Influence of Mental Health Disorders on Academic Performance of Secondary School Students in Kogi East Senatorial District, Kogi State

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Abstract
The study examined the influence of mental health disorders on academic performance of secondary school students in Kogi East Senatorial District. The non-experimental research design that involved descriptive research of the survey type was used for the study. Stratified random sampling technique was used to select a sample size of 110 students from 147 secondary schools across the Local Government Areas of the district. A structured questionnaire titled "Student's Mental Health Disorders (SMHDQ) was used for the study. The reliability of the instrument was established using test-retest method through pilot testing on 15 students who did not participate in the study. Data collected were then correlated using Pearson Product Movement Correlation which yielded a coefficient r value of 0.86. Data collected through the questionnaire were analysed using frequency count and mean. The results of the study revealed that both emotional disorders and disruptive behavioral disorders have negative impact on academic performance of the students. Based on the findings of the study, it was recommended among others that mental health services be provided in all schools. While mental health should be incorporated into the schools' curriculum, schools should employ a trained guidance counsellors and psychiatrists to maintain good mental health among students.

Keywords: Mental health, mental disorders, academic performance.

Introduction

It is often assumed that young people are more carefree than adults; their lives are full of emotional cheerfulness and crisis. This is hugely evident in the statistics regarding adolescent and their mental health. It seems one out of every five adolescents and teenagers possess symptoms and signs for diagnosable mental illness. Hence, Jane, et al (2013) remarked that 50% of all lifetime cases of mental illness will develop by age 14 and 75% of them by age 24. The most common mental health disorders in adolescent and teenagers are in the following order anxiety disorder, stress related disorder, mood disorders, obsessive-compulsive disorder, eating disorder and destructive behaviour disorder (re-attention deficit/hyperactivity disorder or oppositional defiant disorder).

Brandy, et al (2015) asserted that there are certain factors that may be responsible for mental health disorder which include biological factors include factors such as physiological and birth processes which cause an adverse effect on a person's mental health and mental illness that have a long history of biological based evidence such as a genetics, brain injury, infection or disease, prenatal damage, substance abuse. Vankim and Nelson (2013) asserted that there are some environmental factors that caused mental health disorder among adolescent. These, according to them, are psychologically based but tend to be pervasive in a person's life, for instance, stress. However, other common sources of stress, according to Wyatt and Oswalt (2013), are trauma, emotional, sexual or physical abuse, or dysfunctional home environment, early loss such as the loss of parent or sibling, unsafe living conditions, obesity, chronic illness, natural disaster, accident and the likes.

According to Kaess, Brunner and Chanen, (2014) about half of mental conditions first show symptoms in individuals by age 14 and ¾ begin by age 24. These may be the cause of many students coming to school with previously diagnosed mental disorders. Common mental health, according to Brandy, Peckofer, Solari-Twadell and Velsor-Fried-Rich, (2015) include depression and anxiety as well as feeling lonely and overwhelmed while Ibrahim, Kelly, Adams and Chaze Brook, (2013) believed that students experience depression at rates higher than the general population.

However, McLeud (2013) confirmed that both male and female students typically experience increased depression over their years at school. The American College of Health Association (2015) found that mental health issues had negative impact on academic performance of the students with30% of the students affected with stress, sleep difficulties 20%, anxiety 22% and depression 14% while Vankim and Nelson (2013) remarked that individuals who suffered from anxiety often experience other mental health issues such as depression and body dimorphic disorder which all have negative impact on their academic performance. While Rosenfield and Mouzon (2013) argued that females typically report more mental health issue than male but Wyatt and Oswalt (2013) observed non-heterosexual differences. Adolescent students often experience major mental challenges that vary in types and severity which consequently result into suicide, serious harms to other students, inability to live harmoniously with other students and family members. Some of these problems may be a reaction to temporary environmental stressors that eventually lead to school maladjustment and invariable lead to poor academic performance. Many researchers have conducted studies on series of adolescent maladjusted problems such as truancy, borderline personality disorder, anxiety disorder in children and adolescents, adolescents' depressive symptomatology and young adult education attainment. None, however, has focused on the consequences on mental health challenges on educational performance among the secondary school students. It has been estimated that up to 20% of all youths have a diagnosable mental health disorder at any one point in time (Curtis, Tepper and Jaflaoul 2016) and both the prevalence and the severity of these problems is increasing day in-day-out. Mental health problems can affect students'

energy level, concentration in the class, study habit, judicious use of leisure time, dependability, mental ability which invariably hindering their academic performance and can have a long-term consequence in future employment, earning potential and general overall health being. Therefore, this study is aimed at investigating the influence of mental health disorders on academic performance of secondary school students in Kogi East Senatorial District of Kogi state with the intention to examine the influence of mood disorder and behavioural disorder on the academic performance of the students and ways through which counselling service could avert the incidence of these disorders.

Research Questions

The following research questions were answered in this study.

1. What are the influences of mood disorder on academic performance of students of East Senatorial District of Kogi State?

2. What are the influences of behavioural disorder on academic performance of the students?

Methodology

The non-experimental research design that involved descriptive research of the survey type was used for the study. Kashim, Tsead and Felicial (2017) attest that survey research design employs the use of selected representatives sample design for the purpose of generalization on the entire population. This design enables the researcher to cover a large sample size and describe situation as it is. The target population for the study was all the students in the147 secondary schools in East Senatorial Districts of Kogi. One hundred and thirty five(135) students comprising of 15 students from each of the nine local government area that formed East Senatorial District of Kogi State were purposefully sampled from the towns in a house to house selection. However, only 110 of the sampled respondents completed the questionnaire. The respondents comprises of 62 male and 48 females with 80 from Senior Secondary School (SSS) while 30 were from the Junior Secondary School (JSS). The instrument for data collection was a self-structured questionnaire titled "Students Mental Health Disorders (SMHDQ)". The instrument contained sections A and B. Section A contained respondent's bio-data while section B contained twenty items seeking information on emotional disorder and disruptive behaviour disorder. The items were structured on four point Likert format scale of Strongly Agree (SA = 4 points), Agree (A = 3 points), Disagree (D = 2 points) and Strongly Disagree (SD = 1 point). However, any item with a mean score of 2.5 and above were regarded as Agree while a mean score of below 2.5 indicated disagreement of the respondents with the item. The instrument was subjected to face and content validity by three educational experts from the Department of Educational Foundations and Measurement and Evaluation at Kogi State University, Anyigba. The corrections made were effected which the researchers incorporated to build up the quality of the

questionnaire. The reliability of the instrument was established using test-retest method through pilot testing on 15 students who did not participate in the study. Data collected were then correlated using Pearson Product Movement Correlation which yielded a coefficient r value of 0.86which indicated that the instrument was reliable for the study. The researchers personally administered the instrument on the respondents by hand. The responses were collated, scored and subjected to frequency count and mean after collecting the questionnaire back from the respondents for the purpose of data analysis.

Results
Research Question 1: What are the influences of mood disorder on the academic performance of secondary school students?

Table1:influence of mood disorders on the academic performance of secondary school students.

Mood Disorders	SA	A	D	SD	Mean	Decision
I rather be alone than been in the midst of other students to study	13 11.8	17 15.5	50 45.5	30 27.2	2.12	Disagree
I am always shy to discuss my personal problems with others	30 27.3	49 44.5	18 16.4	13 11.8	2.87	Agree
I often withdraw from the midst of students gathering	32 29.1	51 46.4	16 14.5	11 10.0	2.95	Agree
I am always suspicious of students while discussing in my absence	40 36.4	46 41.8	19 17.3	5 4.5	3.10	Agree
I do think I should better be dead or hurt myself in some way while annoyed 16.4	18 20.0	22 40.9	45 22.7	25	2.30	Disagree
I often move or speak slowly that other students could have noticed	20 18.2	21 19.1	46 41.8	23 20.9	2.35	Disagree
I always do not like the association of opposite sex	27 24.5	28 25.5	29 26.4	26 23.6	2.51	Agree
I often have interest or pleasure in doing things with other students	39 35.5	42 38.1	20 18.2	9 8.2	3.00	Agree
I have troubled mind and fall asleep while not getting the Lecturer right 38.2	42 41.8	46 10.9	12 9.1	10	3.09	Agree
I do continue thinking about past unpleasant experiences	39 35.5	43 39.1	15 13.6	13 11.8	2.98	Agree

The table 1 shows that the respondents agreed with the following that: they always shy to discuss their personal problems with others (α= 2.87), withdraw from the gathering of students (α= 2.95), suspicious of students while discussing in their absence (α= 3.10), like the association of opposite sex (α= 2.51), having interest or pleasure in doing things with other students (α= 3.00), having troubled minded and falling asleep while not getting the lecturer right (α= 3.09) and do continue thinking about past unpleasant experiences (α= 2.98).However, the respondents disagreed that they often rather stayed alone than be in the gathering of other students to study (α= 2.12), thinking of death or hurt while annoyed (α= 2.30) and speaking slowly that other students could have noticed (α= 2.35). The weighted average of 2.73 is greater than the mean average score of 2.50 which indicated that mood disorders have influence on the academic performance of secondary school students.

Research Question 2: What are the influences of behavioural disorders on academic performance of secondary school students in Kogi State?

Table 2: Influence of behavioural disorders on academic performances of the respondents.

Disruptive Behaviour Disorders (Deviants)	SA	A	D	SD	Mean	Decision
I do think about sex every time even while in the lecture hall	31 28.2	48 43.6	17 15.5	14 12.7	2.87	Agree
I prefer watching blue films and other pornographic films always	30 27.3	46 41.8	20 18.2	14 12.7	2.84	Agree
I do absent myself from school for just no cause	30 27.2	50 45.5	19 17.3	11 10.0	2.90	Agree
I always hang around with other students who get themselves in trouble	27 24.5	28 25.5	32 29.1	23 20.9	2.54	Agree
I do not feel guilty after misbehaving	25 22.7	36 32.8	25 22.7	24 21.8	2.56	Agree
I do use drugs and other substance for non-medical purposes	28 25.5	42 38.2	18 16.3	22 20.0	2.69	Agree
I technically lie if I have done something wrong	26 23.6	29 26.4	30 27.3	25 22.7	2.51	Agree
I do cheat during examinations and I copy my friends' assignment to submit	51 46.4	32 29.1	11 10.0	16 14.5	3.07	Agree
I do swear to substantiate my opinion on issues often	32 29.1	42 38.2	27 24.5	9 8.2	2.88	Agree
I often use obscene language on my mates	43 39.1	39 35.5	13 11.8	15 13.6	3.00	Agree

Table 2 shows that the respondents agreed with the following items that: they think about sex every time even while in lecture hall (α= 2.87), preferred watching blue films and other pornographic films always (α= 2.84) do absent from school for just no cause (α= 2.90), feel guilty after misbehaving (α=2.56), use drugs and other substances for non-medical purposes (α= 2.69), cheat during examinations and copy friends assignments to submit (α= 3.07), swear to substantiate their opinion on issues (α= 3.00) and often use obscene language on their mates (α= 2.79). However, the levels of agreement and disagreement are at variance on hanging around with other students who are involved in trouble (α= 2.54) and technically lying if they have done wrong (α= 2.51).The average weighted score of 2.79 which is greater than the mean score of 2.50 which indicated that behaviour disorders influence the academic performance of secondary school students at East Senatorial District of Kogi State.

Discussion

The study revealed that mood disorders influenced the academic performance of the student as higher percentage of the respondents always feel shy to discuss their problems with others, and suspicious while other students are discussing in their absence which might not even center on them, having much interest or please in doing things alone without others which often paralyze the cross-fertilization of ideas among the students and not associating with opposite sex is bad omen to effective learning. This finding corroborated the findings of Lieras (2008) found that high mental health troubled students' GPA declined at significantly faster rate over the course of a school year than those students without psychopathological problems. Majority of the respondents agreed that they stay alone while studying, speaking slowly that other students could have noticed to the extent of thinking about death or hurting themselves while annoyed. This is in support of Moffitt(2008) who stressed that academic achievement can be considered as a core metric by which measure the relative success of a youth's childhood as the skills conveyed measure in such are such to foster long-term outcome. The result revealed that students' ability to regulate their emotional, behavioural, depression and attention impulse will pave way for success in school. This is in line with (Duckworth and Carlson 2013) on self-regulation and school success as well as (Liera, 2008) who specifically indicated that inhibition of negative behaviour or thought as well as the activation of positive behaviour and strategies are critical to academic learning skills, staying in school usually graduate from school. The study further revealed traces of aggression tendency among the respondents as they do like keeping the association of opposite sex, always tried to influence their mates' behaviour as well as being annoyed or troubled when their mates could not understand their plight although countless on bragging boasting and aggression tendency as part of normal life, all which invariably affect their academic performance. This is in line with Gwyne (2016) who worked on mental health equally maintained that externalizing problems have impact on students and learning experiences as aggressive students may lack the competencies to interact positively with peers and to

follow teachers' instructions carefully which marked them as low academic achievers.

The study revealed that thinking about sex and substance use for non-medical purpose influence their academic performance. This is in line with Wyatt and Oswalt (2013) who compared mental health issues among students and found that attention problems, delinquency and substance use were associated with earning a lower grade at school but depression was not. The study further revealed that depression and anxiety affect the students' academic performance which is in line with Tammy, et al (2017) who found that depression and anxiety all had a perceived impact on students' academic performance.

Conclusion

Based on the findings, it was concluded that the prevalence and severity of mental disorder are increasing among the students which have consistently impacted the academic performance of the students over time. These challenges as stressors posed a major problem. Therefore, it was recommended that there should be mental health service, be it private or public, in all schools which should be catering for all mental disorder cases among the students. Also, the schools should not ignore the connection of mental health to academic performance, attention and retention. It is ideal to have mental health integrated into school curriculum both at the senior and junior classes; hence, both the teachers and the school counsellors should be able to handle mild mental health challenges among the students. There is need to employ a trained guidance and counsellor in all schools to apply therapeutical methods in arresting mental health disorders.

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