

## A Study On Student Depression In Chachoengsao Province, Thailand

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### Abstract

The purposes of descriptive research were to 1) study levels of student depression in Chachoengsao Province, Thailand; and 2) compare factors related to student depression in Chachoengsao Province, Thailand. The sample selected using the simple random sampling method was 304 elementary students and lower secondary students from schools in Muang District, Chachoengsao. The sample size was calculated by Krejcie & Morgan's Table. The research instrument was a questionnaire. The statistics used for data analysis were frequency, t-test, and f-test. The research results were as follows: 1) The level study of student depression in Chachoengsao Province, Thailand found that 82 students or 26.97% had no depression, whereas 222 students or 73.03% had depression. According to the classification of depression levels, there were 140 students or 46.05% with low depression, 51 students or 16.78% with moderate depression, and 31 students or 10.20% with severe depression. 2) When student depression in Chachoengsao Province was compared to students' general information, it was found that differences in students' gender, ages, and educational levels had an impact on their different depression levels, with a statistical significance.

Keywords: Depression, Student, Chachoengsao Province.

### Introduction

Today, depression is a significant mental health problem that affects populations all over the world. This is a consequence of social and economic change, which is pressured by economic and social problems, including inappropriate utilization of technology. These issues affect lifestyle regarding emotional changes that can cause depression. According to estimates from the World Health Organization, more than 4 percent of the world's population, or more than 300 million people, suffer from depression. From the statistics of the rate of depression among the world's population over the past 10 years, it was found that the rate has increased more than 18 percent. Additionally, it was shown that countries with low or middle incomes had the greatest rates of death due to depression—more than 80% (World Health Organization, 2017a). Depression is a form of mood illness when a person shows irregularities in their thoughts, motivation, emotions, and behavior. Today, it is thought that this disorder is a significant mental health problem. It can happen to people of all genders and ages and is more violent and number of depression people than ever before, with an especially high occurrence in teens. (Praythip Santaphan, Sirinaporn Bushong, and Chaowalit Sriserm, 2019, pp. 187-199). Although depression is a feeling of sadness or an emotion that may happen to everyone, as well as a feeling of physical discomfort, it is an emotion that is difficult to get rid of. People with long-lasting and severe depression should get treatment since, if not handled properly, it can eventually result in depression and even suicide. Therefore, if students with depression don't get the treatment and assistance they need in a timely manner, it might negatively affect their academic performance, social interactions, and a chance of finding employment in the future (Davies, Morriss, & Glazebrook, 2014, p. 130). In addition, depression in students leads to physical and mental illnesses. It is concern that they have a high chance of successfully committing suicide (Islam, Low, Tong, Yuen & Abdullah, 2018). Depression in students is preventable and treatable with proper care. Therefore, educational institutions should play an important role in promoting and preventing depression in students effectively. It involves collaboration with all relevant sectors, especially administrators, teachers/professors and personnel in educational institutions, learners, residents in communities surrounding educational institutions, and local government organization. This is done in

order to make sure that the attempt to promote and prevent problems with health in educational institutions is effective in accordance with the goals of educational institutions and the needs of society in order to produce graduates who are physically and mentally healthy and are prepared to continue to be significant citizens of the world (Parichat Muangkhaw, 2020, page 105).

Some students and teenagers with depression may not be able to recognize when they feel sad. This is difficult to diagnose depression, but it will find behaviors that have changed, such as a lack of interest in things that were once enjoyed, dissatisfaction with what was once a happy activity, dissatisfaction with people or life, expressing annoyance, being aggressive or lethargic, difficulty falling asleep or sleeping too much, being sluggish, looking low on energy, being weak, losing weight without intending to lose weight, feeling worthless, losing concentration, and thinking about planning suicide, and attempting suicide (Duangjai Wattanasin, 2016). According to a study conducted in Thailand, depression affects 13.3 percent of adolescents and 7.1% of school-age children, and it affects female teenagers two times more frequently than it does male adolescents (Bangkok Hospital, 2018). In addition, statistics from the Department of Mental Health during 2017 to 2021 indicate that suicide problems among school-age groups and early teenagers are 4 times more likely than working-aged people. The data from the National Suicide Prevention Center showed that in 2021, there were 439 students aged 15-24 years who committed suicide (Krungthep Turakij, 2022).

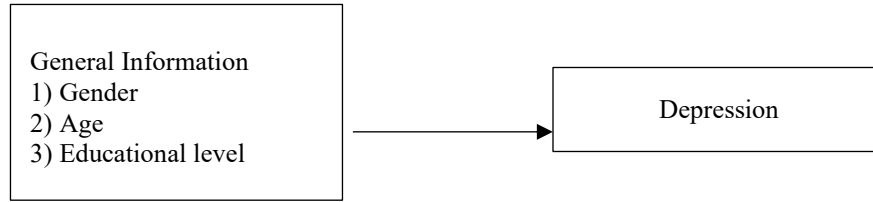
The researcher was therefore interested in studying the depression of students in their early teenagers in Chachoengsao Province, which had never been studied before to obtain basic information of students and use the data as guidelines for planning depression prevention services and providing mental health services for this group of students. This study will appropriately improve the quality of life of young people in the new generation.

### **The Objectives of Research**

1. Study levels of student depression in Chachoengsao Province, Thailand.
2. Study to compare student depression in Chachoengsao Province according to respondents' general information.

### Conceptual Framework

This research is qualitative research, and its conceptual framework is as follows:



**Figure 1 Conceptual Framework**

### Research Methodology

The research is descriptive research.

### Population and Sample

The population is 14,595 elementary students and low secondary students in Chachoengsao Province.

The sample is 304 elementary students and lower secondary students from schools in Muang District, Chachoengsao that are chosen by cluster sampling. The sample size was calculated by Krejcie & Morgan's Table. The sample is selected by using a simple random sampling method.

### The Research Instrument

The research instrument is a questionnaire that is divided into 2 parts.

Part 1: A questionnaire about general information of the respondents, including gender, age, and educational level.

Part 2: The Department of Mental Health's questionnaire (9Q) (2565) for assessing depression symptoms comprises nine items that should be answered during a two-week period. The score will be divided according to the following standards:

Choose option 3 at most / always practice, 3 points

Choose option 2 a lot / often practice, 2 points

Choose option 1 a little / practice some days, 1 point

Choose option 0, never trained, 0 point

The following criteria are used to interpret the results:

#### Total Score

< 7

#### Interpretation

No symptoms of depression or very mild symptoms of depression

7 to 12	Major Depression, mild
13 to 18	Major Depression, moderate
>19	Major Depression, severe

### **Assessing Quality of Research Instrument**

1. The questionnaire was examined by three experts for content validity using the Index of Items Objective Congruence (IOC) and questions with an IOC value of at least 0.5, yielding a content validity of 0.91.

2. Modified the questionnaire in accordance with advice from experts before trying out it with 30 participants from a sample group in Ratchasat District, Chachoengsao Province.

3. Tried out the questionnaire on 30 people who met the same qualifications as the sample group to verify reliability. Calculated the alpha coefficient according to Cronbach's method (Cronbach, 1990, pp. 201-204), which showed that the entire questionnaire had a reliability of 0.84.

### **Data Collection**

A developed questionnaire was used to collect the data. The researcher conducted his own data collection and checked the completeness of the information.

### **Data Analysis**

The researcher analyzed the data according to statistical methods using ready-made computer programs as follows:

1) Analyzed the general information of the respondents by calculating the frequency, and percentage.

2) Analyzed the questionnaire data regarding the level of depression, 9 questions, by analyzing the frequency and percentage.

3) Analyzed the comparative data on student depression in Chachoengsao Province, that were classified by general information of respondents by analyzing mean, and standard deviation (S.D.), t-test and f-test.

### **The Results of Research**

#### **1. The results of the respondents' general data analysis**

The sample that responded the questionnaire consisted of 304 people, most of whom were female, 168 people (55.26%), who were between the ages of 9 and 11, 49 people (16.12%), who

were in primary school, 182 people (59.87%) as shown in Table 1.

**Table 1 shows the number and percentage of respondents' general information.**

General Information	Number (N)	Percentage
<b>Genders</b>		
Male	136	44.74
Female	168	55.26
<b>Ages</b>		
7	8	2.63
8	23	7.57
9	49	16.12
10	32	10.53
11	49	16.12
12	25	8.22
13	12	3.95
14	24	7.89
15	22	7.24
16	15	4.93
17	31	10.20
18	14	4.61
<b>Educational Levels</b>		
Elementary	182	59.87
Secondary	122	40.13
<b>Total</b>	<b>304</b>	<b>100.00</b>

## **2. Analysis results of depression levels of students in Chachoengsao Province.**

According to a study on student depression in Chachoengsao Province, 82 students had no symptoms of depression (26.97%), 222 had symptoms of depression (73.03%), 140 had mild depression (46.05%), 51 had moderate depression (16.78%), and 31 had severe depression (10.20%), as shown in Table 2.

**Table 2 shows the number and percentage of depression levels of students in Chachoengsao Province.**

Depression	Levels	Number (N)	Percentage
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No symptoms of Depression	No or few symptoms of depression	82	26.97
Having symptoms of Depression	Major Depression, mild	140	46.05
	Major Depression, moderate	51	16.78
	Major Depression, severe	31	10.20

### 3. Comparison of data on student depression in Chachoengsao Province, that were classified by general information of respondents.

The results of the study found that gender, age, and educational level differed. The depression of students in Chachoengsao Province was significantly different, as shown in Tables 3, 4, and 5.

**Table 3** showed the results of comparison of opinions on student depression in Chachoengsao Province, classified by gender.

Text	Gender				t	Sig
	Male (n=136)		Female (n=168)			
	$\bar{X}$	S.D.	$\bar{X}$	S.D.		
Feeling bored and don't want to do anything	0.99	0.97	0.68	0.71	3.028	.003
Uneasy, Depressed, Discouraged	0.70	0.75	0.90	0.81	-2.213	.028
Difficulty falling asleep, staying asleep or staying awake or sleeping excessively	1.21	1.04	1.02	0.77	1.820	.070
Easily exhausted or lacking in energy	0.95	0.83	0.74	0.85	2.172	.031
Loss of appetite or excessive eating	0.91	0.77	0.82	0.73	1.045	.297
Feeling bad about yourself and thinking yourself a failure	0.64	0.87	0.64	0.68	.031	.976
Lack of concentration while doing something	1.15	0.91	0.70	0.84	4.502	.000
Act and speak more slowly	0.79	0.80	0.58	0.76	2.262	.024
Thoughts of hurting oneself or Die would be great	0.41	0.65	0.46	0.66	-.614	.540
<b>Total</b>	0.86	0.84	0.73	0.76	2.284	.023

According to the table's comparison of student depression in Chachoengsao Province by gender, the mean for men ( $\bar{X} = 0.86$ ) was higher than the mean for women ( $\bar{X} = 0.73$ ), resulting in a Sig.  $<.05$ , indicating that the genders are different. A statistically significant difference in student depression was found in Chachoengsao Province.

When considering each aspect, it found that depression of students in Chachoengsao Province in terms of difficulty falling asleep, staying asleep or staying awake or sleeping excessively, loss of appetite or excessive eating, feeling bad about yourself and thinking yourself a failure, and thoughts of hurting oneself or die would be great, resulted in a Sig.  $> .05$ . It meant that despite their diverse genders, the depression among students in Chachoengsao was not statistically significantly different. While feeling bored and don't want to do anything, Uneasy, Depressed, Discouraged, easily exhausted or lacking in energy, lack of concentration while doing something, act and speak more slowly, resulted in a Sig.  $<.05$ . It meant that their diverse genders, the depression among students in Chachoengsao was also statistically significantly different.

**Table 4 showed the results of comparison of opinions on student depression in Chachoengsao Province, classified by age.**

Text	Source of variation	Sum of Squares	df	Mean Square	F	Sig.
Feeling bored and don't want to do anything	Between groups	22.903	11	2.082	3.132	.001
	Within groups	194.146	292	.665		
	Total	217.049	303			
Uneasy, Depressed, Discouraged	Between groups	69.416	11	6.311	15.418	.000
	Within groups	119.518	292	.409		
	Total	188.934	303			
Difficulty falling asleep, staying asleep	Between groups	38.588	11	3.508	4.877	.000



or staying awake or sleeping excessively	Within groups	210.044	292	.719		
	Total	248.632	303			
Easily exhausted or lacking in energy	Between groups	39.239	11	3.567	5.878	.000
	Within groups	177.205	292	.607		
	Total	216.444	303			
Loss of appetite or excessive eating	Between groups	34.464	11	3.133	6.740	.000
	Within groups	135.734	292	.465		
	Total	170.197	303			
Feeling bad about yourself and thinking yourself a failure	Between groups	26.812	11	2.437	4.640	.000
	Within groups	153.386	292	.525		
	Total	180.197	303			
Lack of concentration while doing something	Between groups	29.208	11	2.655	3.606	.000
	Within groups	215.025	292	.736		
	Total	244.234	303			
Act and speak more slowly	Between groups	30.017	11	2.729	5.084	.000
	Within groups	156.743	292	.537		
	Total	186.760	303			
Thoughts of hurting oneself or Die would be great	Between groups	17.546	11	1.595	4.112	.000
	Within groups	113.267	292	.388		
	Total	130.813	303			
Depression	Between groups	1242.083	11	112.917	6.040	.000
	Within groups	5458.861	292	18.695		
	Total	6700.944	303			

\* A statistical significance of .05 level

According to the table's comparison of student depression in Chachoengsao Province by age, it found that different age overall resulted in a Sig. < .05. It indicated that the ages are different ( $F = 6.040$ , sig = .000). A statistically significant difference in student depression was found in Chachoengsao Province.

When considering each aspect, it found that depression of students in Chachoengsao Province results in a Sig. < .05 in all aspects. It meant that their diverse ages, the depression among students in Chachoengsao was also statistically significantly different.

**Table 5 showed the results of comparison of opinions on student depression in Chachoengsao Province, classified by educational level.**

Text	Educational level				t	Sig
	Elementary (n=182)		Secondary (n=122)			
	$\bar{X}$	S.D.	$\bar{X}$	S.D.		
Feeling bored and don't want to do anything	0.87	0.06	0.82	0.07	-2.286	.775
Uneasy, Depressed, Discouraged	0.68	0.05	0.83	0.07	-6.108	.000
Difficulty falling asleep, staying asleep or staying awake or sleeping excessively	0.97	0.07	0.81	0.07	1.013	.312
Easily exhausted or lacking in energy	0.77	0.06	0.93	0.08	-2.580	.010
Loss of appetite or excessive eating	0.67	0.05	0.83	0.08	-2.858	.005
Feeling bad about yourself and thinking yourself a failure	0.72	0.05	0.83	0.08	-2.246	.026
Lack of concentration while doing something	0.98	0.07	0.73	0.07	2.816	.005
Act and speak more slowly	0.72	0.05	0.86	0.08	-1.985	.048
Thoughts of hurting oneself or Die would be great	0.51	0.04	0.79	0.07	-4.161	.000
<b>Total</b>	0.76	0.06	0.83	0.07	-2.387	.018

According to the table's comparison of student depression in Chachoengsao Province by educational level, the mean for elementary ( $\bar{X} = 0.76$ ) was lower than the mean for secondary ( $\bar{X} = 0.87$ ), resulting in a Sig. < .05, indicating that the education

levels are different. A statistically significant difference in student depression was found in Chachoengsao Province.

When considering each aspect, it found that depression of students in Chachoengsao Province in terms of feeling bored and don't want to do anything, difficulty falling asleep, staying asleep or staying awake or sleeping excessively, resulted in a Sig. > .05. It meant that despite their diverse educational levels, the depression among students in Chachoengsao was not statistically significantly different. While loss of appetite or excessive eating, feeling bad about yourself and thinking yourself a failure, thoughts of hurting oneself or Die would be great, Uneasy, Depressed, Discouraged, easily exhausted or lacking in energy, lack of concentration while doing something, act and speak more slowly, resulted in a Sig. <.05. It meant that their diverse educational levels, the depression among students in Chachoengsao was also statistically significantly different.

### **Discussion**

1. According to the results of a study on depression in students in Chachoengsao Province, 73.03 percent of the students had depression, which is slightly more than Prapassorn Chandee (2021, p. 259) who found that low secondary students in schools of opportunity expansion school, had depression, 65.60 percent. From Prawanapa Bunpratham's research (2017, p. 51), 28.70 percent of students at the opportunity expansion school had depression. This could be as a result of the use of different sample sizes leading to different rates of depression. Furthermore, it was discovered that 59.87 percent of the sample's participants were in elementary school and that 55.26 percent of them were female. This is in accordance with research done by Netchanok Kaewchantha, Somporn Rungruangkolkait, Waralak Kittiwatpaisarn, and Ingkhata Kotanara (2014) who studied factors predicting depression in college students: differences between man and woman. It was found that 52.04% of female students had a greater rate of depression than male students. According to Ruthairat Srithong (2009, p. 521), it was discovered that students in elementary level or lower had higher rates of depression than those in secondary levels.

2. Comparison of data on student depression in Chachoengsao Province, that were classified by general

information of respondents found that their diverse gender, age and educational levels, the depression among students in Chachoengsao was also statistically significantly different. It is consistent with Nantaya Kongraphan (2020, p. 311), she studied factors affecting depression in teenagers, A case study: Rajamangala University of Technology Suvarnabhumi. It was found that different genders had different depression symptoms. It also consistent with Chanyanuch Kasemane (2020, p. 51) who studied on the risk of being depressed among police cadets in Sampran District, Nakhon Pathom Province. It was found that different class levels, there were different levels of risk of depression was different, with a statistically significant at the 0.05 level. This may be because today's teenagers' lives have more factors that cause stress and depression than ever before. As a result, male and female students have different ways of managing themselves to prevent yourself from having stress that can lead to depression, such as exercising, playing sports, and finding activities to relieve physical, and emotional stress. It is consistent with Pratana Sawadisutha and Sirichai Hongsanguansri (2016, p. 47) said that males and females use different ways to deal with stress. The strategies for dealing with stress that males used more frequently than females, with a statistical significance, were more physical relaxation, and self-blame. Nevertheless, the approaches for managing stress that females used statistically significantly more frequently than males were to seek out of amusement for relaxation, and commitment to work for achievement.

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