

Effectiveness of Approaches Used in Addressing Students' Depression among Teachers' Colleges in Zimbabwe

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Abstract

The study sought to investigate on the effectiveness of approaches used in addressing depression among young adults at teachers' colleges in Zimbabwe. The study adopted the post-positivism paradigm where a mixed approach was used through questionnaire and interview schedule as means of data collection. The sample consisted of 206 participants drawn from 180 students, two vice principal, two deans of students, 13 heads of departments, one chaplain and eight counsellors. While quantitative data was coded and analysed by the use of tables with frequencies and percentages, qualitative data was analysed through the thematic approach. The study concludes that cognitive behavioral therapy, behavioral therapy and person centered therapy are used to address depression cases in Zimbabwean teachers' colleges. The specific techniques which were commonly used include guided discovery, role play, cognitive restructuring, relaxation and visualization, exposure and person centered. The study therefore recommends that the Ministry of Higher and Tertiary Education, Innovation, Science and Technology Development and other stakeholders should come up with a policy which spells out expected counselling approaches and techniques to be used at the colleges to address the depression of students. The study further recommends the provision of more trained counselling personnel for the identified approaches to be effective in addressing depression.

Keywords: Depression, stress, disorder, coping, students, aggressive behavior, counselling, suicide

Introduction

This study sought to investigate on the effectiveness of approaches used to address depression among young adults at Teachers' Colleges in Zimbabwe. Depression is a significant contributor to the global burden of diseases and it affects people in all communities across the world (WHO, 2018; Marcus, Yasamy, van Ommeren, Chisholm & Saxena 2013). Depression is a mood disorder that all people suffer from at times in their life. Marcus et al. (2012), WHO (2013) and Mateus, Wachinger, Atasoy, Schwarz and Navab (2012) describe depression as a leading cause of disability worldwide. Depression is an emotional state marked by sadness and apprehension, feeling worthless and guilty, withdrawal from others and loss of sleep, appetite, sexual desire and interest in usual activities (Ishak, Ahmad & Omar, 2020). Blum and Naylor (2004) view depression as a mood disorder characterized by sadness and dejection, decreased motivation and interest in life as well as

having negative thoughts. Depressed individuals may show two of the following signs: difficulties in eating, sleeping, thinking and making decisions or having no energy and feelings, and continuous fatigued which has detrimental impact on a person's functioning (Manum, Hossain and Griffiths, 2019). Similarly, Plotnik (2002) described depression as a mood disorder which is prolonged and which affects a person's thoughts, feelings and behavior.

Luni, Ansari, Jawad, Dawson and Baig (2009) described anxiety and depression as common psychiatric disorders in village remote areas of Sindh which contradicts the common belief in Pakistan that people who live in remote rural areas have low rates of psychiatric morbidity.

Depressive disorder and symptoms in young people are associated with a wide range of negative outcomes (Rutter, Cohen & Maughan, 2006) which may have an impact on social, academic and

behavioural functioning and which may increase the risk of suicide (Dunn & Goodyer, 2006; Rice, Lifford, Thomas & Thapar, 2009; Islam, Akter, Sikder, & Griffiths, 2020). Students experiencing depressive symptoms report greater amount of emotions (American College Health Association, 2009; WHO, 2018). Islam et al. (2020) found out that there is high prevalence of depression and anxiety among Bangladeshi university students and highlighted a number of risk factors that are associated with depression, then expressed a demand for curbing depression and other mental health conditions which are on the rise trend (Mateus et al., 2012; Lovell, Nash, Sharman & Lane, 2015). He also suggested a need for intervention programmes including provision of adequate and appropriate services for university students.

High rates of students' depression has been reported in India (Kumari, Langer, Jandial, Gupta, Raina & Singh, 2019; Australia (Lowell et al, 2015) and Bangladeshi (Manum et al., 2019). Sarokhani, Delpisheh, Veisani and Sarokhani (2013) revealed that in Iran, depression was common among university students with no difference between males and females. In Pakistan, as reported by Khan, Mahwood, Badshah, Al and Jamal (2006) medical students had anxiety and depression and the prevalence was high because in addition to coping with normal stressors of everyday life, students had to deal with schoolwork overload, financial indebtedness, lack of leisure time, pressure of work and relationship issues. An earlier American study at Duke University reported a lifetime adolescent depression of 20% with twice as many girls as boys experiencing depression at the ratio of 2:1 (Costello, Erkanli & Angold, 2006). Similarly, studies on stress and depression among prospective teachers in Australia revealed that the increase in the psychological distress was among people aged 18-24 and the females, particularly women who were separated (Gardner, 2010; Lovell et al., 2015). Contrary, Cheung et al. (2016) revealed that in Hong Kong, male nursing students suffered more from depression and stress than female classmates.

A nationwide study in the United States of America revealed that 43% of the college students reported feeling depressed and it was difficult for them to study (American College Health Association, 2009). College students reportedly felt more overwhelmed and stressed than fifteen years back (National Health Ministries, 2004, 2006). A survey of college freshman at the University of Idaho Counselling and

Testing Centre indicated that more than 30% of all college freshmen felt overwhelmed frequently with college work. Generally, students were observed to be coming to college overwhelmed and more damaged than the previous year (Kitzrow, 2003). Tragic events, drug and alcohol abuse, poor performance and withdrawal from college campuses as a result of depression at teachers' colleges in Zimbabwe are on the increase trend (Mbetu-Nzvenga, 2009). The difficulties faced by students may trigger the thoughts of attempting suicide, substance and alcohol abuse, withdrawal and acts of aggression.

To the knowledge of the researcher, little research has been done focusing on effectiveness of the approaches used to address depression among young adults at teachers' colleges in Zimbabwe. Related studies carried out include that of Mapfumo, Chitsiko and Chireshe (2012) whose focus was on Teaching Practice generated stressors and coping mechanisms, of Mbetu-Nzvenga (2009) who focused on causes and effects of depression at one of the teacher's colleges in Zimbabwe, of Chireshe and Chireshe (2010) on sexual harassment of student teachers at Zimbabwe's higher education institutions and of Chibanda, Cowan, Gibson, Weiss and Lund (2016) on the prevalence of depression to people with HIV/AIDS. These studies did not directly focus on effectiveness of the approaches used in addressing depression among young adults at teachers' colleges in Zimbabwe, which is the focus of this study. This study was guided by the following research questions:

1. Which approaches are used in addressing depression among students at teachers' colleges in Zimbabwe?
2. What is the perception of stakeholders on effectiveness of approaches and techniques used to address depression among students at teachers' colleges in Zimbabwe?

Review of Related Literature

This section presents the review of related literature and studies regarding approaches used in addressing depression. It includes both theoretical and empirical underpinnings.

Cognitive Behavioral Therapy

Cognitive Behavioral Therapy (CBT) is a combination of therapies for addressing the physical, cognitive and behavioral aspects of anxiety (Rathuis, 2004). This Therapy has been identified in Oxford as a potential treatment that involves cultural

modification (Organista, 2006). Baykal (2017) ascertained that in Istanbul, cognitive behaviour therapy was effective for severe, comorbid and complex populations with anxiety. In mental health field of London, CBT has been recognized as an important psychosocial treatment for depression (Wenzel, 2016). Similarly, a study by Ehde, Dillworth and Turner (2014) found out that cognitive-behavioural therapy has become the first-line psychosocial treatment for individuals with chronic pain in America.

Nehra, Sharma, Sharma, Kurma & Nehra (2013) revealed that cognitive behaviour therapy was used in India to identify and correct negative thinking patterns by replacing them with more rational beliefs. Another study in India by Pinjarkar, Sudhir and Math (2015) indicated that CBT was effective in reducing social anxiety among patients. Cognitive behavioural therapy was the most commonly used psychosocial treatment and most successful treatment of depression in London (Wenzel, Dobson & Hays, 2016; Stice, Burton, Bearman & Rohde, 2010) and California (Satterfield, 2015). Similarly, in Sweden, Blom, Jemelov, Ruck, Lindefors and Kaldo (2017) revealed that CBT was effective in treating both insomnia and depression. In addition, a Dalhousie study by Morris, Mensink and Stewart (2018) found that CBT was effective in significantly alleviating anxiety and depression. This could support the Iranian study findings by Mohamadian, Bagheri, Hashemi and Sani (2018) that CBT was effective in alleviating anxiety and depression and helping individuals to learn necessary social skills, giving them greater hope for life and higher levels of adaptation. Kodal and Wergeland (2018) revealed that CBT was an effective treatment for generalized anxiety disorders.

Cognitive therapists in London use a variety of techniques to help depressed patients to address their thinking which include cognitive restructuring, psycho-education, guided discovery, Socratic questioning, and role playing (Butler & Beck, 1995; Garratt & Ingram, 2006). Baykal (2017) found out that in Istanbul, exposure, cognitive restructuring, relaxation, social skills training and imagery were effective in the treatment of phobias. Further, Saád, Yuscoff, Nen and Sudhi (2013) established that ad-in cognitive group counselling was effective in improving self-concept, reducing depression and increasing resilience of out of wedlock pregnant teenagers in Malaysia. Similarly, a study by Morris et al. (2018) confirmed that psycho-education, cognitive restructuring, exposure and homework

were effective in alleviating social anxiety and depression of clients in Dalhousie.

The effectiveness of CBT techniques of cognitive restructuring with university students suffering from moderate to severe depressive symptoms in Jordan was confirmed by Hamdan-Mansour, Puskar & Bandak (2009). In Brazil, Gerbara, Barros-Neto, Gertsenchtein and Lotus-Neto (2016) established that cognitive restructuring was effective in reducing anxiety. Similarly, the use of cognitive restructuring in India confirmed that the technique helped clients to identify and challenge their pattern of thinking (Nehra, et al. 2013). This could explain the findings by Norton and Abbott's (2016) that cognitive restructuring helps patients to change dysfunctional thoughts and makes them feel acceptable.

Guided discovery known as Socratic questioning is an important technique of cognitive behavior therapy (Cooper, 1997). Myrick and Myrick (1993) discovered that educators use guided imagery as a way to increase personal awareness and create imaginations, artistic expression and concentration in students. Semple, Lee, Rosa and Miller (2010) found out that imagination was the key factor to play and it involved decision making and problem solving ability. Hanish (2013) concluded that guided imagery with deep breathing could be used to increase oxygen to the brain and reduce anxiety. The practice requires students to imagine and be creative in order to solve problems at hand. Hamdan-Mansour, et al. (2009)'s study findings related with Zadeb and Lateef's (2012) view that guided discovery as a CBT technique helps to alleviate depression among young adults.

Role play as a cognitive behavior therapy technique is further known as the most promising approach in addressing depression. Mathews, Gay and Doherty (2014), for instance, established that role play is a form of psychodrama which supports patients' tracking symptoms which involve recording thoughts, behaviors and feelings on a regular basis. Grondin (2018) established that in South Carolina, role play shapes student's ability to think critically and reason. Fominykh, Leong and Cartwright (2017) revealed that role playing is widely used and is an effective teaching and learning method in Russia. This could explain that role play provides an excellent opportunity for enhanced engagement and helps students to deal with real life dilemmas, improve communication skills, reduce anxiety and

increase confidence (Fominykh, Wild, Smith, Alvarez & Morozov, 2015). Role play further uncovers the suppressed unwanted thoughts which might have led to the development of depression.

Socratic questioning is used in psychotherapy as a cognitive therapy technique which is used to clarify meaning, elicit emotions and consequences as well as creating an insight or explore alternative actions (Robinson, 2017). Feldman (2006) confirmed that in London, Socratic questioning was the most frequently used technique to uncover and modify automatic negative thoughts. Similarly, Friedman, Thase and Wright's (2007) view that Socratic questioning is a cost effective treatment which has proven to be effective in Australia. Further, Grondin (2018) established that Socratic Method was an effective method to assure logical and critical thinking of students in South Carolina.

An Australian program consisting of relaxation and visualization as a cognitive behavioral therapy technique was provided to early childhood student teachers prior to their second practicum. The results showed that participating student teachers perceived themselves to be more relaxed than during their pre-practicum period and were less stressed during the post practicum (Gardner, 2010). According to Zadeb and Lateef (2012), like the Socratic questioning, relaxation and visualization were a cost effective treatments which had proven to be effective. Similarly, Klannin-Yobas, Suzzane and Lau (2015) established that the use of relaxation techniques such as progressive muscle relaxation, training music interventions and yoga are effective in reducing depression among older adults in Singapore. Similarly, the results by Friedman, Thase and Wright (2007) in Australia show that imagery as a cognitive technique was effective in minimizing depression. In Germany, Cwik, Velten, Schlte, Margraf, Von Brachel, Hirschfeld, Willutzki and Teismann (2019) observed that even though CBT was effective in addressing depression, one quarter of the patients did not respond positively to the therapy. This is an indication that not all patients respond positively to the CBT therapy, hence other approaches can be used to address depression of students at teachers' colleges in Zimbabwe.

Behavioral Therapy

Duckworth and Shelton (2012) established that the behavioral component of treating depression was useful and effective as behavior can be changed due to the modifications of negative thoughts into

positive ones. The behavioral technique for treating depression had been frequently paired with cognitive interventions. WHO (2018) established that simply changing one's behavior can lead to an improvement on thoughts and mood. Similarly, Duckworth and Shelton (2012) established that the behavioral component of treatment was effective in alleviating depressive symptoms.

Ruggiero, Spada, Caselli and Sassaroli (2018) revealed that the top-down orientation as a behavioral therapy has its empirical strength in some promising Meta Analyses that suggest an increase in psycho-therapeutic effectiveness for some emotional disorders. Downward arrow technique, a top-down technique which breaks the whole into smaller analytical pieces using existing knowledge to understand the individual is a powerful way to move from surface cognitions to deeper cognitive structures (Friedman, Thase & Wright, 2007). Similarly, Mohamadian et al. (2018) established that downward arrow technique challenges and changes irrational beliefs thereby alleviating anxiety. Freidman et al. (2007) pointed that in Australia, the technique was effective in alleviating depression among young adults.

Exposure therapy as a behavioral technique of which enables adaptation of traumatic experience by means of imagery exposure which includes the details of the event and the accompanying cognitive and emotional responses. Baykal (2017) views exposure as the key element of treatment for most anxiety disorders as it changes the emotional and behavioral symptoms. Gerbera, Barros-Neto, Gertsenchtein and Lotufo-Neto (2016) revealed that in Brazil, exposure as a behavioral technique was effective in reducing anxiety. In relation to these study findings, Barrera, Szafranski, Redcliff, Gamaat and Norton (2016) reiterated that exposure is used to relax the clients and it is effective in addressing intense anxiety.

Person Centered Therapy

Grumman (2013) revealed that Person Centered Therapy results into complete acceptance, empathy, respect and provides unconditional support of the client during therapy. Furthermore, person centred therapy is a non-directive optimistic therapy that focuses on the clients' ability to make changes in individual's life for self-actualisation (Garrett & Garrett, 2013). Weston (2011) established that the approach has been successful in treating problems including anxiety disorders, depression and personal disorders. Person centred therapy is widely used in

various fields and was effective in ameliorating general psychological distress and symptoms of depression in Oxford (Bachkirova & Barrington, 2018) and America (Howard & Hoffman, 2017). Person centered therapy emphasizes on complete acceptance, empathy, respect and providing unconditional support of the client during therapy regardless of what is said or done during the session (Howard & Hoffman, 2017). Sa'ad, Yusoff, Nen & Subhi, (2013) found out that the use of person centered approach with group counselling intervention on pregnant teenagers in Malaysia, improved self-concept and reduced depression.

Goldman (2015) revealed that the client centred therapy was perceived beneficial at Salford University as participants had a positive experience during counselling sessions. Goldman (2015) further revealed that the clients were able to express their emotions, gained insight and achieved an increased sense of self confidence due to unconditional positive regard, empathy and congruence. Further, Saunders and Hill (2014) revealed that being congruent and genuine, transparent and open is a requirement for client centred therapist in order for the therapy to be effective. Weston (2011) revealed that person centred therapy was an effective intervention for clients who started with symptoms of depression and distress at East Anglia University in the United Kingdom.

Patel (2016) revealed that the effectiveness of client centred therapy has been criticised for lacking fundamental requirements of a scientific approach. The approach lacks scientific rigor when addressing depressed clients. It has been found that psychotherapy is ineffective unless the person delivering the therapy is genuinely caring, empathetic and has the ability to form a solid bond with the client (Carr, 2011; McCoy Lynch, 2012). Eyssen et al. (2013) revealed that person centred therapy was ineffective treatment in German. This could explain findings in America by Quinn (2015) that person centred approach was systematically

removed from scholarly literature and is ignored by scholars in the 21st century.

Cogbill (2018) revealed that for person centred therapy to be effective, the counsellor needs to demonstrate faith in the client's self-knowledge and about what is best for the client. Huenergarde (2018) revealed that many students in America indicated that they would not attend counselling sessions due to judgemental attitudes shown by the counsellor. Further, sometimes students will not attend all the counselling sessions resulting in the person centred therapy counselling process being perceived as ineffective. Further, Garrett and Garret (2013) revealed that person centred therapy was difficult for the therapist to allow clients to find their own solutions and was ineffective to facilitate the therapy due to its non-directive and passive way of addressing students' depression. This could mean that person centred therapy fails to prepare clients for the real world (Cogbill, 2018) due to lack of faith and its passivity leading to the ineffectiveness of the therapy.

Research Methodology

This study used the post-positivism paradigm, a philosophical worldview in which the quantitative and qualitative methodologies are blended (Denzin, 2008). The mixed approach was used as a means of avoiding biases from single approaches as a way of compensating specific strengths and weaknesses associated with quantitative or qualitative approach as advised by Nowell, Norris, White and Moules (2017).

Research Design

This study employed the concurrent triangulation design which is also known as convergent parallel mixed method (Creswell, 2014). Creswell (2015) defined concurrent design as one phase design in which researchers implement qualitative and quantitative methods during the same timeframe so as to compare the results to see if the approaches confirm or disconfirm each other.

Table 1: Population and Sampling

Category	Students	VP	DoS	HoDs	Chaplains	Counsellors	Total
Population	4000	14	14	70	6	28	4132
Sample	180	2	2	13	1	8	206
Method	Simple Random Sampling			Purposive Sampling			

Population and Sampling

As seen in Table 1, through simple random and purposive sampling, the researcher collected data

through questionnaires from 180 out of 4,000 students and face to face interviews from two out of 14 Vice Principals (VP), 3 out of 14 Deans of

Students (DoS), 13 out of 70 Heads of Departments (HoDs), one out of six Chaplains and eight out of 28 Counsellors.

Validity and Reliability

For acceptable validity of the instruments, items were evaluated whether they reflected the objectives of the study or not. Items which were unclear and irrelevant were corrected. Triangulation, the use of more than one method of data collection, enhanced the reliability of the study results.

Statistical Treatment of Data

Quantitative data was analyzed through frequencies and percentage while qualitative data was analyzed through the thematic approach.

Ethical Considerations

Permission to carry out the study was sought from the Zimbabwean Ministry of Higher and Tertiary Education, Innovation, Science and Technology. Protection from harm, consent, confidentiality and

anonymity were also observed for the safety of participants.

Results and Discussion

This section presents results of the study concerning the effectiveness of approaches used in addressing depression among students at teacher training colleges in Zimbabwe. The presentation was guided by two research questions as follows:

Research Question 1: Which approaches are used in addressing depression among students at teachers' colleges in Zimbabwe?

Table 2 indicates findings regarding approaches used to address depression. The majority of respondents (84.4 %) agreed that behavioral therapy was used, followed by 76.6% who indicated that cognitive behavior therapy was used and 63.4% who perceived that person centered method was used in addressing depression.

Table 2: Approaches Used to Address Depression

Approach	Responses of students		
	Agree	Not sure	Disagree
Cognitive Behavioral Therapy	131 (76.6%)	34 (19.9%)	6 (3.5%)
Behavioral Therapy	146 (84.4%)	20 (11.6%)	7 (4%)
Person centered Therapy	109 (63.4%)	36 (20.9%)	27 (15.7%)

Like the students, counsellors mentioned that the cognitive behavior therapy approach was used in addressing depression. This was evidenced by what one of the counselors said: *Cognitive behavioral therapy is being used, and there are few cases of depressed students which are being noticed at the institution.* However, they confessed that some of them were not well versed with the approach as was indicated by one of the interviewed counsellors: *Cognitive behavior therapy is in use. However, some of us are not well versed with the approach.* Like the students and counsellors, Vice Principals, Deans of students, Heads of Departments and the Chaplain also agreed that cognitive behavioral approach was used and most students counselled had moved on with their life.

Some of the counsellors revealed that the behavioral approach was in use as was evidenced by the following statements: *Behavioral approach is in use and students counselled had shown signs of change in behavior.* Others had the view that behavioral therapy was being used to address severe cases of depression as indicated by one of the counsellors who had the view that, the

approach was used to address severely depressed students. Some counsellors were, however, not well versed with the approach. Like the counsellors, Vice Principals, Deans of student, Heads of Departments and the Chaplain had different views on the use of the behavior therapy. Like the students, some of the Vice Principals, Deans of students and Heads of Departments indicated that the approach was in use. They however differed on the extent of use and other participants were not sure of the use of the approach, as evidenced by one of the Heads of Department1: *I am not sure of the use of behavioral therapy.*

Like 63.4% of students who indicated that the person centered therapy was in use, counsellors revealed that they normally used the approach in assisting students who were depressed. They also revealed that person centered therapy was used when dealing with individual cases of depression. One counselor indicated that "the approach can be used to address severe cases of depression." They further revealed that the person centered therapy was used even on serious cases of depression as the

clients are free to open up and at times come up with own solutions.

The Vice Principals, Deans of students, Heads of Departments and the Chaplain also revealed that the person centered therapy was being used to address depression and they viewed it as the best method to use.

Research question 2: What is the perception of stakeholders on effectiveness of approaches and techniques used to address depression among students at teachers' colleges in Zimbabwe?

Table 3 reveals that students perceived that cognitive behavioral therapy, behavioral and person centered therapy were effective in addressing depression. The cognitive behavioral therapy techniques like guided discovery (61%) and

cognitive restructuring (56.7%) were highly perceived as effective. Exposure (57.2%) was viewed as an effective Behavioral approach in addressing depression. Person centered approach was also viewed as an effective method (54.3%). In summary, all the approaches and techniques were viewed as effective but the extent of effectiveness differs. The counsellors further revealed that they used Socratic questions, guided discovery, client centered, drama and role play techniques to address depression. The Vice Principals, Deans of students, Heads of Departments and the Chaplain also revealed that guided discovery, Socratic, client centered, drama and cognitive restructuring are in use to address depression at the Teachers' Colleges in Zimbabwe.

Table 3 Students' perceptions of the effectiveness of approaches and techniques

Approach	Technique	Responses of Students		
		Agreed	Not sure	Disagree
Cognitive Behavioral Approach	Guided discovery	108 (61%)	23 (13%)	46 (26%)
	Socratic	76 (43.9%)	33 (19.1%)	64 (37%)
	Role play	95 (54.6%)	11 (6.3%)	68 (39.1%)
	Cognitive restructuring	98 (56.7%)	27 (15.6%)	48 (27.7%)
	Imagery	66 (36.9%)	52 (29%)	61 (34.1%)
Behavioral Approach	Relaxation and Visualization	92 (53.8%)	18 (10.5%)	61 (35.7%)
	Downward arrow	38 (25.7%)	57 (38.5%)	53 (35.8%)
	Exposure	99 (57.2%)	26 (15%)	48 (27.8%)
Person Centered Approach	Person Centered	94 (54.3%)	32 (18.5%)	47 (27.2%)

The counsellors indicated that the cognitive behavioral approach was effective in alleviating depression among the students as affected students showed signs of improvement. The counsellors further revealed that the approach was effective as most students' negative way of thinking was changed and were able to complete their courses. Particularly, they indicated that *most counselled students who had indicated earlier on the intention to dropout were able to complete their course.*

Results from the interview schedule further advocated for combination of various techniques to address depression issues. For instance, one of the Vice Principals and some Heads of Departments had the view that integration of the approaches was necessary to effectively address depression of students. Particularly, one of them said, *"the approach is effective but it needs to be used in combination with other approaches."* They also had the view that the effectiveness of the approach depends on the expertise and personality of the

counsellor. Therefore, counsellors need to be highly trained to get acquainted with various approaches in curbing the depression issues.

The findings above have been supported by related literature and study findings. For instance, the use of behavioral therapy correlates with findings in Australia (Duckworth & Shelton, 2012) and Iran (Mohamadian et al., 2018) where behavioral therapy was similarly used to address depression. Secondly, the use of person centered approach is in harmony with study findings in California (Corey, 2005); Malaysia (Othman, 2005; Sapora, 2008); Central Lancashire (Gibbard & Hanley, 2008); South Africa (Kagee & Le Roux, 2015) and Oxford (Bachkirova & Borrington, 2018) which revealed that person-centered therapy was widely used in various fields. Furthermore, the use of guided discovery concurs with the findings by Hamdan-Mansour, et al. (2009) who revealed that guided discovery was used to alleviate depression among young adults in Jordan. The finding on the use of exposure as a

technique concurs with findings of a study made in Brazil (Gerbera et al., 2016) where observations showed that exposure is a key element of behavioral treatments for most anxiety disorders. The finding that role play is being used confirm findings from New York (Levenson & Herman, 1991) and Czech Republic (Fominykh et al., 2017) where role playing is widely used. Likewise, the findings on the use of cognitive restructuring concurs with an earlier Zimbabwean study by Frank (2013) which found that cognitive restructuring technique was used to address depression on adolescents. The study findings on the use of Socratic questioning concurs with studies made in Australia (Friedman, Thase & Wright, 2007) and Pakistan (Zadeb & Lateef, 2012) which established that Socratic questioning is effective in curbing depression issues.

The findings that relaxation and visualization are used to address depression confirm the findings in Pakistan (Zadeb & Lateef, 2012); Australia (Gardner, 2010) and Singapore (Klainin-Yobas, Suzanne and Lau, 2015). Furthermore, the study findings on perceived use of imagery is in harmony with Friedman et al.'s (2007) findings which revealed that imagery as a cognitive technique is in use to address depression among young adults in Australia. Finally, the findings that downward arrow as a technique is used to address depression among students are similar to what was observed in Australia (Freidman et al., 2007) and Italy (Ruggiero, Spada, Caselli & Sassaroli, 2018).

Conclusions and Recommendations

This section presents the conclusions of the paper and then gives the recommendations thereof.

Conclusions

Based on the findings of the study, it is evident that the approaches used in curbing the depression challenges are effective. The study therefore concludes that cognitive behavioral therapy, behavioral therapy and person centered therapy are used in Zimbabwean teachers' colleges to address depression cases. The specific techniques which were commonly used in colleges under investigation include guided discovery, role play, cognitive restructuring, relaxation and visualization, exposure and person centered.

Recommendations

The study recommends that the Ministry of Higher and Tertiary Education, Innovation, Science and Technology Development and other stakeholders should come up with a policy which spells out

expected counselling approaches and techniques to be used at the colleges to address the depression of students. The study further recommends the provision/ recruitment of more trained counselling personnel for the identified approaches to be effective in addressing depression.

References

- American College Health Association (2009). National college. health assessment spring 2008. *Journal of American College Health*, 57(5)6-22.
- Bachkirova, T. & Borrington, S. (2018). The limits and possibilities of a person centred approach in coaching through the lens of adult development theories. *Philosophy of coaching: An international Journal*, 3(1), 6-22.
- Barrera, T. L., Szafranski, D. D., Ratcliff, C.G., Gamaat, S.L. & Norton, P.J. (2016). An experimental comparison of techniques: Cognitive defusions, cognitive restructuring and in-vivo exposure for social anxiety. Houston: *Behavioral and cognitive psychotherapy*, 44(2), 249-254.
- Baykal, A.G. N. (2017). *Cognitive behaviour therapy techniques for the treatment of social phobia*. Istanbul: Psikoloji Bolumu.
- Blum, L.M. and Naylor, J.C. (2004). *Industrial Psychology: Its Theoretical and social foundations*. New York: Harper and Row.
- Butler, A .C & Beck, J. S (1995). *Cognitive Therapy Basics and Beyond*. New York: Gilford press.
- Carr, E. S. (2011). *Scripting addiction: The politics of therapeutic talk and American sobriety*. Princeton, NJ: Princeton University Press.
- Cheung, T., Wong, S.Y., Wong, K. Y., Law, L.Y., Ng, K., Tong, M. T., Wong, K.Y., Ng, M. Y. & Yip, P.S.F. (2016). Depression, Anxiety and Symptoms of stress among Baccalaureate nursing students in Hong Kong: A cross-sectional study. *Journal of Environmental Research and Public Health*, 13 (8), 779.
- Chibanda, D., Cowan, F., Gibson, L., Weiss, H. A.& Lund, C. (2016). Prevalence and correlates of probable common mental disorders in a population with high prevalence of HIV in Zimbabwe. *Psychological Medicine Journal*, 16 (55) 2-9.

- Chireshe, R. & Chireshe, E. (2010). Student Teachers perception towards Teaching Practice Assessment. *South African Journal of Higher Education*, 24(4), 511-524.
- Creswell, J. W. (2015). *A concise introduction to mixed method research*. Boston: Sage Publications.
- Cogbill, A. P., (2018). *Working Alliances: The implications of person centred therapy for student teacher relationship and learning*. Durham, University of New Hampshire.
- Cooper, M (1997). Cognitive theory in anorexia nervosa and bulimia nervosa: A review. *Behavioural and cognitive psychotherapy*, 25,113-145.
- Costello, E. J., Erkanli, A. & Angold, A. (2006). Is there an epidemic of child or adolescent depression? *Journal of Child Psychology and Psychiatry*, 47 (12), 1263-1271.
- Creswell, J. W. (2014). *A concise introduction to mixed method research*. Boston: Sage Publications.
- Corey, G. (2005). *Theory and Practice of Counselling and Psychotherapy* (8th Ed.). Thomson learning Academic Resource Centre.
- Cwik, J.C., Velten, J., Schulte, D, Von Brachel, R. Hirschfeld, G. Berner, A. Willutzki, U, Teismann, T & Margraf. J (2019). Long term effectiveness of cognitive behaviour therapy in routine outpatient care; A 5-20 year follow up study. *Psychotherapy and psychosomatics*, doi.10.1159/000500188.
- Denzin, N. K. (2008). Moments, Mixed Methods and Paradigm Dialog. *Qualitative Inquiry*, 16 (6), 419–27.
- Duckworth, K. & Shelton, R. (2012). *Depression*. Arlington: National Alliance on Medical Illness.Ehde, D.
- M., Dillworth, M. T. & Turner, J. A. (2014). *Cognitive-Behavioral Therapy for Individuals with Chronic Pain Efficacy*. Innovations and Directions for Research: University of Washington.
- Dunn, V. & Goodyer, I. M. (2006). Longitudinal investigation into childhood and adolescence on set depression: Psychiatric outcome in early adulthood. *British Journal of Psychiatry*, 188 216-122.
- Ehde, D. M., Dillworth, M. T. & Turner, J. A. (2014). Cognitive-Behavioral Therapy for Individuals with Chronic Pain Efficacy. *Innovations and Directions for Research: University of Washington*.
- Eyssen, I. C. M. J., Steultjens, M. P. M., de Groot, V., Steultjens, E. M. J., Knol, D. I., Polma, C.H. & Dekker, J. (2013). A cluster randomized controlled trial on the efficacy of client centred occupational therapy in multiple sclerosis: good process, poor outcome. *Disability and Rehabilitation*, 35 (19) 1636-1646.
- Feldman, G. (2006). Cognitive and Behavioural Therapy for Depression Overview: New directions, practical recommendations for dissemination. *Psychiatric clinical north Am*. National Library for Medicine.
- Fominykh, M., Wild, F., Smith, C., Alvarez, V. & Morozov, M. (2015). *An Overview of Capturing Live Experience with Virtual and Augmented Reality: 1st Immersive Learning Research Network Conference*. Prague, Czech Republic: IOS Press, 298–305.
- Fominykh, M., Leong, P. & Cartwright, B. Y. (2017). Role playing and experiential learning in a professional counselling distance course. *Journal of interactive learning research* 29(2): 169-188.
- Frank, R. (2013) *An Exploration of coping mechanism adopted by Adolescents living with HIV and AIDS in Chinhoyi. A case of Adolescents receiving treatment at Chinhoyi Provincial Hospital Mashonaland West Province in Zimbabwe*. Chinhoyi: Zimbabwe Open University.
- Friedman, E.S., Thase, M.E. & Wright, J.H. (2007). Cognitive and Behavioural Therapies. Pittsburgh: University of Pittsburgh.
- Garrett, J. & Garrett, S. (2013). *Person centred therapy. A guide to counselling therapies*. Counselling connection. Retrieved from <http://www.counsellingconnection.com/wp-content/uploads/2013/personcentred-therapy.pdf>

- Garratt, R. E & Ingram, K. L (2006). Cognitive Processes in Cognitive Therapy: Evaluation of the mechanisms of change in the treatment of depression. *Clinical psychology, science & practice* 14(3)224-239.
- Gardner, S. (2010). Stress among Prospective Teachers: Review of the Literature. *Australian Journal of Teacher Education*, 35.
- Gerbera, C. M., Barros-Neto, T. P. D., Gertsenchtein, L., & Lotufo-Neto, F. (2016). Virtual reality exposure using three-dimensional images for the treatment of Social phobia. *Revista Brasileira de Psiquiatria*, 38(1), 24-29.
- Gibbard, I. & Hanley, T. (2008). An evaluation of the effectiveness of person centred counselling in routine clinical practice in primary care. *Counselling and Psychotherapy Research* 8 (4): 215-222.
- Goldman, A. N. (2015). A client focused perspective of the effectiveness for depression. *Counselling and Psychotherapy*, 16 (4) 92-105.
- Grondin, A. J. (2018). Effectiveness of the Socratic Method: A comparative analysis of the historical and modern invocations of an Educational Method in South Carolina. Retrieved from http://scholarcommons.sc.edu/senior_theses.
- Grumman, J (2013). Self- management for people with chronic diseases. Washington DC: Centre for Advancement in Health.
- Hamdan- Mansour, A. M., Puskar, K & Bandak, A. G. (2009). Effectiveness of cognitive behavior therapy on depressive symptomatology, stress and coping strategies among Jordanian University students. Jordan: NCBI.
- Hanish, J. B. (2013). Guided Imagery as Treatment and Prevention for Anxiety Chronic Stress and Illness. Adler Graduate School.
- Howard, M. C. & Hoffman, M. E. (2017). Variable-centred, Person centred and Person specific approaches: where theory meets the method. *Organizational Research Methods*, 1-3.
- Huenergarde, M. (2018). College students' wellbeing: use of counselling services. *American Journal of undergraduate research*, 15 (3) 41-59.
- Ishak, N. A., Ahmad, N. S. & Omar, M. N. (2020). Issues and trends of depression among students in Malaysia. *Universal Journal of Educational Research*, 8 (11B) 5951-5957.
- Islam, S., Akter, R. Sikder, T. & Griffiths, M. D. (2020). Prevalence and factors associated with depression and anxiety among first year university students in Bangladesh: A cross sectional study. *International journal of Mental Health and Addiction*, doi.org/10.1007/s11469-020-00242-y
- Kagee, A., & Le Roux, M.A. (2015). *Person-centred are counselling to ameliorate symptoms of psychological distress among South African patients living with hypertension and diabetes. Results of an intervention study*. South Africa: Department of Psychology, Stellenbosch University.
- Khan, M. S., Mahwood, S., Badshah, A., Al, S.U. & Jamal, Y. (2006). Prevalence of Depression, Anxiety and their associated factors among medical students in Karachi. *Pakistan: Journal of Pakistan Medical Association*, 56 (12), 583-586.
- Klannin- Yobas, P., Oo, W. N., Suzanne, Y. P.Y. & Lau, Y. (2015). *Effects of relaxation interventions on depression and anxiety among older adults: A systematic review*. Singapore: National University of Singapore.
- Klannin- Yobas, P., Oo, W. N., Suzanne, Y. P.Y. & Lau, Y. (2015). *Effects of relaxation interventions on depression and anxiety among older adults: A systematic review*. Singapore: National University of Singapore.
- Kitzrow, A. M. (2003). The Mental Health Needs of Today's College Students: Challenges and Recommendations, *NASPA Journal* 4.
- Kodal, A. & Wergeland G. J. (2018). Long term effectiveness of cognitive behaviour therapy for youth with anxiety disorders. *Journal of Anxiety disorders*, 53(2018) 58-67.
- Kumari, R., Langer, B., Jandial, S., Gupta, R., Raina, S. K. & Singh, P (2019). Psychosocial Health problems: prevalence and associated factors among students of professional colleges in Jammu. *Journal of Community Health*, 31 (01) 43-49.

- Lovell, G.P., Nash, K. Sharman, R. & Lane, B. R. (2015). A cross- sectional investigation of depressive, anxiety and stress symptoms and health behaviour participation in Australian University students. *Nursing and Health Sciences*, 17 134-142.
- Levenson, R.L. & Herman, J. (1991). *The use of role playing as a technique in psychotherapy of children*. New York: Pace University.
- Luni, K.F., Ansari, B., Jawad, A., Dawson, A.& Baig, S. M. (2009). Prevalence of depression and anxiety in a village in Sindh. *Journal of Ayub Medical college Abbottabad*, 21 (2) 68-72.
- Manum, M. A., Hossain, M. S. & Griffiths, M. D. (2019). Mental Health problems and associated predictors among Bangladeshi students. *International Journal of Mental Health and Addiction*, 1-15 doi.org/10.1007/s11469-019-00144-8
- Mapfumo, T. S., Chitsiko, N & Chireshe, R. (2012). Teaching practice generated stressors and copying mechanisms among student teachers in Zimbabwe. *South African Journal of Education*, 32(2).155-166.
- Marcus, M., Yasamy, T. M., van Ommeren, M., Chisholm, D. & Saxena, S. (2013). *Depression: A Global Public Health concern*. WHO Department of Mental Health and Substance Abuse, 6-8.
- Mateus, D., Wachinger, C., Atasoy, S., Schwarz, L. & Navab, N. (2012). *Learning manifolds: design analysis for medical applications: Medical Imaging Intelligence and analysis*. German: IGI Global.
- Matthews, M., Gay, G. & Doherty, G. (2014). *Taking part: Role play in the design of therapeutic systems*. Toronto: One of a CHInd.
- McCoy Lynch, M. (2012). *Factors influencing successful Psychotherapy outcomes*. Minnesota: St Catherine University.
- Mbetu- Nzvenga, J. (2009). *Causes and effects of depression among young adults at teachers' colleges in Zimbabwe*. Harare: unpublished master's thesis.
- Mohamadian, F., Bagheri, M., Hashemi, M.S. & Sani, H.K. (2018). The effects of cognitive behavior therapy on depression and anxiety among patience with Thalassemia: A Randomized controlled trial. Iran: *Journal of caring sciences*, 7 (4), 219-224.
- Morris, P. E., Mensink, D. & Stewart, S. H. (2018). *A brief cognitive behavioral treatment for social anxiety disorder*. Dalhousie University.
- Myrick, R.D. & Myrick L. S. (1993). Guided Imagery: From mystical to practical Elementary School. *Guidance and counselling* 28: 62-72.
- National Health Ministries (2004). *Stress and College Students*. PC(USA) .
- National Health Ministries (2006). Sources of stress among college students. *CVCITC Research Journal* 1 (1) 16-25.
- Nehra, D. K, Sharma, K. L., Sharma N. R., Kurma, V. S & Nehra, S (2013). *Cognitive behaviour therapy: An overview*. India: Global Vision Publishing House.
- Norton, A.R. & Abboit, M. J. (2016). *The efficacy of imagery rescription compared to cognitive restructuring for social anxiety disorder*. Sidney, Australia: University of Sydney
- Nowell, L. S., Norris, J. M., White, D. E. & Moules, N. J. (2017). Thematic analysis: striving to meet the trustworthiness criteria. *International Journal of Qualitative Methods*, 16 1-13
- Organista, K. C. (2006). *Cognitive-Behavioral therapy with Latinos and Latinas*. Washington, DC: American Psychological Association.
- Othman, A.A. (2005). Cognitive behaviour therapy. *Cogent psychology*.
- Patel, M. M. (2016). The theory and rhetoric of person- centred therapy for the view of Carl Rogers. *International Journal of Education and practice*, 3 (2) 58-61.
- Pinjarkar, R. G., Sudhir, P. M.& Math, S. B. (2015). Brief cognitive behaviour therapy in patients with social disorder. A preliminary investigation in Indian. *Journal of Psychological Medicine*, 37 (1), 20-25.
- Plotnik, R. (2002). *An Introduction to Psychology*. London: Wardsworth.
- Quinn, A. (2015). *A person centred approach and decline of a way of being*. A handbook Charleston S, C. Rathuis, A. (2004). *Voyages in Childhood*. London: Wardsworth.
- Rathuis, A. (2004). *Voyages in Childhood*. London: Wardsworth.

- Rice, F., Lifford, K. J., Thomas, H.V. & Thapar, A. (2009). Mental Health and functional outcomes of maternal and adolescent reports of adolescent depressive symptoms. *Journal of the American Academy of child and Adolescent Psychiatry*, 46 (9), 1162-1170.
- Robinson, S. M. (2017). *Socratic questioning: A teaching philosophy for the student research consultation*. In the Library with the lead pipe ISSN 1944-6195
- Ruggiero, G. M., Spada, M. M., Caselli, G. & Sassaroli, S. (2018). A Historical and Theoretical Review of cognitive Behavioural therapies: From structural self-Knowledge to functional processes. *Journal Rational-Emotive Cognitive Behaviour Therapy*, 36, 378-403.
- Rutter, M. K., Cohen, J. & Maugham, B. (2006). Continuities and discontinuities in psychopathology between childhood and adult life. *Journal of Child Psychology and Psychiatry*, 47 (3), 276-295.
- Saad, F. M., Yusoff, F. Nen, S. & Subhi, N. (2013). The effectiveness of person-centred therapy and cognitive psychology and ad-Din group counselling on self-concept depression and resilience of pregnant out of wedlock teenagers. *Procedia social and Behavioural sciences*, 70(11) 1161-70.
- Sapora, S. (2008). *The Effectiveness of Person-centred Therapy and Cognitive Psychology Ad-Din Group Counselling on Self-concept, Depression and Resilience of Pregnant Out-of-wedlock Teenagers Malaysia. Malaysia: Universiti Kebangsaan*.
- Sarokhani, D., Delpisheh, A., Veisani, Y. & Sarokhani, M. T. (2013). *Prevalence of depression among university students: a systematic review and meta-analysis study*. Doi.org /10.1155/2013/373857 .
- Satterfield, M. J. (2015). *Cognitive behaviour therapy: Techniques for retraining your Brain*. University of California, San Francisco Virginia: The Great courses.
- Saunders, P. & Hill, A. (2014). *Counselling for depression. A person centred and experiential approach*. London: Sage.
- Semple, R., Lee, J., Rosa, D. & Miller, L. (2010). A cognitive therapy for children promoting mindful attention to enhance social emotional resiliency in children. *Journal of Child and Family studies*, 19, 218-229.
- Stice, E., Burton, E., Bearman, S.K. & Rohade, P. (2010). Randomized trial of a brief depression prevention program: An elusive search for a psychological placebo control condition: *Behavioural research and theory*, 45,863-876.
- Wenzel, A. Dobson, K.S. & Hays, P.A. (2016). Cognitive behaviour therapy technics and strategies. *American Psychological Association*: doi. Org/10.1037/149 36-000
- Weston, T. (2011). *The clinical effectiveness of person centred psychotherapies: the impact of the therapeutic relationship*. UK: East Aglia University counselling services.
- World Health Organisation (2013). *Investing in mental health*. Geneva: World Health Organisation.
- World Health Organisation (2018). *Macroeconomics and health: Investing in health for economic development*. Geneva: World Health Organisation.
- Zadeb, Z.F. & Lateef, M. (2012). Effect of Cognitive Behavioural Therapy (CBT) on Depressed Female University Students in Karachi. *Procedia - Social and Behavioral Sciences*, 69 (1), 798 – 806.