ADDIS ABABA UNIVERSITY

COLLEGE OF EDUCATION AND BEHAVIORAL STUDIES

SCHOOL OF PSYCHOLOGY

DEPRESSION, ANXIETY AND STRESS AMONG FIRST YEAR ADDIS ABABA UNIVERSITY STUDENTS: MAGNITUDE, AND RELATIONSHIP WITH ACADEMIC ACHIEVEMENT AND SELF-ESTEEM

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THIS THESIS IS SUBMITTED TO THE SCHOOL OF PSYCHOLOGY IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR MASTER OF ARTS DEGREE IN CLINICAL PSYCHOLOGY

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Abstract

Students experiencing psychological problems, such as depression, anxiety and stress, may face problems in managing their educational activities. The main objective of the study was to assess depression, anxiety and stress among Addis Ababa University first year students: its magnitude, relationship with academic achievement and self-esteem. To achieve the objective cross sectional research design was employed. This study could help many parties, such as educators, counselors, and psychologists to design and develop proper intervention programmes to reduce psychological problems among students. The main campus college of Social Sciences, college of Education and Behavioral studies and school of Social Work freshman students of Addis Ababa University students were the aggregate population of the study. The total number of population was 502. Of this 259 students were obtained by using proportionate stratified random sampling technique using colleges and departments as strata. DAS-S-depression, anxiety, stress scale, Rosenberg self-esteem scale and a questionnaires developed by the researcher to identify the factors of depression, anxiety and stress were used to collect the data. Quantitatively   the collected data was analyzed by using percentage, Pearson correlation, bi-point serial correlation chi-square and Univariate ANOVA. Among the participants 18.5 % of the respondents scored high on depression (13.1 %-mild and 5.4% were moderate in depression levels of severity), 28.6% scored high level of anxiety (13.1% mild, 14.7% moderate, and 0.8% severe) and 24% scored high level of stress (14.3% mild and 8.1% moderate level of stress). The Pearson correlation results indicate that the three independent variables have significant relationship with dependent variables (academic achievement and self-esteem). The results suggest that the early prevention of anxiety, depression and stress is critical since, if left untreated, it can have serious consequences on students' future health and career possibilities.

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List of Acronyms

- AAU-------------- ---Addis Ababa University Students

- CGPA------------------- Cumulative Average Grade Point

- DAS-----------------------depression, anxiety and stress

- DASS ----------------------depression, anxiety and stress scale

- RSES---------------------- Rosenberg Self-esteem scale

- SPSS--------------------------Statistical Package for Social Sciences

TABLE OF CONTENTS

List of Tables

List of graphs

CHAPTER ONE

INTRODUCTION

1.1. Background of the study

Performance in academic life demands all aspects of well-being, those that include physical, social, emotional, spiritual, and psychological well-being (Crystal, Chen, Fuligni, Stevenson, Hsu, Ko, Kitamura, & Kimura, 1994). Students who are physically and psychologically stable are expected to perform better compared to those who are not physically, mentally and psychologically fit. In other words, those who are experiencing psychological problems, such as depression, anxiety and stress, may face problems in managing their academic performance. Psychological stability is indeed an important predictor that could contribute to high academic achievement. Hence, it is very much crucial to review and examine the psychological well-being of the students.

While entrance to university or other tertiary education institutions is a joyous time, it can be a stressful life event for some students (Al-Qaisy, 2011). First year students are particularly at risk as they face a number of new stressors during the transitional period of starting a new life in university (Al-Qaisy, 2011). Just as all young adults, undergraduate students need to cope not only with psychological and psychosocial changes that are connected to development of an autonomous personal life but also with the academic and social demands that they encounter in university studies sin their preparation for professional carriers. Therefore the period of undergraduate education is a sensitive period in an individual's life span and this period is

regarded by many as important for developing system and intervention methods that may prevent or reduce mental problems (Gjerde, 2001).

Evidence suggests that university students are vulnerable to mental health problems has generated increased public concern in many societies (Stanley and manthrope, 2001). Previous studies suggest high rates of psychological morbidity, especially depression and anxiety, among university students all over the world (Adewuyal et al., 2006). Edwards and Holden (2001), found that among college students seeking counseling services anxiety and depression were ranked the first and third as presenting problems respectively.

Depression, anxiety, and stress were found to be interrelated to each other. The overlapping symptoms of these three psychological problems can lead to all sorts of academic problems that can give impact to academic achievement among students. For example, it has been found that students' performance in school, college, and university is influenced by the symptoms of depression (Fine & Carlson, 1994; Stark & Brookman 1994), stress (Dusselier, Dunn, Wang, Shelly, & Whalen, 2005), and anxiety (Anson, Bernstein, & Hobfoll, 1984) which could lead to difficulties in concentration, lack of motivation and interest, poor attendance, and physical health such as headache and fatigability. These conditions will influence students' academic achievement.

So the comorbid situation of these three mental disorders feed each other and influence students academic performance and leads students to other physical defect. Like other international and national universities Addis Ababa university is the university in which a lot of students from different ethnic group, religious background, cultural and educational ground learning.

A lot of studies were conducted in Addis Ababa University on depression, anxiety and stress by different scholars. But as far as the researchers reading there no enough research on comorbidity of three variables (depression, anxiety and stress).

The findings of such research may be used to prevent mental disorder, develop strategies and approaches to help students to excel in their academic life.

1.2.Statement of the problem

Depression, anxiety and stress are among the psychological problems that are common among students. Several studies have shown that performance in school, college or university is affected by symptoms of depression such as difficulties in concentration, lack of interest and motivation and preoccupation.

According to Porter (1990), up to 60% of university students left university without finishing their degrees; the majority of these students leave within the first and second years due to inability to manage these psychological conditions especially to cope with stress. Steinberg and Darling (1994) found that 50% of university students who consulted mental health service complained of difficulties in study, anxiety, depression and tension. They further reported that these conditions contributed to poor grades in courses.

The above findings indicate that many students suffer from psychological problems, which in turn affected their academic performance. Many studies were conducted to address this issue and it was found that psychological problems (i.e., depression, anxiety and stress) do have influence on the academic achievement of students. Williamson et al.,(2005), for example reported that stressful life events are significantly elevated in anxious and depressed youths and thus could lead to low performance in academic achievement .

A study by Md Aris Safree Md Yasin and Mariam Adawiah Dzulkifli (2010) also indicated the same results. They found that depression, anxiety, and stress negatively correlate with academic achievement. The higher the depression, anxiety, and stress, the lower the academic achievement among students.

The main research questions are the following

- What is the magnitude of depression, anxiety and stress among Addis Ababa University students?

- Is there a statistically significant relationship between Depression Anxiety, Stress and academic achievement?

- Is there a statistically significant relationship between Depression Anxiety, Stress and self-esteem?

- What are the main sources of depression, anxiety and stress among Addis Ababa University students?

   Based on the previous research, the reasons for conducting the current research could be the following.

- First not many studies were conducted to study psychological characteristics among undergraduate students in Addis Ababa University. The lack of research on mental health (depression, anxiety and stress) may hinder our understanding of psychological condition in relation to university functioning among students in Addis Ababa University.

- Second, depression, anxiety and stress were examined separately in several settings by several researchers and this study focused on their comorbid effects.

1.3. **Objectives of the study**

1.3.1. General objective

The overall objective of the study was to describe the extent/level of depression, anxiety and stress among Addis Ababa University students and relationship with their academic achievement

1.3.2. Specific objective

The specific objectives of the study were

- To assess the magnitude of depression anxiety and stress among the study participants

- To find out the relationship between depression, anxiety and stress with students' academic achievement

- To identify the relationship of depression, anxiety and stress with students' self-esteem

- To determine the factors that led students to depression, anxiety and stress (sources of DAS)

1.4. Significance of the study

The findings of the study will be useful in assisting

Educators –by observing the prevalence and impact of depression, anxiety and stress, the concerned bodies can take measures and can minimize or tackle these problems

Counselors –the counselor develop strategies and manage problems before the occurrence or at the initiation and take care for initial symptoms which will happen at the time of counseling and guidance sessions and even academic advising.

Clinical Psychologists-by identifying the factors that are leading students to depression, anxiety and stress because counselors are not the mere responsible body

Researchers- by observing this paper others may identifies other variables which were not be included in this thesis

In short, it is important to obtain information about students' psychological conditions and psychological growth in the university because it is very much related to their academic achievement

1.5. Delimitation of the study

The study is delimited on depression, anxiety, and stress among AAU first year students. It comprised AAU first year social science and behavioral and education college students. It focused on the relationship of DAS on academic achievement and self esteem. The causes for DAS were also identified by the levels of agreement that the students responded.

1.6. Operational definition

Depression – it involves feelings of bad, weak, disappointed, frustrated ,despairing ,helpless and measured by DASS-depression greater than or equal to the cut-off point of ten (Lovibond& Lovibond, 1995).

A score less than or equal to 10 on DASS indicates a normal situation.

A score greater than 10 on DASS indicates depression.

Anxiety --- it is a basic human emotion when someone is apprehensive about uncertain outcomes of an event and measured by DASS -anxiety greater than or equal to the cut-off point of seven (Lovibond& Lovibond,1995).

A score less than or equal to seven on DASS indicates normal situation.

A score greater than seven on DASS indicates anxiety.

Stress ---is a necessary and unavoidable concomitant of daily living and measured by DASS-stress greater than or equal to the cut-off point of fourteen(Lovibond& Lovibond,1995).

A score less than or equal to 14 on DASS indicates stress.

A score greater than 14 on DASS indicates stress.

Self-esteem –the students general evaluation about themselves and as measured by Rosenberg self-esteem scale

Academic achievement: students' total cumulative grade point divided by the total credit hours

Chapter Two

2. Review of literature

2.1. Definition, symptoms of Depression

Depression is defined in different ways by different scholars. According to Car (2001) depression is not simply bad. For Saron and Saron (2002), depression is feelings of being sad, weak, disappointed, frustrated, despairing, helplessness and hopelessness. Many depressed individuals may be unable to perform well in academic life because they donot have courage in what they are doing (Saron &Saron, 2002). Car (2001), characterize major depression as it is recurrent episodic condition involving low mood ; selective attention to negative features of the environment ;a pessimistic belief system; self defeating behavior patterns particularly with in intimate relationships ,disturbance of sleep and appetite(Car,2001).

Car (2001) characterized depressed individuals from many respects and are discussed as the following.

With respect to perception, having a suffered a loss, depressed individuals tend to perceive the world as if further losses were probable (Car, 2001). Car further stated depressed people selectively attend to negative features of the environment and this in turn leads them to engage in depressive cognitions and unrewarding behavior patterns which further entrench their depressed mood and even in severe cases on individuals may report mood congruent auditory hallucinations.

With respect to cognition, Car (2001) suggested depressed individuals may describe themselves, the world and their future in negative terms.

They evaluate themselves as worthless and are critical of their occupations and social accomplishments.

This negative evaluation is expressed as guilt for not living up to certain standards or letting others down (2001). They see their world, including family, friends and work or school as unrewarding critical and hostile or apathetic.

Car (2001), also seen from the context of affect. He described as low mood is a core feature of depression and involves a feeling of sadness, lonilessness and despair and inability to experience pleasure.

At behavioral level, depressed individuals may show either reduced or slowed activity levels (psychomotor retardation) or increased but ineffective activity (psychomotor agitation. they may show a failure to engage in activities that would bring them a sense of achievement or connectedness to family or friends, loss of energy, disturbance of energy or appetite, weight loss or failure to make age appropriate weight, abdominal pains or headaches and loss of interest in sex (car, 2001).

An interpersonal level, depressed individuals report deterioration in their relationship with families, friends, colleagues and their significant figures in their lives (Car, 2001). They describe themselves as lonely and yet unable or unworthy to take steps to make contact with others.

2.2. Definition and symptoms of anxiety

Huberty(2004), defined anxiety as one of the basic human emotions that occurs in every person at some time , most often when someone is apprehensive about uncertain outcomes of an event or a set of circumstances. Huberty found that anxiety can serve an adaptive function, however, and is also a marker for typical development. The study also showed in school setting, anxiety is experienced often by students when being evaluated, such as when taking a test or giving a public performance.

This study further stated most students cope with situations well, but there is a sub set of up to 30% of students experience severe anxiety , a condition of most often termed test anxiety(Huberty,2004).

According to Wilson, Nathan, O'leary and Clark (1996), anxiety is a psychological disorder that is associated with significant suffering and impairment. The study also found it is a blend of thoughts and feelings that is characterized by a sense of uncontrollability and unpredictability over potentially adverse life events (Wilson et'al., 1996).

A variety of natural and laboratory setting studies were conducted on the relationship between an anxiety and academic performance. Individuals experiencing anxiety show apprehensions that often interfere with everyday life as well as in academic situations.

In general, anxiety is expected to have negative effect on performance. Vogel and Collin (2002), consistent findings indicate that, individuals who have a high level of anxiety perform less well than those who have low anxiety. Another studies also showed the same results. For example the studies conducted by Anson et al., (1984) on the relationship between anxiety and academic performance was found that anxiety was significantly and negatively correlated with grades obtained by the students.

The way students experience and perception their academic related matter is also one of the factors that could affect the performance of students. For instance, Vogel and Collins (2000), stated that if an individual's experience of previous achievement is negative, the anxiety level is higher and it leads to lower performance.

Consequently, if the experience is positive, the anxiety level is lower and leads to higher performance. Overall, it is important to consider motives, aptitudes, cognitive assessments of the task, and the past experience when analyzing anxiety and examining how it relates to performance.

Andrews and Wilding (2004), in their study found that 40% of cohort of University College, London students had attended the student health clinic for psychological problems, characterized by anxiety, tension and poor concentration.

Anxiety was also studied by other scholars. For example Seligmen Wuyek (2007), in their study found that highly anxious students were significantly more likely to score lower on measures of academic achievement and poor acceptance. That means highly anxious students are lower on academic achievement and other characteristics. All of the above studies showed that anxiety can directly students' academic achievement. It was reported that anxiety could affect students'

academic achievement in the sense that students with high anxiety level perform poorer than those with lower anxiety.

2.3. **Definition and symptoms of stress**

Lazarus & Folkman (1984) defined Stress as it is a necessary and unavoidable concomitant of daily living- necessary because without some stress we would be listless and apathetic creatures, and unavoidable because it relates to any external event, is it pleasurable or anxiety producing. A person's response towards stress depends on whether an event is appraised as a challenge or a threat (Lazarus & Folkman, 1984). Challenging stimulus can lead to positive outcomes such as motivation and improved task performance while threatening ones or distress can result in anxiety, depression, social dysfunction and even suicidal intention.

Along with the improvements during the scientific era and the rapid development of information, competitiveness among people has become increasingly intense, as a consequence, people have become busier and, therefore, stress is a natural consequence (Lazarus & Folkman, 1984).

Lazarus and Folkman further stated, even though appropriate stress is a juncture for self-growth, it is also a motivation for people to progress actively. It not only affects our thoughts and feelings but our behavioral models, as well.

However, overstress causes problems and discomfort, and can have serious effects on people. Specifically, student faces the stress when they enter a completely new world of professional education.

Stress has become an important topic in academic circles. Many scholars in the field of behavioral science have carried out extensive research on stress and its outcomes and concluded that the topic needed more attention (Agolla, 2009). Stress in academic institutions can have both Positive and negative consequences if not well managed (Stevenson & Harper, 2006).

Academic institutions have different work settings compared to nonacademic and therefore one would expect the difference in symptoms, causes, and consequences of stress (Chang & Lu, 2007).

2.4. **Depression among Students**

A depressed mood is the experience of unhappiness or distress (Yasin & Dzulkifli, 2011). Yasin & Dzulkifl (2011),found that Depression involve feelings of being sad, weak, disappointed, frustrated, despairing, helpless, and hopeless (Sarason & Sarason, 2002). According to Yasin & Dzulkifli (2011), many depressed individuals may be unable to perform well in academic life because they do not have courage in what they are doing. Yasin & Dzulkifli further found that depressed individuals may feel that they are not reaching the standard of performance set for them. As a result they continuously feel disappointed and despairing. They also stated that depressed individuals perceive things negatively and consider themselves as failures. This condition can definitely contribute too many serious problems in their academic life such as poor grades Yasin & Dzulkifli, 2011).

Fine & Carlson, 1992 in their study shown that performance in school, college, or university was found to be affected by many symptoms of depression, such as difficulties in concentration, lack of interest and motivation, preoccupations, fatigability, and poor attendance (Yasin & Dzulkifli, 2011).

Surtees, Wainright, and Pharoah (2002) cited in (Yasin & Dzulkifli, 2011), in their survey, found these conditions reduced the likelihood of achieving a first-class degree among first-year students, although this relationship disappeared when adjustment was made for other factors such as homesickness.

Many clinical descriptive reports suggested that depression may be a contributing factor to poor academic performance (Fine & Carlson, 1994). Because of this, several approaches have been conducted to investigate the relationship between depression and academic achievement.

For example, Stark and Brookman (1994) obtained teachers' and parents' global ratings of students' academic performance and ratings of severity of students' depressive symptoms. The former was an instrument used to measure student's academic performance and study habit, while ratings of severity of students' depressive symptoms were used to measure the depression level of the students. The result of the studies showed that there was an inverse relationship between academic achievement and depression.

This notion was then supported by Zaid, Chan, and Ho (2007). The study on emotional disorders among medical students in one of the Malaysian private colleges found that students who experienced depression had a lower academic performance.

 Another study by Sherina, Lekhraj, and Nadarajan (2003) yielded that 41.9% students in one of the Malaysian public institutions were found to have depression. Some reported that their academic performance was affected by depression. This shows that depression affects the performance of the students i.e. the higher the depression, the lower is the academic achievement of the students.

Based on the above findings, it can be said that depression does affect academic achievement of the students. This means the higher the depression level of the students, the lower is their academic performance.

2.4.1. Characteristics of Students with Depression

Depression is not easy to identify. The U.S. Center for Mental Health describes the behavior of youth with depression: students with depression may sulk, refuse to participate in family and

social activities, get into trouble at school, use alcohol or other drugs, or stop paying attention to their appearance. They may also become negative, restless, grouchy, aggressive, or feel that no one understands them. Students with major depression are likely to identify themselves as depressed before their parents suspect a problem (Center for Mental Health Services, Washington, DC, 1998).

It is necessary to look at the typical symptoms of depression and see how each symptom may be manifested in a student, keeping in mind that students with depression do not necessarily exhibit all these characteristics. Many students experience the following characteristics from time to time (Huberty, 2004). When the following characteristics persist at the same time should be taken seriously. It is important to remember that one symptom will affect another. For instance, if students have trouble getting to sleep and want to avoid people, it may be difficult for them to summon the energy and motivation to maintain regular school attendance (Huberty, 2004).

Huberty (2004), found individuals with depression showed the following characteristics. overwhelming feelings of sadness or grief ,anger and irritability, avoiding other people, loss of interest in taking part in activities, difficulty concentrating and making decisions, loss of energy, unreasonable guilt, helplessness, or hopelessness, feeling overwhelmed by small things, sleep disturbances, substance abuse, thoughts of death, suicide, or harm to others.

2.5. Anxiety among students

In the majority of cases, test and performance anxiety is not recognized easily in schools, in large part because students rarely refer themselves for emotional concerns (Md Yasin &Dzulkifli, 2011). Md Yasin & Dzulkifli (2011) also stated not wanting to risk teasing or public attention,

anxious students suffer in silence and underperform on school-related tasks. Further the found that Anxiety is one of the most basic human emotions and occurs in every person at some time, most often when someone is apprehensive about uncertain outcomes of an event or set of circumstances. In addition the study found Anxiety can serve an adaptive function, however, and is also a marker for typical development. In the school setting, anxiety is experienced often by students when being evaluated, such as when taking a test or giving a public performance. Some students cope with these situations well, but there is a subset of up to 30% of students who experience severe anxiety, a condition most often termed test anxiety (Md Yasin&Dzulkifli, 2011).

Unless the above mentioned situations early prevented, the consequence will negative and leads to other comorbid problems.

Md Yasin & Dzulkifli in their study stated that when test anxiety is severe, it can have significant negative effects on a student's ability to perform at an optimal level. Over time, test anxiety tends to generalize too many evaluative situations, contributing to more pervasive underachievement. Additional consequences of chronic test anxiety can include lowered self-esteem, reduced effort, and loss of motivation for school tasks. Other forms of anxiety that can be seen in the school include generalized anxiety, fears, phobias, social anxiety, and extreme social withdrawal (Md Yasin & Dzulkifli, 2011).

2.5.1. Characteristics of Anxiety

The central characteristic of anxiety is *worry*, which has been defined by Vasey, Crnic, and Carter (1994) as "an anticipatory cognitive process involving repetitive thoughts related to possible threatening outcomes and their potential consequences" (p. 530).

Although everyone worries occasionally, excessive and frequent worry can impair social, personal, and academic functioning. It can contribute to feelings of loss of control and perhaps depression, especially in girls.

When people become highly anxious, they tend to view more situations as potentially threatening than do most of their peers. They have an irrational fear that a catastrophe will occur and feel that they are unable to control outcomes. Often, there a rational basis for the anxiety, but it is greatly disproportionate to the circumstances.

Huberty (2001), in his study identified the manifestation of Anxiety in three ways: cognitively, behaviorally, and physiologically. To Huberty, Often the symptoms are apparent in all three areas, such as worry, increased activity, and flushing of the skin. He further stated many of the behaviors exhibited by anxious youth reflect attempts to control the anxiety and minimize its effects. The majorities of students who are anxious are not disruptive and are more likely to withdraw and avoid anxiety-producing situations (Huberty, 2001). In addition in extreme cases, they may be seen by teachers as unmotivated, lazy, or less capable than their peers. On the other extreme, some students with performance anxiety may act out, consciously or unconsciously, as a way of avoiding the risk of being embarrassed or failing. School personnel should be aware of students whose disruptive or negative behavior aligns with upcoming performance-based assignments (Huberty, 2001).

2.6. Stress among Students

Stress is a mechanism of any internal or external demand made upon the body (Dusselier *et al.,* 2005). Dusselier et al., (2005), found that Stress is considered as a state of individuals that result from their interaction with the environment that is perceived as too demanding and a threat to their well-being. The stressors are not only physical, but may also involve emotions.

Stress was found to be a part of students' life and could give impact on how students cope with the demands of academic life. In Rawson, Bloomer, & Kendall(1999), Students reported experiencing academic stress at predictable times each semester with the greatest sources of academic stress resulting from taking and studying for exams, grade competition, and the large amount of content to master in a small amount of time .

There are models in studying stress in academic and other settings. One model that is useful to study in understanding stress among students is the person environment model (Misra & McKean, 2000). According to this model; individuals can appraise stressful events as challenging or threatening. It means for this model that when students perceived their education as a challenge, stress can bring them a sense of competence and an increase capacity to learn(Misra & McKean, 2000). They also stated However, when education is perceived as a threat; stress can elicit feelings of hopelessness and a foreboding sense of loss, thus leading to lower academic achievement.

Research shows that there exists a relationship between stressful life events and poor academic performance among university students and there is a connection between health-related quality of life and stress (Dusselier *et al.,* 2005; Misra & McKean, 2000).

Because stress adversely affects psychological and physical health, undergraduate students reported that stress was the most common health factor impacting their academic performance (Dwyer & Cummings, 2001).

Demakis and McAdams (1994) in their study which was focused on undergraduate students they found that undergraduate students who reported heightened levels of stress had significantly more physical health problems and less satisfaction towards academic achievement compared to those reporting lower levels of stress.

Several studies have investigated the association between striving for high academic achievement and stress. Ollfors and Anderson's (2007) study among Swedish youth showed that the greater the commitment to schoolwork was, the higher the level of perceived stress. Those adolescents who experienced the highest levels of stress also considered the demands placed on them to be far too great. Huan et al. (2008) found that students who rated school-related demands as one of their main sources of stress were also more likely to worry about their studies and feel overwhelmed by their workload. According to Murberg and Bru (2004), worries about school achievement and feeling that schoolwork is too demanding are particularly associated with psychosomatic symptoms. This suggests that pressure to achieve good grades as well as demanding schoolwork may be of importance in predicting psychosomatic symptoms among adolescents. According to Kaplan, Liu and Kaplan (2005), perceived stress not only has consequences on emotional adjustment but also on academic performance among adolescents. After then examining the role of personal academic expectations for academic performance, Kaplan et al. (2005) found that extremely high expectations were counterproductive, especially in a highly stressful school environment. In other words, high academic expectations, which

imply high perceived demands, may serve to increase school-related stress and thereby impede academic performance.

The perception of the stress by the students could play significant roles on its seriousness. Murphy & Archer (1996) in their study found that when stress is perceived negatively or becomes excessive, students experience physical and psychological impairment.

 Excessive stress among students was found to reduce effectiveness of their study which contributes to bad habits, and results in negative long-term consequences, including absenteeism, poor academic performance, and school dropout. Wintre and Yaffe (2000) found that increases in stress during the first year predicted decreased overall adjustment and made the students more vulnerable to many social and psychological problems, thus contributed lower grade point average (GPA) in the final year.

Social situation is another important factor in causing psychological problems. A more recent study showed that that social situation of the students could activate stress (Dusselier et al., 2005). It was found that timid individuals feel and sense stress more compared to their outgoing friends. There is a possibility that the students will not become active in their academic life. The same study showed that stress together with sleep loss and substance abuse will lead students to depression.

The findings highlighted in the previous research found that stress influences academic achievement. The presence of stress could affect students' performance in their academic life. Thus, the higher the stress level, the lower the academic achievement.

2.7. Causes and contributing factors of depression, anxiety and stress

According to Huberty (2004), the causes of depression are complex (Huberty, 2004)

In his study Huberty (2004) found that , some people have a greater likelihood of developing depression, such as those who have first-degree relatives with depression (e.g., parent), living in highly stressful and demanding environments, or suffer traumatic events (e.g., loss of a loved one) (Huberty, 2004).

Depression may be a long-term condition that has persisted over several weeks, months, or years or it may be of recent onset, such as in trauma (Huberty, 2004). Long term depression is more difficult to treat and most often requires professional help. Helping Students in the Classroom depression may subside more quickly, but may require professional help to show the best improvement (Huberty, 2004).

Most experts agree that depression is associated with changes in the chemistry of some neurotransmitters in the brain, and this can be chronic (Huberty, 2004).

Some evidence indicates that students who believe that others do not view them as competent are more likely to develop depression (Huberty, 2004). This view has particular salience in schools. That is, if teachers and peers view a student as not being academically or socially capable, there may be a greater risk of development of depression. Similarly, because schools can be stressful places for students who are not successful, they can be at increased risk for depression (Huberty, 2004). Many students who have not been successful at school relate feelings of sadness and depression because they do not do well or fit in.

There is no one cause of depression (British Ministry of Education, 2001). Research suggests that there is a dynamic and complex interplay between biological, genetic, and psychosocial factors that lead to depression. Psychosocial factors include specific distressing life events or environmental stress (poverty, unemployment) and family functioning. British Ministry of Education (2001) identified the following factors for depression.

Biochemical Imbalance in the Brain

As Koplewicz (2002), cited in Huberty (2004) when the brain chemicals are imbalanced, messages are not transmitted effectively, so the brain functions differently. For example, imbalances of the brain chemical serotonin may cause sleep problems, irritability, and anxiety characteristic of depression. Huberty (2004) also found that an imbalance of norepinephrine, which regulates alertness and arousal, may contribute to the fatigue and the depressed mood that are symptoms of the illness.

Koplewicz (2002) also stated Students are already going through significant changes, including growth spurts and hormonal changes that cause emotional turmoil for some individuals. These normal changes are not solely responsible for depressive illness.

Genetic Links

As depression is much more common in student where one biological parent has depression, a variety of studies have been undertaken to determine whether the incidence of the disorder has genetic links. Evidence to date suggests that genetic factors play a major role in bipolar disorder and to some extent in severe major depressive disorders. However, not all individuals who are genetically predisposed to depression actually have a depressive episode (Huberty, 2004).

Distressing Life Events or Environmental Stress

According to The National Association of School Psychologists (NASP), 2004) family situations that can lead individuals to depression are the following.

''Marital discord or divorce, Remarriage or co-habitation, Serious illness or death of a parent or loved one, Separation from siblings or close friends, Unemployment and poverty, Abuse — physical, emotional or sexual, Parental psychopathology, including mood disorders and drug or alcohol abuse Family violence'' (pp.46)

Attending school is another distressing life event for some students (NASP, 2004). The association also stated for students with depression, school can constitute a significant stressor because their illness affects the ability to learn and relate to others. Students with depression often already have low self-esteem, and the difficulty they experience at school adds to this negative feeling.

Further the association found Social difficulties can also make school an unpleasant experience for some students. Social problems can be a contributing factor to depression or, alternatively, a result of depression

Psychological Factors

Huberty (2004) identified the psychological factors for depression. According to Huberty (2004), Individuals with depression tend to get into a cycle of negative thoughts, feelings and perceptions that serve to perpetuate the low mood. He also examined when they make mistakes or are ignored, they think, "I'm stupid. I never get anything right. Nobody likes me." They tend to ignore times when they do something right or someone is friendly to them. The study also found that they focus on the negative experience and that becomes the only way they see the world.

 In Hubert's (2004) study, when students move to university, they face increased academic expectations in a school structure where they interact with a greater number of adults and peers on a less personal basis than in high school. Most students manage these changes successfully, but those who have difficulty meeting their academic goals and/or need greater social supports can develop a cycle of negative thinking and experiences (NASP, 2004).

2.8. Relation between Self-Esteem and DAS

Anxiety is an important affective variable (Endler & Kocovski, 2001), because it is the core symptom in the group of anxiety disorders (American Psychiatric Association, 2000) that cause a major burden of disease (Greenberg et al., 1999).

Anxiety is associated with depression: Self-report measures of depression and anxiety are strongly correlated in clinical samples (Mendels, Weinstein, & Cochrane, 1972) and nonclinical samples(Dobson, 1985; Gotlib, 1984; Tanaka-Matsumi & Kameoka, 1986), and depressive and anxiety disorders show a high diagnostic comorbidity (T. A. Brown, Campbell, Lehman, Grisham, & Mancill, 2001; Kessler, Chiu, Demler, & Walters, 2005).

Although depression and anxiety are related, the constructs are conceptually distinct and can be empirically distinguished (B. J. Cox, Swinson, Kuch, & Reichman, 1993; Endler, Denisoff, & Rutherford, 1998; McWilliams, Cox, & Enns, 2001; Watson & Clark, 1992).

Many previous studies have examined whether risk factors and correlates of depressive disorders are specific for depression or whether they are also related to anxiety (A. T. Beck, Steer, & Epstein, 1992; R. Beck & Perkins, 2001; R. Beck et al., 2001; Hankin, Abramson, Miller, & Haeffel, 2004; Joiner, 1995; Mor & Winquist, 2002).

The relation between self-esteem and anxiety has only rarely been studied (J. E. Roberts, 2006). Cross-sectional studies have reported negative, medium-sized to strong correlations between the constructs (Lee & Hankin, 2009; Riketta, 2004; Watson et al.,2002).

There are controversial issues among theories concerning the relationship between self esteem, depression and anxiety. The followings are the two theories that hypothesize how depression and anxiety might be differentially related to self esteem.

First, according to the tripartite model (Clark, Watson, & Mineka, 1994), depression should exhibit a stronger relation to self-esteem than does anxiety. The tripartite model states that depression and anxiety share the feature of high negative affectivity, that is, a stable disposition to experience nonspecific distress and unpleasant mood.

However, the model also states that each construct includes a unique component, with low positive affectivity being specific to depression and with heightened autonomic arousal being specific to anxiety. Thus, whereas depression is linked to both positive affect and negative affect, anxiety is linked to negative affect only. Given that self-esteem is correlated with both positive and negative affect at about similar effect size (Aspinwall & Taylor, 1992; Joiner, 1995; Watson et al., 2002), the tripartite model suggests that low self-esteem is more relevant for depression than for anxiety.

Second, the cognitive content hypothesis of A. T. Beck et al. (1992), which was derived from Beck's cognitive theory of depression (A. T. Beck, 1967), posits that depression and anxiety can be distinguished by specific cognitive vulnerabilities. The cognitive content hypothesis states that depressive cognitions reflect negative evaluations of the self, the world, and the future, whereas anxious cognitions reflect the anticipation of a physical or psychological threat. Accordingly, low self-esteem should be a stronger diathesis for depression than for anxiety

2.9. Conceptual frame work

Figure 1: conceptual frame work of main variables
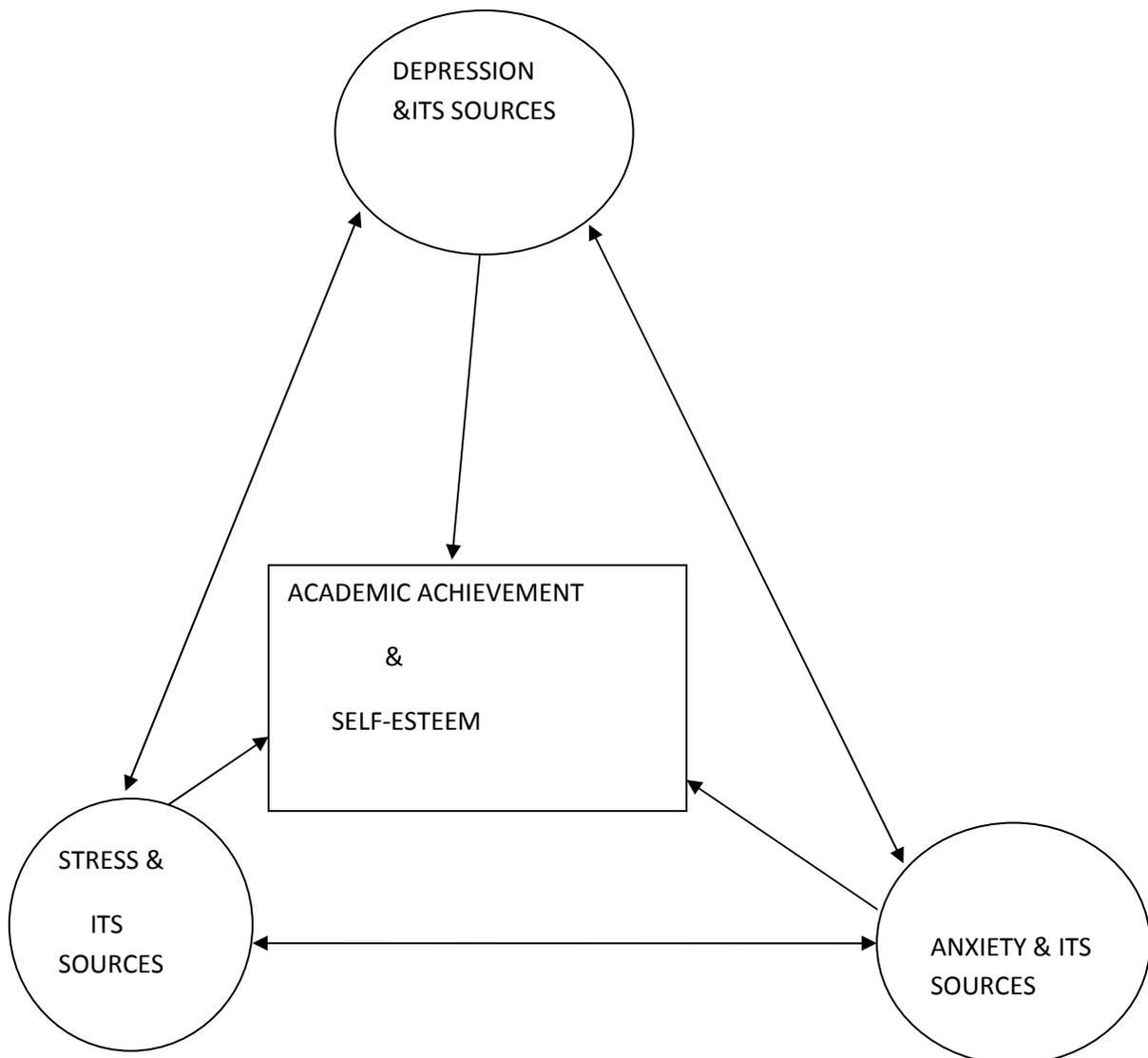
Chapter Three
Method

3.1. Research design

In order to assess the prevalence of depression, anxiety and stress and their relationship with academic achievement and self esteem among Addis Ababa University freshman students, cross sectional research design was employed.

3.2. Study site

This study was conducted in Addis Ababa University. The university comprises nine colleges, ten schools, two institutes, and eighty departments. Totally the university is teaching 20,117 students by different year level in 2013/14(2006 EC) academic year. Of these students 4,945 first year; 4860 second year; 5073 third year; 3358 fourth year and 1924 five and above students.

3.3. Population

The aggregate population of the study was the main campus social science, education and behavioral science first year Addis Ababa University students. The total number of population is 502. The research targeted this population for several reasons. First, there is little or no study conducted on this population. Second, the researcher would face little difficulty in collecting data for the study. This means that these departments are very near to the department of the

researcher. Third, because of the physical proximity of the study site, it helped the researcher to conduct the research as he also completed the internship.

3.4. Sample and sampling technique

Of the above population, the sample comprised 259 students. Based on this, 220 students were obtained but additional 40 students were added so as to account for incomplete responses that may not be considered in data analysis.

At the end, however, there was only one who did not complete the questionnaire properly. This was not considered in data analysis. As a result, there were 259 students in the sample.

In order to select these students, the researcher employed proportionate stratified random sampling technique using colleges and departments as strata. Thus, using this sampling technique, two colleges, one school and seven departments were selected. These are tabulated in Table 1 below.

Table1: number of sample students by College and Department/School

College	School/Department	Size of Students		Size of Sample Selected	
		Total	Female	Total	Female
College of Social science					
	Archeology	41	18	23	11
	Geography and Environmental Science	42	22	24	13
	Political science	85	24	42	12
	Social anthropology	51	29	28	16
	sociology	85	38	42	19
College of Education and Behavioral Studies	Psychology	59	39	32	22
	Special needs Education	8	4	5	2
School of Social Work	Social Work	131	40	63	20

		TOTAL	502	214	259	125

3.5.Inclusion criteria

Students at Addis Ababa University were eligible for participation in this study only if they

- gave their written consent
- Were either in the College of Social Science or College of Education and Behavioral Studies.
- Were first year students.

3.6. Instruments of data collection

To collect pertinent data, the researcher used three instruments. These are DAS-S-depression, anxiety, stress scale, Rosenberg self-esteem scale and a questionnaire developed by the researcher to identify the causes of depression, anxiety and stress.

Depression, Anxiety and Stress Scale (DASS)

The DASS is a 42-item questionnaire which includes three self-report scales designed to measure the negative emotional states of depression, anxiety and stress. Each of the three scales contains 14 items, divided into subscales of 2-5 items with similar content. The depression scale items are 3, 5, 10, 13, 16, 17, 21, 24, 26, 31, 34, 37, 38, 42;The anxiety scale items are 2, 4, 7, 9, 15, 19, 20, 23, 25, 28, 30,

36, 40, 41 and the stress scale items are 1, 6, 8, 11, 12, 14, 18, 22, 27, 29, 32, 33, 35, and 39.

Findings from discriminant validity showed that the DASS discriminates the normal and clinical population (Lovibond & Lovibond, 1995). Concurrent validity coefficients were found to be high (.87 and .84, respectively). Cronbach internal consistency of the entire scale was .89. Item-total correlations ranged from .51 to .75. Test retest and split-half reliability coefficient scores were .99 and .96 respectively. These results demonstrate that the DASS is a valid and reliable instrument. Studies conducted by Ramli et al, (2007), Cronbach alpha values were 0.75, 0.74 and

0.79 respectively. On the other study by (McDowell, 2006) the three subscales were moderately inter-correlated; the standardized correlation between them ranged between 0.69 and0.84

Overall findings demonstrated that this scale had acceptable and fairly high validity and reliability scores and that it may be used as an efficient instrument in order to assess emotional states of university students.

To check the reliability of DAS in this context pilot study was conducted and the results produced the following reliability coefficients.

Table 2: Reliability of the Scales in the Present Study

Instrument	Cronbach alpha	No of items
Depression	.75	14
Anxiety	.72	14
stress	.86	14
RSES	.76	10
CAUSES	.95	30

Translation and scoring of the instrument

All materials used in this study were translated from English to Amharic by professional translators-individuals who had experience and knowledge in psychology and counseling. Also it has been shown to a specialist who had clinical experiences in institutions for its validity, suitability, and clarity.

Concerning the scoring and other related issues of DASS, the researcher used the manual which was written by the author (Lovibond &Lovibond, 1995).

3.7.Procedures of data collection

In order to collect data first formal letter was taken from the school. Based on that letter, the researcher asked permission from each department head. Those department head gave the

permission and planned to the secretaries of the departments to get the students schedule. The secretaries showed the schedule and contacted with the representatives of the student.

By the facilitation of these representatives the researcher got the lecturers and students. The lecturers were asked to help the researcher at the end of their class and their permission was gotten. Next the researcher introduced him and the objectives of the study for the students and asked their consent.

The questionnaires were distributed for those students who gave their consent. After they finished the questionnaires they return back to the researcher at that time. By these procedures the data was collected.

On the other hand, to get students cumulative grade point the same procedures were used. First the researcher got permission from the University registrar directorate. Then students' CGPA were collected based on their identity number from their respective registrar office.

3.8. Data analysis

After the data were it was analyzed qualitatively and quantitatively. Quantitatively the collected data was inserted to SPSS 20 and analyzed by using percentage, mean, point- biserial correlation, Univariate analysis, and chi-square. Descriptive mean scores were also done .To get the prevalence of DAS percentage was used and to get inter- relationship between Depression ,anxiety ,stress, academic achievement ,and self esteem , Pearson correlation was employed while for further implication of identifying the interaction of self- esteem with place of residence and gender of the respondents Univariate ANOVA was employed.

3.9. Ethical considerations

A letter introducing the objective of the study, and maintaining the confidentiality was attached as the cover page of the questionnaire. Participants gave consent for participation in the study.

The right to refuse was clearly stated in the letter if the respondent is not volunteer to participate in the study.

CHAPTER FOUR

RESULTS

In this chapter the results obtained from the research are presented.

4.1. Result on Descriptive statistics

Table 3-Mean score of academic achievement for Archeology students with respect to their gender

Department	Sex of respondents	mean	standard deviation	N
Archeology	Male	2.5758	.87216	12
	Female	2.5573	.46641	11
	Total	2.5573	.69232	23

As indicated in the above table 3, the average cumulative grade point of archeology department male student is m=2.5758, SD=.87216. So, the maximum GPA was 3.44796 and the lowest grade of the respondent was 1.70364. For females, average GPA was 2.5573 with SD, 0.46641. The minimum and maximum GPA of archeology female students was 2.09089 and 3.02371

Table 4: Mean of academic achievement score for geography and environment students with respect to their gender

Department	Sex of respondents	mean	standard deviation	N
Geography	Male	2.8417	.64766	12
	Female	2.4658	.48410	12
	Total	2.6537	.59122	24

As indicated in table the average grade point for geography and environmental studies was 2.8417,sd,0.64766 for male students and 2.4658,sd,0.48410 for females. The maximum and minimum GPA of male students was 3.48936 and 2.19404 respectively. For female students the minimum GPA was 1.9817 and maximum was 2.9499.

Table 5: Mean score of academic achievement for political science students with respect to their gender

Department	Sex of respondents	mean	standard deviation	N
Political science	Male	3.1330	.48316	30
	Female	3.2592	.47098	12
	Total	3.1690	.47745	42

Average GPA for political science students was also done with mean, 3.1330, SD=0.48316 for male students and mean=3.2592, SD=.47098 for female students. The maximum and minimum GPA for male and female students was 3.73018 and 2.78822   and 3.61616 and 2.6148 respectively.

Table 6-Mean score of academic achievement for Social anthropology students with respect to their gender

Department	Sex of respondents	mean	standard deviation	N
Social anthropology	Male	2.6796	.46126	23
	Female	2.4360	.20007	5

| | Total | 2.6361 | .43395 | 28 |

The average GPA of social anthropology student for both gender was done and looks like the following (m, 2.6798, SD, .46126, N.23) for male students and (m, 2.4360, SD, .20007, N, 5) for female students.

Table: 7 Mean score of academic achievement for sociology students with respect to their gender

Department	Sex of respondents	mean	standard deviation	N
Sociology	Male	2.5684	.72264	19
	Female	2.5587	.54254	23
	Total	2.5631	.62228	42

The average GPA of sociology student for both gender was done and looks like the following (m, 2.5684, sd,.72264,N.19) for male students and (m,2.5587,sd,.54254,N,23) for female students.

Table :8 Mean score of academic achievement for psychology students with respect to their gender

Department	Sex of respondents	mean	standard deviation	N
Psychology	Male	3.0239	.56302	23
	Female	2.7956	.45709	9
	Total	2.9597	.53829	32

Average GPA for political science students was also done with mean, 3.0239, SD=0.56302 for male students and mean=2.79597, SD=.45709 for female students

Table 9: Mean score for school of Special needs Education students with respect to their gender

Department	Sex of respondents	mean	standard deviation	N
Special needs education	Male	2.4650	.23335	2
	Female	2.3100	.31512	3
	Total	2.3720	.26546	5

As indicated in table above the average CGPA for Special needs Education was 2.4650,sd,0.23335 for male students and 2.3100,sd,0.31512 for females. The maximum grade point for Special needs Education Department student was 2.69835 and minimum GPA of 2.23165. For female students, minimum and maximum CGPA was 1.994 and 2.62512 respectively.

Table :10 Mean score for school of social work students with respect to their gender

School	Sex of respondents	mean	standard deviation	N
Social work	Male	3.1183	.59278	35
	Female	2.7089	.69807	28
	Total	2.9363	.66854	63

Table :11 Mean score of students anxiety level by gender

sex of respondents	Mean	Std. Deviation	N
Male	5.3013	3.69729	156
Female	6.0388	3.27774	103
Total	5.5946	3.54836	259

The above tables 11 showed that anxiety mean score for both genders. As showed the average mean score of anxiety for male is (m=5.3013, SD=3.69729, N= 156) and for females (m=6.0388, SD=3.27774, N=103).

Table 12: Mean score of students stress level by gender

sex of respondents	Mean	Std. Deviation	N
male	10.3910	5.72101	156
female	10.0680	4.74499	103
Total	10.2625	5.34694	259

The above table 12 showed that stress mean score for both genders. As showed the average mean score of stress for male is (m=10.3910, SD=5.72101, N= 156) and for females (m=10.0680, SD=4.74499, N=103).

Table 13: Mean score of students depression level by gender

sex of respondents	Mean	Std. Deviation	N
male	5.0705	4.57216	156
female	6.3786	4.22902	103
Total	5.5907	4.47673	259

As indicated above the average students depression score was (m=5.0705, sd=4.57216, N=156

for male students and (m=6.3786, sd=4.22902, N=103) for females.

Table: 14 Pearson correlations between dependent and independent variables

		Depression	Anxiety	Stress	Self-esteem
Academic achievement	Pearson Correlation Sig. (2-tailed) N	-.689 .000 259			.314 .000 259

			.296	.549	-.123
depression	Pearson Correlation				
	Sig. (2-tailed)		.000	.000	.000
	N		259	259	259
anxiety	Pearson Correlation			.496	-.717
	Sig. (2-tailed)			.000	.000
	N			259	259
Stress	Pearson Correlation				-.330
	Sig. (2-tailed)				.000
	N				259

**. Correlation is significant at the 0.01 level (2-tailed).

The above table shows the relationship between both dependent and independent variables. As indicated above, academic achievement had negative relationship with depression, while positive relationship with self-esteem

On the other hand, depression had positive relationship with anxiety and stress had negative relationship with self-esteem.

To check the curvilinearity of academic achievement with anxiety and stress bi-point serial correlation and graph were sketched like the following.

Table 15: Bi-point serial correlation between academic achievement and anxiety

		cumulative grade	anxiety composed
cumulative grade	Pearson Correlation	1	-.280[**]
	Sig. (2-tailed)		.000
	N	259	259
anxiety composed	Pearson Correlation	-.280[**]	1
	Sig. (2-tailed)	.000	
	N	259	259

**. Correlation is significant at the 0.01 level (2-tailed).

Table 16: bi-point serial correlation between academic achievement and stress

		cumulative grade	stress composed
cumulative grade	Pearson Correlation	1	-.274[**]
	Sig. (2-tailed)		.000
	N	259	259
stress composed	Pearson Correlation	-.274[**]	1
	Sig. (2-tailed)	.000	
	N	259	259

As indicated above table 15 and 16 both Anxiety and stress had negative relationship with

academic achievement and the scatter plot showed linear relationship as indicated below.

Scatter diagram of anxiety with academic achievement looks like the following
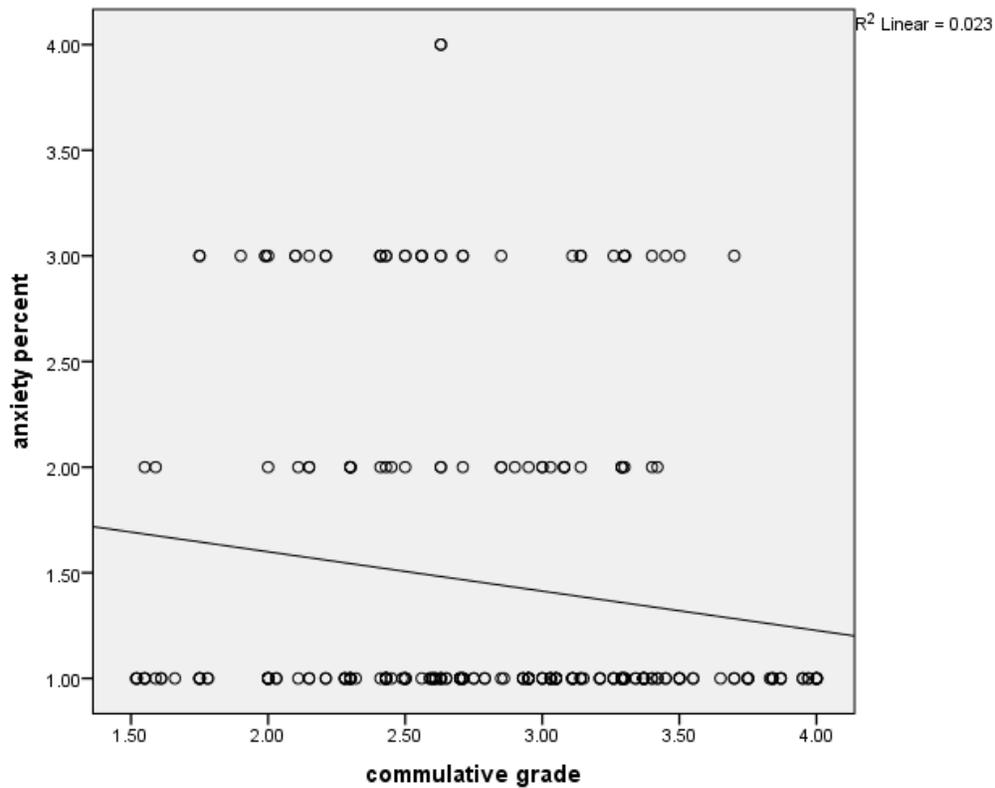
Graph 1: the relationship between anxiety and students' academic achievement

As indicated in the above graph the relationship between anxiety and academic achievement was

sketched.

Below the relationship between stress and academic achievement was sketched and likes the

following
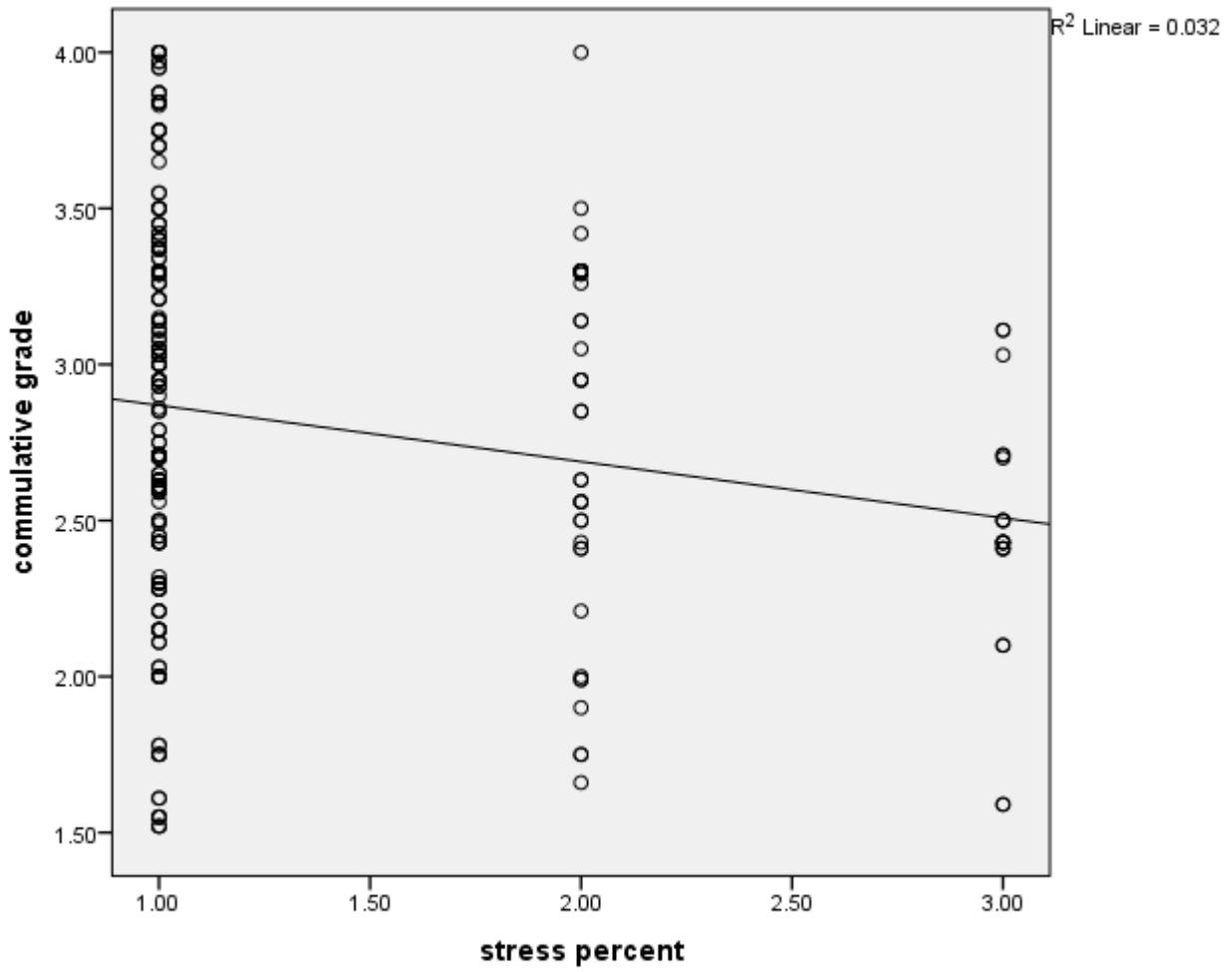
Graph 2: the relationship between stress and students' academic achievement

Like anxiety and academic achievement, stress and academic achievement had linear

relationship.

4.2. Magnitude of Depression, Anxiety and Stress

Table 17: The magnitude of depression

Status of Depression	Frequency	Percent	Score high on Depression
Normal(0-9)	211	81.5	18.5%
Mild(10-13)	34	13.1	
Moderate(14-20)	14	5.4	
Severe (21-27)	-	-	
Extremely severe(27-42)	-	-	

As indicated in Table 17 above, 211(81.5%) of the students were under normal condition. On the other hand, 18.5% of the students scored high on depression. From these students, 34 (13.1%) scored mild level of depression whereas the other 14 (5.4%) scored moderate level of depression. The above criteria to categorize the students in to three levels (normal, mild, moderate, severe and extremely severe) were based on the scoring manual of DASS written by Lovibond & Lovibond (1995).

Table 18: Magnitude of Anxiety

Level	Frequency	Percent	Scored high level of Anxiety
Normal(0-7)	185	71.4	28.6 %
Mild (8-9)	34	13.1	
Moderate (10-14)	38	14.7	

Severe (15-19)	2	0.8	
Extremely severe(20-42)	-	-	

As indicated in Table 18 above, 185 (71.4%) of the students were in the normal category. The remaining 74 students (28.6%) had experienced some form of anxiety. Among this students, 34 (13.1%) of them had experienced a mild level of anxiety whereas 38(14.7%) of the students had a moderate level of anxiety. Only two students (0.8%) had a severe level of anxiety.

Table 19. Magnitude of stress

Level of Stress	Frequency	Percent	Scored high on Stress
Normal (0-14)	201	77.6	
Mild (15-18)	37	14.3	22.4%
Moderate (19-25)	21	8.1	
Severe (26-33)	-	-	
Extremely severe(34-42)	-	-	

In Table 19 above, the prevalence of stress among university students is summarized.

The data indicate that 58 (22.4%) of the students were under stressful conditions whereas the remaining 201 (77.6%) of the students were normal. Among the 58 students, 37 (14.3%) experienced stress at a mild level whereas 21(8.1%) had a moderate level of stress.

4.3. Results on the interaction between gender and place of residence with self-esteem

Table 20. Univariate analysis of gender and place of residence with self-esteem

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
sex	2.939	1	2.939	.084	.772
Place of residence(PR)	347.379	1	347.379	9.931	.002
sex * PR	134.029	1	134.029	3.832	.051

Even if it is not included in the objectives of the study, this study tried to see whether there is an interaction between gender and place of residence on self-esteem among participants. The result showed that there is significant interaction is found between place of residence and self-esteem and the interaction of both sex and place of residence with self-esteem even if it is not less than .05. So, it is marginally significant. In addition to the following graph and table show the mean difference clearly

Table 21: mean difference of self –esteem with gender and place of residence

sex of respondents	place of residence	Mean

male	Urban	16.870
	Rural	15.926
female	Urban	18.646
	Rural	14.608
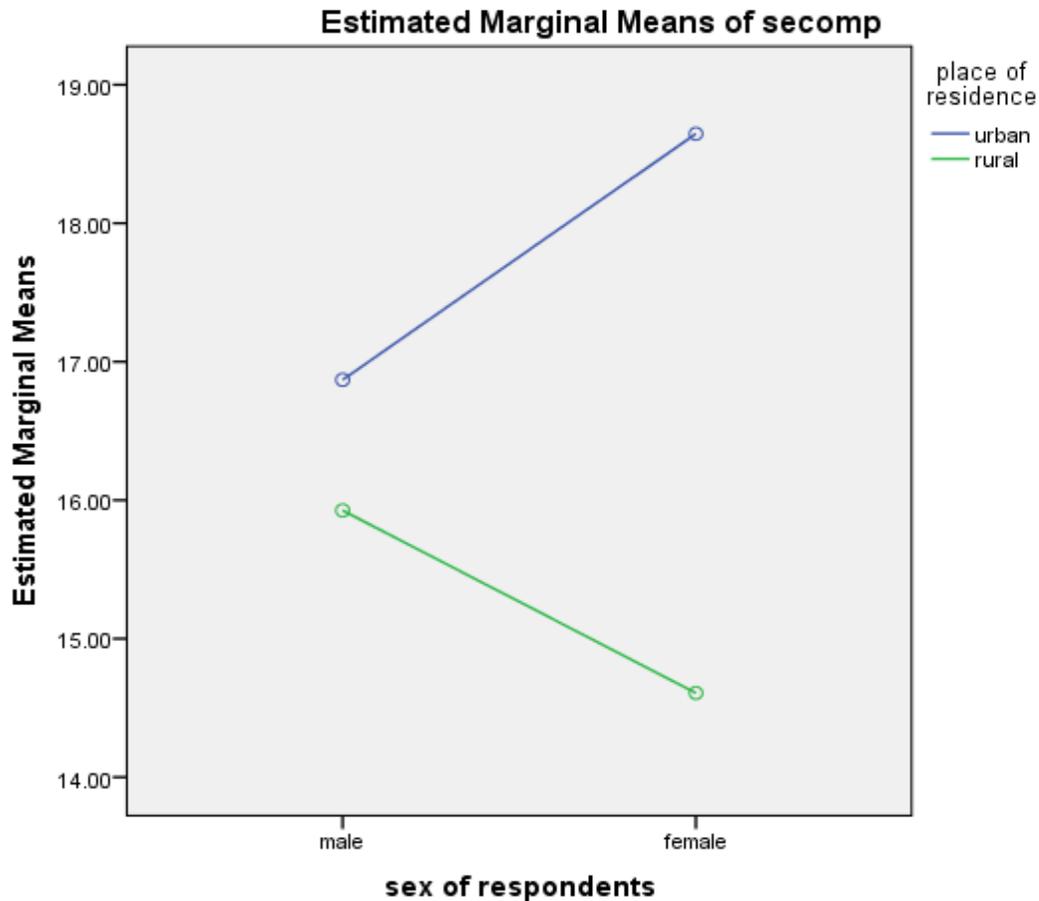
Graph 3: estimated marginal means of self-esteem with gender and place of residence

As indicated in above table and graph there is significant mean difference between females in rural and urban. As indicated females in urban had high self esteem than those of rural. On the other hand males in urban had low self -esteem than females in urban where as the reverse is true for rural males and females.

The response of factors that leads students to DAS was tabulated. Agree and strongly agree were recomputed to agree and disagree and strongly disagree to disagree. The respondents response tabulated in the table are narrated as the following (see appendix -3).

The top ten factors that led students to depression, anxiety and stress were having inflexible rules about how one should behave, excessive pressure from teachers, test anxiety, loss of loved one ,poor study habits ,deficit in social supports, curriculum and instruction, home sickness, school work increases, and team work related issues. Some of the factors were cross tabulated and look the following

Below this some of factors that led students to depression, anxiety and stress were cross tabulated with dependent variables. From the listed factors, those had significant relationship were only tabulated. From these the first was difficulty in making friends looks like the following

Table 22: cross tabulation between difficulty and stress

			Difficulty in making friends				Total
			strongly disagree	disagree	strongly agree	agree	
stress and not	normal	Count	33	53	83	32	201
		Expected Count	29.5	45.0	87.7	38.8	201.0
	Score high on stress	Count	5	5	30	18	58
		Expected Count	8.5	13.0	25.3	11.2	58.0
Total		Count	38	58	113	50	259
		Expected Count	38.0	58.0	113.0	50.0	259.0

Table 23: chi-square result of Difficulty in making friends and stress

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	14.645[a]	3	.002
Likelihood Ratio	15.706	3	.001
Linear-by-Linear Association	11.715	1	.001
N of Valid Cases	259		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 8.51.

Table 24 the Symmetric Measures of Difficulty in making friends and stress

		Value	Approx. Sig.
Nominal by Nominal	Phi	.238	.002
	Cramer's V	.238	.002
N of Valid Cases		259	

a. Not assuming the null hypothesis.
b. Using the asymptotic standard error assuming the null hypothesis.

The above tables showed there is a difference between when there is the presence of the factor and stress (chi-square=0.002, P=0.002. That means when the factor is available, there is stress among students. But there is no relationship (< 0.30) as indicated the following table (Phi= 0.238)

Table 25: cross tabulation of the factor Living room inconvenience to sleep anytime one wants and stress

			Living room inconvenience to sleep anytime one wants				Total
			srongly disagree	disagree	strongly agree	agree	
stress and not	normal	Count	48	43	52	58	201
		Expected Count	61.3	44.2	47.3	48.1	201.0
	Score High stress	Count	31	14	9	4	58
		Expected Count	17.7	12.8	13.7	13.9	58.0
Total		Count	79	57	61	62	259
		Expected Count	79.0	57.0	61.0	62.0	259.0

Table 26 :Chi-Square Tests between stress and Living room inconvenience to sleep anytime one wants

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	24.171[a]	3	.000
Likelihood Ratio	25.406	3	.000
Linear-by-Linear Association	23.687	1	.000
N of Valid Cases	259		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 12.76.

Table 27:Symmetric Measures between Living room inconvenience to sleep anytime one wants and stress

	Value	Approx. Sig.
Nominal by Nominal — Phi	.305	.000
Nominal by Nominal — Cramer's V	.305	.000
N of Valid Cases	259	

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

What makes different from the first factor is the strength of the relationship they had which is

positive weak relation (r=0.305)

Table 28: cross tabulation between stress and overcrowding in dormitory

			Overcrowding in dormitory				Total
			strongly disagree	disagree	strongly agree	agree	
stress and not	normal	Count	56	38	44	63	201
	normal	Expected Count	62.9	32.6	46.6	59.0	201.0
	Score High stress	Count	25	4	16	13	58
	Score High stress	Expected Count	18.1	9.4	13.4	17.0	58.0
Total		Count	81	42	60	76	259
		Expected Count	81.0	42.0	60.0	76.0	259.0

Table 29: Chi-Square Tests between stress and overcrowding in dormitory

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	9.200[a]	3	.027
Likelihood Ratio	9.824	3	.020
Linear-by-Linear Association	2.303	1	.129
N of Valid Cases	259		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 9.41.

Table 30 Symmetric Measures between stress and overcrowding in dormitory

		Value	Approx. Sig.
Nominal by Nominal	Phi	.188	.027
	Cramer's V	.188	.027
N of Valid Cases		259	

a. Not assuming the null hypothesis.
b. Using the asymptotic standard error assuming the null hypothesis.

Table 31: cross tabulation between deficits in social support and stress

			deficits in social support				Total
			srongly disagree	disagree	strongly agree	agree	
stressed and not	normal	Count	28	32	66	75	201
		Expected Count	26.4	27.9	74.5	72.2	201.0
	stressed	Count	6	4	30	18	58
		Expected Count	7.6	8.1	21.5	20.8	58.0
Total		Count	34	36	96	93	259
		Expected Count	34.0	36.0	96.0	93.0	259.0

Table 32 Chi-Square Tests between stress and deficits in social support

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	7.904[a]	3	.048
Likelihood Ratio	8.058	3	.045
Linear-by-Linear Association	.432	1	.511

| | | N of Valid Cases | 259 | | |

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 7.61.

Table 33: Symmetric Measures stress and deficits in social support

		Value	Approx. Sig.
Nominal by Nominal	Phi	.175	.048
	Cramer's V	.175	.048
N of Valid Cases		259	

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

The same procedures were done for other factors and look the following

Table 34: cross tabulation between curriculum and instruction and stress

			curriculum and instruction				Total
			srongly disagree	disagree	strongly agree	agree	
stressed and not	normal	Count	21	39	58	83	201
		Expected Count	24.8	31.0	60.5	84.6	201.0
	stressed	Count	11	1	20	26	58
		Expected Count	7.2	9.0	17.5	24.4	58.0
Total		Count	32	40	78	109	259
		Expected Count	32.0	40.0	78.0	109.0	259.0

Table 35 :Chi-Square Tests between stress and curriculum and instruction

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	12.359[a]	3	.006
Likelihood Ratio	16.390	3	.001

Linear-by-Linear Association	.073	1	.787
N of Valid Cases	259		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 7.17.

Table 36: Symmetric Measures between stress and curriculum and instruction

		Value	Approx. Sig.
Nominal by Nominal	Phi	.218	.006
	Cramer's V	.218	.006
N of Valid Cases		259	

a. Not assuming the null hypothesis.
b. Using the asymptotic standard error assuming the null hypothesis.

Table 37: cross tabulation between stress and Poor study habits

			Poor study habits				Total
			srongly disagree	disagree	strongly agree	agree	
stressed and not	normal	Count	32	30	65	74	201
		Expected Count	29.5	24.8	71.4	75.3	201.0
	stressed	Count	6	2	27	23	58
		Expected Count	8.5	7.2	20.6	21.7	58.0
Total		Count	38	32	92	97	259
		Expected Count	38.0	32.0	92.0	97.0	259.0

Table 38:Chi-Square Tests between stress Poor study habits

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	8.409[a]	3	.038
Likelihood Ratio	9.763	3	.021

			Value			1	.101

	Value		
Linear-by-Linear Association	2.685	1	.101
N of Valid Cases	259		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 7.17.

Table 39: Symmetric Measures between stress and Poor study habits

		Value	Approx. Sig.
Nominal by Nominal	Phi	.180	.038
	Cramer's V	.180	.038
N of Valid Cases		259	

a. Not assuming the null hypothesis.
b. Using the asymptotic standard error assuming the null hypothesis.

Table 40:Crosstabulation between having inflexible rules about how one should behave and stress

			Having inflexible rules about how one should behave				Total
			strongly disagree	disagree	strongly agree	agree	
stressed and not	normal	Count	19	35	67	80	201
		Expected Count	20.2	31.0	76.1	73.7	201.0
	stressed	Count	7	5	31	15	58
		Expected Count	5.8	9.0	21.9	21.3	58.0
Total		Count	26	40	98	95	259
		Expected Count	26.0	40.0	98.0	95.0	259.0

Table 41:Chi-Square Tests between stress and having inflexible rules about how one should behave

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	9.757[a]	3	.021
Likelihood Ratio	9.877	3	.020
Linear-by-Linear Association	.524	1	.469
N of Valid Cases	259		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 5.82.

Table 42:Symmetric Measures between stress and Having inflexible rules about how one should behave

		Value	Approx. Sig.
Nominal by Nominal	Phi	.194	.021
	Cramer's V	.194	.021
N of Valid Cases		259	

a. Not assuming the null hypothesis.

b. Using the asymptotic standard error assuming the null hypothesis.

CHAPTER FIVE

5. DISCUSSION

The main objective of this study was to examine the magnitude/extent of DAS among AAU students and its relationship with academic achievement and self-esteem. In present study the magnitude of depression is inconsistent with the studies conducted in several settings by different researchers. From these the study conducted by Sherina ,Lekhraj and Nadarajan(2003) in Malaysian public institutions had found that 35.4% of the respondents scored high on depression and, 33% of Iran, 27.1% of Turkish, 26.2 of Denizili, 9.1 % of Ethiopia, and 39.6 % of Vietnam experienced high score on depression.

The magnitude of anxiety was consistent with the study conducted by Md Yasin &Dzulkifli, 2003) which is 30% of students experienced severe anxiety level. On other hand it is less than from the result which was done in Malaysia which is 47.2% and 40% in cohort University College who experienced anxiety. They stated it has negative effects on students' ability to perform at an optimal level.

On the other hand the magnitude of stress was differs from the study conducted in Malaysia 31.1%, Vietnam 49.6% and 90%, Saudi Arabia 57%, and Islamic republic of Arabia 61.4% and 61.3% who experienced stress

The statistical significant relationship between depression, anxiety and stress with academic achievement and self-esteem were also another objective of the study. In this study the result showed that there is statistical significant relationship between depression, anxiety and stress with academic achievement and self-esteem. This study is congruent with other Studies conducted in several setting on several populations. Let's see separately one by one.

For example studies conducted Yasin &Dzulkif (2011), depressed individuals become disappointed frustrated, and this leads to failure in their academic progress. This mean that they unable to perform well in academic achievement because they donot have courage in what they are doing.

This study has similar congruent result with the study conducted by Fine &Carlson (1994), which focused on the statistical relationship with academic achievement. Their study found that there is a relationship between depression and academic achievement and depression is a contributing factor to poor academic performance. Zaid, Chan, and Ho (2007) found that students who experienced depression had a lower academic performance which is similar with present study. These were not the mere studies that are congruent with the present study. One study conducted in Malaysian public institution by Sherina, Lekhraj and Nadarajan (2003) has congruency with the present study and stated the academic performance of the student was affected by depression and concluded the higher the depression, the lower the academic achievement of students.

In the case of anxiety, this study is congruent with a series of studies. For example studies conducted by Vogel and Collin (2002) finding indicates individuals with higher level of anxiety perform less well than those who have low anxiety.

Another study by Anson et al (1984) also stated the relationship between anxiety and academic achievement and found anxiety had significant relation with grades obtained by the students. Other researchers had the same notion. Like Seligman &Wuyek (2007) in their study found highly anxious students were more significantly more likely to score lower on measurements of academic achievement. All the studies mentioned including the present studies had

commonalities that is anxiety can directly affect the academic achievement of students/students'
with high level of anxiety perform poorer than those with lower anxiety.

The third one is the congruency of this study in the case of stress with other studies. It has
similarity results with the study conducted by Dusselier et al (2005); Misra &McAdams (2007)
and their study stated there is statistically significant relationship between stress and academic
achievement.

Demakis and McAdams (1994) had also the same result which stated heightened level of stress
significantly more physical health problems and fewer satisfactions towards academic
achievement compared to those reported lower levels of stress. On the other hand Wintre and
Yaffe (2000) in their study found that increases in stress during the first year predicted decrease
overall adjustment and contributed to lower grade point average (GPA) in the final year. On the
other had a low to medium level of stress can bring them a sense of competence and an increase
capacity to learn. This mean that the relationship is curvilinear as indicated in graph 2 result part.
So it is found one part of students' life and give impact on students cope with the demands of
academic life. Generally, all studies had the same notion with the present study that, the higher
the stress level, the lower the academic achievement.

In addition to the academic achievement, the statistical significant relation of depression, anxiety
and stress with self-esteem was another objective of the study. Like the above mentioned this
study had similar results with other studies in the case of students' self esteem. Researchers
Lee& Hankin, 2009; Riketta, Watson et al., 2002, in their cross sectional studies revealed that
there are statistical significant relationship between depression, anxiety and stress with students'
self-esteem.

Another study by Aspinwall &Taylor, 1992; Joiner 1995) showed the same results. They stated that the depressed, anxious and stressed students reflect negative evaluations of the self, the world and the future as well as the anticipation of physical and psychological threat and this all leads them to low self esteem.

In identifying the factors that leads students to DAS, this study had consistencies in degree of respondents' agreement. But due to the difference in number of respondents in several studies, the percentage may differ. What if, the causes that were included in this study were agreed as they were the causes for DAS by the respondents even if the number of the respondents differs. In other studies the causes were observed independently for three variables (DAS). In this the comorbid causes were identified. Let's see by categorizing them. In Quyeen Diho Do (2007), study the top factors were identified was intrapersonal factors.

In this study, most of the respondents (74.5%) responded as having inflexible rule about one should behave was the top of the factor for DAS which is one part of intrapersonal factor. This result had also consistency with yadeta et al., 2012) study which was entitled mental distress among university students in Ethiopia.

They stated that separation pre-existing social supports, social problems threats due to high expectations from parents and teachers were the causes for mental distress. Like this result, this study, a large number of students reported excessive pressure from parent and teachers, deficits in social support, and home sickness were the causes for DAS. Too much work and financial problems were the causes for DAS according Quyeen Diho Do (2007) and Blazer, Hughes &Fowler (1989) consistently with this study. Consistently with other studies, a lot of students responded unfamiliarity of environment, chronic illness, and sleep deprivation as the causes for

DAS. There is no enough review which states unfair assessment of instructors is a cause for DAS.

But unexpected result was identified by classifying from the context of gender, ethnicity, and religion which is related with Dyrebye et al., 2005 study. Concerning the curriculum, this study had consistent result with the study conducted in Kaohsing medical university in Taiwan, which stated the new curriculum- teaching in block had both positive and negative correlations with the severity of DAS.

The difference of DAS in this study and other studies conducted could be attributed to different factors. These may be the study design itself could be one factor. In several studies DAS were conducted longitudinally, and in this study the design is cross- sectional. The second factor could be the measurement (instrument).

In this study, the comorbid symptoms were measured by a single instrument called DASS, but in other studies DAS were measured by separate instruments. Mean that three variables (depression, anxiety and stress) were measured separately.

Another factor could be the number of participants and the nature of participants could be attributed. Several studies were conducted on clinical settings-like psychiatric hospitals, refugees and soon, but in this study the participants were university students

Further socio-economic, cultural and environmental factors could be attributed.

CHAPTER SIX

6. CONCLUSION AND RECOMMENDATIONS

6.1. CONCLUSION

The main findings of the study were the following

- The high rates of DAS among university students have major implications, not only with psychological morbidity , that will have adverse effects on students' health, development, educational attainment, and quality of life ,but also the deteriorating influence on their own families, institutions and even other people's lives.

- There is statistical significant relationship between depression, anxiety and stress with academic achievement and self -esteem. Depression, anxiety and stress were found to have an impact on academic achievement and self esteem of university students. They could also decrease motivation in ability, attention and concentration. The higher depression, anxiety and stress among students, the lower their academic achievement and self- esteem

- The presence of a lot of factors that led students to depression, anxiety and stress in higher institutions had adverse effects on students physical, psychological and social well being and decrease the academic achievement of students and their self esteem.

6.2. Recommendations

Based on the main findings of the study the researcher forwarded the following implications

- The prevalence of depression, anxiety and stress among students has major implications. So, it is better to develop strategies in place to identify and support all students suffering from depression, anxiety and stress. Even there are students who are severely anxious which needs immediate interventions.

- It is better if psychologists use screening mechanism to identify students' depression, anxiety and stress level before they start freshmen class. This mechanism may help the psychologist to early identify and treat their student and gives hint for longitudinal studies

- In terms of DAS prevention, freshman students need to be oriented about learning skills, time management skills, and communication skill in order to meet academic requirements, arrange their time effectively for learning and leisure activities and overcome difficulties in working in new environment through workshop and meeting before the starting of class

- Maintaining and enhancing support systems from friends, peers should be promoted for students in coping with problems in learning and life skills as well as through supporting from seniors.

- Reducing stress like overload class works, mess living condition, high expectations for grades from teachers, conflicting with friends should be implemented to prevent suffering from stress and its more severe consequences.

- Early prevention of depression, anxiety and stress is critical since, if left untreated, it can have serious consequences not only on students' academic achievement but also on their future health and career possibilities.

- Additionally, dormitory environment should be improved in improved in terms of neatness.

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APPENDICEES

APPENDIX 1: QUESTIONNAIRES ENGLISH VERSION

<div align="center">

ADDIS ABABA UNIVERSITY

COLLEGE OF EDUCATIONAL AND BEHAVIORAL STUDIES

SCHOOL OF PSYCHOLOGY

QUESTIONNAIRES TO BE COMPLETED BY STUDENTS

PART ONE: CONSENT FORM

</div>

This study intends on depression, anxiety and stress among Addis Ababa university freshman students: school functioning and other correlates. I kindly request you to participate .There are no risks involved except the time you take from your busy schedule. The information will be worth your time and effort, please complete it as per the instructions.

I have been informed about the sense of the study. I have the right to withdraw from the study at any time of the research. With my signature, I give my written consent to the study and assure that the data I give in the form of responses in the questions are accurate.

❖ DONOT WRITE YOUR NAME

Date _____   Signature _____

<div align="center">

PART TWO: DEMOGRAPHIC CHARACTERISTICS

</div>

1. ID No. _____   2. Year of study_____

3. Sex/gender: Male ☐   Female ☐   4. Age _____

5. Place of residence: urban ☐ rural ☐

6. Program of study/Department _____

7. Family's Educational Background

      A. Father's education background:

Not education ☐   Completed primary school ☐   completed secondary school ☐   ☐
Certificate   College graduate   University graduate

      B. Mother's education background

No education ☐   Completed primary school ☐   Completed secondary school ☐   ☐
Certificate

College graduate ☐   University graduate ☐

PART II: DASS (DEPRESSION ANXIETY STRESS SCALE)

Please read each statement and circle a number 0, 1, 2 or 3, which indicates how much the statement applied to you over the past week. There is no right or wrong answers. Do not spend too much time on any statement
The rating scale is as follows: 0 -Did not apply to me at all   1 -Applied to me to some degree, or some of the time   2- Applied to me to a considerable degree, or a good part of time   3 -Applied to me very much, or most of the time

No	Statements	Rating scales
1	I found myself getting upset by quite trivial things	0 1 2 3
2	I was aware of dryness of my mouth	0 1 2 3
3	I couldn't seem to experience any positive feeling at all	0 1 2 3
4	I experienced breathing difficulty (e.g., excessively rapid breathing, breathlessness in the absence of physical exertion)	0 1 2 3
5	I just couldn't seem to get going	0 1 2 3
6	I tended to over-react to situations	0 1 2 3
7	I had a feeling of shakiness (e.g., legs going to give way)	0 1 2 3
8	I found it difficult to relax	0 1 2 3
9	I found myself in situations that made me so anxious I was mostly relieved when they ended	0 1 2 3
10	I felt that I had nothing to look forward to	0 1 2 3
11	I found myself getting upset rather easily	0 1 2 3
12	I felt that I was using a lot of nervous energy	0 1 2 3
13	I felt sad and depressed	0 1 2 3
14	I found myself getting impatient when I was delayed in any way (e.g., lifts, traffic lights, being kept waiting)	0 1 2 3

15	I had a feeling of faintness	0	1	2	3
16	I felt that I had lost interest in just about everything	0	1	2	3
17	I felt I wasn't worth much as a person	0	1	2	3
18	I felt that I was rather touchy	0	1	2	3
19	I perspired noticeably (e.g., hands sweaty) in the absence of High temperatures or physical exertion	0	1	2	3
20	I felt scared without any good reason	0	1	2	3
21	I felt that life wasn't worthwhile	0	1	2	3
22	I found it hard to wind down	0	1	2	3
23	I had difficulty in swallowing	0	1	2	3
24	I couldn't seem to get any enjoyment out of the things I did	0	1	2	3
25	I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat)	0	1	2	3
26	I felt down-hearted and blue	0	1	2	3
27	I found that I was very irritable	0	1	2	3
28	I felt I was close to panic(danger)	0	1	2	3
29	I found it hard to calm down after something upset me	0	1	2	3
30	I feared that I would be "thrown" by some trivial but unfamiliar task	0	1	2	3
31	I was unable to become enthusiastic about anything	0	1	2	3
32	I found it difficult to tolerate interruptions to what I was doing	0	1	2	3
33	I was in a state of nervous tension	0	1	2	3
34	I felt I was pretty worthless	0	1	2	3
35	I was intolerant of anything that kept me from getting on with what I was doing	0	1	2	3
36	I felt terrified	0	1	2	3
37	I could see nothing in the future to be hopeful about	0	1	2	3
38	I felt that life was meaningless	0	1	2	3
39	I found myself getting agitated	0	1	2	3
40	I was worried about situations in which I might panic and make a fool of myself	0	1	2	3
41	I experienced trembling (e.g., in the hands)	0	1	2	3
42	I found it difficult to work up the initiative to do things	0	1	2	3

PART III: SELF ESTEEM SCALE (Rosenberg, 1965)

Instructions: Below is a list of statements dealing with your general feelings about yourself. If you strongly agree, circle SA. If you agree with the statement, circle A. If you disagree, circle D. If you strongly disagree, circle SD.

1	On the whole, I am satisfied with myself.	SA	A	D	SD
2	At times, I think I am no good at all.	SA	A	D	SD
3	I feel that I have a number of good qualities.	SA	A	D	SD
4	I am able to do things as well as most other people.	SA	A	D	SD
5	I feel I do not have much to be proud of.	SA	A	D	SD
6	I certainly feel useless at times.	SA	A	D	SD

7	I feel that I'm a person of worth, at least on an equal plane with others.	SA	A	D	SD
8	I wish I could have more respect for myself.	SA	A	D	SD
9	All in all, I am inclined to feel that I am a failure.	SA	A	D	SD
10	I take a positive attitude toward myself.	SA	A	D	SD

PART IV: Factors that Lead Students to Depression and Anxiety

Please give your degree of agreement for the following causes of depression ,anxiety and stress
The rating scale is as follows:
3-strongly agree ,   2-agree,   1 -strongly disagree,   0 -disagree

no	Causes of anxiety, stress and depression	scale			
1	Having difficulty in dating	0	1	2	3
2	sexually transmitted infections as a result of unsafe sexual practice	0	1	2	3
3	Difficulty in making friends	0	1	2	3
4	Conflicts in terms of religious and racial issues among students	0	1	2	3
5	lack of coin for raw materials	0	1	2	3
6	Worry about self safety in the campus	0	1	2	3
7	Lack of adequate sanitary facility in the living area	0	1	2	3
8	don't have adequate recreational facility in terms of type and quantity	0	1	2	3
9	Living room inconvenience to sleep anytime one wants	0	1	2	3
10	Overcrowding in dormitory	0	1	2	3
11	new conditions that are stressful in the first exposure (like presentation,)	0	1	2	3
12	Sleep deprivation	0	1	2	3
13	School work increases (Eg. Excessive home work)	0	1	2	3
14	Loneliness	0	1	2	3
15	Homesickness	0	1	2	3

16	unfamiliarity of environment	0	1	2	3
17	excessive pressure or coercion from parents	0	1	2	3
18	exccessive pressure or coercion from teachers	0	1	2	3
19	Test-anxiety	0	1	2	3
20	Deficits in social support curriculum and instruction	0	1	2	3
21	Team work related issues (Eg. Work with people you donot know)	0	1	2	3
22	Un fair assessment of Instructors due difference in religion	0	1	2	3
23	Un fair assessment of Instructors due difference in ethnicity	0	1	2	3
24	Un fair assessment of Instructors due to gender	0	1	2	3
25	Poor study habbits	0	1	2	3
26	Loss of loved one	0	1	2	3
27	family functioning	0	1	2	3
28	Having inflexible rules about how one should behave	0	1	2	3
29	substance abuse	0	1	2	3
30	Chronic illness eg. heart disease	0	1	2	3

APPENDIX 2: QUESTIONNAIRES AMHARIC VERSION

አዲስ አበባ ዩኒቨርስቲ

የትምህርትና ባህረይ ሳይንስ ጥናት ኮሌጅ

ሳይኮሎጂ ትምህርት ክፍል

በተማሪዎች የሚሞላ መጠይቅ

ክፍል አንድ፦ የዉል ስምምነት

ይህ ጥናት የሚያተኩረዉ/ዋና አላማዉ ድባቴ(depression ፣(anxiety) (sress) በአዲስ አበባ ዩኒቨርስቲ የመጀመሪያ አመት ተማሪዎች ላይ፡ በትምህርት ቤት እንቅስቃሴና ሴሳ ግንኙነቶች ላይ ነዉ፡፡ ስዚህ ጥናት መሳካት የናንተ ተሳትፎ በከፍተኛዉ አስተዋጾ ስላለዉ እንድትሳተፉ በአክብሮት እጠይቃሁ፡፡ ጥናቱ እናንተ ከምትሰጡት ከመባብ ጊዜና ጉልበት በስተቀረ ዉጤታችሁም ላይም ሆነ ሴሳ ጉዳት የለዉም፡፡ የምትሰጡት መረጃ ጥናቱ ከታሰበስት አላም በስተቅ ሴሳ አላማ የለዉም፤ሚስጢሩ የተደበቀ ነዉ፡፡በተጨማሪም ጥናቱ የሚሳካዉ ትክክለኛዉና አጋባባዊ መልስ ስትሰጡ ብቻ ስለሆነ በአገባብ እንብባችሁ እንዲትመልሱ ጨምሬ በአክብሮት እጠይቃስሁ፡፡

ስስ ጥናቱ ምንነትና አላማ ተነግሮኛና ተስማምቼ የጹሁፍ ስምምነት በመስጠት መሳተፌን በፈርማዬ አረጋግጣስሁ፡፡

--------------------------ፌርማ

❖ ስምዎትን አይጻፉ/መጻፍ አይፈቀድም!

ክፍል ሀስት፦ የግል መረጃዎች

1. **የመ/ቁ**(Id no)_____

2. **የሚያጠኑበት መንፈቀ ዓመት**(ACADEMIC YEAR)_____

3. **ጾታ ወንድ** ☐ **ሴት** ☐

4. **ዕድሜ**____

5. **የትዉልድ ቦታ ከተማ** ☐ **ገጠር** ☐

6. **የሚያጠኑበት የትምህርት አይነት**(department)_____

7. **የቤተሰብ ትምህርት ደረጃ**

   ሀ)የአባት የትምህርት ደረጃ   ያልተማረ ☐ የመጀመሪያ ደረጃ ትምህርትያጠናቀቀ ☐ ሁለተኛ
   ትምህርት ደረጃ ያጠናቀቀ ☐ ሰርተፍኬት ☐ ኮሌጅ ምሩቅ ☐ ዩኒቨርስቲ ምሩቅ ☐

   ለ)የእናት የትምህርት ደረጃ

   ያልተማረች ☐ የመጀመሪያ ደረጃ ትምህርት ያጠናቀቀች ☐ ሁለተኛ ደረጃ ትምህርትያጠናቀቀች ☐   ☐
   ሰርተፍኬት ☐ ኮሌጅ ምሩቅ ☐ ቨርስቲ ምሩቅ

ክፍል ሶስት፦ ድባቴ(depression) የመረበሽ(anxiety) እና የመጨነቅ(stress) መለኪያ

የሚከተሉት አረፍተ ነገሮች የሚያሳዩት ሳስፈዉ ሳምንት በምን ያህል በርስዎ ሳይ እንደተከሰቱ የሚያሳዩ ናቸዉ፡፡
ስለዚህ አረፍተ ነገሮችን የተሰጡት ቁትሮች(0፣1፣2፣3፣) እያከበቡ ይመልሱ፡፡ ከሚሰጡት መልስ ትክክለኛ ወይም ትክክለኛ
አይደለም የሚባል የለም ፡፡ ስማናቸዉም ጥያቄዎች ብዙ ጊዜ መዉሰድ አይፈቀድም፡፡
0-በእኔ ላይ ምንም አልተከሰተም፤   1-በእኔ ላይ በተወሰነ ጊዜ ተከስተዋል፤አንደንዴ፤
2- በተመጣጣኝ ሁኔታ-ጥሩ የህይወቴ አካል   3-በእኔ ላይ ብዙ ጊዜ ተከስተዋል-አብዛኛዉን ጊዜ የሚሉ ናቸዉ፡፡

1	በትናንሽ ነገር ራሴን ተናድጄ አገኘሁ	0	1	2	3
2	የአፌ መድረቅ ታዉቆኛል	0	1	2	3
3	ምንም አይነት በጎ ነገር እንዳሳረኩ ይሰማኛል	0	1	2	3
4	የመተንፈስ ችግር ያጋጠመኛል(በጣም መተንፈስ ወይም ያስመተንፈስ) ምንም አይነት ዉጫዊ ችግር ሳይኖርብኝ	0	1	2	3
5	ሲንቀሳቀስ የሚያቅተኝ ይመስሳል	0	1	2	3

6	ስነገሮች ከመጠን በላይ ቦታ እሰጣለሁ	0	1	2	3
7	መጨባበጥ(መንቀጥቀጥ) ላይ ችግር እንዳለኝ ይሰማኛል	0	1	2	3
8	መንቀሳቀስ ላይ ሲከብዲኝ አያስь	0	1	2	3
9	የሚያሽብረኝ ነገሮች የማዉቃቸዉ ካለቁ በጋሳ ነዉ	0	1	2	3
10	ስወደፈት ምንም መመኪያ እንዲሴስኝ ይሰማኛል	0	1	2	3
11	በቀላሉ እከፋስሁ(አልደሰትም)	0	1	2	3
12	ሰሜታዊ ጉልበት እንደሚጠቀም ይሰማኛል	0	1	2	3
13	ሀዘን ወይም መደበት(depression) ይሰማኛል	0	1	2	3
14	ነገሮች ሲዘገዩ ትዕግስት አጣስሁ(ስምሳሴ፦ሲፍ ላይ፣ትራፌክ መብራት፣ሰዉ ሲጠባበቅ)	0	1	2	3
15	ራሴን የመሳት ስሜት ይሰማኛል	0	1	2	3
16	ስማንኛዉ ነገር ልክ ፍሳጎት እንዳጣሁ ይሰማኛል	0	1	2	3
17	እንደ ሰዉ ጠቃሚ እንዳልሆንኩ ይሰማኛል	0	1	2	3
18	ስሜን ቸሉ እንዳልተነገቀኩ ይሰማኛል	0	1	2	3
19	ያልበኛል(ስምሳሴ፦እጂን ምንም አይነት ሙቀት ወይም ስራ ሳይኖር)	0	1	2	3
20	ያስምክንያት የፍርሃት ስሜት ይሰማኛል	0	1	2	3
21	ሕይወት ትርጉም እንደሲሰዉ ይሰማኛል	0	1	2	3
22	ራሴን ማቀዝቀዝ/ማረጋጋት ያቀቅተኛል	0	1	2	3
23	የመዋጥ ችግር ነበረብኝ/ያጋጥመኝ ነበር	0	1	2	3
24	ከሰራሁት ዉጭ ሴሳ መዝናና የማገኝ አይመስስኝም	0	1	2	3
25	ያስምንም ምክንያት የልብ እንቅስቃሴ ይታወቀኛል	0	1	2	3
26	የልቢ ቢስነትና ግራ መጋባት ስሜት ይሰማኛል	0	1	2	3
27	በቀላሱ/ቸሉ እንደተናዶ/ዲኩ ራሴን አገኛስሁ	0	1	2	3
28	ስድንጋጤ ቅርብ እንደሆንኩ ይሰማኛል	0	1	2	3
29	ከንዴት በጋሳ መረጋጋት ያቅተኛል	0	1	2	3
30	ሳልተስመዶና አስስተኛ ነገር ዉስጥ እንደሚወድቅ ያስፈራኛል	0	1	2	3
31	ስማንኛዉም ነገር ደስታ ማሳየት አቅተኝ ነበር	0	1	2	3
32	ራሴ የፈጠርከቸዉ መረበሾችን(ANXIETY) መቀበል ያቅተኛል	0	1	2	3
33	ከፍተኛ ስሜት ዉስጥ ነበርኩን	0	1	2	3
34	የማልጠቅም ሰዉ እንደሆንኩን ተሰምቶኛል	0	1	2	3
35	የሚመስከተኝ ስራ ዉስጥ ካልተሳተፍኩኝ ትዕግስት አጣስሁ	0	1	2	3
36	ሀይስኛ ሀዘን ተሰምቶኛል	0	1	2	3
37	ስወደፈት ተስፋ የሚሰጥ ምንም ነገር አይታየኝም	0	1	2	3
38	ሕይወት ተስፋ የስሽ እንደሆነ ይሰማኛል	0	1	2	3
39	ራሴን እንደተጨነኩ አገኛስሁ	0	1	2	3
40	ዝቅ ያደረጉኝና አጋጣሚ የነበሩ ክስተቶች አጨናንቀኛሉ	0	1	2	3
41	የመንቀጥቀጥ ስሜት ተሰምቶኛል (ስምሳሴ፦እጂን)	0	1	2	3
42	ስራ ጀምሮ መስራት ላይ ሲያስቸገረኝ አገኛስሁ	0	1	2	3

ክፍል አራት

ከዚህ በታች ያሉ መጠይቆች ስራሳችሁ ያሳችሁን ግምት ይመስከታሱ፡፡ስለዚህ እንደ አጠያየቃቸዉ ሙሷቸዉ፡፡

ስቀጥሮች የተሰጠዉ ስም/መስያ					
0-ማስት በጣም እስማማለሁ 1-እስማማለሁ 2-አልስማማም 3-በጣም አልስማማም					
ተ.ቁ	አረፍተነገሮች		የስምምነት መስያ		
1	ሙሉ በሙሉ በራሴ ተደስቻለሁ	0	1	2	3
2	ሲነሳ ሙሉ በሙሉ ጥሩ አይደለሁም እሳሰሁ	0	1	2	3
3	ጥሩ ባህሪያቶች እንዳሉኝ ይሰማኛል	0	1	2	3
4	አብዛኛዉ ሰዉ እንደሚሰራ ስራ መስራት እችላለሁ	0	1	2	3
5	ኩሩ የሚያደርገኝ ነር አይደለሽ ይሰማኛል	0	1	2	3
6	ሲነሳ ጥቅም የለሽ እንደሆንኩ ይሰማኛል	0	1	2	3
7	ቢያንስ በአንድ ደረጃ ክለሉ� ደህና ሰዉ እንደሆንኩኝ ይሰማኛል	0	1	2	3
8	ስወደፊት ብዙ ክብር እንዲኖረኝ እመኛለሁ	0	1	2	3
9	ሙሉ በሙሉ በዉድቀት እንደተከበብኩ ይሰማኛል	0	1	2	3
10	ስራሴ መልካም አኳኋን አለኝ	0	1	2	3

ክፍል አምስት

የሚከተስት ሐረጎች ድባቴ(depression), መረበሽ(anxiety), መጨነቅ(stress) መከሰታዉ መንሰዔዎች ላይ ያተኩራል። ስስዚህ የመስማማታሁን መጠን አሳዩ።

0 ማስት በጣም እስማማለሁ 1-እስማማለሁ 2-አልስማማም 3-በጣም አልስማማም					
ተ.ቁ	መንስዔዎች		የስምምነት መስያ		
1	የመቀጣጠር ያስመቻል(ጸታዊ)	0	1	2	3
2	ጕደኛ የመፍጠር ችግር	0	1	2	3
3	በተማሪዎች መሃል ከሀይማኖት የሚመነጭ ግጭት	0	1	2	3
4	የገንዘብ ማጣት ችግር	0	1	2	3
5	ስስ ግል ንጽህና መጨነቅ	0	1	2	3
6	የመዝናኛ ቦታ እጥረት(በቀጥርና ጥሪት)	0	1	2	3
7	በተማሪዎች መሃል ከዘር የሚመነጭ ግጭት	0	1	2	3
8	በቦታዉ ያስመመቸት እንደፈስጉ ያስመተኛት	0	1	2	3
9	በዶርም ዉስጥ መጨናነቅ/የተማሪ መብዛት	0	1	2	3
10	ስጭንቀት ፈጣሪ አዳዲስ ነገሮች መጋስጥ(ስምሳሴ፡-ጸሁፎችን ማቅረብ)	0	1	2	3
11	የእንቅልፍ መዛባት	0	1	2	3
12	የትምህርተ ክፍል ስራ መብዛት(ስምሳሴ፡-ከመጠን በላይ የቤት ስራ)	0	1	2	3
13	ብቸኝነት	0	1	2	3
14	የቤተሰብ ናፍቆት	0	1	2	3
15	መኗሪያ አካባቢ አዲስነት	0	1	2	3

16	ከመጠን በላይ የሆነ ግፊት ከመሳጆች	0	1	2	3
17	ከመጠን በላይ የሆነ ግፊት ከመምህራን	0	1	2	3
18	የፈተና ጊዜ ድንጋጤ	0	1	2	3
19	የድጋፍ እጥረት	0	1	2	3
20	ስርዓተ ትምህርትና መምሪያ	0	1	2	3
21	በአንድነት የሚሰሩ ስራዎች(ስምሳሌ ከማያዉቋቸዉ ጋር መስራት)	0	1	2	3
22	ከሀይማኖት የመነጨ አገባብ የሴስ የመምህራን አመዛዘን	0	1	2	3
23	ከዘር የመነጨ አገባብ የሴስ የመምህራን አመዛዘን	0	1	2	3
24	ከጾታ የመነጨ አገባብ የሴስ የመምህራን አመዛዘን	0	1	2	3
25	ጾታዊ ትንኮሳ	0	1	2	3
26	የሚወዱትን ማጣት	0	1	2	3
27	ቤተሰብ ዉስጥ ስምምነት ያለመኖር	0	1	2	3
28	ስመንቀሳቀስ ወጥ የሆነ ህግ ማስቀመጥ	0	1	2	3
29	አልኮል መጠጦችን መጠቀም	0	1	2	3
30	ዘላቂነት ያላቸዉ በሽታዎች(ስምሳሌ የልብ በሽታ)	0	1	2	3
31	ጥራት የጎደስ የአጠናን ዘዴ	0	1	2	3

ስመልካም ትብብርዎ ከልብ አመሰግናስሁ!

Appendix 3:   Frequency Table of factors that leads students to DAS

No	Causes of DAS	Response by %	
		Agree	Disagree
1	Having inflexible rules about how one should behave	193 (74.5%)	66(25.5%)
2	Excessive pressure from teachers	190 (74.4%)	69(26.6%)
3	Test anxiety	190 (74.4%)	69(26.6%)
4	Loss of loved one	191(73.7%)	68(26.3)
5	Poor study habits	189 (73%)	70(27%)
6	Deficits in social support	189 (73%)	70(27%)
7	Curriculum and instruction	187 (72.2%)	72(27.8%)
8	Home sickness	178 (68.7%)	81(31.3%)
9	school work increases	176 (68%)	83(32%)
10	Team work related issues (Eg. Work with people you do not know)	176 (68%)	83(32.0%)
11	unfamiliarity of environment	175(67.6%)	84(32.4%)
12	loneliness	174(67.2%)	85(32.8%)
13	Un fair assessment of Instructors due difference in ethnicity	174(67.2%)	85(32.8%)
14	family functioning	174(67.2%)	85(32.8%)
15	Worry about self sanitation in the campus	173(66.8%)	86(33.2%)
16	Chronic illness eg. heart disease	169(65.3%)	90(34.7%)
17	excessive pressure from parents	168(64.9%)	91(35.1%)
18	sleep deprivation	165(64.7%)	94(36.3%)
19	Un fair assessment of Instructors due to gender	166(64.1%)	93(35.9%)
20	Difficulty in making friends	163(62.9)	96(37.1%)
21	Un fair assessment of Instructors due difference in religion	162(62.5%)	97(37.5%)

22	Lack of adequate sanitary facility in the living area	160(61.8%)	99(38.2%)
23	lack of coin for raw materials	160(61.8%)	99(38.2%)
24	new conditions that are stressful in the first exposure	157(60.6%)	102(39.4%)
25	substance abuse	149(57.5%)	110(42.5%)
26	Having difficulty in dating	146(56.4%)	113(44.6%)
27	Conflicts in terms of religious and racial issues among students	139(53.7%)	120(46.3%)
28	Overcrowding in dormitory	136(52.5%)	123(43.5%)
29	Living room inconvenience to sleep anytime one wants	123(47.5%)	136(52.5%)
30	Don't have adequate recreational facility in terms of type and quantity	121(46.7%)	138(53.3%)