research would contribute a lot for different institutions and individuals, our university would get information about how much anxiety and depression were prevalent to give emphasis and prepare a good treatment plan for the student.

Currently, the literature that existed on anxiety and depression among university students in Ethiopia is sparse. Therefore, there is a need to quantify the prevalence rate of mental illness in general anxiety and depression in a particular group among Ethiopian university students to plan for the treatment of anxiety and depression to maintain their mental health status. Hence, the study revealed that the prevalence of anxiety and depression among the participants was high and at a risk stage, the university probably the ministry of health can mount a strategy that would make psychological services attractive to the student. With regards to the target population after this study has been conducted it would play a greater role for the student of Wolkite University; to know and understand their screening rate of anxiety and depression, and accordingly if any of them is assessed with a critical need of clinical help in the screening instrument of anxiety and depression, the professional recommendation of this study would help them to reach an effective treatment solution. In addition to this the present study would contribute to the existing limited knowledge. This study would be important to inform students, teachers and parents to enhance their student self-confidence in the time of presentation. Then all could do something to reduce the problems, and also important for other researchers as in put on the topic.

1.6 Scope of the study

In this research a descriptive design would be used to identify the assessment of anxiety and depression among Wolkite University College of health and engineering & technology students. The ground for selecting a descriptive type of research design was that it was clear that the researchers would simply describe the available situation which already exists.

This study is delimited to Wolkite University Engineering and technology college and Medicine and health to assess the prevalence of depression and anxiety particularly gender and age difference among Wolkite university students.

1.7. Limitation of the study

Certain limitations should be kept in mind when interpreting the result of this study. In the present study, the researcher focused on depression and anxiety, and these did not examine the full range of mental health problems prevalent in student population.

1.8. Operational definitions of terms

Anxiety: means a fear of losing control and feelings of choking. However, when a person regularly feels disproportionate levels of anxiety, it might become a medical disorder.

Depression: Sadness, feeling down, having a loss of interest or pleasure in daily activities.

CHAPTER TWO

2. LITERATURE REVIEW

This chapter presented the literature review conducted for the present study. It started with a brief definition of basic terms such as depression and anxiety, and then it moved to reviewed in relation to prevalence of depression and anxiety among the respondents and finally it moved to the gender difference on the development of anxiety and depression.

2.1 The concept of depression and anxiety

What is depression?

students with alcohol dependence was 23.8%. Depression was a stated of low mood and aversion to activity that can affected the person behavior, thought, feelings and sense of wellbeing (APA, 2013; Salmans, 1997). according to the DSM5 depression exist in ten different forms starting with major depression, persistent depressive disorder, bipolar disorder, seasonal affective disorder, psychotic disorder, postpartum depression, premenstrual dysphonic disorder, situational depression, and atypical depression (APA, 2013). Lambert, holzer & bun, (2014) & APA, (2013) Identified that from these ten categories of depression the most consistent with traumatic experience are;

- 1) Major depression disorder
- 2) Bipolar disorder (known as manic depression)
- 3) Persistent depressive disorder (formal name dysthymia.)

But for this study major depressive disorder is the major concern which is characterized by UN willingness to work, eat study and even sleeps in other words the lack of enthusiasm to live life. Usually it happens twice in a life time for no war veterans. However, for a war exposed veteran with PTSD, it can occur frequently (Lambert, holzer & hasbun, 2014; APA, 2013).

2.2. Depression symptoms

Depression symptoms include:

- Feelings of sadness or unhappiness
- Irritability or frustration, even over small matters
- Loss of interest or pleasure in normal activities
- Reduced sex drive
- Insomnia or excessive sleeping
- Changes in appetite depression often cause decreased appetite and weight loss.

2.3 What is anxiety disorder?

Anxiety disorder- defined by excess worry, hyper arousal, and fear that is counterproductive and debilitating-are some of the most common psychiatric conditions in the western world (Simpson et al. 2010). The prevalence of anxiety disorder in the United States is estimated to be 18% (Kessler et al. 2005). And the annual cost is reported to be 42.3 billion (Greenberg et al. 1999). In the European Union (EU), over 60 million people are affected by anxiety disorder in a given year, making them the most prevalent psychiatric conditions in the EU (Witcher et al. 2011). The global burden of disease (GBD) study estimated that anxiety disorder contributed to 26.8 million disability adjusted life years in 2010 (Whiteford et al. 2013). While a number of reviews have focused on the burden of depression and its economic, social and health care policy implications, substantially fewer have assessed anxiety.

2.4. The prevalence of depression among college students

Related literature about the prevalence of depression among college students showed that it was high among them. For instance, Furr et al. (2001) studied depression among college students in 939 college students. They found that 14.9 percent of those students were depressed. American College Health Association's National College Health Association (ACHA-NCHA) (2004) reported that 10.3% of students had ever been diagnosed with depression, and according to ACHA-NCHA reference group report

(2004) 14.9% of students reported having ever been diagnosed with depression, 25.2% said they are currently in therapy for depression, and 38% said they are currently taking medication for depression. Almost 40% of men and 50% of women reported feeling so depressed that they had difficulty functioning one or more times during the last school year.

In addition to this American college health association (2002) in a survey study found that 11.8 percent of college students have received a diagnosis of depression in their life time. Furthermore, adewuya (2006) has conducted a research aimed to estimate the prevalence of major depressive disorder (MDD) among Nigerian college students with alcohol related problems (ARP) and compare the estimated prevalence with their counterparts without ARP. Study was a cross sectional survey of representative sample of students (n=2658) in six colleges in sun state, western Nigeria. Result showed that prevalence of MDD in college

2.5. Prevalence of anxiety among university students

Sarthe and jeewanthika (2016) have conducted a cross sectional study at department of nursing, faculty of allied health science, university of peradeniya using purposive sample of 92 undergraduate nursing students completed a presented self- administration questioners and found that 59.8% of the participants were screened positive for anxiety .a study from Lithuania found that symptoms of anxiety and symptoms of depression were prevalent in medical students at 43% and 14%, respectively (bunevicius, katkute, &bunevicius, 2008). Several studies from turkey have also revealed a high prevalence of anxiety and depression among university student (aktkein et al, 2001; bayram&bilgel, 2008; bostanchi et al., 2005; karaoglu& seeker, 2010; ozdemir&rezaki, 2007).

A study conducted by esinberget,al (2007) at a large cross-sectional study from the united states, indicated that 15.6% of under graduate and 13.0% of graduate students reported suffering a depressive or anxiety disorder. Anxiety alone was reported by 4.2% of under graduate and 3.8% of graduate students. Out of these reporting anxiety disorder , the majority indicated that they were suffering from generalized anxiety disorder (2.9% of under graduate, 3.1% of graduate student) rather than panic disorder (1.8%, 1.1%).are The gender difference in levels of reporting.

2.6. Gender difference in anxiety and depression among university student

Men and women both experience depression but their symptoms can be very different. Because men who are depressed may appear to be angry or aggressive instead of sad, their families, friends, and even their doctors may not always recognize the anger or aggression as depression symptoms. In addition, men are less likely than women to recognize, talk about, and seek treatment for depression

a woman has a depressive disorder, it interferes with daily life and normal functioning, and causes pain for both the woman with the disorder and those who care about her. Depression is a common but serious illness, and most who have it need treatment to get better. Depression affects both men and women, but more women than men are likely to be diagnosed with depression in any given year

Bogging and Barrett (1991) have examined gender difference on the BDI among college students and found that females reported more depressive symptoms than males. In addition to these Alfred and Sigelman (1998) studied a longitudinal investigation of sex difference in symptoms of depression during the transition to college in a sample of 287 college students. Survey data were collected at a summer Orientation and one semester into freshman year. Results indicated that females were more depressed than males at both times, although depressive symptom scores increased in both sexes. LIOLYD and Miller (1997) has also studied gender difference in depression among college students. Results showed that medical students at the University of Texas shared similar rates of depression, while medical students at the University of Edinburgh showed higher rates of depression in females.

Eisenberg et al. (2007) in United States found the prevalence of an anxiety disorder in females was twice that of males. However, these may be due to higher incidences of reporting among females than males.

CHAPTER THREE

3. RESEARCH METHOD

3.1 Research Design

This study would use descriptive, survey design type of research design. Descriptive research tried to painted a picture of a given situation by addressing who, what, where, and how questions William, G.(1984).The reason that the researcher to used descriptive type of research into describe and assessed anxiety and depression symptoms among first year students in Wolkite university in health and engineering college.

3.2 study area

The site was located in Guraga zone SNNPE regional state, Wolkite university was one of the Ethiopian public university established in 2012, with the action of producing highly qualified graduates who would be able to served with highest possible dedication for the successes of the country was growth and transformation plan, it was located approximately 168km from Addis Ababa reported from SNNPE.

3.3 population and sampling technique of the study

The general population of that studied were first year students of Wolkite University in engineering and Technology and Medicine and Health College, the Main reasons to choose that because the researcher thinks the course mode of delivery, difficulty level and the overload of the curriculum subjected/ exposed the students with anxiety and depression. So, that I was eager to see prevalence's of anxiety and depression as a psychology graduated.

As the studied would be taken pre-assessment, there were about 3510 first year students in Wolkite university main campus of college educational and behavioral science. In engineering and Health College there were 600 students in number, from these 350 are male and 250 are females. To determined the total of respondents as a sample size from the given population the researcher used Yamane sample size determination formula.

$$n = \frac{N}{1 + N(e)^2}, \text{ where } n = \text{sample size}$$

N=total population

E=level of precision or error

If 10% is selected as an error

$$n = N / (1 + N (e)^2)$$

Sample size of male as follow:-

$$n = N / (1 + N (e)^2) \text{ Then } n = 350 / (1 + 350(0.1)^2)$$

$$350 / 4.5 = 78$$

Sample size of females as follow:-

$$n = N / (1 + N (e)^2) \text{ then } n = 250 / (1 + 250(0.1)^2)$$

$$250 / 3.5 = 71$$

$$n = 78 + 71$$

$$n = 149$$

3.4 Method of data collection

In order to get the detailed information on the existed one of symptoms of anxiety and depression among first year students of Wolkite university, the quantitative and Quantitative data would be collected through standardized scale of beck`s anxiety and depression close ended questioner and assessed the depression and anxiety scale, which was adopted from different literature quantitative data collection instrument would be used for these study.

3.5 Method of data analysis

To analyze the data with regarded to the objectives of the studied descriptive statics such as, frequency, percentage, were employed to determined the demographic characteristics of the respondent prevalence of anxiety and depression and significant gender difference in the development depression and anxiety among participants of the studied it was analyzed.

3.6 Ethical considerations

Before the researcher started data collected, the researcher would received formal letter of cooperation from the of Wolkite University, Educational and Behavioral Science faculty department of psychology. Then the relevant studied area would be approached through that formal letter of cooperation to get the desired data. All studied participants would be also informed about the purpose of the studied and the right to refused filing the questionnaire at any time when they want to done, so the secrets of participants would be kept to assured confidentiality. The participants would be requested for their consent to be member of this research prior to the distribution of the questionnaire .Beside to this the maximum effort would be done to overcome ethical concerned of the participants.

CHAPTER FOUR

4 RESULT, ANALYSIS, INTERPRETATIONS AND DISCUSSION

Table4.1 demographic variable

<i>GENDER</i>					
<i>Male</i>		<i>Female</i>		<i>Total</i>	
<i>Count</i>	<i>Percentage</i>	<i>Count</i>	<i>Percentage</i>	<i>Count</i>	<i>percentage</i>
78	52%	71	48%	149	100%

Source on own survey 2019

As indicated in the above table from the total of 149 students 78(52%) were male and 71(48%) were female students

Table 4. 2 Symptom of Depression

Note; - key for scales

0= not at all

1= mildly (it did not bother me much.)

2= moderately (It was very unpleasant but I could stand it.)

3= severely (I could barely stand it.)

Item	Quotation	0	1	2	3	Total
1	Sadness	20(13%)	27(18%)	52(35%)	50(34%)	149(100%)
2	Pessimism	22(15)	16(11)	50(34)	61(40)	149(100%)
3	Past failure	29(19)	24(16)	58(39)	42(28)	149(100%)
4	Loss of pleasure	39(26)	20(13)	28(19)	62(42)	149(100%)
5	Self dislike	30(20)	29(19.5)	42(28)	48(32)	149(100%)
6	punishment feeling	32(21.47)	37(24.8)	48(32.21)	32(21.47)	149(100%)
7	I feel the same about Myself	10(7)	57(38)	20(13)	62(42)	149(100%)

8	self-criticalness	25(16.78)	32(21.47)	38(25.5)	54(36.24)	149(100%)
9	suicidal thoughts or wishes	59(39.6)	48(32.21)	22(14.76)	20(13.42)	149(100%)
10	Crying	35(23.48)	54(36.24)	32(21.47)	28(18.79)	149(100%)
11	Agitation	33(22.14)	45(30.2)	52(34.89)	19(12.75)	149(100%)
12	loss of interest	21(14)	25(17)	42(28)	61(41)	149(100%)
13	Indecisiveness	62(42)	24(16)	43(29)	20(13)	149(100%)
14	I have not lost interest in other people or activities	52(35)	34(23)	43(29)	20(13)	149(100%)
15	loss of energy	44(30)	30(20)	23(15)	52(35)	149(100%)
16	Changes in sleep patterns	46(31)	32(21)	20(13)	51(34)	149(100%)
17	Irritability	10(7)	59(40)	62(42)	18(12)	149(100%)
18	Change in appetite	40(27)	31(21)	60(40)	18(12)	149(100%)
19	Concentration difficulties	20(13)	41(26)	50(34)	38(26)	149(100%)
20	Tiredness or fatigued	21(14)	30(20)	58(39)	40(27)	149(100%)
21	loss of interest in sex	30(20)	23(15)	56(38)	40(27)	149(100%)

Source on own survey 2019

As indicated in the above table 4.1 first item the total of 149 participant (52(35%) of respondents were moderate level feeling of sadness, 50(34%) of were severely feeling of sadness, 27(18%) of respondents were mildly level feeling of sadness and 20(13%) of were not at all feeling of sadness. From these the researcher understand that the majority percent of respondents were most of the time moderate level and severely feeling of sadness in Symptom of Depression.

From the above table 4.1 second items 61(40%) of respondents were severely feeling of pessimism, 50(34%) of respondents were moderate level feeling of pessimism, 22(15%) of

respondents were severely feeling of pessimism and 16(11%)of respondents were not at all feeling of pessimism. From this the researcher concludes that the majority percent of respondents were severely feeling of pessimism.

From the above table 4.1 third item 58(39%)of respondents were moderate level feeling of past failure, 42(28%)of respondents were severely feeling of past failure.29(19%)of respondents were not at all feeling of feeling of past failure and 24(16%)of respondents were mildly level feeling of past failure. From this the researcher concludes that the majority percent of respondents were moderate level feeling of past failure.

From the above table 4.1 tenth item

Table 4. 3 Symptom of Anxiety

Note;- key for scales

0= not at all

1= mildly (it did not bother me much.)

2= moderately (It was very unpleasant but I could stand it.)

3= severely (I could barely stand it.)

Item	Feelings	0	2	3	4	Total
1	Difficulty breathing	20(13.42%)	29(19.46%)	68(45.6%)	32(21.47%)	149(100%)
2	Difficulty sleeping at night	15(10)	35(23)	70(47)	29(19)	149(100%)
3	Dizzy or lightheaded	69(46)	35(23)	25(17)	20(13)	149(100%)
4	Face flushed	75(50)	45(30)	22(15)	7(5)	149(100%)
5	Faint	78(52)	45(30)	22(15)	3(2)	149(100%)
6	Fear of dying	69(46)	48(32)	24(16)	8(5)	149(100%)
7	Fear of losing control	35(23)	70(47)	25(17)	19(13)	149(100%)
8	Fear of the worst happening	72(48)	20(13)	32(21)	25(17)	149(100%)
9	Feeling hot	20(13)	25(17)	68(46)	36(24)	149(100%)
10	Feelings of choking	82(55)	20(13)	25(17)	22(15)	149(100%)
11	Hands trembling	20(13)	26(17)	70(47)	33(22)	149(100%)
12	Heart pounding or racing	70(47)	5(3)	75(50)	1(0.67)	149(100%)
13	Indigestion or discomfort in abdomen	75(50)	35(23)	33(22)	6(4)	149(100%)
14	Nervous	14(9)	55(37)	67(45)	13(9)	149(100%)
15	Numbness or tingling	15(10)	50(34)	70(47)	14(9)	149(100%)
16	On edge	79(53)	52(35)	10(7)	8(5)	149(100%)
17	Racing thoughts	30(20)	25(17)	75(50)	19(13)	149(100%)
18	Shaky	10(7)	30(20)	82(55)	27(18)	149(100%)
19	Terrified	48(32)	22(15)	69(46)	10(7)	149(100%)
20	Terrified	35(23)	47(31)	72(48)	5(3)	149(100%)
21	Unable to relax	25(17)	68(46)	45(30)	11(7)	149(100%)
22	Unsteady	53(36)	38(26)	51(34)	7(4)	149(100%)
23	Wobbliness in legs	47(32)	22(15)	53(36)	27(18)	149(100%)

Source on own survey 2019

From the above table 4.3 question 1, 68(45.6%)of respondents were moderately difficulty breathing, 32(21.47%) of respondents were severely difficulty breathing29(19.46%). of

respondents were mildly difficulty breathing and 20(13.42%)of respondents were severely difficulty breathing. From this the researcher concludes that the majority percent of respondents were moderately difficulty breathing,

From the above table 4.3 question 2, 70(47%) of respondents were moderately difficulty to sleep at night 29(19%) of respondents were severely, 35(23%) of respondents were mildly difficulty to sleep at night and15(10%) not at all difficulty to sleep at night From this the researcher concludes that the majority percent of respondents were moderately difficulty to sleep at night

From the above table 4.3 question 7, 70(47%) of respondents were mildly Fear of losing control, 35(23%) of respondents were not at all Fear of losing control, 25(17%) respondents were moderately Fear of losing control and 19(13%) of respondents were severely Fear of losing control, So the researcher concludes that the majority percent of respondents were mildly Fear of losing control

As the above table 4.3 question 13 indicate, 75(50%) of respondents were not at all Indigestion or discomfort in abdomen, 35(23%) of respondents were mildly Indigestion or discomfort in abdomen, 33(22%) of respondents were moderately Indigestion or discomfort in abdomen and 6(4%) of respondents were severely Indigestion or discomfort in abdomen. So the researcher concludes that the majority percent of respondents not at all Indigestion or discomfort in abdomen.

As the above table 4.3 question 18 indicate, 82(55%) of respondents were moderately shaky, 30(20%) of respondents were mildly shaky, 27(18%) of respondents were severely and the remaining 10(7%) of respondents were not at all shaky.

As the above table 4.3 question 23 indicate, 53(36%) of respondents were moderately Wobbliness in legs, 47(32%) of respondents were not at all wobbliness in legs, 27(18%) of respondents were severely Wobbliness in legs and 22(15%) of respondents were mildly so most of the time found on moderate and not at all Wobbliness in legs. Generally from the above table participants were at moderate level of feeling in symptom of anxiety

Table 4.4 Gender difference on Anxiety and depression symptoms

Symptom	level	Gender					
		Male		Female		Total	
		Count	percentage	Count	Percentage	count	percentage
Anxiety	Have anxiety symptom	36	24%	40	27%	76	51%
	Medium	29	19%	16	11%	45	30%
	No anxiety symptom	15	10%	13	9%	28	19%
	Total	78	52%	71	48%	149	100%
depression	Have depression symptom	32	21%	35	23%	67	45%
	Medium	30	20%	23	15%	53	35%
	No depression symptom	16	11%	13	9%	29	20%
	Total	78	45%	71	55%	149	100%

Source; own survey 2019

From the above table 4.4 item 1 shows that, 36(24%) of males respondents were have anxiety symptom and 40(27%) of females respondents were have anxiety symptom from this the majority of respondents were 40(27%) more of females respondents were have anxiety symptom than males.

From the above table 4.4 show that, 29(19%) of males respondents were have medium symptom and 16(11%) of females respondents were have medium symptom. From this the majority of respondents were, 29(19%) more of males respondents were have medium anxiety symptom than females.

From the above table 4.4 show that, 15(10%) of males respondents were no anxiety symptom and 13(9%) of females respondents were no anxiety symptom. From this the researcher conclude that 15(10%) from the total (19%) males have no anxiety symptom.

From the above table 4.4 item 2 show that, 32(21%) of males respondents were have depression symptom and 35(23%) of females respondents were anxiety symptom of depression. From this the researcher conclude that 35(23%) from the total (45%) males have depression symptom.

From the above table 4.4 item 2 show that, 30(20%) of males respondents were have medium have depression symptom and 23(15%) of females respondents were medium symptom of depression. From this the researcher conclude that 30(20%) from the total (35%) males have medium depression symptom.

From the above table 4.4 item 2 show that, 16(11%) of males respondents were have no depression symptom and 13(9%) of females respondents were no depression symptom. From this the researcher conclude that 16(11%) from the total (20%) males have medium depression symptom.

4.5 The prevalence of depression and anxiety in first year students

As generally the prevalence of depression and anxiety in wolkite university students were highly affected by (51%) of anxiety and (45%) of depression in wolkite university students were affected.

4.6. Discussion

This chapter presents the discussion of the major findings of the study. The order of the discussion presented in this chapter follows that of the results sectn; hence, the first section provides discussion of the results of the study on the prevalence of depression among first two discusses the results of the study on the prevalence of anxiety among respondents of the study. Section three offers the discussion of results showing the presence of significant difference in the level of anxiety and depressive symptoms –and gender difference anxiety and depressions. The discussion also contrasts the findings of the present study with the reports of the previous studies. With respect to anxiety symptom studies show that women have higher prevalence than men. (tagifard etal 2014).

CHAPTER FIVE;

SUMMARY, CONCLUSION AND RECOMANDATION

5.1 Summary

As literature indicated that prone to stress due to the transitional nature of college life can have dramatic consequence for the mental health and well being of university student's anxiety and depression are the most dominant screened mental health problem among university students. Therefore, the objective of this study was to assess the existence of anxiety and depression Hence, to answer the basic research question of the, present study of 149 participants were consent simple random sampling method from medical health and engraining technology college wolkite university students. The data was collected using a self administered questioner called back which consisted of primarily developed aiming to measure severity of anxiety among the participants the instrument has also translated and back translated by research advisor in wolkite university in to Amharic language, then the data was entered to and was analyzed using descriptive frequency, percentage.

Accordingly, with regards to the existence of anxiety and depression among the 149 participants of the study (in which females are greater than male 36(24%) i.e. 36 male 40 female respondents had depression symptom and 29(19%) male and 16(11%) female respondents showed medium on depression symptom so male greater than females and (10%) i.e. 15 male and 13(9%) female students showed the respondents had no anxiety and depression symptom.

Furthermore, with regards to the gender difference in anxiety and depression among participants of the study, result of the indicated that there is significant gender difference in the high score of anxiety, but not depression.

5.2 conclusions

The study involves 73 university students who were wolkite university medical health and engraining technology college wolkite university students. The main objective of the study was to assess the prevalence of depression and anxiety among first year university students. Data was collected through adapting they HAD to screen the prevalence of depression and anxiety. The findings of the study gained through HAD indicated that among participants of these 55% were screened for depression symptom 48% were also screened for anxiety symptom. Hence the present study has conclude that there is a significant prevalence of anxiety and depression among the university student which is consistent with the findings of sarath and jeewanthika, (2016) who have conclude a cross sectional study at department of nursing, faculty of allied health since, university of peradenya using purposive sample of 92 undergraduate nursing student and found that 59.8% of the participants were screened positive for anxiety, study form Lithuania 43%(bunevicius,katkute, &bunevicius,2008), and with the finding of the Americancollegestudents was 23.8%, in addition to these the present result is similar with preeti Sharma and nadeem(2013) who have conducted a researcher studyon a total of 661 nursing students to examines the prevalence of depression, anxiety and symptoms of stress among baccalaureate nursing students in Hong Kong and found that 35.8% 37.3% and 41.1%, respectively.

5.2 Recommendation

Based on the findings of the study this research has suggested the following points.

- Even though the institution (Wolkite University) has its own clinic, rather than physiotherapist and nurse who are mainly concerned with diagnosis and treated the physical illness, there are not any mental health professionals who can assist diagnosis and treat for patients with mental illness such as depression anxiety.
- Wolkite University as institution should establish counseling centers which involved mental health professionals such as psychologists, psycatrist, and social worker who can easily facilitate the diagnosing, assessing and treating of the different types of mental illness which are commonly affecting the university students.
- As findings of study revealed that significant amount of university students are screened with sever level of depression and anxiety so, we can conclude that mental health problems are significantly affecting the students.
- The university management and the government coordinately should give focus on this issue, and should facilitate the way in which these veterans could gate treatment from mental health professional.
- In general, policy makers, the government and other NGO should be to address the issue of anxiety and depression which are found in this study by giving life skill trainee programs aiming; increase the university student's awareness on how to use a healthy skill of coping mechanisms to decrease their level of anxiety and depression. And to give them psychology education about the nature, types, causes, effects, and treatment methods of mental health problems.

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**APPENDIX
WOLKITE UNIVERSITY**

COLLEGE OF EDUCATIONAL AND BEHAVIORAL SCIENCE

DEPARTMENT OF PSYCHOLOGY

Depression Assessment (Beck's Depression Inventory)

Instruction- The following part of the questionnaire have 21 items each respondents are expected to read every details of the alternatives and to circle on the feeling which is the same with them. If you got more than one alternative for the same group choose an alternative which have maximum degree.

1	Sadness	2	Pessimism
0	I do not feel sad	0	I am not discouraged about my future
1	I feel sad much time	1	I feel more discouraged about my future than I used to be
2	I am sad all the time	2	I do not expect things to work out for me.
3	I am so sad or unhappy that I cannot stand it much of the time	3	I feel my future is hopeless and will only get worse.
3	Past failures	4	Loss of pleasure
0	I do not feel like a failure	0	I get as much pleasure as I ever did from the things I enjoy.
1	I have failed more than I should have	1	I do not enjoy things as much as I used to
2	When I see the past everything I do is failed	2	I get very little pleasure from the things I used to enjoy
3	I feel I am a total failure as a person	3	I cannot get any pleasure from the things I used to enjoy

5	Guilty feeling	6	punishment feeling
0	I do not feel particularly guilty	0	I do not feel I am being punished
1	I feel guilty over many things I have	1	I feel may be punished
2	I feel quite guilty most of the time	2	I expect to be punished
3	I feel guilty all of the time	3	I feel I am being punished
7	I feel the same about myself	8	self-criticalness
0	I have lost confidence in myself	0	I do not criticize or blame myself more than usual
1	I am disappointed in myself	1	I am more critical of myself than used to be
2		2	I criticize myself for all of my faults
3	I dislike myself	3	I blame myself for ever thing bad that happens
9	suicidal thoughts or wishes	10	Crying
0	I do not have any thought of killing myself	0	I do not cry any more than I used to
1	I have thought of killing myself, but I would not carry them out	1	I cry more than I used to
2	I would like to kill myself	2	I cry over every little thing
3	I would kill myself if I had the chance	3	I feel like crying, but I cannot

11	Agitation	12	loss of interest
0	I am no more restless or would up than usual	0	I have not lost interest in other people or activities
1	I feel more restless or would up than usual	1	I am less interest in other people or thing s than before
2	I am so restless or agitated that is hard to stay still	2	I have lost most of my interest in other people or things
3	I am so restless or agitated that I have to keep moving or doing something	3	loss of interest
13	Indecisiveness	14	I have not lost interest in other people or activities
0	I make decision about as well as ever	0	I am less interest in other people or thing s than before
1	I find it more difficult to make decision than usual	1	I have lost most of my interest in other people or things
2	I have much greater difficulty in making decision than I used to	2	I feel more worthless as compared to other people
3	I have trouble making any decisions	3	I feel utterly worthless
15	loss of energy	16	Changes in sleep patterns
0	I have as much energy as ever	0	I have not experienced any change in my sleeping pattern
1	I have less energy than I used to have	1	I sleep somewhat more than usual

2	I do not have enough energy to do very much	2	I sleep somewhat less than usual
3	I do not have enough energy to do thing	3	I sleep a lot more than usual
17	Irritability	18	Change in appetite
0	I am no more irritable than usual	0	I have not experience any change in my appetite
1	I am more irritable than usual	1	My appetite is somewhat less than usual
2	I am much more irritable than usual	2	my appetite is somewhat greater than usual
3	I am irritable all the time	3	I crave food all time
19	Concentration difficulties	20	Tiredness or fatigued
0	I can concentration as well as ever	0	I am no more tired or fatigued than usual
1	I cannot concentrate as well as usual	1	I get more tired or fatigued more easily than usual
2	it is hard to keep my mind on anything for very long	2	I am too tired or fatigued to do a lot of the thing I used to do
3	I find I can't concentrate on anything than	3	I am too tired or fatigue to do most of the things I used to do
21	loss of interest in sex		
0	I have not noticed any recent changes in my		

	interest in sex		
1	I am less interested in sex than I used to be		
2	I am much less interested in sex now		
3	I have lost interest in sex complete		

Part-III: Beck's Anxiety Inventory (BAI)

Instruction: based on your feeling of the past week, please read each phrase and mark (X) on number

0,1,2,3 which indicate how much the phrase applied to you. Scale is as follow:

0= not at all

1= mildly (it did not bother me much.)

2= moderately (It was very unpleasant but I could stand it.)

3= severely (I could barely stand it.)

No	Feelings	1	2	3	4
1	Difficulty breathing				
2	Difficulty sleeping at night				
3	Dizzy or lightheaded				
4	Face flushed				
5	Faint				
6	Fear of dying				
7	Fear of losing control				
8	Fear of the worst happening				

9	Feeling hot				
10	Feelings of choking				
11	Hands trembling				
12	Heart pounding or racing				
13	Indigestion or discomfort in abdomen				
14	Nervous				
15	Numbness or tingling				
16	On edge				
17	Racing thoughts				
18	Shaky				
19	Terrified				
20	Terrified				
21	Unable to relax				
22	Unsteady				
23	Wobbliness in legs				