THE EFFECTS OF DEPRESSION ON THE COMMUNICATION SKILLS OF MASS COMMUNICATION STUDENTS IN THE UNIVERSITY OF BENIN

BY

ESINULO CHUKWUMDIMMA RESURRECTA
ART2100927

DEPARTMENT OF MASS COMMUNICATION
FACULTY OF ARTS
UNIVERSITY OF BENIN
BENIN CITY, NIGERIA

OCTOBER, 2025

THE EFFECTS OF DEPRESSION ON THE COMMUNICATION SKILLS OF MASS COMMUNICATION STUDENTS IN THE UNIVERSITY OF BENIN

BY

ESINULO CHUKWUMDIMMA RESURRECTA

ART2100927

A PROJECT SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENT FOR THE AWARD OF BACHELOR OF ARTS (B.A) DEGREE IN MASS COMMUNICATION, TO THE DEPARTMENT OF MASS COMMUNICATION, FACULTY OF ARTS, UNIVERSITY OF BENIN, BENIN CITY.

OCTOBER, 2025

DECLARATION

This Project work is based on a study undertaken by me, in the Department of Mass Communication, Faculty of Arts, University of Benin, under the supervision of Prof. Marcel Okhakhu. All ideas and opinions are products of my personal research, due acknowledgments is given to authors of works cited and used in this research work

ESINULO CHUKWUMDIMMA RESURRECTA
ART2100927

CERTIFICATION

This is to certify that this research work was duly carried out by Esinulo Chukwumdimma Resurrecta in the Department of Mass Communication, Faculty of Art, University of Benin, in partial fulfillment of the requirements for the award of Bachelor of Art degree in Mass Communication.

_____ _____

Prof. Marcel Okhakhu **Date**
Project Supervisor

_____ _____

Dr. Daniel O. Ekhareafo **Date**
Head of Department

DEDICATION

This project work is dedicated to God Almighty who faithfully gave me the strength and courage to go through this programme despite the challenges.

To my lovely parents Mr. Desmond Esinulo and Mrs Gardenia Esinulo for their love, prayers, support and for constantly being there for me throughout the programme.

This work is also dedicated to the sincere researchers out there - the real heroes behind the scene who contribute their brain power for the upliftment of man. That is what this work is about - sincere research for the betterment of mankind.

STUDENT'S THESIS

AUTHOR'S STATEMENT

I hereby grant the University of Benin, through the University of Benin Library, a non-exclusive, worldwide right to reproduce and distribute my thesis and abstract (hereinafter "the Work"), in whole or in part, through any media, in its present form or any translated version for preservation and accessibility, provided such translation does not alter its content. This grant is royalty-free, and I retain the right to publish the Work in its current or future versions elsewhere.

Warranties

I further affirm that:

1. I am the sole author of the Work and grant the University of Benin the right to make it available four (4) years after the award of my degree, in compliance with the University of Benin Senate regulations.
2. The Work does not contain confidential information requiring third-party consent for disclosure.
3. I have exercised due diligence to ensure that the Work is original and does not breach any Nigerian law or infringe upon any third party's copyright or other Intellectual Property Rights, to the best of my knowledge.
4. Where the Work includes copyrighted material not owned by me, I have obtained unrestricted permission from the copyright holder to grant this license to the University of Benin Library. Such third-party materials are clearly identified and acknowledged within the Work.
5. In the event of any copyright dispute concerning the Work, I agree to indemnify and hold harmless the University of Benin, its officers, employees, and agents from any liability arising from the material authorized under this agreement.
6. The University of Benin is under no obligation whatsoever to take legal action on my behalf as the Depositor in the event of an intellectual property rights infringement or any other related dispute in the material deposited.

Author`s Name	Signature/Date	Email
Supervisor's Name	Signature/Date	Email
Supervisor's Name	Signature/Date	Email

ACKNOWLEDGEMENTS

My sincere gratitude goes to God Almighty, the source of wisdom and knowledge who in his infinite mercy, gave me the grace to face this great task and go through with it. My immense appreciation goes to my amiable project supervisor Prof. Marcel Okhakhu for his scrutiny and guidance. Thank you for stretching me beyond my perceived limits and showing me that there is a higher level.

Special thanks goes to the Head of Department, Dr Daniel Ekhareafo for his immense help during the course of writing this work. To all my lecturers in the Department of Mass Communication who have nurtured and have helped to increase my fountain of academic knowledge and wisdom; Prof. Festus P. Olise, Prof. Ezekiel S. Asemah, Prof. (Mrs) E. Obaje, Dr Gloria Ogono and others; I am grateful.

To my lovely and very understanding parents, Mr. Desmond Esinulo and Mrs Gardenia Esinulo, I am very grateful for all your efforts, encouragement, prayers and sacrifice towards ensuring that I complete this programme.

My special appreciation goes to my siblings Esinulo Kelemaria and Esinulo Chukwumnonso for their encouragement and prayers during tough times. I must not fail to thank Igbinosa Success (Muichiro), Innocent Comfort (moral lesson), my roommate Elvis Blessing and other wonderful people I met in UNIBEN for all their kindness and stress. May God reward you all for your kindness and prayers.

TABLE OF CONTENTS

CHAPTER TWO: LITERATURE REVIEW

CHAPTER THREE: METHODOLOGY

CHAPTER FOUR: DATA PRESENTATION, ANALYSIS AND DISCUSSION OF FINDINGS

CHAPTER FIVE: SUMMARY, CONCLUSION AND RECOMMENDATIONS

LIST OF TABLES

ABSTRACT

The rigorous nature of academic tasks coupled with financial and social pressures make university students susceptible to depression. While research has shown that depression does affect one's communication skills, there has not been much light shed on the picture of how this affects the Nigerian Mass Communication student - a need that needs to be addressed given the Mass Communication student's need for a good command of communication skills. This study was therefore done to investigate the effects of depression on the communication skills of undergraduate Mass Communication students at the University of Benin. This study was carried out with the objectives of determining the prevalence and causes of depression among undergraduate Mass Communication students the University of Benin, how it affects their communication skills as well as the objective of proposing potential interventions to address the impact of depression on the students' communication skills. The study was anchored on the tenets of the Spiral of Silence theory and Beck's Cognitive theory. The study used a quantitative research design and collected data through a questionnaire which consisted of 24 close ended questions and 3 open ended questions and was administered to 265 students. The respondents were selected using the Krejcie and Morgan Table as well as stratified random sampling technique. The data was analysed using simple frequencies, percentages, and thematic analysis all presented in tabular forms. Findings from this study revealed a high prevalence of depressive symptoms, with 65.7% of the respondents screening positive with financial pressure (26%) and academic stress (20%) identified as the primary contributing factors. The study also found out that depression significantly impaired the affected respondents' verbal, non-verbal and interpersonal communication skills. A majority of affected students reported difficulties with verbal expression (66.5%), speaking up in class even when they had ideas (70.1%), and public speaking (65.5%). Non-verbal communication skills were also severely affected, with students reporting challenges with maintaining eye contact (69%), negative changes in body language (51.7%), and an inability to pay attention in conversations (54%). The challenges in utilizing interpersonal skills reported by the affected respondents were revealed through thematic analysis which highlighted social withdrawal and avoidance (20.6%) interpersonal difficulties and feelings of disconnection (21.6%) among other key effects. The study concludes that depression creates substantial barriers to the development and utilization of core communication skills essential for Mass Communication students' academic and career success. It recommends the implementation of a multi-tiered support system, including accessible professional mental health services, the fostering of peer support networks, and institutional reforms to alleviate the stressors.

Keywords: Depression, Communication Skills, Mass Communication Students, University of Benin, Mental Health, Effects.

CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

Communication has been an important aspect of human existence right from the very beginning. Over the years, it has evolved from primitive signs/gestures and the use of symbols/writing to the digital media of today, continuously changing to meet the needs of man at each particular time. Every human needs effective communication to successfully face the complexities of daily life and relationship building. Effective communication helps individuals to express their emotions, needs, thoughts, resolve conflicts, collaborate with others and adapt to different social and professional situations. Lack of effective communication can lead to frustration, misunderstanding and difficulties in relationships. Effective communication is especially important to Mass Communication students. This is because their academic and professional success depends on how well they are able to convey clear messages and engage with various audience.

The communication model proposed by Shannon and Weaver (1949) empasizes on the presence of noise (anything that hinders the successful transmission of a message from the sender to the receiver) in the communication process. Noise takes various forms such as physical noise (e.g sound of car horns, blaring of loudspeakers), semantic noise (e.g poor grammar, unclear expressions) and psychological noise (e.g stress, anxiety and of course, depression). The

communication process is only considered complete when the receiver not only receives the message but also understands it. When psychological noise (e.g depression) among other noise types is present, it disrupts the process, making it difficult for one to achieve effective communication.

Depression is a common mental disorder affecting millions of people around the globe. It is also known as Depressive disorder. The World Health Organization (2023) defines depression as "a mental disorder characterized by persistent feelings of sadness, loss of interest in activities and emotional distress that can interfere with daily life".

It goes further to state that "depression should not be confused with regular mood changes which could come up once in a while without causing much harm, depression can negatively impact communication, relationships, academic performance and work productivity. It is often linked to stressful life events, trauma and biological factors (WHO 2023). The definition given by the World Health Organization affirms that the mood changes in humans are considered normal until the feeling of sadness becomes persistent and is accompanied by emotional distress and loss of interest in daily activities. At such point, it is a mental disorder called depression.

WHO (2023) goes further to state that an estimated 280 million people experience depression globally and though there are psychological and pharmaceutical treatments for depression, Treatment and support services for depression are often

absent or underdeveloped in low and middle income countries with an estimated 75% of the people suffering from depression in these countries and not receiving treatment. (WHO 2023). While depression is a mental health concern on a global scale, its impact on Nigerian youths is a cause for especial alarm. In fact, research conducted by UNICEF (2021) revealed that one in six Nigerian youths aged 15-24 displayed symptoms of depression. The fact that there is limited access to mental care in Nigeria because mental health services in Nigeria face stigmatization makes the situation worse.

Since the majority of undergraduate students in Nigeria fall within the earlier stated age grade (15-24 years), it follows that a significant number of Nigerian undergraduate students are also affected by depression. This gives rise to concerns about how depression might influence essential academic and social skills especially communication. Given the high prevalence of depression and its impact on social and cognitive functions, there is a need to look at its effect on communication skills, especially among students in communication intensive fields like Mass Communication. Although there has been an increasing awareness of mental health issues in higher education, there has been limited research focused on the direct impact of depression on communication skills particularly among Mass Communication students whose field demands a high level of communicative and expressive ability.

This study aims to close that gap by examining how depression affects the communication skills of the Mass Communication students within the context of the University of Benin. The findings will provide insight into the intersection between communication and mental health thereby contributing to existing discussions on mental health in higher education. The findings will also offer recommendations that may guide policies, interventions and support systems for students facing mental health challenges.

1.2 Statement of the Problem

Ineffective communication is a challenge that besets a substantial number of undergraduate students. The common causes of the problem are the students' lack of communication skills or difficulty in using the skills effectively. Sometimes, untreated depression could be an underlying cause of students' inability to use their communication skills well.

According to UNICEF (2021), one in six Nigerian youths aged 15-24 show symptoms of depression and yet mental health challenges remain largely unaddressed because of inadequate awareness and widespread stigma. Given the notable proportion of undergraduate students in the above mentioned age bracket (15-24 years), it can be implied that a large number of undergraduate students are battling depression which has effect on their communication skills.

According to Shannon and Weaver's (1949) model, noise can hinder effective communication by disrupting how messages are presented and interpreted. Depression

is a form of psychological noise that breaks down the communication process of individuals by affecting their communication skills - the means through which they send and receive messages.

Meanwhile, Schramm's (1954) model highlights the importance of shared experiences in communication. Depression can restrict social interaction and feedback ultimately causing breakdown in the communication process. While previous research acknowledges that a relationship exists between depression, social interactions and cognitive functions, studies mostly focus on Western contexts, often failing to put Nigeria's issue of mental health stigma and lack of support into account.

This study aims to close that gap by providing context- specific understanding of how depression affects the communication skills of mass communication students at the University of Benin thereby offering insights that could be valuable to both academia and Nigeria's socio- cultural environment.

1.3 Research Questions/Objectives of the Study

The research aims to:

1. Determine the prevalence of Depression among undergraduate Mass Communication students at the University of Benin.
2. Identify the causes of depression among these students.
3. Examine how depression affects the communication skills of undergraduate students at the University of Benin.

4. Propose potential solutions to address the impact of depression on communication skills of undergraduate Mass Communication students at the University of Benin.

1.4 Research Questions

The following research questions guided this study:

1. What is the prevalence of depression among undergraduate Mass Communication students at the University of Benin?
2. What are the causes of depression among undergraduate Mass Communication students at the University of Benin?
3. In what ways does depression affect the communication skills of undergraduate Mass Communication students at the University of Benin?
4. What possible interventions or support systems can help undergraduate Mass Communication students manage communication difficulties associated with depression?

1.5 Significance of the Study

It is true that some Nigerian undergraduates are going through depression which is severely affecting their ability to communicate effectively. While previous research have explored the link between depression and communication, few have focused on the Nigerian context and even fewer on undergraduate Mass Communication students.

This study is a timely intervention that would bridge these gaps and shed more light on the overall picture of communication studies. The findings from this research will help undergraduate Mass Communication students to pay more attention to their mental health and its influence on their academic careers and interpersonal communication. Lecturers and educators would benefit from this research by gaining insight into the communication challenges faced by some students due to depression. It would enable them to offer more targeted support.

Furthermore, this study can guide the government, tertiary institution management and non- governmental organizations in formulating mental health policies and communication- focused interventions designed for university environments.

Finally, this research can serve as a basis for further studies including comparative research across faculties, age groups or even institutions.

1.6 Scope of the Study

This research work focused on undergraduate students of Mass Communication department within the University of Benin. The researcher used a questionnaire based survey to examine the relationship between depression and their communication skills, verbal, non-verbal and interpersonal. The research is limited to the 2023/2024 and 2024/2025 academic sessions only. It does not cover students from other departments or universities.

1.7 Limitations of the Study

Some of the constraints that would be faced in the course of the research are:

Sample Size Limitations: The study is limited to Mass Communication students at the University of Benin. This may affect the generalizability of the findings to other departments or institutions.

Self-Reported Data: The use of questionnaires means the data depends on the participants' honesty and self-awareness. This could introduce bias.

Mental Health Stigma: Due to the sensitive nature of depression and societal stigma, some respondents may be unwilling to fully disclose their experiences.

Lack of Clinical Diagnosis: This study does not include professional psychological assessments therefore; the findings would be based on self-identified symptoms rather than confirmed diagnosis.

1.8 Operational Definition of Terms

Communication Skills: They are skills that enable individuals to convey and receive information effectively. They are:

Verbal Skills: These skills enable individuals to use words of mouth to convey and receive information. They include the ability to pronounce words correctly, intonation, pace and even listening skills.

Non Verbal Skills: They enable individuals to convey and receive information without using word of mouth. They include the ability to use the right facial

expressions and body language, comprehension and reasoning, reading skills and writing skills.

Interpersonal Skills: They are relevant to academic and social settings e.g knowledge of the laws of the institution and of Mass Communication practice, socio- cultural awareness i.e awareness of the customs and culture of the students' present location (Benin City).

Depression: Depression is mental health condition characterized by persistent feelings of sadness, helplessness and a loss of interest in daily activities. It may or may not be formally diagnosed. In this study, it is considered based on self-reported symptoms.

Effect: In the context of this research, "effect" refers to the impact that depression may have on students' ability to communicate effectively.

Mass Communication Students: This term refers to the undergraduate students that is, students pursuing a first degree and enrolled in the Department of Mass Communication in the University of Benin during the period of the research.

Mental Health: This is a person's psychological, emotional and social wellbeing. It affects the way individuals think, feel and act especially in relation to others and their environment.

CHAPTER TWO

LITERATURE REVIEW

This chapter entails the review of literature material that is related to the research. This section is written with the aim of showing available knowledge of the researcher on the work done by others concerning the subject matter. The following are the basic concepts that would be discussed in this chapter;

Understanding Depression

Communication Skills

Effects of Depression on Communication Skills

Empirical Review

Theoretical framework.

2.1 Conceptual Review

2.1.1 Understanding Depression

Depression is a mental health challenge which is characterized by symptoms of persistent feelings of sadness, hopelessness and causes the affected individual to lose their interest in daily activities (especially the activities that used to give them pleasure) for more than two weeks.

This definition should not make one to suppose that sadness and mood swings are the same thing as depression. These two phenomena are normal emotional displays. It only becomes depression when these emotional displays become persistent that is, they refuse to stop or subside after two weeks or more.

Cleveland clinic (n.d.) defined depression as "a common mental health condition that causes a persistent feeling of sadness and changes in how you think, sleep, eat and act".

Cleveland Clinic (n.d.) went further to state that there are several types of depression each being of different intensity ranging from severe to mild and that the most severe and most common type of depression is Clinical depression or Major Depressive Disorder. It gave examples of the types of depression including Persistent Depressive Disorder, Disruptive Mood Disregulation Disorder, Premenstrual Disphoric Disorder and even Depressive Disorders caused by other medical conditions such as Parkinson's disease, postpartum period or even Bipolar Disorder. (Cleveland Clinic n.d.)

The National Institute of Mental Health (NIMH), a lead U.S Federal Agency for research on mental disorders gave a definition of depression that is quite similar to the one given by Cleveland clinic. NIMH (2025) defined depression as a mental health disorder that can cause severe symptoms that can affect how one feels, think and handle daily activities like sleeping, working or eating. It went further to State that depression can affect anybody regardless of age, race, income, culture or education (National Institute of Mental Health, 2025).

The Diagnostic and Statistical Manual of Mental Disorders Fifth Edition Text Revision of the American Psychiatric Association (2022) outlined the symptoms of Clinical Depression including:

Having a depressed mood for most of the day nearly everyday.

Displaying a diminished interest in daily activities.

Significant weight gain/loss not attributable to intentional dieting. That is, a change of more than 5% of body weight in a month due to decrease/increase in appetite nearly everyday.

Difficulty in sleeping/oversleeping nearly everyday.

Fatigue or loss of energy nearly everyday.

Feelings of worthlessness or excessive inappropriate guilt.

Recurrent suicidal thoughts or attempts.

Bearing in mind the position of the National Institute of Mental Health (2025) on depression's ability to affect anyone irrespective of demographic divisions, one can safely conclude that undergraduate students are not out of the reach of susceptibility to depression. This conclusion is more believable when one considers that the average undergraduate student faces academic, social pressures, financial pressures and sometimes, unresolved trauma - a list of factors which when combined, have the ability to lead to depression.

It is hardly surprising therefore, that a systematic review and meta-analysis carried out by Cui, Ajayi, Kim and Egonu (2022) revealed that the prevalence of depression among Nigerian undergraduate students was 26% with regional variations giving 45.9% to North Western students, 33% to South Southern students, 22.1% to South Eastern students and 18.1% to South Western students.

Depression has significant negative effects on intra/inter personal interactions, leading to reduced confidence in social settings as well as communication breakdown. The impact of these effects are keenly felt by undergraduate Mass Communication students whose academic and career success is heavily dependent on effective communication.

2.1.2 Communication Skills

Communication skills are the set of abilities needed to effectively carry out the process of giving and receiving information. These abilities are necessary in every form of communication including Mass Communication. For the purpose of this study, communication skills are grouped into three major categories: Verbal communication skills, Non Verbal communication skills and Interpersonal/Social skills.

Verbal Communication Skills

These are the skills that are necessary for engaging in dialogue (talking to other people). They include:

1. Language: Merriam-Webster dictionary defines language as "a systematic means of communicating ideas or feelings by use of conventionalized signs, sounds, gestures or marks". (Merriam- Webster, n.d., Definition 3). For this section, the focus is on spoken language.

Language is not just about talking, it is a complex system that includes local dialect, vocabulary, grammar, pronunciation/accent, syntax and so on. It is not just a means of expressing oneself, it is shaped by the culture, environment and events of our

times. This is why certain words, slangs or taboos like "type shi" came up recently (it was not used way back in the 15th Century because there were no computers then and hence, no concept of typing).

The ability of culture, environment and events to shape languages also explains why certain words are used among some circles and are vehemently prohibited in other circles (consider words like "shit" or the "f" word). There is therefore, a need for both the sender and the receiver to share a common language or the process of communicating verbally will not be feasible.

2. Clarity: There is a need for one to speak in such a clear way that one's listeners can understand. One has to use the right words, make structured sentences and speak in a way that the sentences convey a logical flow of ideas.

Clarity enables a speaker to speak directly, eliminate ambiguity and make the language to suit the listener's level of understanding. This is why it is an important skill for Mass Communication students whose audience are heterogeneous (i.e includes people of different backgrounds, education levels and expectations).

3. Tone: Tone is the attitude or emotional quality conveyed in a speaker's voice during the communication process. It plays the role of showing a speaker's intentions and feelings beyond the literal meaning of words.

A speaker's tone can be angry, warm, cordial, enthusiastic, indifferent compassionate and so on. Different tones are produced when a speaker stressed or places emphasis on certain words within sentences, through the use of rising, falling or

flat tones as well as through the increment or reduction of voice volume at certain points within the sentences.

For example, the question, "are you okay" can convey a range of feelings like concern (if the speaker speaks with a low voice volume and place emphasis on the word, "you"), anger (if the speaker speaks with a high voice volume and place emphasis on the word, "okay") or even sarcasm (if the speaker speaks with a moderate volume and no emphasis is placed on any word).

Tone can also be used to indicate the type of sentence i.e whether it is a question, an exclamation or even a command. Questions are usually denoted by a rising tune at the end/last word. The voice volume and the word stressed depends on the speaker's mood. Exclamations are denoted by a sharp rise in tune in the word that conveys the sense of exclamation or conveys the reason for the exclamation like "no" for a bad reason or "hurray" for a nice cause. Sentences showing command start with a rising tune and end with a falling tune. Try saying "come here" or "get out" and notice the rising and falling tune at work. When giving commands, people sometimes use a high voice volume to ensure the command is obeyed.

4. Listening and Understanding: Listening is a receptive skill that allows both the sender and receiver to receive messages/feedback in the verbal communication process. It is the process of actively receiving, constructing meaning and framing a response to spoken messages. Unlike hearing which is a passive reception, listening

requires attention, interpretation and feedback. Consider this scenario of a conversation between a Mass Communication student named Peter and his roommate:

Peter: I'm going to the market. Is there anything I can get for you?

Roommate: Yes please, buy a tuber of yam for me.

Peter: Alright, how do we settle the payments?

Roommate: I have sent 2000 naira to your Opay account.

Peter: (Checks his account via the app) Payment received. See you later.

From this dialogue, one can notice that at the beginning, Peter was the sender while his roommate was the receiver but when the roommate replied, the roles interchanged. At any point of the dialogue, whoever that was the receiver had to listen in order to get the message and whatever he heard determined his reply. This shows the relevance of listening skills in any verbal communication process.

Understanding is a skill that goes hand in hand with listening. In fact, it is considered a part of the listening process. It is the ability to get the meaning, intent and context behind a message in the communication process.

Understanding is a cognitive skill (i.e a skill that has to do with the thinking faculty) and just like listening, it is a receptive skill. The verbal exchange process is not just about someone talking to another person/people, the intended message must get to the receiver. This is where listening and understanding comes in. With listening, the message is received and with understanding, the message is comprehended.

John Powell (1969) in his book, "Why am I afraid to tell you who I am?" draws attention to the interconnectedness of listening and understanding and the need for both of them in verbal communication:

> Listening in dialogue is listening more to meaning than to words... In true listening, we reach behind the words, see through them, to find the person who is being revealed. Listening is a search to find the treasure of the true person as revealed verbally and non verbally. There is the semantic problem, of course. The words bear a different connotation for you than they do for me. Consequently, I can never tell you what you said, but only what I heard. I will have to rephrase what you have said, and check it out with you to make sure that what left your mind and heart arrived in my mind and heart intact and without distortion (Powell 1969).

Good verbal communication goes beyond merely hearing words but involves interpretation of what is said, recognizing underlying emotions and implications and the mental organization of received information.

Non Verbal Communication Skills

Communication goes beyond the use of one's voice to convey information, meaning and feelings. Sometimes, silence is loudest and a look, a gesture or even a picture can convey meanings that could not be described even with the use of a thousand vocal words. This is why non verbal communication skills are essential to everyone who wishes to communicate effectively especially Mass Communication students who are naturally in the business of effective communication.

It is interesting to note that non verbal communication skills can be used to enhance the effects of verbal communication skills. The non communication skills include:

1. Body Language: Body language is the use of physical behaviors, expressions and mannerisms to convey messages. It encompasses all movements of the body that can be used to communicate with others including gestures, facial expressions, posture, movement, use of space and eye contact.

In interpersonal communication, words do the telling while body language does the showing. Body language shows the reality of the individuals involved in the interpersonal communication process by reinforcing, contradicting or sometimes, replacing the speaker's words. This role of body language is supported by Franklin Ernst Jr. (1973) who wrote in his work, "Who's Listening?" that "To listen is to move. To listen is to be moved by the talker - physically and psychologically... The non-moving, unblinking person can reliably be estimated to be a non-listener..." He even went further to affirm that "... when other visible moving has ceased and the eyeblink rate has fallen to less than once in six seconds, listening, for practical purposes, has stopped" (Ernst 1973).

Body language determines the response of the other party. For example, a strong unwavering eye to eye contact indicates confidence while slouched shoulders, averted eyes or folded arms gives the audience a sense of timidity, anxiety or even lack of interest.

People who are constantly in the act of face to face communication need to gain mastery on the correct usage of body language to improve their self presentation and interprete the intentions/emotions of others. There is a need to expatiate on Gestures and facial expressions because each are broad concepts within the concepts of body language.

2. Gestures: Gestures are the physical movement of certain body parts usually the hands, arms or head to convey meaning or support the spoken words during communication. They are non verbal cues that are used to express feelings, emphasize points and in some contexts, they can even replace words. For example, a shrug can be used to show uncertainty or carefreeness while a thumb up or nodding can show approval.

The importance of gestures in the communication process is established by David McNeill (1992) who posits that "gestures are an integral part of language as much as are words, phrases and sentences - a co equal partner in the entreprise of communication".

The mastery of the usage of gestures is necessary for Mass Communication students who engage in a lot of public speaking, presentations and on-cameral appearances because gestures would speak as loudly as words. Knowledge of the right usage of gestures would help prevent misunderstanding especially in cross-cultural communication. For example, pointing is considered inappropriate behavior among

some Eastern cultures. Anybody that wants to communicate effectively with people from China, Korea, Japan among others has to take care not to point.

3. Facial Expressions: Facial Expressions involve the movement of the facial muscles especially around the eyes, eyebrows and mouth in order to communicate with others. Facial expressions enhance the meaning of spoken words, convey mood, emotions or reactions, reinforce the impact of spoken words on the receiver and build connection between the people involved in the communication process.

Albert Mehrabian (1981) in his book, "Silent Messages" asserts that "The combined effect of simultaneous verbal, vocal and facial attitude communications is a weighted sum of their independent effect - with the coefficients of .07, .38, and .55, respectively". This means that he found out that messages sent by people through their facial expressions (attitudes) account for 55% of what is perceived by others during communication processes.

A smile can be used to soften a critical comment or diffuse tension, eye to eye contact can help both parties to connect and a raised eyebrow can be used to show skepticism. In communication, especially face to face communication, facial expressions can be used to draw the audience's attention, ensure their engagement and reinforce a point.

4. Writing Skills: Al-Atabi (2020) defines writing as "the process of using symbols, letters of the alphabet, punctuations and spaces to communicate thoughts and ideas in a readable form. They are the skills that make one able to convey ideas, information

and feelings through written language (i.e using pen and paper or printing). Writing shares some similarities with verbal communication skills in the sense that they both involve the use of language to communicate with others but they different at the point of time frame/lifespan. Writing is more permanent than spoken words which is why it is great for record keeping.

Writing is one of the oldest and effective means of expression and persuasion. Strong writing skills involves the use of language, rich vocabulary, proper grammar, correct spellings, logical organization of ideas and clarity. Writing is essential to the academic and professional careers of Mass Communication students as all branches of Mass Communication require good writing skills for activities such as script writing, news report and editing, speech writing, interview preparation, advert copywriting and even content creation.

The use of writing skills has one drawback: like all other forms of communication processes, writing requires both the sender and receiver to have a shared field of experience. That is, both of them need to be familiar with the act of writing. They need to know how to write and decode written messages. This is where the need for reading skills comes in.

5. Reading Skills: Reading skills enable one to decipher and understand written works. It gives one the ability to decode, comprehend and critically engage with written texts. Reading skills are foundational skills for information gathering and processing, learning and effective communication. It is not just about recognizing

words on a page but making sense out of those words, identifying contexts, tones and intent. Reading is a silent but active means of communication between the sender (writer) and receiver (reader).

Mass Communication students need to have strong reading skills to help them with their activities such as audience analysis, content analysis, reception and analysis of feedback, research and learning. Reading helps Mass Communication students to gather information, stay grounded in their knowledge and remain sound in their chosen field of study.

6. Observation: Observation skills are the means through which one can receive non verbal cues in every communication process. It is the act of intentionally noticing and interpreting visual behavior, cues and environmental details during the communication process. It helps both the sender and receiver to understand situations, notice the other party's emotions and give appropriate response even in the absence of spoken words. Observation would help Mass Communication students to have meaningful interpersonal interactions and enhance their storytelling and message tailoring ability.

Interpersonal/Social Communication Skills

These are the skills that enable one to make connections with people around him/her. It is only when there is some form of connection between two individuals that they would communicate (this principle applies even to connections based on needs and wants).

Tim Vipond of the Corporate Finance Institute (n.d.) defines Interpersonal communication skills as "the skills required to effectively communicate, interact, and work with individuals and groups". They went further to state that "those with good interpersonal skills are strong verbal and non verbal communicators and are often considered to be 'good with people'". This definition shows that interpersonal skills are connected to the verbal and non verbal skills.

Interpersonal skills are skills that allow a person to interact harmoniously with others in personal, academic and professional settings. It goes beyond what is said (verbal) or showed (non verbal). It has to do with how individuals manage relationships, interprete and respond to social cues. It encompasses skills such as:

1. **Empathy:** It enables an individual to connect with others by looking at their point of view after placing himself/herself in their condition.
2. **Emotional Intelligence:** It is the ability of one to recognize and embrace one's emotions as well as the emotions of others and control these emotions to create mutually satisfying outcomes. One's emotional intelligence has to do with how well one understands the needs and feelings of others (Herrity, 2025).
3. **Active Listening:** It entails not just hearing but fully engaging with the speaker- listening to whatever the speaker has to say even if one does not agree. According to Herrity (2025), "active listening means listening with the purpose of gathering information and engaging with the speaker". She went further to

state that "active listeners avoid distracting behaviours while in conversation with others".

4. **Conflict Resolution:** In the social environment, every human has his/her own interests. Sometimes, there is a clash of interests and conflicts arise. Conflict resolution skills help one to detect sources of conflicts, address them constructively and prevent future conflicts. Katz and McNulty (1994) defines conflict resolution as "a communication process for managing a conflict and negotiating a solution."
5. **Collaboration and Teamwork:** These help individuals to cooperate and work together with others in a group. It has to do with acknowledging and respecting the differences of every member of a group and giving meaningful contributions towards the achievement of the group's common goal.
6. **Respect and Tact:** It is the act of interacting with people with consideration of their opinions, backgrounds, cultures, religions etc. Chemsterdam (2025) defines tact as, "the ability to perceive others, adjust oneself and maintain respect, sensitivity, and appropriateness in interactions."

Interpersonal/Social communication skills would help Mass Communication students to have meaningful interactions, avoid conflicts and foster collaboration to achieve common goals.

2.2 Opinion Review

2.2.1 Effects of Depression on Communication Skills

Depression affects various aspects of an individual's personal and social life including the ability to effectively use communication skills. The effects of depression on communication skills include:

Effects on Verbal Communication Skills

Depression is characterized by a loss of interest in daily activities including conversation, fatigue and persistent feelings of hopelessness (American Psychiatric Association, 2022). These symptoms make it increasingly difficult for depressed individuals to engage in verbal communication.

Depressed individuals are usually reluctant to contribute to conversations especially in group settings. This arises out of the individuals' feelings of worthlessness. The lack of interest and fatigue give depressed individuals their characteristic flat, low and monotonous tone (Schräder et al., 2024; Wang et al., 2019).

They display a lack of enthusiasm which people may misinterpret as disinterest. Their fluency and coherence are also affected as their speech slows down and is filled with unnecessary pauses, incomplete sentences or stammering (Mundt et al., 2012). Disorganized thoughts can lead to low attention span and reduction in listening and understanding skills. It also makes them to avoid detailed expression and struggle to express themselves clearly.

Effects on Non Verbal Communication Skills

An individual's ability to give and receive non verbal cues can be severely affected by depression. Individuals battling depression often show reduced facial expressions (Ellgring, 1989), they are always looking glum and appear to be wearing very forced smiles (Berenbaum & Oltmanns, 1992; Brozgold et al., 1998; Girard et al., 2014). They also tend to avoid eye contact. These behaviors make them appear blank, withdrawn or disengaged.

Their body language is also affected as they exhibit closed-off postures (such as slouched shoulders, bent heads, crossed arms etc) They show a marked reduction in gestures as well as sluggish movements which make them appear unapproachable (Girard et al., 2014), less confident or disconnected. Depressed individuals may experience slower cognitive processing, reduced motivation or negative self perspective (Beck et al.,1987) that can impact their creativity and confidence thus resulting in inability to produce clear written works. The slower cognitive processing can also impact their reading skills.

Their observation skills may not be utilized as they tend to become self absorbed, distracted and emotionally withdrawn which reduces their awareness of their surroundings and social dynamics. They may also neglect their appearance and grooming, unintentionally sending negative or disinterested signals.

Effects on Interpersonal/Social Communication Skills

Depression makes individuals withdrawn and avoid public interaction (Allen & Badcock, 2003; Girard et al., 2014) which is the very opposite of interpersonal communication. Withdrawal often leads to difficulty in recognizing and appropriately responding to social and emotional cues.

Depressed individuals tend to avoid all forms of confrontation and may display oversensitivity. These behaviors affect their empathy and conflict resolution skills. They are more likely to respond negatively, withdraw or behave aggressively to family members and friends, which can lead to increased conflict or disengagement in relationships (Rudolph et al., 2008). Their loss of interest in daily activities can affect their participation in group activities and collaboration. Their feelings of worthlessness (Beck et al.,1987) lead to low confidence and make them second guess themselves and feel like their opinions don't matter. All of these combine to make social connection and interaction difficult for individuals battling with depression.

2.3 Empirical Review

Moeller, R.W., & Seehuus, M. (2019). Loneliness as a Mediator for College Students' Social Skills and Experiences of Depression and Anxiety. (Journal of Adolescence, 73, 1-13)

Moeller and Seehuus (2019) explored the relationship between verbal and social skills and anxiety and depression among college students with a specific focus on the mediating role of loneliness. The study used a diverse sample of 2,054 students

(M=19.95; S.D=1.26) from two residential colleges in the United States and used a cross-sequential research design to examine mental health variables.

The researchers used six mediation models to separately test whether loneliness mediated the relationship between verbal social skills (social sensitivity, social expressivity and social control) and the experiences of depression and anxiety. Their findings showed that:

1. Both depression and anxiety were separately predicted by the verbal encoding skill (social expressivity and social control) as well as the decoding skill (social sensitivity).
2. Loneliness significantly mediated the relationship between these social skills and mental health in each model.

Altogether, the models accounted for 37-38% of the volume in depression scores and 17-20% in anxiety scores. The study showed that verbal social skills play a crucial role in students' experience of loneliness as well as depression and anxiety. The researchers recommended that colleges improve their student social skills to prevent mental health challenges.

Their study is relevant to this study because it has revealed that poor verbal social skills can increase feelings of loneliness which in turn, contributes to increased symptoms of depression and anxiety. Although they were able to show how poor verbal skills affects depression in college students, they did not show how depression affects the students' verbal skills.

Rashtchi, M., Zokaee, Z., Ghaffarinejad, A.R., & Sadeghi, M.M. (2012). Depression. Does it affect the comprehension of receptive skills? (Neurosciences (Riyadh, Saudi Arabia), 17(3), 236-240).

Rashtchi et al. (2012) examined whether depression had any effect on the comprehension of receptive language skills- specifically reading and listening among Iranian students learning English as a Foreign Language (EFL). The research aimed to compare the performance of depressed and non depressed male and female students to determine if depression could cause learning inefficiencies.

The researchers selected 227 high school students (126 males and 96 females) from two schools in Kerman, Iran using simple random sampling method and adopted a descriptive, correlational research design to look into the relationship between levels of depression and comprehension performance. An initial assessment was carried out on the participants using the Beck Depression Inventory and the results showed that 93 students were non depressed, 65 had minimal depression, 48 had mild depression and 16 suffered from severe depression. Listening and reading tests were then administered to all participants.

The findings showed a significant relationship between depression levels and students' comprehension in both reading and listening. Overall, males performed better than females in both receptive skills. However, while there were no significant difference across depression levels in listening, reading comprehension varied significantly between males and females, regardless of depression severity. The

researchers concluded that depression can hinder students' ability to comprehend receptive language skills. They recommended that learners who show deficiency in reading or listening should be examined for possible depressive symptoms.

The relevance of their study to this research is that the researchers have been able to establish that depression has the ability to affect the receptive skills (skills that enable one to receive information- listening and reading in the case of the Iranian students. This research shows how depression affects not only students' listening and reading but other forms of communication skills as well.

Abdelaziz, A. M., & Sallam, S. (2025). The indirect effect of Communication Skills on the relationship between Emotional Maturity and Mental Health Disorders among a sample of Egyptian university students. (Current Psychology, 44, 3491-3502).

Abdelaziz and Sallam (2025) conducted a survey to investigate the direct effect of communication skills on the relationship between emotional maturity and mental health disorders (anxiety and depression) among Egyptian university students while exploring potential differences based on gender and academic specifics (literary/scientific disciplines).

The research was conducted on a total sample of 236 undergraduate and post graduate students from two faculties at Ain Shams University, Egypt using a correlated research design to test for associations and mediating effects. Their findings revealed that:

1. There was a significant negative correlation between emotional maturity and mental health disorders as well as between communication skills and mental health disorders.
2. There was a statistically significant indirect (partial mediating) effect of communication skills on the relationship between emotional maturity and both anxiety and depression.
3. There were notable differences in emotional maturity and communication skills across academic specializations. That is, students in scientific disciplines displayed stronger communication skills and reported higher level of depressive symptoms while students in literary disciplines showed greater emotional maturity but higher anxiety symptoms.

The researchers therefore recommended that the emotional maturity and communication skills be focused among university students in Egypt in order to get better mental health outcomes for them.

Their study is highly relevant to this research because it confirms that there is a link between communication skills and mental health. It acknowledges the need for the improvement of emotional and communication abilities of university students. Although the study shares similarities with this research in terms of population (university students) and points of interest (connection between mental health and communication), there are points of divergence:

1. While Abdelaziz and Sallam's study looks at communication as a bridge between mental health disorders and emotional maturity, this research is focused on the effect of depression on communication skills.
2. The two studies do not share geographical contexts as Abdelaziz and Sallam's study was based in Egypt while this study is based in Nigeria. This could cause differences in cultural, academic and socio-economic contexts too.

2.4 Theoretical Framework

The Spiral of Silence Theory and Beck's Cognitive theory serves as the framework that gives this study its structure.

Spiral of Silence Theory

The Spiral of Silence theory was propounded by Elisabeth Noelle-Neumann in 1984. The theory states that individuals tend to suppress their private opinions when they perceive that their opinions are unpopular. The theory is based on the human fear of social isolation.

According to the theory, people constantly observe the social environment including the media to determine the popular opinions. When they feel that their opinions are contrary to the popular opinion and might attract disapproval, they tend to remain silent to avoid being marginalized. The more they stay silent, the less popular the idea becomes thus, creating a spiral where the minority view becomes even less visible, strengthening the dominant view. Over time, the spiral can amplify as more

people - including those who may have considered shifting from the majority to the minority view will hesitate to speak out.

In the context of depression, the Spiral of Silence theory provides insight into why individuals struggling with mental health issues like depression often withdraw from communication. Depression is characterized by low self-esteem, extreme feelings of worthlessness and self doubt. These feelings make depressed individuals to conclude that their opinions are not valued (are in the great minority) hence, they avoid speaking up in social and group settings.

Also, in many societies, people with depression and other mental health issues usually face stigma and the fear of this stigma reinforces their silence. Over time the pattern becomes a cycle: the less they speak, the more unwanted they feel their opinion is and the more they feel that their opinion is unwanted, the more reluctant they are to speak. This cycle aligns with the Spiral of Silence theory.

In summary, the Spiral of Silence theory explains the cause of the reduction in verbal and interpersonal communication often displayed by individuals battling depression, highlighting the social and psychological barriers that prevent expression and showing that depression can indeed affect a person's ability to communicate effectively.

Beck's Cognitive Theory

Beck's Cognitive Theory was developed by psychiatrist Aaron Beck in the 1960s. The theory posits that it is not a situation itself that determines a person's

emotional and behavioral responses but rather the individual's thoughts (cognitions) about that situation. The theory forms the basis of the Cognitive Therapy and the Cognitive Behavioral Therapy (CBT) both of which aim to help individuals recognize and modify unhelpful thinking patterns common in mental health conditions such as depression.

The theory argues that depression is a result of persistent negative thoughts and dysfunctional belief systems. Depressed individuals tend to interprete life events in a way that focuses on the negative and overlooks the positive. This distorted form of thinking is called Cognitive distortion and manifests in what Beck calls the Cognitive Triad: Negative thoughts about the self, Negative thoughts about the world and Negative thoughts about the future. Depressed individuals believe that they are worthless (negative thoughts about self), that others won't understand them (negative thoughts about the world) and that nothing would improve (negative thoughts about the future) hence, they are more likely to withdraw from conversations, misunderstand social cues and lose motivation to communicate. Their verbal communication may be filled with negative self talks, hesitation or a dull tone (reflecting their lack of emotional energy) while their non verbal cues such as gestures, facial expressions and postures would look flat, withdrawn or weak due to their internal struggles.

Although Beck's Cognitive Theory is a psychological theory rather than a communication theory, it is relevant to this study because it explains the internal

mental processes such as negative self perception and hopelessness that lead to withdrawal, silence and communication breakdown in depressed people.

Conclusion: Beck's theory complements the Spiral of Silence theory by offering a psychological explanation for why depressed individuals avoid communication. While the Spiral of Silence theory focuses on external social pressures, Beck's Cognitive theory shows the internal mental processes and both contribute to the depressed individual's silence and withdrawal.

CHAPTER THREE

METHODOLOGY

3.1 Research Design

This study utilized a descriptive survey design. Descriptive survey design is the most appropriate for this study because it helped the researcher to systematically collect and organize data from the population which was used to analyze the effect of depression on the communication skills of Mass Communication students.

The design also enabled the researcher to gather the most accurate information because the population from which the data was collected needed to be free from any form of influence.

3.2 Population of the Study

The population of the study is 821 students which is the total number of all the full time undergraduate Mass Communication students in the University of Benin, Benin City, Edo state, Nigeria.

The figure, 821 was derived from the addition of the total number of full-time undergraduate students given by all the class representatives of the various levels - from 100-400 level i.e 100 level= 148 students, 200 level= 255 students, 300 level= 237 students and 400 level= 181 students.

The students were selected to be the population of the study because they are frequently exposed academically to communication related tasks and are susceptible to factors affecting mental health.

3.3 Sample Size/Sampling Technique

The Krejcie and Morgan (1970) table was used to determine the sample size out of the population of 821 students. After using the table, the researcher got a recommended sample size of approximately 265 students. A stratified random sampling technique was then adopted to ensure fair representation across the academic levels (100-400 levels).

The researcher stratified the entire population according to academic levels then she allocated the sample to each level proportionally using the formula:

N= [Population of each level÷ Total Population (821)] × Sample Size (265)

Therefore:

100 level = (148 /821) × 265 = 48 students

200 level = (255/821) × 265 = 82 students

300 level = (237/821) × 265 = 77 students

400 level = (181/821) × 265 = 58 students

The researcher adopted this stratified approach to ensure that all levels were adequately represented in line with their actual proportions in the population.

3.4 Instrument for Data Collection

The instrument for data collection in this study is a questionnaire titled: **Questionnaire on the Effects of Depression on the Communication Skills of Undergraduate Mass Communication Students at the University of Benin.**

The questionnaire was designed to gather information on the demographics of the students, prevalence of depression as well as the experiences of depressed students, the impact of depression on their communication skills, their coping strategies and suggestions as to support for the students. The questionnaire was divided into four sections: A - D.

Section A collected information on the students' backgrounds (age, gender, level of study, etc). Section B screened the respondents to identify those who have experienced depressive symptoms recently. Only the respondents that met the screening criteria proceeded to the next sections.

Section C gathered information on the effects of depression on the respondents' communication skills. The section was divided into three sub sections: i.) Verbal communication which looked at the effects of depression on the respondents' ability to express themselves vocally. ii.) Non verbal communication which looked at the effect of depression on the respondents' ability to give and receive non verbal cues. iii.) Interpersonal and Academic communication which looked into the challenges faced by the respondents during interaction with others in their social environment (within the confines of the university).

Section D helped to identify the strategies used by the respondents to manage the effects of depression on their communication skills and it gathers the respondents' suggestions on how they can be supported. The questionnaire used a combination of open-ended and close-ended questions that were concise, clear and showed respect for the sensitive nature of the subject matter (depression).

3.5 Validity of the Research Instrument

The questionnaire was subjected to expert review to ensure its validity. It was submitted to the research project supervisor who is an experienced academic in the field of Mass Communication for extensive scrutiny, corrections and recommendations.

This process helped the questionnaire to achieve face validity by making sure that the questions were appropriate structure wise, content wise and language wise. It also helped the questionnaire to achieve content validity as the process ensured that the questionnaire adequately covered all aspects of the study.

3.6 Method of Data Collection

The data for this study was collected via a structured questionnaire administered by the researcher.

The questionnaire was in physical form (printed copy). The questionnaire were distributed through person to person approach. Data collection happened over a two week period to provide enough time for proper reception and collation of responses. Only the responses from students who met the screening criteria (those who currently

or recently experienced depressive symptoms within the past eight months) were analyzed.

3.7 Method of Data Analysis

The researcher manually analyzed the collected data using descriptive statistics that is, frequencies and simple percentages. The collected responses was organized into tables and analyzed using frequencies and simple percentages in order to summarize the demographic data, outcome of the screening questions and also to show patterns in respondents' communication challenges. The open-ended questions was grouped thematically to capture common themes.

This approach is most suitable for showing trends and making observations based on the respondents' answers.

3.8 Ethical Considerations

Because of the sensitive nature of one of the subject matters of this study (depression), this study took certain ethical considerations into account:

Participation in this study was strictly voluntary and the informed consent of the participants was obtained i.e the questionnaire contained an introductory statement that outlined the study's purpose. The anonymity of the participants as well as the confidentiality of their responses was guaranteed. The participants were allowed to withdraw at any point of the data collection process. The researcher made all necessary efforts to ensure that participation in the data collection process did not cause distress to the participants.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND DISCUSSION OF FINDINGS

This chapter presents and analyses the data that was collected through the questionnaire. The data was collected and analysed using descriptive statistics that is, frequencies and simple percentages. A total of 265 copies of the questionnaire were filled.

The open ended questions were analysed thematically i.e the responses were examined to find recurring themes. It should be noted that some reponses reflected more than one theme and the frequency was done according to the number of times each theme appeared hence, the total sample for each open ended question varies.

The items in the questionnaire are analyzed below using frequencies, percentages and tables for the presentation of data. The Data presentation and analysis section will be divided into four groups: Demographic data, Screening questions, Communication and depression and Open ended questions.

4.1 Data Presentation and Analysis

Section A: Demographic Data

Table 1: Gender of the Respondents

Gender	**Frequency**	**Percentage**
Male	72	27%
Female	185	70%
Other	2	1%
Prefer not to say	6	2%
Total	265	100%

Source: Field Survey, 2025

The above table indicates that the majority of the respondents were female (70%), a huge number compared to males' 27%. A small minority identified as "other" or "prefer not to say". This table reflects the general enrollment trends within Mass Communication department at the University of Benin which often has a higher population of females than males.

Table 2: Age of the respondents

Age	**Frequency**	**Percentage**
20 and below	129	48.68%
21 – 25	129	48.68%
26 – 30	7	2.64%
Above 30	0	0%
Total	**265**	**100%**

Source: Field Survey, 2025

The above table shows that nearly all the respondents (97.36%) are aged 25 or younger. This percentage is evenly split between students aged 20 and below and 21-25. The remaining 2.64% was taken by those between 26-30 years. It shows that the undergraduate population of Mass Communication department are predominantly youths.

Table 3: Level of Study of the Respondents

Level of Study	**Frequency**	**Percentage**
100 Level	48	18.1%
200 Level	82	30.9%
300 Level	77	29.1%
400 Level	58	21.9%
Total	**265**	**100%**

Source: Field Survey, 2025

The above table indicates that 200-level students constituted the largest respondent group (30.9%), followed closely by 300-level students (29.1%).

Table 4: Access to Professional Mental Health Support among Respondents

Access to Professional Mental Health Support	**Frequency**	**Percentage**
Yes	8	3.02%
No	241	90.94%
Prefer not to say	16	6.04%
Total	**265**	**100%**

Source: Field Survey, 2025

The above table shows that an overwhelming majority of the respondents (90.94%) are not currently receiving professional mental health support. Only a very small fraction (3.02%) are receiving support while a few (6.04%) preferred not to disclose this information. This shows a trend that is most disturbing especially if one considers the fraction of Respondents who eventually displayed signs of depression (see Table 11).

Section B: Screening Questions

Table 5: In the past eight months, have you frequently felt persistent sadness, hopelessness or emptiness?

Response	**Frequency**	**Percentage**
Yes	106	40%
No	159	60%
Total	**265**	**100%**

Source: Field Survey, 2025

Table 5 shows that a significant proportion of respondents are experiencing persistent feelings of sadness, hopelessness or emptiness within the past eight months - a core symptom associated with depression.

Table 6: Have you experienced a lost of interest or pleasure in activities you previously enjoyed including social interactions?

Response	Frequency	Percentage
Yes	194	73.2%
No	71	26.8%
Total	**265**	**100%**

Source: Field Survey, 2025

The above table shows that an overwhelming majority of respondents reported experiencing a lost of interest or pleasure in activities they once enjoyed - another fundamental diagnostic criterion for depression.

Table 7: Was there a time in the past eight months when you often felt excessively tired or lacking in energy even after rest?

Response	Frequency	Percentage
Yes	204	77%
No	61	23%
Total	**265**	**100%**

Source: Field Survey, 2025

The above table shows that a vast majority of respondents reported frequently experiencing excessive fatigue or loss of energy even after adequate rest in the past eight months. This symptom is a common physical manifestation of depression.

Table 8: Did you find it difficult to concentrate, make decisions or stay engaged in conversations during that period?

Response	Frequency	Percentage
Yes	166	62.6%
No	99	37.4%
Total	**265**	**100%**

Source: Field Survey, 2025

In the above table, majority of the respondents (62.6%) reported difficulties with concentration, decision making and staying engaged in conversations.

Table 9: Did you ever withdraw from social activities, public speaking, or group discussions due to feeling overwhelmed, anxious, or unmotivated during that period?

Response	Frequency	Percentage
Yes	160	60.4%
No	105	39.6%
Total	**265**	**100%**

Source: Field Survey, 2025

The above table indicates that a clear majority of respondents (60.4%) reported withdrawing from key communicative activities like social activities, public speaking and group discussions due to feeling overwhelmed, anxious or unmotivated.

Table 10: Were you ever diagnosed with depression or did you suspect that you might be experiencing depression during the last eight months?

Response	Frequency	Percentage
Yes, I have been Diagnosed	18	6.8%
No but I suspect I might have had it	72	27.2%
No, I don't think so	175	60%
Total	**265**	**100%**

Source: Field Survey, 2025

Table 10 reveals that despite the high symptoms reported in tables 5-9, a lot of respondents (60%) did not believe they had depression. A comparison between this table and table 4 suggests a potential lack of awareness or reluctance of respondents to identify with the word, "depression".

Table 11: Prevalence of Depression among Respondents.

Mental State	Frequency	Percentage
Depressed	174	65.7%
Non Depressed	91	34.3%
Total	**265**	**100%**

Source: Field Survey, 2025

The above table depicts that based on each respondent's results from the screening questions, a significant majority (65.7%) of the Mass Communication student surveyed are experiencing symptoms consistent with depression. This

prevalence rate is notably high and disturbing given the fact that majority of them are unaware of this as shown in table 10.

Table 12: Factors contributing to respondents' feelings of Depression.

Factors	**Frequency**	**Percentage**
Academic Stress	34	20%
Family Problems	4	2.3%
Financial Pressure	46	26%
Social Pressure	20	11.5%
Others	I16	9.2%
Combination of above mentioned factors	54	31%
Total	**174**	**100%**

Source: Field Survey, 2025

Table 12 reveals that depression among the respondents is rarely attributed to a single cause. Majority of the respondents (54%) reported that a combination of some or all of the stated factors was responsible. Meanwhile financial pressure (26,%) and academic stress (20%) were identified as the most significant individual contributors.

Section C: Communication and Depression

Table 13: During the period of Depression, how often did you find it difficult to express yourself verbally?

Response	**Frequency**	**Percentage**
Always	16	9.1%
Often	42	24.1%
Sometimes	58	33.3%
Rarely	48	27.5%
Never	10	6%
Total	**174**	**100%**

Source: Field Survey, 2025

The above table shows a range of verbal communication difficulty among respondents. While a minority reported a constant struggle (Always=9.1%) or no struggle (Never=6%). The vast majority fell in between with a significant combined percentage of 57.4% of the respondents faced this challenge regularly (often=24.1% and sometimes=33.3%).

Table 14: Did you experience difficulty speaking up in class even when you had ideas to share?

Response	**Frequency**	**Percentage**
Yes, frequently	46%	26.4%
Yes, sometimes	76%	43.7%
No, not really	52%	29.9%
Total	**174**	**100%**

Source: Field Survey, 2025

The above table shows that difficulty speaking up in class was an issue for 70% of respondents who reported experiencing depression in the past eight months. While it was a frequent issue for 26.4%, it was a recurring issue for 43.7% of the affected respondents.

Table 15: Did you ever struggle with Public Speaking due to feelings of Sellf Doubt, Fear or lack of Motivation during that period of Depression?

Response	**Frequency**	**Percentage**
Yes	114	65.5%
No	60	34.5%
Total	**174**	**100%**

Source: Field Survey, 2025.

Table 15 indicates that nearly two-thirds (65.5%) of respondents struggling with depression reported that it caused them to struggle with public speaking due to feelings of self doubt, fear or lack of motivation.

Table 16: Did it affect your ability to pay attention and understand what was being said in conversations?

Response	**Frequency**	**Percentage**
Yes	94	54%
No	80	46%
Total	**174**	**100%**

Source: Field Survey, 2025.

Table 16 reveals that depression affected a significant percentage (54%) of respondents' ability to pay attention and understand what was being said in conversations.

Table 17: During the period of Depression, did you find it difficult to maintain Eye contact during conversations or presentations?

Response	Frequency	Percentage
Yes, always	48	27.6%
Sometimes	72	41.4%
No	54	31%
Total	**174**	**100%**

Source: Field Survey, 2025

The above table displays a combined percentage of 64% of respondents who reported difficulty in maintaining eye contact during conversations or presentation with 26.7% struggling with it constantly (always) and 41.4% facing the challenge intermittently (something).

Table 18: Did you notice changes in your Body Language (e.g slouching, avoiding gestures) when communicating while feeling depressed?

Response	Frequency	Percentage
Yes	90	51.7%
No	84	48.3%
Total	**174**	**100%**

Source: Field Survey, 2025

The table above depicts that 51.7% of the respondents who displayed depressive symptoms reported noticing changes in their body language

Table 19: Did you notice yourself being easily distracted or losing focus during the period of Depression?

Response	**Frequency**	**Percentage**
Yes	134	77%
No	40	23%
Total	**174**	**100%**

Source: Field Survey, 2025

The table above reveals that a remarkably high percentage (77%) of respondents reported that they were easily distracted/losing focus during the period of depression.

Table 20: Did you have negative perception of yourself/your situation during that period (e.g feelings of hopelessness, worthlessness etc)?

Response	**Frequency**	**Percentage**
Yes, I did	106	60.9%
No, I did not	68	39.1%
Total	**174**	**100%**

Source: Field Survey, 2025

Table 20 shows that 60.9% of the respondents reported having a negative perception of themselves or their situation during the period of depression.

Table 21: Did you notice any negative changes in your study habits or any other exercise that had to do with reading and writing?

Response	Frequency	Percentage
Yes	40	63.3%
No	64	36.7%
Total	**174**	**100%**

Source: Field Survey, 2025

Table 21 infers that majority (63.3%) of the students who experienced or are experiencing depression within the past eight months reported that they noticed negative changes in their study habits or other activities that had to do with reading and writing.

Table 22: Did it affect your physical appearance (i.e did you pay less attention to dressing and grooming)?

Response	Frequency	Percentage
Yes	98	56.3%
No	76	43.7%
Total	**174**	**100%**

Source: Field Survey , 2025

Table 22 indicates that 56.3% of the respondents that had depressive symptoms in the past eight months reported that depression affected their physical appearance including how they dressed.

Table 23: Did you dislike or avoid group discussions or teamwork because of your mood or emotional state during the period of depression?

Response	Frequency	Percentage
Yes, frequently	36	20.7%
Yes, sometimes	110	63.2%
No	28	16.1%
Total	**174**	**100%**

Source: Field Survey, 2025

The above table depicts that disliking or avoiding group discussions or teamwork because of the mood or emotional state during the period of depression was an issue for a collective percentage of 83.9% of the respondents who recently experienced depression. It was a frequent issue for 20.7% and an occasional issue for 63.2 of them.

Table 24: Did the period of Depression affect your ability to complete communication-related academic tasks (e.g., writing articles, giving presentations, participating in interviews)?

Responses	Frequency	Percentage
Yes, significantly	20	11.5%
Yes, somewhat	70	40.2%
No, not really	84	48.3%
Total	**174**	**100%**

Source: Field Survey, 2025

Table 24 infers that the issue of depression affecting the ability to complete communication related academic tasks was a significant one for 11.5% of the respondents and a slight one for 40.2% of the respondents.

Section D: Open ended Questions

Table 25: How did depression affect your ability to communicate with lecturers, classmates, or friends?

Theme	**Frequency**	**Percentage**
Social withdrawal and avoidance	40	20.6%
Cognitive Negativity and low self-esteem	30	15.5%
Loss of interest and impaired concentration	28	14.4%
Interpersonal difficulties and feelings of disconnection	42	21.6%
No noticeable effects	54	27.9%
Total	294	100%

Source: Field Survey, 2025

Table 25 reveals that the impact of depression on the respondents ability to communicate is multifaceted. While more than a quarter (27.9%) of the respondents indicated "no noticeable effects", the overwhelming majority of themes described significant negative effects.

Table 26: What coping strategies, if any, have you used to manage communication difficulties related to depression?

Theme	Frequency	Percentage
Social Support	42	17.21%
Introspective and Solitary activities	52	21.31%
Pushing through and Self encouragement	62	25.41%
Spiritual and Faith based coping strategies	22	9.02%
Escapism and Avoidant coping mechanisms	20	8.2%
Professional help	2	0.82%
Absence of Coping strategies	44	18.03%
Total	244	100%

Source: Field Survey, 2025

Table 26 indicates that respondents are majorly relying on personal and internal coping strategies. The most common approach was "Pushing through and self encouragement" and the most remarkable finding is the exceptionally low level of recourse to professional help (0.82%) which was overshadowed even by "Absence of coping strategies"(13.03%).

Table 27: What support do you think Mass Communication students dealing with depression need to improve their communication skills?

Theme	Frequency	Percentage
Institutional and Academic support	32	13.3%
Professional and Structured Mental Health help	52	21.7%
Peer and Social Support Systems	72	30%
Personal development and Self help strategies	40	16.7%
Spiritual and Personal Solace	8	3.3%
Potentially unhelpful or Avoidant suggestions	10	4.2%
Uncertainty about what would help	26	10.8%
Total	**240**	**100%**

Source: Field Survey, 2025

Table 27 infers that respondents made a clear demand for human connection (Peer support - 30%) as well as professional mental health help (21.7%). The request for intrapersonal forms of help (16.7%) is higher than "Institutional and academic support" (13.3%). This suggests that students see the problem as psychological and social, not just academic. 10.8% expressed uncertainty about what would help which points to the need for better mental health awareness and resource promotion.

4.2 Discussion of Findings

This section presents the discussion of findings based on the answers to the research questions administered in the questionnaire.

Research Question 1: What is the prevalence of Depression among undergraduate Mass Communication students at the University of Benin?

The findings from the screening questions (Tables 5 - 10) shows that there is a significantly higher prevalence of depressive symptoms among undergraduates Mass Communication students in the University of Benin.

Table 11 revealed that 65.7% i.e 174 out of 265 of the surveyed students had experienced symptoms consistent with depression within the last eight months. This figure is high and shows that depression is a major health concern within the student population of undergraduate Mass Communication students. A look into the tables showing the frequency of some specific symptoms reported by the respondents will reinforce the above stated prevalence.

For example, Table 6 reports that a vast majority (73.2%) experienced a lost of interest or pleasure in previously enjoyed activities, Table 7 showed that 77% reported persistent fatigue and 62.6% of the total number of respondents acknowledged that they had difficulties with concentration, decision making and staying engaged in conversations in Table 8.

The high prevalence rate in this study aligns with growing national and global concerns about the state of university students' as reflected by the systematic review

and meta-analysis conducted by Cui, Ajayi, Kim and Egonu (2022) which revealed that the prevalence of depression among Nigerian undergraduates was 26% - a percentage that won't look so small when one puts the very large population of Nigerian undergraduates into account. The study also noted regional variations with rates as high as 45.9% in the Northwest and 33% in the South-South (this rate is particularly relevant to the context of this study) among others.

Worthy of mentioning are the facts presented in Table 10 which shows that 60% of the total number of respondents (including those whose response the screening questions indicated the presence of symptoms consistent with depression within the past eight months) claimed not to have been depressed within the above-mentioned timeframe. There was also a huge gap between the number of students who suspected they had had depression (27.2%) and those with a formal diagnosis (6.8%). These facts highlight a critical gap in the rate of students' use of mental health services.

Research Question 2: What are the causes of Depression among undergraduate Mass Communication students at the University of Benin?

The findings from Table 12 indicates that depression among the undergraduate Mass Communication students at the University of Benin is not always a result of a single cause but is sometimes caused by a combination multiple interconnected stressors. This point is demonstrated by the fact that the largest percentage of the responses (31%) pointed to "Combination of above mentioned factors".

Among the responses that chose individual stressors, "Financial Pressure" (26%) came out as the most significant contributor and was closely followed by "Academic Stress" (20%). "Social Pressure" clinched a substantial percentage of 11.5% which reflected the challenges beyond academics which the students face including the struggle to conform to peer/family/societal expectations, the desire to gain social acceptance and navigate complex peer relationships. "Family Problems" wasn't so common a stress among the respondents as evidenced by its accounting for just 2.3% of the responses.

The identification of financial and academic pressures as the lead single causes shows that the main causes are outside the students' direct control as they are systemic and environmental in nature. The students are struggling with the high cost of living and education (which are national economic issues) as well as the intense demands of their coursework.

Meanwhile, the relatively lower reporting of social pressures and family problems suggest that within the university environment, these personal and interpersonal stressors might be secondary or worsened by the urgent pressures of financial coping and having a high academic performance.

Research Question 3: In what ways does Depression affect the Communication Skills of Mass Communication students at the University of Benin?

The findings of this research reveals a profound impairment of the communication skills of undergraduate Mass Communication students who displayed depressive symptoms. The researcher was able to uncover effects on their ability to use verbal, nonverbal and interpersonal communication skills.

Table 13 showed that a group of 33.3% reported an intermittent occurrence of difficulty in verbal expression that is, an unpredictable cycle of being able or unable to express themselves verbally. There was another group deeply affected students with 24.1% having the difficulty often and 9.1% always having the difficulty. Verbal expression became a consistent struggle for them.

A remarkable finding comes from Table 14 where a combined percentage of 70.1% students (who chose "yes, frequently" and "yes, sometimes") admitted to having difficulty speaking up in class even when they had ideas to share. This shows that even though the problem was not a lack of common language (since they had ideas to share) but rather an inability to use that skill probably due to feelings of self doubt thus reflecting the Cognitive Triad propounded by Aaron Beck (Beck et al., 1987).

Public speaking is one of the central pillars upon which the activities and careers of Mass Communication students are built and yet Table 15 reports that 65.5%

of the students who displayed depressive symptoms connected their depression to struggles with public speaking due to self doubt, fear or lack of motivation.

Furthermore, their listening and understanding skills were affected as shown in Table 16 where 54% reported inability to pay attention and understand what was being said in conversations during the period of depression.

The impact of depression goes beyond the use of words to the use of nonverbal cues which aid effective communication. More than half of the students (69%) had some form of difficulty in maintaining eye contact as reported in Table 17. This is a key signal of lack of confidence and engagement. 51.7% of the students reported negative changes in their body language such as slouching in Table 18. Their reading and writing skills were also affected as 63.3% of the students noticed negative changes in their study habits/any exercise that had to do with reading and writing in Table 21.

Table 19 revealed the effect of of depression on the students' observation skills. 77% of the students reported being easily distracted or losing focus during their period of depression. Also important is the recording herein of the effects of depression on their physical appearance (e.g dressing and grooming) reason being that one's physical appearance is the first nonverbal cue that others observe about an individual. Depression affected 56.3% of the students' physical appearance as reported by Table 22.

Moving on to the effects of depression on the students' use of interpersonal skills, the findings of this research shows that a combined percentage of 83.9% of the

students reported that they avoided group discussions or teamwork during their periods of depression (Table 23). This behavior is most likely fueled by the negative perception about self/situation reported by 60.9% of the students in Table 20.

The thematic analysis presented in Table 25 confirms the effects of depression on students' interpersonal skills as 20.6% of the students described effects that reflected the theme of social withdrawal and avoidance with some responses stating, "I had the urge to shut myself from everyone", "I just felt somehow and decided to stay low key". Some students displayed this withdrawal and avoidance symptoms not by merely avoiding interpersonal communication but by hiding their feelings from others/masking it. This can be seen in the response, "It rarely did. I didn't see the need making it obvious. I have the ability to contain it in". 21.6% of the students' reponses reflected the theme, "Interpersonal difficulties and feelings of disconnection" as can be seen in these responses: "Not wanting to talk much, lost bond with some persons...", "I would always stay quiet when speaking with friends because anytime I want to speak, I get watery eyes", "Just always kept to myself so it felt like I neglected my friends". 14.4% of the students' responses in Table 25 reflected the theme of "Loss of interest and Impaired concentration" as is seen in these responses: "I just didn't feel like interacting...", "It made me not want to engage in any personal and group communication by making me have little or no interest in people and my environment", "I sometimes found myself zoning out in conversations" and even "I couldn't focus". The theme of "Cognitive negativity and low self-esteem" was another

theme reflected by the responses of 15.5% of the students in Table 25. The responses include: "It made me have low self-esteem and also not think of myself in a not so good manner", "... during communication with other people, I felt my suggestion or words will be void...", "It makes me feel the lecturer wouldn't pay attention to me because I'm always having this feeling that nobody really cares".

Research Question 4: What possible interventions or support systems can help undergraduate Mass Communication students manage communication difficulties associated with depression?

The researcher asked an open ended question in the "Final thoughts" section of the questionnaire which was "What support do you think Mass Communication students dealing with depression need to improve their communication skills?" Because this research is done for the betterment of undergraduate Mass Communication students going through depression, the answer to this research question will be based on the thematic analysis of the students' responses reflected in Table 27. 30% of the students' responses reflected the need for Peers and Social support systems. They need a kinder environment with friends, family, staff and classmates who understand what they are going through and are willing to bear with them and help them. As a respondent put it, "they need social support and love from those around".

There is also a need for Professional Mental Health Help. 21.7% of the students called for this in their responses which reflected the theme of "Professional

and Structured Mental Health Help" with responses like "a confidential helpline where students can help themselves freely without getting judged" and "Seek professional help". It is remarkable that while these students know they need counselors and therapists, they are not using them as reflected by the meager 3.02% of the total number of respondents that reported to be using professional mental health support in Table 4. While the University of Benin has actually provided Counseling offices in both Ugbowo and Ekehuan campuses, students are not using them. This leads us to another recommendation of Institutional and Academic support.

Some of the students (13.3%), recognizing their lack of knowledge of what depression actually is, called for Awareness programmes or lectures about depression organized by the University of Benin as well as a communication improvement training to be held by the department. One student went as far as giving it the name, "communication improvement symposium". Other responses under this theme called for less financial pressure and a more flexible academic calendar.

Help coming from different sources is one thing and the students placing themselves in a position to receive help is another thing. 16.7% of the responses acknowledged this and called for Personal Development and the use of Self help strategies such as reading self help books, trying to be positive and engaging in leisure activities/exercises among others. A final recommendation of seeking Spiritual and Personal Solace was given by 3.3% of the respondents who displayed depressive symptoms.

In conclusion, this five part approach can address the main causes of the students' depression and the resulting effects on their communication skills. The response of a respondent sums it up: "Therapy, good listeners, friends, money and practice".

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATION

5.1 Summary of the Study

This study was informed by the growing global and national concerns about the increasing prevalence of depression among university students and its ability to hinder their academic development. For Mass Communication students, their academic and professional development is based on their ability to communicate effectively - a criterion which is severely affected by depression.

This research was therefore carried out to investigate the effect of depression on the communication skills of undergraduate Mass Communication students at the University of Benin.

The study was carried out with the objectives of determining the prevalence and causes of depression among the students, how it affects their communication skills as well as proposing potential interventions to address the I'm actually of depression on the students' communication skills.

Based on the data collected, the research has shown that:

1. The prevalence of depression among undergraduate Mass Communication students at the University of Benin is quite high and is placed at 65.7%.
2. While 31% of the affected respondents reported that their depression was caused by a combination of stressors, financial pressure (26%) and academic stress (20%) were the most significant single causes of depression.

3. For the effects of depression on the respondents' verbal communication skills, a significant majority of affected students experienced difficulties with verbal expression with a combination of 66.5% of them reporting that it was always, often, or sometimes a challenge.
4. A combined percentage of 70.1% had difficulty speaking up in class even when they had ideas to contribute and 65.5% of the affected respondents reported struggling with public speaking due to self-doubt, fear or lack of motivation.
5. 54% of the affected respondents reported finding it difficult to pay attention and understand what was being said in conversations and 77% reported being easily distracted.
6. Reports on the effects of depression on their non verbal communication skills showed that 69% of the students reported some form of difficulty in maintaining eye contact. Meanwhile, over half of them reported negative changes in their body language (51.7%), during exercises that had to do with reading and writing (63.3%) and 56.3% noticed changes in their physical appearance.
7. The response of the affected respondents on the effect of depression on their interpersonal skills show that 83.9% of the respondents reported some form of avoidance of group discussions or team work during the period of depression.

8. The thematic analysis revealed that the responses of majority (27.9%) of the affected respondents reported that there was no noticeable effect on their interpersonal skills. Responses that reported some form of effect reflected the themes of interpersonal difficulties and feelings of disconnection (21.6%) and social withdrawal and avoidance (20.6%) among others.

9. The thematic analysis of the last question showed that the forms of support desired by the affected respondents were Institution and academic support and Peer and Social support systems among others.

5.2 Conclusion

This research concludes that rate of depression among undergraduate Mass Communication students is rather alarming and adds to the growing national and global concerns for the state of youths' mental health. There are significant effects on the communication skills of the students who have been depressed and this is a cause for concern as the academic and career success of Mass Communication students is heavily dependent on their abilities to communicate effectively. There is therefore, a need for some measures to be taken to help the affected students improve their communication skills despite their challenges.

5.3 Recommendations

The following recommendations are made based on the findings of this study:

1. Awareness programmes on the reality of depression and the availability/reliability of the Counseling offices provided by the University of Benin should be held regularly.
2. A comparative research should be carried out for other student groups within the department of Mass Communication such as the Part Time and postgraduate students as well as across departments, faculties and even institutions.
3. There should be an encouragement of research culture whereby students are able to carry out research for the betterment of mankind and finding of solutions to the problems of our time as opposed to carrying out research just to get a degree.

References

Abdelaziz, A.M., Sallam, S. (2025). *The effects of communication skills on the relationship between emotional maturity and mental health disorders among a sample of Egyptian university students*. Current Psychology. 44, 3491-3502. https://doi.org/10.1007/s12144-024-07236-2.

American Psychiatric Association (2022). *Diagnostic and statistical manual of mental disorders* (5th ed., text rev.) https://doi.org110.1176/appi.books.9780890425781.

Al-Atabi, A.J. (2020). *What is Writing?* Research Gate. https://doi.org/10.13140/RG.2.2.35570.53440

Allen, N. B., & Badcock, P. B. T. (2003). The social risk hypothesis of depressed mood: Evolutionary, psychosocial, and neurobiological perspectives. *Psychological Bulletin, 129*(6), 887–913. https://doi.org/10.1037/0033-2909.129.6.887

Beck, A.T., Rush, A.J., Shaw, B.F., & Emery, G. (1987). *Cognitive therapy of depression*. Guilford publications.

Berenbaum, H., & Oltmanns, T. F. (1992). Emotional experience and expression in schizophrenia and depression. *Journal of Abnormal Psychology, 101*, 37–44. https://doi.org/10.1037/0021-843x.101.1.37

Brozgold, A. Z., Borod, J. C., Martin, C. C., Pick, L. H., Alpert, M., & Welkowitz, J. (1998). Social functioning and facial emotional expression in neurological and psychiatric disorders. *Applied Neuropsychology, 5,* 15–23. https://doi.org/10.1207/s15324826an0501_2

Cleveland Clinic (n.d.). *Depression: causes, symptoms, types & treatment.* Cleveland Clinic. Retrieved April 22, 2025 from https://my.clevelandclinic.org/health/diseases/9290-depression.

Chemsterdam. (2025, March 11). *Tact: The art and wisdom of relationships.* Chemsterdam. Retrieved October 17, 2025, from https://www.chemsterdam.com/tact-the-art-and-wisdom-of-relationships/

Cui, S., Ajayi, B , Kim, E., & Egomu, R. (2022). *A systematic review and meta-analysis of depression prevalence among Nigerian students pursuing higher education*. Journal of Behavioral and Brain Science 12(11), 589-598. https://doi.org/10.4236/jbbs.2022.1211035.

Ellgring, H. (1989). *Nonverbal communication in depression*. Cambridge University Press.

Ernst, F. H., Jr. (1973). *Who's listening? A handbook of the transactional analysis of the listening function.* Vallejo, CA: Addresso'Set

Girard, J. M., Cohn, J. F., Mahoor, M. H., Mavadati, S. M., Hammal, Z., & Rosenwald, D. P. (2014). Nonverbal social withdrawal in depression: Evidence from manual and automatic analysis. *Image and Vision Computing, 32*(10), 641–647. https://doi.org/10.1016/j.imavis.2013.12.007

Herrity, J. (2025, May 30). *Interpersonal skills: Definitions, examples and how to improve.* Indeed Career Guide. Retrieved October 16, 2025, from https://www.indeed.com/career-advice/resumes-cover-letters/interpersonal-skills

Isara, A.R., Nwokoye, D.I., & Odaman, A.O. (2022). *Relevance and risk factors of depression among undergraduate Medical students in a Nigerian university.* Ghana Medical Journal. 56(4), 303-310. https://doi.org/10.4314/g.uj.v56i4.9

Katz, N., & McNulty, K. (1994). *Conflict resolution* [PDF]. Maxwell School of Citizenship and Public Affairs, Syracuse University. Retrieved October 17, 2025, from https://www.maxwell.syr.edu/docs/default-source/ektron-files/conflict-resolution-neil-katz-and-kevin-mcnulty.pdf?sfvrsn=4de5d71e_9

Krejcie, R.V., & Morgan, D.W. (1970). *Determining sample size for research activities.* Educational and Psychological Measurement. 33(3), 607-610.

McNeill, D. (1992). *Hand and Mind: What Gestures Reveal about Thought.* University of Chicago Press

Mehrabian, A. (1981). *Silent messages: Implicit communication of emotions and attitudes* (2nd ed.). Wadsworth.

Merriam-Webster. (n.d.). *Language.* In Merriam-Webster.com.dictionary. Retrieved April 25, 2025, from https://www.merriam-webster.com/dictionary/language.

Moeller, R.W. & Seehuus, M. (2019). *Loneliness as a mediator for college students' social skills and experiences of depression and anxiety.* Journal of Anxiety. 73, 1-13. https://doi.org/10.1016/j.adolescense.2019.03.006.

Mundt, J. C., Vogel, A. P., Feltner, D. E., & Lenderking, W. R. (2012). Vocal acoustic biomarkers of depression severity and treatment response. *Biological Psychiatry, 72*(2), 580–587. https://doi.org/10.1016/j.biopsych.2012.03.015

National Institute of Mental Health (2025). *Depression.* U.S Department of Health and Human Services, National Institute of Health. Retrieved September 15, 2025 from https://www.nimh.nih.gov/health/topics/depression

Noelle-Neumann, E. (1984). *The spiral of silence.* Chicago: University of Chicago.

Oguizu, O.J., Dominic, O.O., & Oguizu, A.O. (2024). *Prevalence of depression among undergraduate students attending Kaduna State University, Kaduna, Nigeria.* American Journal of Biomedical Sciences and Research. 22(6), 863-868. https://doi.org/10.34297/AJBSR.2024.22.003030.

Powell, J. (1969). *Why am I afraid to tell you who I am?* Niles, IL: Argus Communication.

Rastchi, M., Zokaee, Z., Ghaffarinejad, A.R., & Sadeghi, M.M. (2012). *Depression. Does it affect the comprehension of receptive skills*? Neurosciences (Riyadh, Saudi Arabia) 17(3), 236-240.

Rudolph, K. D., Flynn, M., & Abaied, J. L. (2008). A developmental perspective on interpersonal theories of youth depression. In J. R. Z. Abela & B. L. Hankin (Eds.), *Handbook of depression in children and adolescents* (pp. 79–102). Guilford Press.

Schramn, Wilbur, 1907-1987 editor (1954). *The process and effects of mass communication.* Urbana: University of Illinois Press.

Shannon, C.E., & Weaver, W. (1949). *The mathematical theory of communication*. University of Illinois Press.

Schräder, J., Tröger, J., Habel, U., König, A., & Wages, L. (2024). The voice of depression: Speech features as biomarkers for major depressive disorder. *BMC Psychiatry, 24*(1), 794. https://doi.org/10.1186/s12888-024-06253-6

Vipond, T. (n.d.). *Interpersonal skills.* Corporate Finance Institute. Retrieved October 9, 2025
From https://corporatefinanceinstitute.com/resources/management/interpersonal-skills/

Wang, J., Zhang, L., Liu, T., Pan, W., Hu, B., & Zhu, T. (2019). Acoustic differences between healthy and depressed people: a cross-situation study. *BMC Psychiatry, 19*(1), 300. https://doi.org/10.1186/s12888-019-2300-7

APPENDIX

Department of Mass Communication,
Faculty of Arts,
University of Benin,
Benin City, Nigeria.

Dear Respondent,

REQUEST FOR COMPLETION OF QUESTIONNAIRE

I Esinulo Chukwumdimma Resurrecta, a final year student of the Department of Mass Communication, University of Benin is carrying out a research project on "The Effects of Depression on the Communication Skills of Mass Communication Students in the University of Benin".

I will be grateful if you assist me in completing the questionnaire below. Your responses will remain confidential and will be used solely for academic purposes. Kindly answer the questions as truthfully as possible. Thank you.

Yours faithfully,

Esinulo Chukwumdimma Resurrecta
Researcher

SECTION A: DEMOGRAPHIC INFORMATION

Please provide the following information about yourself. This will help the researcher to understand the results better. Your responses will remain confidential.

1. Gender

   [ ] Male

   [ ] Female

   [ ] Other

   [ ] Prefer not to say

2. Age

   [ ] 20 and Below

   [ ] 21-25

   [ ] 26-30

   [ ] Above 30

3. Level of study

   [ ] 100 level

   [ ] 200 Level

   [ ] 300 Level

   [ ] 400 Level

4. Are you currently receiving any professional mental health support?

   [ ] Yes

   [ ] No

   [ ] Prefer not to say

SECTION B: SCREENING QUESTIONS

These questions will help the researcher to identify students who may have experienced depressive symptoms in the past eight months. If a respondent answers 'No' to most questions, they will not proceed to the next section.

5. In the past eight months, have you frequently felt persistent sadness, hopelessness, or emptiness?

   [ ] Yes

   [ ] No

6. Have you experienced a loss of interest or pleasure in activities you previously enjoyed, including social interactions?

   [ ] Yes

   [ ] No

7. Was there a time in the past eight months when you often felt excessively tired or lacking in energy, even after adequate rest?

   [ ] Yes

   [ ] No

8. Did you find it difficult to concentrate, make decisions, or stay engaged in conversations during that period?

   [ ] Yes

   [ ] No

9. Did you ever withdraw from social activities, public speaking, or group discussions due to feeling overwhelmed, anxious, or unmotivated during that period?

   [ ] Yes

   [ ] No

10. Were you ever diagnosed with depression or did you suspect that you might be experiencing depression during the last eight months?

[ ] Yes, I have been diagnosed

[ ] No, but I suspected I might have had it

[ ] No, I don't think so

11. What do you think contributed to your feelings of depression?

[ ] Academic Stress

[ ] Family problems

[ ] Financial pressure

[ ] Social pressure

[ ] Others (please specify in the space provided)

_____

_____

If the respondent answers "Yes" to at least 3 of the first 5 questions or selects "Yes, I have been diagnosed" / "No, but I suspect I might have it" in Question 10, they can proceed to Section C.

SECTION C: COMMUNICATION AND DEPRESSION

This section is for students who have experienced depressive symptoms. That is, those that answered yes to at least 3 questions from Questions 5 - 9 or those that selected "Yes, I have been diagnosed" or "No, but I suspected that I might have had it" in Question 10.

VERBAL COMMUNICATION

12. During the period of depression, how often did you find it difficult to express yourself verbally (e.g., explaining ideas, participating in discussions)?

    [ ] Always

    [ ] Often

    [ ] Sometimes

    [ ] Rarely

    [ ] Never

13. Did you experience difficulty speaking up in class, even when you have ideas to share?

    [ ] Yes, frequently

    [ ] Yes, sometimes

    [ ] No, not really

14. Did you ever struggle with public speaking due to feelings of self-doubt, fear, or lack of motivation during that period of depression?

    [ ] Yes

    [ ] No

15. Did affect your ability to pay attention and understand what was being said in conversations?

    [ ] Yes

    [ ] No

NON-VERBAL COMMUNICATION

16. During the period of depression, did you find it difficult to maintain eye contact during conversations or presentations?

[ ] Yes, always

[ ] Sometimes

[ ] No

17. Did you notice changes in your body language (e.g., slouching, avoiding gestures) when communicating while feeling depressed?

[ ] Yes

[ ] No

18. Did you notice yourself being easily distracted or losing focus during the period of depression?

[ ] Yes

[ ] No

19. Did you have negative perception about yourself/your situation during that period (e.g feelings of hopelessness, worthlessness etc)?

[ ] Yes I did

[ ] No I did not

20. Did you notice any negative changes in your study habits or any excercise that had to do with reading and writing?

[ ] Yes

[ ] No

21. Did it affect your physical appearance (i.e did you pay less attention to dressing and grooming?)

[ ] Yes

[ ] No

INTERPERSONAL AND ACADEMIC COMMUNICATION

22. Did you dislike or avoid group discussions or teamwork because of your mood or emotional state during the period of depression?

[ ] Yes, frequently

[ ] Yes, sometimes

[ ] No

23. How did depression affect your ability to communicate with lecturers, classmates, or friends?

_____

_____

_____

24. Did the period of depression affect your ability to complete communication-related academic tasks (e.g., writing articles, giving presentations, participating in interviews)?

[ ] Yes, significantly

[ ] Yes, somewhat

[ ] No, not really

SECTION D: COPING STRATEGIES

24. What coping strategies, if any, have you used to manage communication difficulties related to depression?

_____

_____

_____

FINAL THOUGHTS

25. What support do you think mass communication students dealing with depression need to improve their communication skills?

_____

_____

_____