

## A New Challenge: Depression is a Significant Problem among University Students

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Mental health is a new priority for modern public health due to the growing number of morbidity caused by mental illness such as depression or anxiety disorders (1). Mental illness, and depression is a leading cause of mental health problems, also affects disability rates of a population as well as death rates indirectly through elevating the risk of suicide. In addition, depression has been recognized as an independent risk factor for coronary heart disease (2), therefore it may contribute to the development of leading causes of mortality.

Epidemiological studies help us to understand background variables influencing the onset of depression. Mental health promotion and prevention programmes should start as early as adolescence since this is the age group where mental health problems begin to emerge in a greater amount. However, whereas we know more and more about adolescent depression, less is known about depression in another age group, namely, life period during college years.

Modernization brought about tremendous changes in the life cycle, among others, a prolongation in adolescent period. Social scientists call this life period postadolescence in which some of the characteristics of youth's behaviour are still similar to adolescents, whereas others are closer to adulthood. Youths spend more and more time in higher education which may cause an unstable identity and many psychosocial challenges. The number of students is increasing all over the world and youths may have to leave the parental home and face a number of difficulties, such as financial problems or the increased achievement pressure.

They must therefore adapt to the circumstances of the university environment. First-year students are particularly at risk since they have to face many behavioural challenges and develop new psychosocial identity, whereas older students face greater achievement pressure geared to the job market. All these contribute to an elevated vulnerability among university students and, as a consequence, the prevalence of psychiatric distress and depression is becoming higher among them (3). On the other hand, studies revealed that among students with a psychiatric disorder, only a smaller proportion sought medical care (4).

There is a need to understand the mechanisms contributing to this process and the mental health status of university students should become a key issue in public health. Therefore, the study of Lowe *et al* in this issue of the Journal seems to provide important information on factors associated with depression in students at The University of the West Indies, Mona, Jamaica (5). This paper is unique in examining a subgroup of college students who may be at high risk for becoming depressed due to their economic and other socio-economic characteristics. The authors collected data from a wide cross-section of the university population ( $n = 690$ ) and nearly 40% of the students scored in the clinically depressed range using the Brief Screen for Depression (BSD). Not surprisingly, female students tended to report higher levels of depression compared to males.

Being married and having mothers with higher schooling level provided a protection against depression, whereas the presence of a chronic condition or disability proved to be a risk factor. We should also note here that there were differences among students by faculty of the study; medical students scored lowest while students from the social science faculty scored highest. More depressed students belonged to the unemployed group. Depression was also associated with seasonality; during the Christmas season, more students were depressed. This might also be linked to a lack of social support as a previous research suggested (3).

The high rate of depressed students is shocking indeed. The authors suggest that students most at risk should be actively screened for depression especially during the month of December. Those who are clinically depressed should be referred to a therapist for clinical treatment. It is also appropriately recommended by the authors that education on the symptoms and risk factors may be given to students (maybe on-line) during the first semester of the university year. Peer education of helpers may also assist in developing a network for mutual help among students. As another paper suggests, self-esteem is a powerful protective factor against depression, therefore, strengthening positive well-being through developing a strong self-esteem would also be a key point in prevention (6). This is particularly important not only in prevention of depression but also in prevention of substance use since university students are particularly at high risk for smoking, binge drinking or illicit drug use during examination periods (7). There is a close connection between depression, affect-regulation and smoking, and college students often use illicit substances to cope with

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pressures of examinations, especially those who are more likely to get depressed.

As this paper suggests, depression may be a significant problem in students at The University of West Indies, Mona campus. Other studies also justify that this is a growing problem that creates a great challenge for modern society's public health. More studies are needed on the issue and the results may help develop new strategies for mental health promotion on university campuses.

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