Relationship between Depression and Students' Health as Well as Their Academic Achievement at Secondary Level Due to War Hazards Including U.S Drone Attacks in North Waziristan Agency

Matiullah^{1*} Muhammad Saqib Khan² Saqib Shahzad³ Ishtiaq Ahmad⁴ Ahmadullah⁵
1. Lecturer, Department of Education & Research, Sub-Campus Lakki Marwat, UST Bannu
2. Lecturer, Department of Business Administration, Gomal University, D.I.Khan
3. Assistant Professor, Department of Education, Abdul Wali Khan University, Mardan
4. Prof. of Surgery, Al-Nafees Medical College & Hospital, Isra University Islamabad Campus
5. Ph.D Scholar and S.S (Zoology), Department of Zoology, University of Peshawar

Abstract

Depression is that psychological problem in which adolescents are sad and broken down; they feel loneliness and mostly show th symptoms like low self-esteem, self blame, hopelesnees, suicide thought, anger and bad temper (Elgard and Arlett, 2002). The main purpose of the study was to determine the relationship between depression and students' health as well as their academic achievement at Secondary level due to war hazards including U.S drone attacks in North Waziristan Agency. All 10th class students of Govt. High Schools in North Waziristan Agency were the population of the study. Four hundred and three respondents were taken as sample from the selected Govt. High Schools. Respondents were taken through simple random sampling technique. The study was delimited to 10th class students of thirty schools only i.e.(15 male and 15 female Govt. High Schools) in North Waziristan Agency in which 50.12% respondents were male and 49.88% were female. Data was collected through face-to-face questionnaire having five options 'Always', 'Frequently', 'Occasionally', 'Seldom' and 'Never' carrying values 5, 4, 3, 2 and 1 respectively in order to get the responses of the respondents easily and clearly. The study concluded that war hazard including U.S drone attacks caused depression in North Waziristan Agency in which students suffered a lot mentally, physically and academically.

Keywords: War Hazard, U.S. Drone Attacks, Depression, Students' Health, Academic Achievement and Schools.

1. Introduction

Depressed students are highly sad and anxious; they always feel worthless and pessimistic due to which they are angry and of empty mood; similarly depressed students never take interest in their studies and they always want isolation in the society (Rohan, et al., 2004). Depression negatively influences students' ability to work, sleep, study and eating (Luoma, Pearson, & Martin, 2002). Students suffering from depression also suffer from anxiety disorder, post-traumatic stress disorder, panic disorder and social phobia (Devane, et al., 2005). Students suffering from depression may also face other diseases such as heart attack, stroke, cancer, AIDS and diabetes etc. (Krishnan & Taylor, 2004).

Depression badly affect students' brains particularly their moods, their thinking power, sleep and appetite (Shear, et al., 2005). Students with depression are constantly sick and they refuse to go to school and are not independent to make decision (Cyranowski, et al., 2000). Students having depression lose their weights and sometimes try to commit suicide (Rohan, et al., 2004). Depressed students mostly think about suicide. (Cyranowski, et al., 2000). Depression negatively affects students' lives, their behaviors due to which they show poor academic achievement (Sjöberg, et al., 2005). Students suffering from depression are psychologically disturbed (Hayman, et al., 2007).

2. Literature Review

War hazards and U.S. drone strikes are also responsible for headaches; digestive disorders and poor judgment of the students (Rohan, et al., 2004). Depressed students have poor health (Hagell & Westergren, 2006). Students with major depression always think about suicide attacks, academic failure and interpersonal problems (Trivedi, et al., 2006). Depression badly influences every aspect of students and such type of students mostly think about violence and suicide (Bridge, et al., 2007). Students under depression are highly frustrated and they easily outburst to anger (Adewuya, et al., 2006). Depressed students also suffer from other physical ailments such as headaches and stomachaches (Lisanby, 2007). Failure, criticism, feeling of worthlessness and rejection are common in depressed students (Yan, et al., 2006).

Depressed students appreciate isolation (Bayram & Bilgel, 2008). Lower energy and concentration difficulties are all because of depression in students (Bostanci, et al., 2005). Students with depression have poor attendance and poor grades and they are highly frustrated also (Morissette, et al., 2008). Depressed students may

also drinker, violence stricken and dangerous for society (Jane-Lollips & Matystina, 2006). Depressed students sometimes give preference to suicide (Egede, 2007). Negative emotions such as sadness, bitterness and anger are common in depressed students (Kelly, 2009). Depressed students are melancholic-minded and emotionally disturbed (Neimeier, Kupfer, & Gieler, 2006).

Depression is also associated with eating disorders (Gostautas, Pranckeviciene, & Matoniene, 2006). Depressed students are fully pessimistic due to which they can't show fruitful performance academically (Surtees, et al., 2002). Psychologically depressed students always show poor academic achievement (Sherina, et al., 2003). Depressed students reject pleasure, interest in studies and they are also suffer from insomnia; guilty feelings and lack of concentration are also rife in depressed students (Hysenbegasi, et al., 2005). Depressed students also suffer from chronic diseases like allergy, diabetes, asthma and pneumonia etc (Hysenbegasi, et al., 2005).

3. Research Methodology

3.1 Research Design

The study was descriptive in nature.

3.2 Population of the Study

The population of the study consisted of all male and female students of Secondary Schools in North Waziristan Agency under the jurisdiction of BISE Bannu.

3.3 Duration

The researcher completed this research task in one year.

3.4 Sampling Technique

Stratified Random Sampling technique was used.

3.5 Sample Size

The population was divided into two strata i.e. urban and rural. Thirty Secondary Schools (15 urban and 15 rural) were selected randomly in which nine boys' Secondary Schools and six girls' Secondary Schools were urban. Similarly, six boys' Secondary Schools and nine girls' Secondary Schools were rural. The total numbers of respondents taken as sample were 403 as shown in the table 1 below:

Sample Size Rule of Thumb 10-100 100%

 101-1000
 10%

 101-1000
 10%

 1001-5000
 5%

 5001-10000
 3%

 10000 + 01%
 10%

Source: Curry, J. (1984). Professor of Educational Research, North Texas State University; Sample Size Rule of Thumb; *Populations and Sampling*, 7-4.

Table 3.1: The Sampling Framework (n=403)

Respondents as Samples in Urban Areas Secondary				Respondents as Samples in Rural Areas Secondary				
Schools			Schools					
Male	Sampled	Female	e Sampled Male Sampled Female Sampled					
Schools	Respondents	Schools	Respondents Schools Respondents Schools Respondent					
9 122 6 80 6 80 9 121						121		
Total numbers of male schools $= 15$ Male Respondents as samples (n=202, 50.12%)								
Total numbers of female schools = 15 Female R				spondents as samples (n=201, 49.88%)				
Grand Total of sampled Schools = 30 Total Sampled Respondents (n=403, 100%)								

4. Data Collection

The researcher completed this novel research study through his personal interest for which the reserecher studied different materials related to his research study such as journals, newspapers, magazines, books and internet etc. The researcher also conducted seminars with expert educationists, psychologists and psychiatrists regarding psychotraumic problem (depression) caused by war hazards in North Waziristan Agency. The researcher personally collected data from respondents at Secondary Schools level in North Waziristan Agency. The researcher finally tried his best to identify the impact of depression on students' mental, physical health and academic achievement at Secondary Schools level due to war hazards in North Waziristan Agency.

5. Data Collection Instrument

The researcher developed a unique questionnaire i.e. "Face-to-face Questionnaire" for data collection from

students regarding depression caused by war hazards in North Waziristan Agency and its impact on students' mental, physical health and academic performances and academic achievement at Secondary School level in North Waziristan Agency.

6. Measurement Scale

The researcher used a novel scale with five options "Always", "Frequently", "Occasionally", "Seldom", and "Never" carrying values 5,4,3,2 and 1 in order to measure the opinions and views of the students. The scale is given below in the form of table.

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Table 6.1: Illustration	of Scale.	Applied for	Data Co	llection ((n=403)

Version	Always	Frequently	Occasionally	Seldom	Never
Numerical Values	5	4	3	2	1

7. Pilot Study

For validity, the researcher administered his initial draft of questionnaire to thirteen research experts i.e. five psychiatrists, six psychologists and two educationists. The experts were requested to bring corrections, modifications or changes in the statements of the questionnaire for the purpose of refinement. For reliability the questionnaire was distributed among 50 students at Secondary level in North Waziristan Agency. Chronbac Alpha formula was used for reliability assessment and obtained Chronbac Alpha was .789.

8. Data Analysis

Data was analyzed through Arithmetic Mean, Std. Deviation and Pearson Correlation by using SPSS (Version 16.0).

9. Results

A total of 403 respondents, 403 repondents were interviewed from thirty Secondary Schools (fifteen rural and fifteen urban). Among them, 202 (50.12%) were male and 201 (49.88%) were females. Among them 73 (18.11%) respondents feel always depression due to war hazard and U.S drone attacks; 22 (5.46%) respondents frequently feel depression; 93 (23.08%) respondents ocassionally feel depression; 41(10.17%) respondents seldom feel depression and 174 (43.18%) respondents never feel depression due to war hazard and U.S drone attacks in North Waziristan Agency.

Among male respondents (n=74, 36.63%) never feel depression due to war hazard and U.S drone attacks in North Waziristan Agency, similarly (n = 11, 5.45%) seldom deel depression; (n = 40, 19.8%) ocassionally feel depression; (n = 13, 6.44%) frequently feel depression and (n = 64, 31.68%) always feel depression because of war hazards and U.S attacks in North Wazitistan Agency due to which students' show poor academic achiemvent.

In the same way among female respondents (49.75%, n = 100) never feel depression becuae of war hazards and U.S drone attacks in North Wazitistan Agency; likewise (14.93%, n = 30) seldom feel depression; (26.37%, n = 53) ocassionally feel depression; and (4.48%, n = 9) frequently as well as always feel depression due to war hazards and U.S drone attacks in North Wazitristan Agency because of which students show poor academic grades at Secondary level education as shown in the graph and table 9.1 below:

Attacks in North Waziristan Agency (n=403)	Cable 9.1: Respondents' Responses regarding Depression Caus	sed by War Hazard as Well as I	J.S Drone
	Attacks in North Waziristan Agency (n=403)		

Gender	Never	Seldom	Occasionally	Frequently	Always	Total
Male	74	11	40	13	64	202
Male	(36.63%)	(5.45%)	(19.8%)	(6.44%)	(31.68%)	(50.12%)
Female	100	30	53	9	9 (4.48%)	201
remate	(49.75%)	(14.93%)	(26.37%)	(4.48%)	9 (4.4070)	(49.88%)
Tatal	174	41	93	22	73	402 (1000/)
Total	(43.18%)	(10.17%)	(23.08%)	(5.46%)	(18.11%)	403 (100%)



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Fig 9.1: Respondents' Responses regarding Depression Caused by War Hazard as Well as U.S Drone in North Waziristan Agency

Table 9.2: Correlation between Depression and Academic Achievement of 10th Class Students

Psycho-Traumic Problems due to War Hazard and U.S Drone Attacks in North Wazirisan Agency	Mean	S.D	r	Sig.
Depression	2.2010	1.29169	-912*	.000
N=403 *p<0.05 **p<0.01(2-tailed).				

Table 9.2 shows that the Mean of Depression = 2.2010, S.D = 1.29169, r = -912^* and p = .000. The value of p is less than 0.05 and the value of 'r' is negative so there is negative correlation between depression and academic achievement of 10^{th} class students.

10. Discussion

Results of the study indicates that thers is negative relationship between depression and academic achievement of students at Secondary School level in North Wazuritan Agency. And this also illustrates that the highrer the depression among students, the lower their level of academic achievement. Depression also negatively influence the learning capabilities of students at Secondary school level. Depression also causes physical, mental and psychological problems for students at Secondary level due to which they hardly pass academically. The researcher examined that depression is quite prevalent in North Waziristan Agency because of war hazards due to which students are fully disturbed and they confront other health problems also. Depression negatively influence students' concentration power and their learning ablities. Depression also badly affect the growth and development of students at Secondary school level and even they face death too due to depression caused by war hazards and U.S drone attacks in North Waziristan Agency.

11. Conclusions

Depression had high negative impact on students' academic achievement at Secondary school level in North Waziristan Agency and depression stricken students were highly disturbed physically, mentally and psychologically and they always showed poor academic achievement due to intense depression for which war hazards and U.S. Strikes were highly responsible.

12. Recommendations

The following recommendations are suggested for sympathetic consideration by keeping in view the results, discussion and conclusions mentioned above; and it is expected that the government of Pakistan may take initiative and productive steps in this regard.

1. The government of Pakistan may judicially stop drone attacks as well as war hazard in North Waziristan Agency as these attacks are the violation of the sovereignty of Pakistan.

- 2. Psychotraumic students in North Waziristan Agency may be referred to expert psychologists and psychiatrists for their proper treatment.
- 3. The government of Pakistan may arrange special medical, psychological and psychiatric wards for the treatment of all traumatic (depressed) students due to war hazard and U.S drone attacks in North Waziristan Agency.
- 4. Guidance and counseling corners in schools for referrals, psychosocial trainings to teachers and awareness programs for self-management regarding depression may also be introduced.
- 5. To improve the situation in schools in North Waziristan Agency, further research on this topic may be conducted.

13. References

- Adewuya, A. O., Ola, B. A., Olutayo, O. A., Mapayi, B. M., & Oginni, O. O. (2006). Depression amongst Nigerian university students. Prevalence and sociodemographic correlates. Soc Psychiatry Psychiatr Epidemiol. 41, 674-8.
- Bayram, N., & Bilgel, N. (2008). The prevalence and socio-demographic correlations of depression, anxiety and stress among a group of university students. *Soc Psychiatry Psychiatr Epidemiol*, 43, 667-72.
- Bostanci, M., Ozdel, O., Oguzhanoglu, N. K., Ozdel, L., Ergin, A., & Ergin, N. (2005). Depressive symptomatology among university students in Denizli, Turkey: prevalence and sociodemographic correlates. *Croat Med J.* 46:96-100.
- Bridge, J. A., Iyengar, S., Salary, C. B., Barbe, R. P., Birmaher, B., Pincus, H. A., Ren, L., Brent, D. A. (2007). Clinical response and risk for reported suicidal ideation and suicide attempts in pediatric antidepressant treatment, a meta-analysis of randomized controlled trials. *Journal of the American Medical Association*, 297(15), 1683-1696.
- Cassano, P., & Fava, M. (2002). Depression and public health, an overview. *Journal of Psychosomatic Research*, 53, 849-857.
- Cyranowski, J. M., Frank, E., Young, E., & Shear, M. K. (2000). Adolescent onset of the gender difference in lifetime rates of major depression. *Archives of General Psychiatry*, 57, 21-27.
- Devane, C. L., Chiao, E., Franklin, M., & Kruep, E. J. (2005). Anxiety disorders in the 21st century: status, challenges, opportunities and comorbidity with depression. *American Journal of Managed Care*, 11(12), 344-353.
- Egede, L. E. (2007). Major depression in individuals with chronic medical disorders: prevalence, correlates and association with health resource utilization, lost productivity and functional disability. *Gen Hosp Psychiatry*. 29, 409-16.
- Elgard J, F., & Arlett, C. (2002). Perceived social inadequacy and depressed mood in adolescents. J. Adolesc., 25, 301-305.
- Gostautas, A., Pranckeviciene, A., & Matoniene, V. (2006). Changes in depression and quality of life during inpatient treatment of depression. *Medicina (Kaunas)*, 42, 472-8.
- Hagell, P., & Westergren, A. (2006). The significance of importance: an evaluation of Furans and Powers' Quality of Life Index. *Quall Life Res*, 15, 867-76.
- Hayman, K. J., Kesre, N. M., La Grow, S. J., Wouldes, T., Robertson, M. C., & Campbell, A. J. (2007). Depression in older people: visual impairment and subjective ratings of health. *Optom Vis Sci.* 84, 1024-30.
- Hysenbegasi, A., Steven, L., Clayton, R., & Rowland. (2005). Impact of depression on the academic productivity of university students. *The Journal of Mental Health Policy and Economics*, 8, 145-151.
- Jane-Lollips, E., & Matystina, I. (2006). Mental health and alcohol, drugs, and tobacco: A review of the comorbidity between mental disorders and the use of alcohol, tobacco and illicit drugs. *Drug Alcohol Review*, 25, 515-36.
- Kelly, J. (2009). Parental death has major impact on depression risk in youth, Am J Psychiatry, 166, 786-794.
- Krishnan, K. R. R., & Taylor, W. D. (2004). Clinical characteristics of magnetic resonance imaging-defined subcortical ischemic depression. *Biological Psychiatry*, 55, 390-397.
- Lisanby, S. H. (2007). Electroconvulsive therapy for depression. *New England Journal of Medicine*. 357, 1939-1945.
- Luoma, J. B., Pearson, J. L., & Martin, C. E.(2002). Contact with mental health and primary care prior to suicide: a review of the evidence. *American Journal of Psychiatry*, 159, 909-16.
- Morissette, S. B., Gulliver, S. B., Kamholz, B. W., Duade, J., Farchione, T., & Devine, E. (2008). Differences between daily smokers, chippers, and nonsmokers with co-occurring anxiety and alcohol-use disorders. *Addict Behave*, 33, 1425-3.
- Neimeier, V., Kupfer, J., & Gieler, U. (2006). Acne vulgaris- psychosomatic aspects. J Dtsch Dermatol Ges. 4, 1027-36.

- Rohan, K. J., Lindsey, K. T., Roecklein, K. A., & Lacy, T. J. (2004). Cognitive-behavioral therapy, light therapy and their combination in treating seasonal affective disorder. *Journal of Affective Disorders*, 80, 273-283.
- Shear, K., Frank, E., Houck, P. R., & Reynolds, C. F. (2005). Treatment of complicated grief: a random-ized controlled trial. *Journal of the American Medical Association*. 293, 2601-2608.
- Sherina, M. S., Lekhraj, R., & Nadarajan, K. (2003). Prevalence of emotional disorders among medical students in a Malaysian university. *Asia Pac Fam Med*, 2, 213-217.
- Sjöberg, R. L., Nilsson, K. W., Leppert, J., & Obesity, S. (2005). Depression in school-aged children: a population-based study. *Pediatrics*, 116, 389-92.
- Surtees, P. G., Wainwright, N. W. J., & Pharaoh, P. D. P. (2002). Psychosocial factors and sex differences in high academic attainment at Cambridge University. *Oxford Review of Education*, 28, 21-38.
- Trivedi, M. H., Fava, M., Wisniewski, S. R., Thase, M. E., Quitkin, F., Warden, D., Ritz, L., Nierenberg, A. A, Lebowitz, B. D., Biggs, M. M., Luther, J. F., Shores-Wilson, K., Rush, J. A. (2006). Medication augmentation after the failure of SSRIs for depression. *New England Journal of Medicine*, 354(12), 1243-1252.
- Yan, H., Li, M., Dibley, M. J., Chang, S. Y., & Sib-Britt, D. (2006). Prevalence of overweight and obesity and its associated risk factors in students aged 11-17 in Xi'an in 2004. *Zhongguo Yi Xue Ke Xue Yuan Xue Bao*. 28, 234-9.