Depressive Symptoms and Suicidal Ideation among Nursing and Midwifery Students

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Depression is one of the most frequent psychiatric disorders that its prevalence has been reported to be 10-64% among university students [1]. Although the process of education in nursing is leading to increased productivity and effectiveness, but it can also be a very stressful experience [2, 3]. Prevalence of depression in Kerman nursing and midwifery students were 50.8% and 38.4%. The majority students had mild and moderates and a few reported severe and very severe depressive symptoms. The lowest level of depression was found in students who were in their Fourth study year. It can be assumed that fourth year students were more adjusted to the demands of their studies and more accepting of their decision to continue in this field and in the first year students. It is possible that they face higher levels of stress and workload, as they have begun their clinical practice, which is accompanied with fear of making any fatal mistakes.

Also, depressive symptoms may be more common as a result of student worries about their future as they are approaching graduation. Additionally a perceived lack of practical skills is a common worry for many diploma students. In midwifery students, lower prevalence of depression in first-year students, was perhaps due to be accepted at the university, lack of familiarity with the hospital environment and lack of knowledge about the field labor market. This study exhibited the lowest depression scores and year 2 and 3 nursing students indicated experiencing the highest degree of pressure from studies resulting in a positive relationship between being a university senior and depressive symptoms. Considering the high frequency of depressive symptoms among students of two fields, urge mental health professionals to better understand the difficulties of nursing and midwifery students. It seems that a student counseling service offering mental health assistance is necessary. This service should particularly find a way to reach out to poor students and students with poor school performance and if a faculty member suspects or registers concern for a student, a meeting to assess the situation, followed by a referral for evaluation and treatment, would be the expected protocol. Crisis intervention protocols should as well be considered for implementation in nursing programs before a crisis (such as a nursing student suicide) occurs. Furthermore, counseling can help nursing and midwifery students cope with academic stress, fears about their future, personal problems etc and adjust better to the demands of the education program and practice. In addition their professors could encourage them to broaden their social networks and personal interests during their educational experience and throughout their lifetime.

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References

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