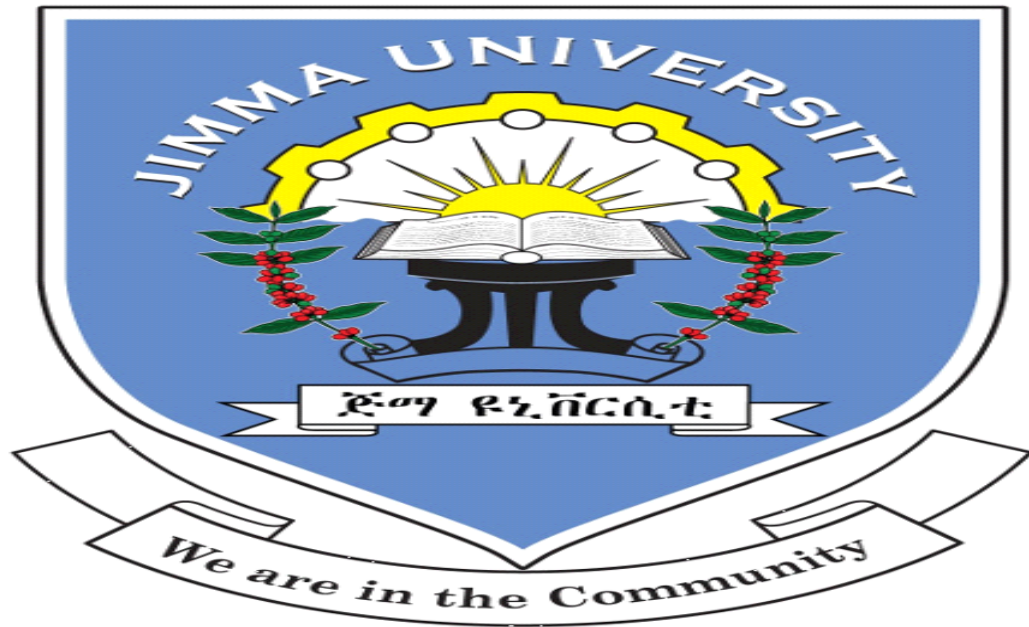


**PREVALENCE AND ASSOCIATED FACTORS OF DEPRESSION
AMONG STUDENTS IN JIMMA UNIVERSITY MAIN CAMPUS**



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**THESIS SUBMITTED TO DEPARTMENT OF PSYCHIATRY COLLEGE
OF HEALTH SCIENCE IN JIMMA UNIVERSITY FOR PARTIAL
FULFILLMENT OF MSc IN INTEGRATED CLINICAL AND
COMMUNITY MENTAL HEALTH.**

MAY, 2016

JIMMA, ETHIOPIA

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Abstract

Background: -University students are highly trained and expected to transform a country of their origin by providing mentally healthy work however worldwide they are at risk for mental health disorders particularly to depression in which its prevalence range from 8.1%-43.4%. Depressed students missed classes, assignments, exams and course. Despite this startling magnitude and its impact on performance there is scarce information in Jimma University.

Objective: - This study aimed to assess the prevalence rate of depression and associated factors among regular students at Jimma university main campus in 2016.

Method: - Institutional-based multistage stratified cross-sectional study design was conducted among 556 students. A structured Self-administered questionnaire was used to obtain socio-demographic, economic and environmental data and Beck Depression Inventory (BDI-II) was used to screen depression. Collected data was analyzed using Statistical Package for Social Science (SPSS V.20). Obtained data was analysed using simple descriptive statistics. Bivariate analysis was used to see the significance of association. Variable that shows association in bivariate analysis was entered to multivariate logistic regressions to control for confounders and the significance of association was determined by 95% confidence interval and p-value <0.05.

Result: Nearly one third of the participants (n=157, 28.2%) had depression. Having family member with mental illness (OR= 2.307, 95%CI=1.055-5.049), college of Social science and humanity (OR=2.582, 95%CI=1.332-5.008), having sex after drinking (OR=3.722, 95%CI=1.818-7.619), being hit by sexual partner (OR=3.132, 95%CI=1.561-6.283), childhood emotional abuse (OR=2.167, 95%CI=1.169-4.017), monthly pocket money between 500-999(ETB) (OR=0.450, 95%CI=0.204-0.995), promoted academic performance (OR=2.912, 95%CI=1.063-7.975) had significant association with depression.

Conclusion:-This study has shown that the prevalence of depression among university students was high. College of social science and humanity, being hit by sexual partner, having family members with mental illness, lower pocket money, poor academic performance, having sex after drinking and childhood emotional abuse have an impact on the prevalence of depression. Further study is needed to assess impact of depression and its possible intervention.

Key words: Depression, prevalence, university students.

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Abbreviation and acronyms

AOR-Adjusted Odds Ratio

BDI-Beck Depression Inventory

CES-D-Centers for Epidemiologic Studies Depression Scale

CGPA-Cumulative Grade Point Average

CI-Confidence Interval

COR-Crude Odds Ratio

DALYs-Disability Adjusted Life Years Measures

DSM-IV-Diagnostic and Statistical Manual Fourth Edition

ETB-Ethiopian Birr

HIV/AIDS-Human Immune Deficiency Virus/Acquired Immune Deficiency Syndrome

JUCAVM- Jimma University College of Agriculture and Veterinary Medicine

MDD-Major Depressive Disorder

OR-Odds Ratio

PHQ-9-Patient Health Questionnaire

OR-Odds Ratio

SPSS-Statistical Package for Social Science

STIs-Sexually Transmitted Infections

UAE-United Arab Emirates

WHO-World Health Organization

YLD- Years Lived With Disability

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Chapter One -Introduction

1.1. Background

Depression is common and severe mental disorder caused by combination of genetic, social, psychological and environmental factors(1). Depressive disorder is considered if the following symptoms have been present and represent a change from previous functioning; the symptoms is depressed mood, loss of interest or pleasure. In addition to it a person also experiences symptoms from a list that includes changes in appetite and weight, changes in sleep and activity, lack of energy, feelings of guilt, problems thinking and making decisions, and recurring thoughts of death or suicide(1). Depressive disorder is one of the most pressing public health problems since it is associated with substantial impairment, comorbidity, poor health, and mortality(2). It impair quality of life more than physical illnesses (1). It affect economic activity, learning, social and cultural life and people's ability to participate in their communities(3). Furthermore, depression is associated with a high risk of suicide and suicide attempts(4). In addition, persistent ignorance and misperceptions of the disease by the public, including many health providers, as a personal weakness or failing leads to painful stigmatization and avoidance of the diagnosis by many of those affected(5).

University students are a special segment of a society. They are at a specific developmental milestone that bridges a critical transitory period from childhood to adulthood and transition from high school to higher education. This transitional period embraces very important process like endocrine surge, emotional turmoil and identity development which can lead to crises, that include self-doubt, social withdrawal, loneliness, lowered self-esteem, and even depression(6). Mental ill health affects business and industry, through sickness absence and unemployment. It also limits educational achievement because they feel worthless and develop loss of concentration and indecisiveness which lead to poor academic performance(7). The aim of this study was to assess the prevalence rate and factors associated with depression among Jimma University student and to suggest possible intervention programs.

1.2. Statement of the problem

Depression is the major mental disorder which has a high prevalence rate. It is the most severe disorder that causes morbidity and mortality all over the world and this disorder leads to other problems and affect an individual's life. University students worldwide are at risk for mental health disorders particularly to depression because of the range of stressors they face. The stressors include geographic changes, new academic demands and academic difficulties like overburdened by academic work load , leaving far away from significant others and biological family members, and an entirely new interpersonal ,social and physical environment encounters alongside financial difficulties urging student to develop new coping mechanisms that help the student to survive in academic environment though the student is separated is separated from beloved one for the first time(7, 8).

Depression causes huge financial and social expenses on individuals and society related university costs; such as absenteeism and decreased productivity. Depression affects an individual academic achievement .There is a negative relationship between depression and academic achievement and this showed when depression is high, academic achievement is low and vice versa. Depressed students missed greater number of classes, missed a greater number of assignments and missed a greater numbers of exams and dropped a greater number of course. University students' drop their study and have difficulty to finish their study because of depression (8).

Living far from home, planning for future and excessive need to achieve and succeed in their education and maintain a good grade are most common causes that lead university students to become stressed and finally develop depression. Furthermore, due to the new educational reforms students now enter the university at younger ages and are not experienced enough to handle their problems which can result in depression. Almost all of this university students came from different regions and it may be the first time to separate from family and have low probability to live with their families which is difficult to easily to adapt because of this they develop the feeling of loneliness and they have high probability to develop depression. So, most university students' especially first year students are more affected by depression disorder (8, 9). Lastly, due to the increased student populations and the attendant work load, most students do not get individual counseling as expected when their psycho-social problems arise. This myriad of factors is enough to predispose the students to depression. It is also noted that if depression is

not properly handled it can lead to poor physical and psychological health even result in health difficulties severe enough to keep them bedridden(9). Due to the undesirable effects of depression on students, the University has counseling and placement centre and other personnel to help students address stressors that could result in depression on campus and contribute towards the alleviation of mental problems and maintaining good mental health of the students on campus, however, little attention is given to them. Unfortunately, despite the gravity of this problem and the fact that depression is the most easily treatable mental disorder condition, the general public and the University students tend to consider depression as a social stigma and the affected people often feel that seeking professional help indicates weakness and they will be termed lazy(10).

Even if there are studies that deal about the prevalence of depression in general population and university students of Ethiopia, the studies are not enough for investigating the problem and also these studies were done by composing depression with other variables like sleep problems, anger expression and violent behavior. So previous studies were not clearly predicting the association of depression and socio demographic variables. Because of this the researcher had the belief that studying depression on university students was vital to investigate the problem first and come up with important recommendation to the university, mental health professional, clinical psychologists and policy makers.

1.3. Significance of the study

Depression is one of the most serious and prevalent mental illness that can results in serious disability and ending life by committing suicide and by becoming danger to others (homicide) but if identified earlier, it can be effectively treated and managed. Depressed students miss greater number of classes, exams, number of social activities and assignments and also dropping a significantly greater number of courses. Depression causes huge financial and social expenses on individuals and society related University costs; such as absenteeism and decreased productivity if it is not detected and intervened early. There fore finding of this study will show the prevalence of depression among Jimma University students which will be vital for University administrator to recruit sufficient mental health professional and manage student clinic .In addition this study will reveal important factors that related to depression there fore Ministry of health and nongovernmental organization who are working on mental health or University student can be benefited from identified factors in this study. In addition it will serve as baseline information and gives chance to researchers, mental health, other health professionals and concerned body to have further investigation on impact and intervention of depression.

Chapter Two-Literature review

2.1. Overview

Depression has no cultural and social boundaries; it may affect students in different age group, sex, socio-economic status, religion, and ethnicity. Students may feel depressed within the university environment, their relationship with others and their academic performance(7). This section includes important information that deals about prevalence of depression and sociodemographic factors. In addition, the section tries to describe factors associated with depression from different sources.

2.2. Prevalence of depression

Study conducted in Riyadh city in 2012 among 787 participants, show that 463 (59%) were classified between moderate and extreme depression(11). Study conducted in 2013 on 7,807 participant in Germany showed prevalence of current depressive symptoms (Patient Health Questionnaire (PHQ-9) ≥ 10 points) are 8.1% (women 10.2%; men 6.1%)(12). Study done on 182 College Students of rural mid-size southeastern university in 2006 showed that 43.4% of the total sample had experienced depressive symptoms in their lifetimes(13). According to study done in large Midwestern public University in 2005 using PHQ-9 estimated prevalence of depression (major or other) was 13.8% for undergraduates(6). According to study done on students Accessing Healthcare in 4 University clinics in the Midwest, Northwest, and Canada Overall, 26.4% of female and 24.7% of male study participants screened positive for depression(14). According to the study done on 5245 Chinese University Students in 2013: prevalence rate for any depressive disorders other than borderline depression among students was 11.7%(15).

Study conducted on 481 Oman University Students in 2011 using PHQ-9 showed the overall prevalence rate of depression:-133 (27.7%) among the participants (16). According to the study examined University students in AL AIN, United Arab Emirates (UAE), the total estimated prevalence of depression was 22.2%. Most of the self-reported depressed cases were moderate in severity (44.8%) and 19.4% were severe(17). In 35 studies conducted in Iran from 1995 to 2012 with sample size of 9743, prevalence of depression in the University students were estimated to be 33%(18).

Study finding on University Students in Western Nigeria in 2013 using Centers for Epidemiologic Studies Depression Scale (CES-D) reported severe depression to be 7.0% and 25.2% were moderate to severe depression(10). A study examined 312 students at the University of Ghana in 2011 report that students scored an average of 16.14 on the BDI suggesting that they manifest mild symptoms of depression according to Beck's norms i.e. 10-18 reflects mild levels of depression(19). Study conducted on 923 students in 2015 at University of Nairobi revealed that- overall; 41.33% of the students scored above the cut-off point of 10 on the CES-D 10 scale, with 35.71% having moderate symptoms and 5.62% having severe depressive symptoms(20). According to study finding on Anger expression, violent behavior, and symptoms of depression among 1,176 male college students in Ethiopia , 2006 depression was evident in 23.6% of participants(9).

2.3. Factors contributing to depression

Most of studies done in different country revealed that, women are more likely to develop depression than men (7, 8, 17). For example study done in United Arab Emirates (UAE) reported; prevalence of depression were higher among females than males (23.5% and 19.5% respectively), though it was not statistically significant(17). According to reports of different studies depression is significantly higher among age group 17-29 years olds(6, 11, 13 19). Study done in United Arab Emirates showed age (with the highest rate in the age group 17-25) had shown a significant difference on the prevalence of depression (17). A study done on University students showed that depression is more prevalent in single than married students(18).

Student who have reported poor parental relationships were 1.41 times to be affected by depression than student with good parental relationship according to report of study conducted in China(15). Lack of social support was significantly associated with depression according to study report from Nigeria(10). Individual with higher socioeconomic status are less likely to have current depressive symptoms(6). Some studies done on students report that current financial struggles and growing up in a serious financially constrained family have more likelihood to screen positive for depression (6, 8, 20). Study done in China showed depressive symptoms was significantly higher in students with lower parental education and dissatisfied with their major degree of study(15). Study done on University students in Oman using PHQ-9 showed there was no association between the severity of depression and the academic year and around 23.7% (n=33) of the students scoring more than 11 were from the college of social Science(16).

According to some study report possibility of having depressive symptoms was significantly higher in students who were in lower study year(15). Poor academic performance were associated with depression(16).According to study done in 4 university clinics in the Midwest, Northwest, and Canada emotional abuse, unwanted sexual encounters and tobacco use, were all associated with screening positive for depression however the frequency of heavy drinking was not significantly associated with probable depression(14).

Risky sexual behaviour, being forced to have sex and being hit by a sexual partner, factors which are high in the study done in Kenya are reported as a causes of high depressive symptoms among students(20).An average of between 9·3% and 23·0% of participants with one or more chronic physical disease had comorbid depression(23).Depression is higher in those whose childhood residence were rural than urban(15). Potential risk factors of depression include chronic illness like HIV/AIDS, habit of substance abuse, stigma, intimate partner violence, migration and parental violence(20). Overburden with test schedule were significantly associated with depression(24).

2.4. Conceptual frame works

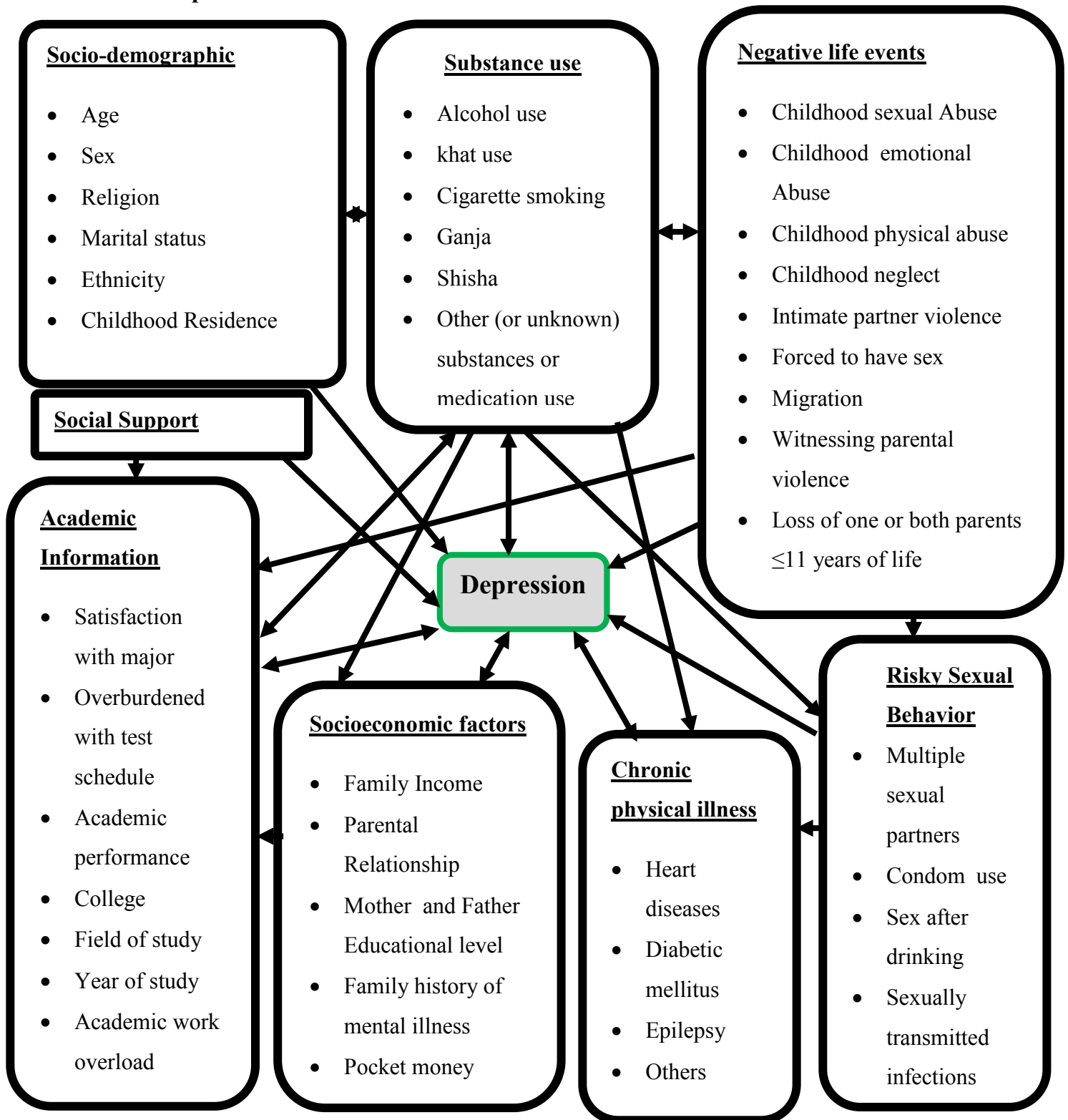


Figure1. The conceptual framework to study prevalence and associated factors of depression among Jimma university main campus regular students, April 2016

Chapter Three-Objective

3.1. General objective

To assess the prevalence of depression and associated factors among Jimma university main campus students in 2016

3.2. Specific objectives

- To assess the prevalence rate of depression among main campus Jimma university students.
- To identify the factors associated with depression among main campus Jimma University students.

Chapter Four- Methods and Materials

4.1 Study setting and period

Study was conducted in Jimma University main campus which is found in Jimma town located in Oromia regional state at 347km south West of Addis Ababa. Jimma university is one of the public higher education institution in Ethiopia established in 1999 by the amalgamation of Jimma College of Agriculture (JCOA) founded in 1952 and Jimma institute of health science (founded in 1983). Jimma University currently has four (4) campuses. Main campus was study area containing four colleges. Those are College of health science, College of natural and computational science, College of social science and Humanity, College of law and Governance. The campus has total of 30 departments and 6,155 regular undergraduate students. This study was conducted from April 5 to 20, 2016.

4.2. Study design

An institution based cross sectional study was conducted.

4.3. Population

4.3.1. Source population

All regular undergraduate students in the main campus of Jimma University

4.3.2. Study population

All regular undergraduate students included into the sample.

4.4. Inclusion and exclusion criteria

4.4.1. Inclusion criteria

All regular undergraduate students in the main campus of Jimma University

4.5. Variable of the study

4.5.1. Dependent variable

-Level of depression

4.5.2. Independent variables

❖ **Demographic factors**

Age, sex, religion, marital status, ethnicity, childhood residence.

❖ **Academic Information**

Satisfaction with major, overburdened with test schedule, academic performance, college, field of study, year of study, academic work overload.

❖ **Socio-economic factors**

Family income, parental relationship, mother and father education level , family history of mental illness, pocket money.

❖ **Social Support**

❖ **Substance use**

Alcohol use, Khat use, Cigarette smoking, Ganja, Shisha and other (or unknown) substances or medication use

❖ **Risky Sexual Behavior**

Multiple sexual partners, condom use, sex after drinking

❖ **Negative life events**

Childhood sexual, emotional and physical abuse, intimate partner violence, forced to have sex, migration, witnessing parental violence, loss of one or both parents' ≤11 years of life, multiple caretakers early in life, childhood neglect.

❖ **Chronic physical illness**

Heart diseases, diabetic mellitus, Epilepsy and others chronic physical illness

4.6. Sample size and sampling technique

4.6.1. Sample size determination

Maximum estimate were taken from the results of a three previous study done on prevalence rate of depression among university student. That was study done among Awassa University and private and public college male students in Awassa, Ethiopia:- in which depression were evident in 23.6% of participants (9) was taken in order to get high sample size. Single population proportion formula was used to determine sample size at 95% CI and 5% marginal error at 95% CI and 5% marginal error:

$$n = \frac{(z_{\alpha/2})^2 p(1-p)}{d^2}$$

Where

n_i =Initial sample size

α = Confidence interval (95%)

p =proportion of Depression is: 23.6%,

d =Margin of sampling error tolerated (5%)

$$n_i = \frac{(1.96)^2 \cdot 0.236(1-0.236)}{(0.05)^2} = \frac{3.8416 \times 0.236 \times 0.764}{0.0025} = 277$$

The total number of regular students in the main campus was 6,155 which was less than 10,000.

Using finite population correction formula the final sample size was;

$$n_f = \frac{n_i}{1 + \frac{n_i}{N}}$$

Where, n_f = final sample size

$$1 + \frac{n_i}{N}$$

n_i = initial sample size calculated above(277)

$$N$$

N =total number regular students

$$n_f = \frac{277}{1 + \frac{277}{6155}}$$

$$= \frac{277}{1.04379} = 266$$

Since multistage stratified sampling technique was used to select students, using design effect the sample was multiplied by 2 giving 532. Considering that the questionnaire was self-administered and by adding 10% non-respondent rate the final number of the study subject became **586**.

4.6.2. Sampling technique

Multistage stratified sampling technique was used to select the study participants. All college in Jimma University main campus were included and stratification was first done on the department level, then by the year of study. Under this four college total of 30 departments found. Ten department form College of health science constituting 33.3%, 7 department form College of natural and Computational science constituting 23.3% , 11 department form College of social science and Humanity constituting 36.6% and 2 department form college of law and Governance constituting 6.7%. Using WHO rule thirty three percent (11 departement) of whole department (30 departement) was selected according to their respective percentage using simple random sampling. Therefore 33.3% of 10 department meaning 4 department in College of health science, 23.3% of 7 department meaning 2 department in College of natural and Computational science

and 36.6% of 11 department meaning 4 department in College of social science and Humanity and 6.7% of 2 department meaning one department in college of law and Governance was randomly selected by simple random sampling lottery method. Sample was stratified based on year of study (first year to fifth year) and students are selected using simple random sampling from all year of study. All 586 students selected by simple random sampling according to their proportion from sampling frame developed for each year of study.

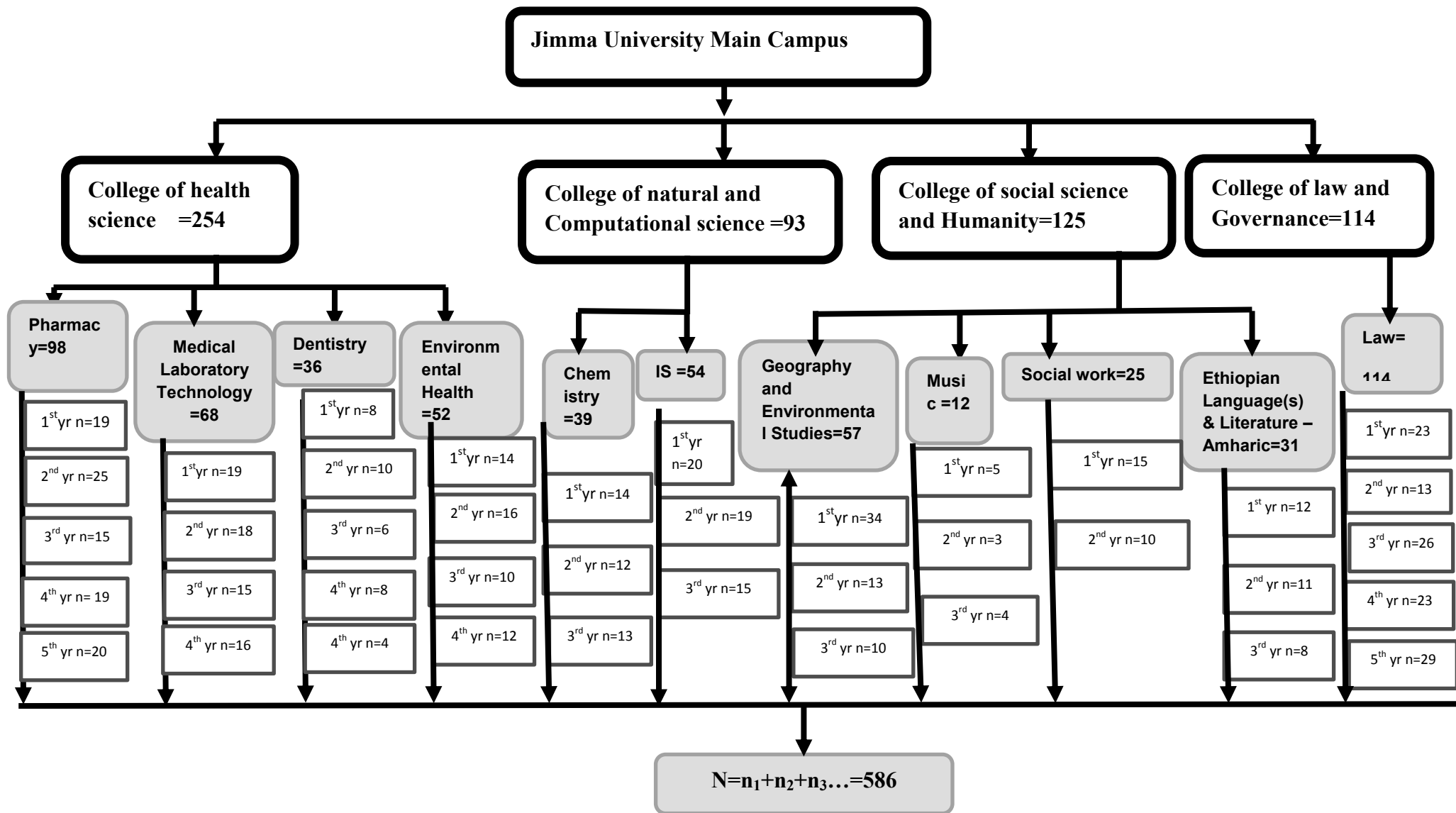


Figure 2: The schematic presentation of the sampling procedure among Jimma University main campus regular students, April 2016.

4.7. Data collection procedure and tools

A self-administered structured questionnaire was used to collect data. Questionnaires about demographic, socio-economic and social environmental factors were developed after extensive review of literatures and similar study tools. Beck Depression Inventory (BDI-II) was used to screen the presence and the severity of depressive symptoms. The BDI-II was developed in 1996 and was derived from the BDI. The 21-item is scored on a scale of 0-3 in a list of four statements arranged in increasing severity about a particular symptom of depression, bringing the BDI-II into alignment with DSM-IV criteria. Total score ranges from 0 to 63 and BDI scores 14 or higher was categorized as depressive for logistic regression analysis(25). The internal consistency (Cronbach's α) was higher in many countries ranging from 0.75-0.88(15, 19, 25, 26,) and Cronbach's $\alpha = 0.85$ in Ghana(19). In the current study the internal consistency was high(Cronbach's $\alpha = 0.897$). The Oslo 3-items social support scale was used to assess social support. A sum index was made by summarizing the raw scores, the sum ranging from 3 – 14. It was reliable in the study (Cronbach's $\alpha = 0.91$) done at Wolayta universit(27). And for Alcohol consumption, AUDIT was used which was valid and reliable with Cronbach's alpha score of 0.98(28). Then this questionnaire was translated to Amharic and Afan Oromo language then retranslated back to English so as to see and keep the consistency by language experts. The Amharic and Afan Oromo version of the questionnaire was used for actual data collection.

4.8. Operational definition

According to BDI-II: A score of 0 to 4 is (Normal), 5 to 13 is (Border line clinical depression), score of 14 to 19 is (Mild depression), 20 to 28 is (Moderate depression), 29 to 63 is (Severe depression)

Non-depressed- Those students who score 13 and below on BDI

Depressed- Those students who score 14 and above on BDI.

Level of Social support: for this study social support is measured using Oslo 3-items social support scale and A score of:-

- 3-8 is **poor support**.
- 9-11 is **moderate support** and
- 12-14 is **strong support**

Chronic physical illness- Illnesses that can be managed, but cannot be cured and have a greater risk of developing depression for example Diabetes, asthma, arthritis, cancer etc.

Substance use: use of any of the substances mentioned such as, Khat, Alcohol, Cigarette, Ganja and other psychoactive substance or medication.

Lifetime substance use: use of Khat, Alcohol, Cigarette, Ganja and other psychoactive substance or medication once or more in life time (20).

Current substance use: use of Khat, Alcohol, Cigarette, Ganja and other psychoactive substance or medication in the last one month (20).

Childhood neglect - Deficit in meeting a child's basic needs, including the failure to provide basic physical, health care, supervision, nutrition, emotional, education and/or safe housing needs(29).

Childhood emotional abuse- Any act including confinement, isolation, verbal assault, humiliation, intimidation, infantilization, or any other treatment which may diminish the sense of identity, dignity, and self-worth(28, 29, 30).

Childhood physical abuse - Any act resulting in a non-accidental physical injury, including not only intentional assault but also the results of unreasonable punishment. Having one or more of the following was considered as being victim of Physical abuse: - Being hit, slapped, kicked, or otherwise physically hurt by someone during childhood (28, 29).

Childhood sexual abuse- Any sexual act with a child performed by an adult or an older child. Having one or more of the following was considered as being victim of sexual abuse:-Incest, sexual touching of any part of the body, clothed or unclothed, penetrative sex or rape, intentionally engaging in sexual activity in front of a child, encouraging a child to engage in prostitution (28, 29).

Academic performance-JU grading scale was used relying on students' report. Students last semester CGPA (Cumulative Grade Point Average) was taken to rank student as-

1. Great Distinction->3.75

2. Distinction-3.25-3.75

4. Promoted-2.00-3.25

5. Warning and dismissal- ≤ 2.00

University students: Students who are attending their education in Jimma University in 2016.

Parental relationship- Percieved parental relationship by students as poor, moderate and good

Satisfaction with major study- Percieved satisfaction of major study by students as poor, moderate and good

Multiple care takers early in life:- Having more than one care takers early in life after one or both parents death

4.9. Data processing and analysis

Once all necessary data was obtained, data was checked for completeness. Study variable was coded in Epidata manager Version 2.0.8.56 and data was entered, edited by EpiData entry client version 2.0.7.22. Data were analyzed using SPSS version 20. For the analysis of obtained data simple descriptive statistics (mean, percentage, frequencies, and standard deviation) was used. Bivariate analysis was done to see the association of each independent variable with the outcome variable. Variables with p-value ≤ 0.25 in bivariate analysis were entered into multivariate logistic regression model to identify the effect of each independent variable with the outcome variables. Finally a p-value of less than 0.05 was considered statistically significant, and adjusted odds ratio with 95 % CI was calculated to determine the strength association.

4.10. Data quality management

To identify potential problems and to make important modifications, the questionnaire was pre-tested on 10 % of the total study participants randomly selected among College of Agriculture and veterinary medicine (JUCAVM) one week before day of actual data collection after training was given to eight supervisor (Mental health master students). Any error, ambiguity, incompleteness, or other encountered problems was addressed immediately after supervisor received filled questionnaire from each student. Also the collected data was checked for its completeness and immediate action was taken on detected case by principal investigator.

4.11. Ethical consideration

The study was conducted after ethical clearance and official letter was written to each department head from Institutional Review Board (IRB) of Jimma University. Selected students was told about nature, purposes, benefits and adverse effects of the study and invited to participate. Confidentiality was ensured and all related questions they raised were answered. All participants were recruited directly in their respective classrooms after the end of a class. They were asked to make 20 min available for completion of the questionnaires. Participation was completely voluntary, with no economic or other motivation. Participants' were given written informed consent for their participation. Participants' rights to refuse or discontinue participation at any time they want were strictly respected. The time of investigation avoided the beginning and end of the semester, when students are undergoing stressors related to moving or preparing for final exams and projects. About 157 student score above 14 on BDI-II and 67 students had suicidal wish, thought or plan and needs help from mental health professionals, however only four students who score more than 14 on BDI-II and 1 student who had suicidal thought contacted supervisor or call phone number available on the questionnaire and linked to Jimma University student clinic and hospital.

4.12. Dissemination plan

After the study has been conducted, it will be submitted to department of Psychiatry, College of health science and to student research office of JU. Efforts will be made to present it in different workshops, and to publish it on peer reviewed, national or international journal.

Chapter Five –Result

5.1. Socio- demographic and economic characteristics of respondents

From the total of 586 students 556 participated in the study giving response rate of 94.8%. Among 556 students participated majority were males 64.7 % (n=360). The mean age of the respondents was 21.21(SD = ±1.99 years) with minimum and maximum ages ranging from 18 to 35 years respectively. Of all participants the majority 59% (n=328) were Oromo by ethnicity, 37.8% (n=210) were Orthodox Christians by religion, and 86.0%(n=478) were single in marital status. The majority of the study participants 52.9%(n=294) were originally from rural areas and 32.7% (n=182) were from first year of study. About 39.4%(n=219) reported that they get amonthly pocket money of 300–499 ETB. According to the participants response 6.7 % (n=37) and 8.5 % (n=47) of participant had chronic physical illness and family members with mental illness respectively. Regarding the distribution of study subjects among different colleges, majority of the participants 43.2 % (n=240) were from College of health Sciences. Based on the students' response, about 41.7% (n=232) respondents' mother and 35.8% (n=199) respondents' father were attended their education until primary school. About 42.4% (n=236) of respondent has moderate social support and 36.9 % (n=205) of participants' family had income \leq 2000ETB. About 59.2% (n=329) and 51.3% (n=285) of student had acedamic work overload and overburdened by test schedule respectively (See table-1).

Table 1:- Socio- economic and academic characteristics of participants among Jimma university main campus regular student, April 2016 (N=556)

	Variable	Frequency (n)	Percentage (%)
Gender	Male	360	64.7
	Female	196	35.3
Age	18-20	231	41.5
	21-22	212	38.1
	23-35	113	20.3
Ethnicity	Oromo	328	59

	Amhara	130	23.4
	Tigre	26	4.7
	Gurage	32	5.8
	Yem	14	2.5
	Others*	26	4.7
Marital status	Married	60	10.8
	Single	478	86.0
	Others**	18	3.2
Religion	Muslim	182	32.7
	Orthodox	210	37.8
	Protestant	159	28.6
	Others***	5	0.9
Childhood Residence	Rural	294	52.9
	Urban	262	47.1
Monthly Pocket Money (Ethiopian Birr)	100-299	107	19.2
	300-499	219	39.4
	500-999	186	33.5
	1000-4000	44	7.9
Chronic physical illness	No	519	93.3
	Yes	37	6.7
Mother educational level	Illiterate	176	31.7
	Grade 1-8	232	41.7
	Grade 9-12	111	20
	University	37	6.7
Father educational level	Illiterate	127	22.8
	Grade 1-8	199	35.8
	Grade 9-12	140	25.2
	University	90	16.2
Family income (Ethiopian Birr)	300-2000	205	36.9
	2001-2999	121	21.8

	3000-4999	151	27.2
	5000-25000	79	14.2
Parental relationship	Good	322	57.9
	Moderate/fair	135	24.3
	Poor	99	17.8
Family history of mental illness	No	509	91.5
	Yes	47	8.5
Year of study	1 st year	182	32.7
	2 nd year	136	24.5
	3 rd year	122	21.9
	4 th year	63	11.3
	5 th year	53	9.5
College	CHS	240	43.2
	CSSH	125	22.5
	CNCS	93	16.7
	CLG	98	17.6
Academic performance	Warned	4	0.7
	Promoted	345	62.1
	Distinction	167	30
	Great distinction	39	7
Academic work overload	No	227	40.8
	Yes	329	59.2
Satisfaction with major study	Good	295	53.1
	Moderate/fair	162	29.1
	Poor	99	17.8
Overburdened with test schedule	No	271	48.7
	Yes	285	51.3
Social support	Poor support	103	18.5
	Moderate Support	236	42.4
	Strong Support	217	39.0

*Somali, Affar and Wolayta, etc**Divorced, Widowed and Separated***Wakefata, Catholic and Athiest, CHS-College of health science, CSSH-College of social science and Humanity, CNCS-College of natural and computational science, CLG-College of law and Governance.

The study revealed that 21.2% (n=118) of the students chewed khat at least once in their lifetime and the current use of khat is 66 % (n=78). Regarding alcohol drinking habit, 37.9% (n=211) reported that they drink alcohol at least once in their lifetime while 24.2 % (n=51) were drinking alcohol over the last 30 days prior to the study. The study showed that 4.9 % (n=27) of the respondents smoked cigarettes at least once in their life time whereas 44.4 % (n=12) of the respondents have been smoking cigarettes in the past 30 days. Furthermore, 10.4 % (n=58) of the study participants used shisha at least once in their lifetime, whereas 15.5% (n=9) of the respondents have been smoking shisha in the past 30 days. About 7.6 (n=42) of the respondents used ganja at least once in their life time whereas 28.6 % (n= 12) of the participants have been using Ganja in the last 30 days. There is no participant who use other (unspecified) psychoactive substance or medication. Only 0.2% (n=1) individual had history of migration (out of birth country) (see table-2).

Table 2 Substance use, risky sexual behavior and negative life events among Jimma university main campus regular students, April 2016.N=556

Variables			Number (n)	Percentage (%)
Alcohol Use	Lifetime	No	345	62.1
		Yes	211	37.9
	Current	No	160	75.8
		Yes	51	24.2
Khat Use	Lifetime	No	438	78.8
		Yes	118	21.2
	Current	No	40	34
		Yes	78	66
Cigarette smoking	Lifetime	No	529	95.1
		Yes	27	4.9
	Current	No	15	55.6
		Yes	12	44.4

Shisha Use	Lifetime	No	498	89.6
		Yes	58	10.4
	Current	No	49	84.5
		Yes	9	15.5
Ganja Use	Lifetime	No	514	92.4
		Yes	42	7.6
	Current	No	30	71.4
		Yes	12	28.6
Multiple sexual partner	No	60	10.8	
	Yes	113	20.3	
Sex after drinking	No	516	92.8	
	Yes	40	7.2	
Being hit by sexual partner	No	509	91.5	
	Yes	47	8.5	
Forced to have sex	No	500	89.9	
	Yes	56	10.1	
Childhood physical abuse	No	377	67.8	
	Yes	179	32.2	
Childhood sexual abuse	No	518	93.2	
	Yes	38	6.8	
Childhood emotional abuse	No	494	88.8	
	Yes	62	11.2	
Childhood neglect	No	493	88.7	
	Yes	63	11.3	
Witnessing Parental Violence	No	372	66.9	
	Yes	184	33.1	
Death of parents before the age 11	No	16	2.8	
	Yes	65	11.7	
Multiple care takers in early life	No	53	9.5	
	Yes	26	4.7	

5.2. Prevalence of Depression

Nearly one third (28.2 %, n=157) of the participants had depression during the current academic year. About 40.6 % (n=226) of the participants were without depression (Normal) and 31.1% (n=173) had borderline clinical depression; While 14.4% (n=80) had mild depression, 9.9% (n=55) had moderate depression and 4% (n=22) had severe depression (See figure 3).

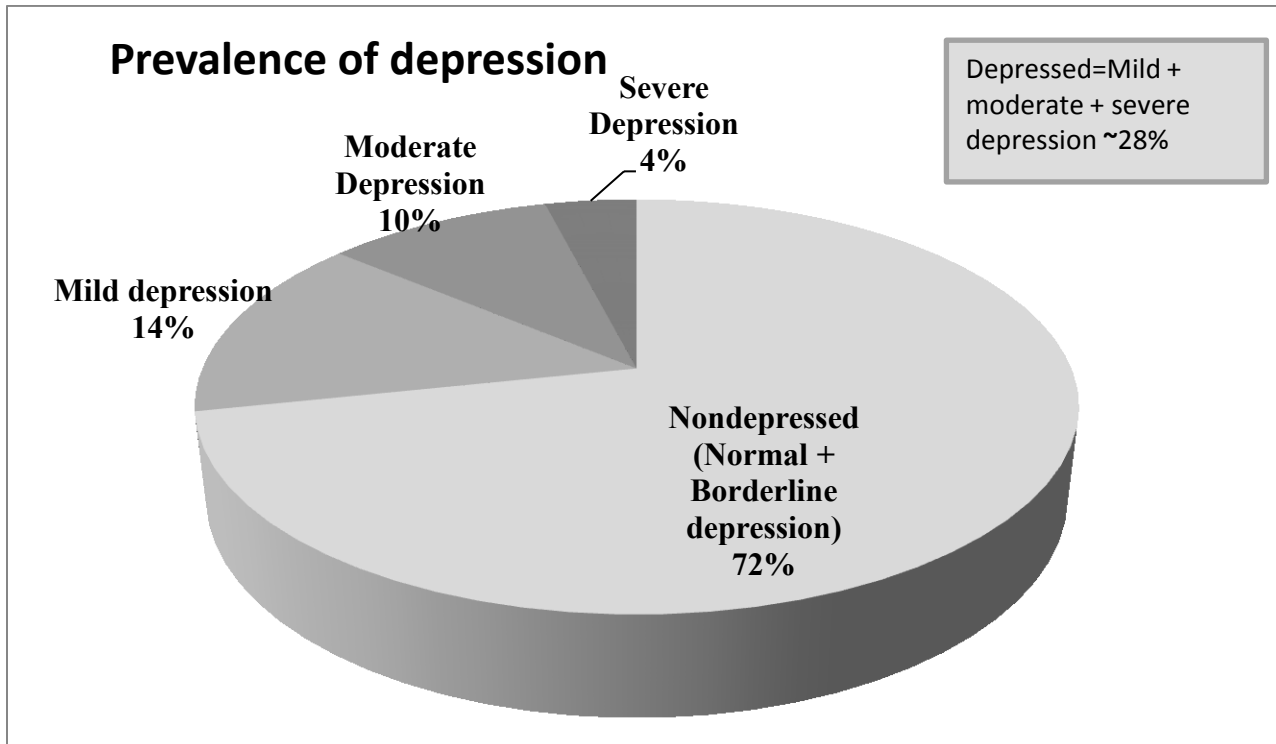


Figure 3:- Levels of depression and its prevalence among Jimma University main Campus regular students, April, 2016. N=556

5.3. Factors associated with depression

Socio-demographic and economic characteristics of students like age, sex, family income, parental education level, academic work overload, being overburdened with test schedule, death of parents before age of 11, substance use, multiple care takers early in life and childhood residence didn't show any association with depression on bivariate analysis, however being single, having poor parental relationship, chronic physical illness, family history of mental illness were associated with depression(see table-3).

Table 3:- Bivariate analysis of socio-economic characteristics of participant among Jimma university main campus regular student, April 2016. (N=556)

Variables		Depression		COR & 95%CI	P-value
		No N (%)	Yes N (%)		
Gender	Male	263(73.1)	97(26.9)	1	1
	Female	136(69.4)	60(30.6)	1.196(0.816-1.754)	0.360
Age	≤20	164(71)	67(29)	1.240(0.743-2.071)	0.713
	21	86(70.5)	36(29.5)	1.271(0.713-2.264)	0.877
	22	64(771.1)	26(28.9)	1.233(0.660-2.303)	0.562
	≥ 23	85(75.2)	28(24.8)	1	1
Marital status	Married	34(56.7)	26(43.3)	1	1
	Single	354(74.1)	124(25.9)	0.458(0.264-0.794)	0.005*
	Others**	11(61.)	7(38.9)	0.832(0.284-2.442)	0.738
Childhood Residence	Rural	205(69.7)	89(30.3)	1	1
	Urban	194(74)	68(26)	0.807(0.557-1.171)	0.259
Mother educational level	Illiterate	125(71)	51(29)	1.269(0.560-2.878)	0.568
	Grade 1-8	161(69.4)	71(30.6)	1.372(0.616-3.057)	0.439
	Grade 9-12	85(76.6)	26(23.4)	0.952(0.399-2.272)	0.911
	College/University	28(75.7)	9(24.3)	1	1
Father educational level	Illiterate	87(68.5)	40(31.5)	1.609(0.864-2.998)	0.134
	Grade 1-8	140(70.4)	59(29.6)	1.475(0.824-2.641)	191
	Grade 9-12	102(72.9)	38(27.1)	1.304(0.701-2.426)	0.402
	College/University	70(77.8)	20(22.2)	1	1
Family income (Ethiopian Birr)	<2000	146(71.2)	59(28.8)	0.926(0.525-1.632)	0.791
	2001-2999	91(75.2)	30(24.9)	0.755(0.401-1.422)	0.385
	3000-4999	107(70.9)	44(29.1)	0.942(0.520-1.707)	0.845
	>5000	55(69.6)	24(30.4)	1	1
Parental Relationship	Good	244(75.8)	78(24.2)	1	1
	Moderate	84(62.2)	51(37.8)	1.899(1.234-2.924)	0.004*

	Poor	71(71.7)	28(28.3)	1.234(0.744-2.047)	0.416
Family members with mental illness	No	378(72.8)	141(27.2)	1	1
	Yes	21(56.8)	16(43.2)	2.043(1.036-4.026)	0.039*
Chronic physical illness	No	372(73.1)	137(26.9)	1	1
	Yes	27(57.4)	20(42.6)	2.011(1.092-3.704)	0.025*
College	CHS	182(75.8)	58(24.2)	1.243(0.701-2.205)	0.457
	CSSH	71(56.8)	54(43.2)	2.966(1.619-5.434)	<0.001
	CNCS	68(73.1)	25(26.9)	1.434(0.732-2.807)	0.293
	CLG	78(79.6)	20(20.4)	1	1
Year of study	1st year	123(67.6)	59(32.4)	2.063(0.970-4.388)	0.060
	2nd year	90(66.2)	46(33.8)	2.198(1.013-4.768)	0.046
	3rd year	97(79.5)	25(20.5)	1.108(0.490-2.508)	0.805
	4th year	46(73)	17(27)	1.586(0.656-3.850)	0.305
	5th year	43(81.1)	10(18.9)	1	1
Satisfaction with major	Good	212(71.9)	83(28.1)	1	1
	Moderate	117(72.2)	45(27.8)	0.982(0.641-1.506)	0.935
	Poor	70(70.7)	29(29.3)	1.058(0.641-1.748)	0.825
Overburdened with test schedule	No	197(72.7)	74(27.3)	1	1
	Yes	202(70.9)	83(29.1)	1.094(0.756-1.583)	0.634

Keys- *Factors that have association **Widowed, Divorced and separated, CHS-College of health science, CSSH-College of social science and Humanity, CNCS-College of natural and computational science, CLG-College of law and Governance

Bivariate analysis indicated substance use were not significantly associated with depression while, having sex after drinking, being hit by sexual partner, being forced to have sex , having childhood physical, emotional and sexual abuse, witnessing parental violence ,pocket money between 500-999ETB and student who are promoted on aademic performance are associated with depression and entered to multivariate logistic regression model(See table-4).

Table 4:- Bivariate analysis of risky sexual behavior, negative life events and substance use of participant among Jimma university main campus regular student, April 2016. (N=556)

Variables			Depression		COR & 95%CI	P-value
			No N (%)	Yes N (%)		
Sex after drinking	No	380(73.6)	136(26.4)	1		
	Yes	19(47.5)	21(52.5)	3.088(1.611-5.920)	0.001*	
Being hit by sexual partner	No	381(74.9)	128(25.1)	1	1	
	Yes	18(38.3)	29(61.7)	4.796(2.576-8.926)	<0.001*	
Forced to have sex	No	372(74.4)	128(25.6)	1	1	
	Yes	27(48.2)	29(51.8)	3.122(1.781-5.472)	<0.001*	
Childhood physical abuse	No	291(77.2)	86(22.8)	1	1	
	Yes	108(60.3)	71(39.7)	2.224(1.515-3.266)	<0.001*	
Childhood sexual abuse	No	381(73.6)	137(26.4)	1	1	
	Yes	18(47.4)	20(52.6)	3.090(1.587-6.015)	0.001*	
Childhood emotional abuse	No	365(73.9)	129(26.1)	1	1	
	Yes	34(54.8)	28(45.2)	2.330(1.359-3.994)	0.002*	
Witnessing parental violence	No	284(76.3)	88(23.7)	1	1	
	Yes	115(62.5)	69(37.5)	1.936(1.321-2.838)	0.001*	
Pocket Money (Ethiopian Birr)	<100	15(78.9)	4(21.1)	0.351(0.100-1.229)	0.102	
	100-299	55(62.5)	33(37.5)	0.789(0.378-1.649)	0.529	
	300-499	161(73.5)	58(26.5)	0.474(0.243-0.924)	0.028*	
	500-999	143(76.9)	43(23.1)	0.396(0.199-0.787)	0.008*	
	>1000	25(56.8)	19(43.2)	1	1	
Academic performance	Warned	3(75)	1(25)	2.267(0.196-26.271)	0.513	
	Promoted	228(66.1)	117(33.9)	3.489(1.330-9.158)	0.011*	
	Distinction	134(80.2)	33(19.8)	1.675(0.608-4.612)	0.319	
	Great distinction	34(87.2)	5(12.8)	1	1	

Alcohol Use	Lifetime	No	245(71)	100(29)	1	1
		Yes	154(73)	57(27)	0.907(0.618-1.330)	0.616
	Current	No	365(72.3)	140(27.7)	1	1
		Yes	34(66.7)	17(33.3)	1.304(0.706-2.409)	0.397
Khat Use	Lifetime	No	314(71.7)	124(28.3)	1	1
		Yes	85(72)	33(28)	0.983(0.625-1.546)	0.941
	Current	No	343(71.8)	135(28.2)	1	1
		Yes	56(71.8)	22(28.2)	0.998(0.586-1.699)	0.995
Cigarette smoking	Lifetime	No	380(71.8)	149(28.2)	1	1
		Yes	19(70.4)	8(29.6)	1.074(0.460-2.506)	0.869
	Current	No	389(71.5)	155(28.5)	1	1
		Yes	10(83.3)	2(16.7)	0.502(0.109-2.317)	0.377
Shisha Use	Lifetime	No	360(72.3)	138(27.7)	1	1
		Yes	39(67.2)	19(32.8)	1.271(0.710-2.275)	0.420
	Current	No	393(71.8)	154(28.2)	1	1
		Yes	6(66.7)	3(33.3)	1.276(0.315-5.166)	0.733
Ganja Use	Lifetime	No	371(72.2)	143(27.8)	1	1
		Yes	28(66.7)	14(33.3)	1.297(0.664-2.535)	0.446
	Current	No	391(71.9)	153(28.1)	1	1
		Yes	8(66.7)	4(33.3)	1.278(0.379-4.305)	0.692

*Factors that have association

Multivariate logistic regression analysis revealed that family history of mental illness, college type, being hit by sexual partner, childhood emotional abuse, academic performance, pocket money and sex after drinking had significant association with depression. Accordingly the odds of having depression was 2.3 fold higher (OR= 2.307, 95%CI=1.055-5.049) among student who had family member with mental illness as compared with student who have no family members with mental illness. The odds of having depression was 2.58-fold higher (OR=2.582, 95%CI=1.332-5.008) among students who were from college of Social science and humanity than students from college of law and governance. The odds of having depression was 3.7 times more likely (OR=3.722, 95%CI=1.818-7.619) in students who had sex after drinking than students who had no sex after drinking. Students who have been hit by sexual partner were 3

times (OR=3.132, 95%CI=1.561-6.283) more likely to develop depression than students who have no such events. Students who report childhood emotional abuse were 2-times more likely (OR=2.167, 95%CI=1.169-4.017) to report depression than students with out childhood emotional abuse. Students who reported getting monthly pocket money between500-999(ETB) had a 55% reduced risk of depression (OR=0.450, 95%CI=0.204-0.995) than students with pocket money greater than 1000(ETB). The odds of having depression among students with promoted acedamic performance was 3-fold higher (OR=2.912, 95%CI=1.063-7.975) than students who pass with great distinction grade report (Table-5).

Table 5:- Multivariate analysis of factors associated with depression among participant at Jimma university main campus regular student, April 2016. N=556

Variables		Depression		AOR & 95% CI	P-value
		No N (%)	Yes N (%)		
Family members with mental illness	No	378(72.8)	141(27.2)	1	1
	Yes	21(56.8)	16(43.2)	2.307(1.055-5.049)	0.036*
College	CHS	182(75.8)	58(24.2)	1.273(0.682-2.377)	0.448
	CSSH	71(56.8)	54(43.2)	2.582(1.332-5.008)	0.005*
	CNCS	68(73.1)	25(26.9)	1.523(0.731-3.173)	0.261
	CLG	78(79.6)	20(20.4)	1	1
Sex after drinking	No	380(73.6)	136(26.4)	1	1
	Yes	19(47.5)	21(52.5)	3.722(1.818-7.619)	<0.001*
Being hit by sexual partner	No	381(74.9)	128(25.1)	1	1
	Yes	18(38.3)	29(61.7)	3.132(1.561-6.283)	0.001*
Childhood emotional abuse	No	365(73.9)	129(26.1)	1	1
	Yes	34(54.8)	28(45.2)	2.167(1.169-4.017)	0.014*
Pocket Money (Ethiopian Birr)	<100	15(78.9)	4(21.1)	0.348(0.088-1.368)	0.131
	100-299	55(62.5)	33(37.5)	0.905(0.386-2.118)	0.817
	300-499	161(73.5)	58(26.5)	0.489(0.224-1.071)	0.074
	500-999	143(76.9)	43(23.1)	0.450(0.204-0.995)	0.049*

	>1000	25(56.8)	19(43.2)	1	1
Academic performance	Warned	3(75)	1(25)	1.812(0.133-24.738)	0.656
	Promoted	228(66.1)	117(33.9)	2.912(1.063-7.975)	0.038*
	Distinction	134(80.2)	33(19.8)	1.327(0.462-3.812)	0.599
	Great distinction	34(87.2)	5(12.8)	1	1

*Variables with significant association, CHS-College of health science, CSSH-College of social science and Humanity, CNCS-College of natural and computational science, CLG-College of law and Governance.

Chapter Six-Discussion

The finding of this study showed that the prevalence of depression among Jimma university regular undergraduate students was 28.2%. The figure largely falls within the prevalence rates reported in different study results across the world from similar study population. The finding was similar with studies carried out in Western Nigeria 25.2 % (10), Oman University 27.7% (16) and Iran 33% (18). On the other hand the current study finding was higher than the study done in Ethiopia, Awassa 23.6% (9) and China 11.7% (15). The first probable reason for the different prevalence rate might be due to the use of different assessment tools in which the previous studies used PHQ-9(9) while the current study used BDI-II. The second reason could be the difference in study population in which the previous studies participant were only male gender and included both private and governmental university which had different socioeconomic status status while the current study focused on government university students of both sexes. In addition previous study used large sample size 1176(9) and 5245 (15) while our sample size were 586 students. This study finding was lower than study done in United Arab Emirates 64% (17) and rural mid-size southeastern university 43.4% (13). The variation might be due to the difference in data collection tool in which previous study used PHQ-9(17) and SCL-90-R (13). The other reason might be difference in study participants which had different sociodemographic and economic characteristics.

In this study 31.1% had borderline depression, 14.4% of the participants had mild depression, 9.9% had moderate depression and 4% had severe depression. This finding is similar with study done in Iran reporting, 31% of the students were classified as minor depression (borderline), 20.7% as moderate (more than mild and less than severe), and 11% as the severe one(26). The reason for difference in prevalence of severe depression might be due to different cutoff point and number of items used by previous study that is score 0 (no depression), score 1 (almost no depression), score 2-3 (poor), score 4-7 (mild), score 8-10 (more moderate than mild), score 11-14 (moderate less than severe) and score 15 and above (severe depression) while current study used different cutoff point.

Regarding factors affecting prevalence of depression the study finding revealed that family history of mental illness, college type, being hit by sexual partner; childhood emotional abuse,

academic performance, pocket money and sex after drinking had significant association with depression.

Results of this study showed that having family history of mental illness are significant predictors for depression. According to different literatures individual from family members with mental illness are more prone to develop depression(32).This might be explained by the fact that mental illness have genetic base, families are stigmatized and there are a lot of burden on the family members regarding financial expense and giving care for the patient(1, 2).

This study also revealed students from college of social science and humanity had higher depression than students from college of law and governance. Study done in Oman support this finding (16). This might be explained by the fact that from the current study students from College of social science and humanity are more likely to report alcohol and other substance use which might lead them to develop depression.

Risky sexual behavior like having sex after drinking been found to be associated with depression in this study. Similar findings were reported in previous study done in Kenya(20).This might be explained by the fact that students who are abusing substance are more prone to develop depression and participating in risky sexual activity let person to have guilt feeling and worry about acquiring STI which might lead to psychological distress mainly depression(10).

In the current study having been hit by a sexual partner and childhood emotional abuse had significant association with depression.Similar results were shown in studies done among Kenya university students(20). This might be explained by the fact that people expect care and love from sexual partner when this are not met people are disappointed and dissatisfied which might lead them to have divorce and abuse substance which increase risk of developing depression(20).In addition child abuse might lead individual to develop short term and longterm psychological damage and adopt behavioural risk factors such as smoking, alcohol abuse, poor diet and lack of exercise which inturn lead to depression(30).

In this study academic performance and depression were found to have strong association.Students who pass with promoted academic performance were prone to develop depression than students who pass with great distinction which is similar with study finding in Oman (16) and Saudi Arabia (33). In this study the increased reporting of depression in students with poor academic performance could be explained by the fact that poor concentration is

especially recognizable in university students as it affects their daily academic performance(33). Previous studies found that depression deteriorates cognitive functioning (10) and academic pressure was the first factor, which elevates the stress level and leads to mental health problems (e.g., depression) because students fail to cope effectively with academic mis-achievement at university, and because of the difficulty to achieve the high grades they desire(8).

This study revealed that there was a negative correlation between pocket money and depressive symptoms in which students getting low pocket money are less likely to develop depression when compared to student who received higher pocket money.It known that most of literature report that having financial problems (struggles) lead students to develop stress and depression however this study finding is inconsistent with study report from Saudi Arabia (8, 33).This might be explained by the fact that in Ethiopia there is strong social support and in Ethiopian university there is a lot of facility nearby like students have free tuition fees which will be paid in the future makes student not to develop depression.

Strength of the study

Strength of this study were it assessed severity of depression in addition to its prevalence and most important variables like family history of mental illness, social support and stressful life events are addressed which was limitation and recommendation of previous study.

Limitations

Recall bias was major limitation, as it depends on self report of symptoms, there could have been errors related to inaccurate reporting and inability of recalling events.

Chapter Seven-Conclusion and Recommendation

7.1. Conclusion

This study has shown the association between multiple socio-demographic characteristics and depression. A high and alarming prevalence of depressive symptoms among the university students was found.

College of Social science and humanity, having sex after drinking, low pocket money, low academic performance, having childhood emotional abuse, being hit by sexual partner and having family history of mental illness showed statistical significance with depression.

7.2 Recommendation

Based on the findings above, recommendations made to Ministry of Education and Health in collaboration with Jimma University higher administrative body to expand mental health services in the University to prevent new incidence and give appropriate treatment for depressed students.

Recommendation made to College social science and humanity in Jimma University to detect factors responsible for increased depression among this group and to react on it.

Recommendation goes to Non governmental organizations (NGO) working on reproductive health and mental health to rearrange additional orientations and trainings about risky sexual behavior and its consequence and how to manage it.

Recommendation made to Jimma university mental health professional to prepare workshop focused on type of stressful life events like childhood emotional abuse and violence by intimate sexual partner and how to cope with this problem.

Recommendation goes to higher institution instructor to increase students' academic performance after searching for possible reason why students are performing poor and working on it together with students.

Further study is needed to assess impact of depression among university student and its possible intervention.

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Annexes

8.2. Questionnaire

Code No _____

Consent and information sheet

Mental illnesses are among the most prevalent health problem among young age population if not early detected and promptly treated. Therefore, the result of this study is very important for us as graduating class as well as for you for future success in life and if there is some who is suffering currently among you for getting necessary medical attention as soon as possible. I am doing this study for the partial fulfillment of the requirements for a master's of science in integrated clinical and community mental health. The objective of this study is to assess prevalence and associated factor of depression among regular undergraduate students, Jimma University, 2016. Your cooperation and honest participation in filling questionnaires will provide me valid result and help me to make recommendation of different type of relevant intervention; hence I request you to participate honestly. Your participation in filling the prepared questionnaires and every aspect of the study is completely voluntary. You may skip any question that you prefer not to answer, but I would appreciate your cooperation. You may also ask question to clarify if you do not understand them. If you do not want to participate on this study for different reason that makes you not to participate you do so either at the beginning you can stop participating during the participation period. However I advise you to participate as your involvement in the study is precious and indirectly you are helping young people like you to get the necessary health services in the country. Your name will not be written in this form (your participation is anonymous) and your responses to our questions are identified only by code number .All information that you give me will be kept confidential and the release of information will be general not by each individual.

Do you agree to participate in this study? 1. Yes 2. No

Name of supervisorSignature.....Date.....

Name of principal investigator.....Signature.....Date.....

PART. 1. Question to assess Sociodemographic / Back ground information

Instruction 1: This Question is about your Back ground information. Please circle the option that represents your experience and write appropriate answer on the space.

No	Back ground information	Response
BG1	Age	_____
BG2	Sex	1. Male 2. Female
BG3	Marital status	1. Married 2. Single 3. Divorced 4. Separated 5. Widowed
BG4	Ethnicity	1. Oromo 2. Amhara 3. Tigre 4. Gurage 5. Yem 6. Other specify-----
BG5	Religion	1. Muslim 2. Orthodox 3. Protestant 4. Catholic 5. Wakekefata 6. Other specify-----
BG6	Where did you grow up? Childhood Residence	1.Rural 2.Urban

PART.2. Question to assess Parents' Socio-economic status

Instruction 2: This Question is about your Parents' Socio-economic status. Please circle the option that represents your parents and write appropriate answer on the space.

No	Parents' Socio-economic factors	Response
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PSF1	How much in average do you think your family's Monthly Income?	_____ Birr
PSF2	How much total pocket money you get monthly?	_____ Birr
PSF3	Mothers' Education level	1. Uneducated -0 years 2. Primary1-8 Grade 3.Secondary or 9–12 grade 4. University
PSF4	Fathers' Education level	1. Uneducated -0 grade 2. Primary1-8Grade 3.Secondary or 9–12 grade 4. University
PSF5	What your parental relationship looks like?	1. Good 2. Moderatel/Fair 3. Poor
PSF6	Do you have family member with mental illness?	1. Yes 2. No
PSF8	If your answer to question number PSF6 is yes, from where you heard or understand that your family member had mental illness?	1.Health institution 2. Traditional healer 3.Specifyif other _____
PSF9	Have you ever had chronic physical illness?	1. Yes 2. No
PSF10	If your answer to question PSF9 is yes Specify what type of illness do you have?	_____

PART.3. Question to assess your Academic information

Instruction 3: This Question is about your Academic information. Please circle the option that represents you and write appropriate answer on the space.

No	Academic information	Response
AI1	College	_____
AI2	Department	_____
AI3	Year of study	1. 1st-year

		2. 2nd-year 3. 3rd-year 4. 4th-year 5. 5th-year
AI4	Do you have Academic work overload?	1. Yes 2. No
AI5	Academic performance-Write your last two semester CGPA(Cumulative Grade Point Average)	1. 2007 second semester CGPA _____ 2. 2008 first semester CGPA _____
AI6	What your Satisfaction with major study looks like?	1. Good 2. Moderate/Fair 3. Poor
AI7	Are you Overburdened with test schedule?	1. Yes 2. No

PART.4. Question to assess presence of depressive disorder

Instruction 4: This Question is about presence of depressive disorder. Please circle the option that represents your experience and write appropriate answer on the space.

NB:-In this study it will be expected that some of student may have Depression which requires mental health professional help and it is unethical to use subjects only for study purpose without suggesting some help for this students. The only way to reach this subject to help after they fill questionnaire and give it back to investigator is by looking to the score of PART 4(BDI) that means the current part. Therefore we request you to put the sum of each chosen items at the end of PART4 (BDI) table on the space in front of total score and if your total score is above 14 and if your chosen item to question number BD9 is 1, 2 Or 3 it means that you need professional help therefore please contact supervisor or call on 0910058532 (Mr.Gutema Ahmed) or 0910107507 (Mr.Yonas Tesfaye).

No	Beck Depression Inventory	Response
BD1	Sadness	0 I do not feel sad. 1 I feel sad much of the time. 2 I am sad all of the time. 3 I am so sad or unhappy that I can't stand it.
BD2	Pessimism	0 I am not discouraged about my future. 1 I feel more discouraged about my future than I used to be. 2 I do not expect things to work out for me. 3 I feel my fortune is hopeless and will get only worse.
BD3	Past Failure	0 I do not feel like a failure. 1 I have failed more than I should have. 2 As I look back I see a lot of failures. 3 I feel I am a total failure as a person.
BD4	Loss of Pleasure	0 I get as much pleasure as I ever did from the things I enjoy. 1 I don't enjoy things as much as I used to. 2 I get very little pleasure from the things I used to enjoy. 3 I can't get any pleasure from the things I used to enjoy.
BD5	Guilty Feelings	0 I don't feel particularly guilty. 1 I feel guilty over many things I have done or should have

		done.
		2 I feel quite guilty most of the time.
		3 I feel guilty most of the time.
BD6	Punishment Feelings	0 I don't feel I am being punished. 1 I feel I may be punished. 2 I expect to be punished. 3 I feel I am being punished.
BD7	Self-Dislike	0 I feel the same about myself as ever. 1 I have lost confidence in myself. 2 I am disappointed in myself. 3 I dislike myself.
BD8	Self-Criticisms	0 I don't criticize or blame myself more than usual. 1 I am more critical of myself than I used to be. 2 I criticize myself for all of my faults. 3 I blame myself for everything bad that happens.
BD9	Suicidal Thoughts or Wishes	0 I don't have any thoughts of killing myself. 1 I have thoughts of killing myself, but I would not carry them out. 2 I would like to kill myself. 3 I would kill myself if I had the chance.
BD10	Crying	0 I don't cry any more than I used to. 1 I cry more than I used to. 2 I cry over every little thing. 3 I feel like crying, but I can't.
BD11	Agitation	0 I am no more restless or would up than usual. 1 I feel more restless or would up than usual. 2 I am so restless or agitated that it's hard to stay still. 3 I am so restless that I have to keep moving or doing

		something.
BD12	Loss of Interest	<p>0 I have not lost interest in other people or activities.</p> <p>1 I am less interested in other people or things than before.</p> <p>2 I have lost most of my interest in other people or things.</p> <p>3 It's hard to get interested in anything.</p>
BD13	Indecisiveness	<p>0 I make decisions about as well as ever.</p> <p>1 I find it more difficult to make decisions than usual.</p> <p>2 I have much greater difficulty in making decisions than usual.</p> <p>3 I have trouble making any decision.</p>
BD14	Worthlessness	<p>0 I do not feel I am worthless.</p> <p>1 I don't consider myself as worthwhile and useful as I used to.</p> <p>2 I feel more worthless as compared to other people.</p> <p>3 I feel utterly worthless.</p>
BD15	Loss of Energy	<p>0 I have as much energy as ever.</p> <p>1 I have less energy than I used to have.</p> <p>2 I don't have enough energy to do very much.</p> <p>3 I don't have enough energy to do anything.</p>
BD16	Changes in Sleeping Patterns	<p>0 I have not experienced any change in my sleeping pattern.</p> <p>1 I sleep somewhat more/less than usual.</p> <p>2 I sleep a lot more/less than usual.</p> <p>3 I sleep most of the day.</p> <p>I wake up 1-2 hours early and can't get back to sleep.</p>
BD17	Irritability	<p>0 I am no more irritable than usual.</p> <p>1 I am more irritable than usual.</p> <p>2 I am much more irritable than usual.</p> <p>3 I am irritable all the time.</p>
BD18	Changes in Appetite	<p>0 I have not experienced any change in my appetite.</p> <p>1 My appetite is somewhat greater/lesser than usual.</p> <p>2 My appetite is much greater/lesser than usual.</p>

		3 I crave food all the time or I have no appetite at all.
BD19	Concentration	0 I can concentrate as well as ever.
	Difficulty	1 I can't concentrate as well as usual.
		2 It's hard to keep my mind on anything for very long.
		3 I find I can't concentrate on anything.
BD20	Tiredness	0 I am no more tired or fatigued than usual.
	or	
	Fatigue	1 I get more tired or fatigued more easily than usual.
		2 I am too tired or fatigued to do a lot of the things I used to do.
		3 I am too tired or fatigued to do most of the things I used to do.
BD21	Loss of Interest in	0 I have not noticed any recent change in my interest in sex.
	Sex	1 I am less interested in sex than I used to be.
		2 I am much less interested in sex now.
		3 I have lost interest in sex completely.

PART.5.Question to assess Risky Sexual Behavior

Instruction 5: **This Question is about Risky Sexual Behavior. Please circle the option that represents your experience and write appropriate answer on the space.**

No	Risky Sexual Behavior	Response
RSB1	Have you ever had sexual partner?	1. Yes 2. No
RSB2	If your answer to question number RSB1 is yes how many sexual partners did you have?	_____
RSB3	How often did you use a condom with your sexual partner?	1. Always 2. Occasionally 3. Rarely
RSB4	Have you ever worried about having HIV?	1.Yes 2.No
RSB5	Have you ever visited counselors because you worried you are HIV positive?	1.Yes 2.No
RSB6	Have you ever been diagnosed HIV positive?	1.Yes 2.No
RSB7	Have you ever been diagnosed with other sexually transmitted infection?	1.Yes 2.No
RSB8	If your answer to question number RSB4 is yes specify	

	sexually transmitted infection you experienced or diagnosed?	_____
RSB9	Have you ever had sex after drinking alcohol?	1.Yes 2.No

PART.7. Question to assess Social Support (SSQ)

Instruction 7: The following 3 questions ask about how you experience your social relationships. The inquiry is about your immediate personal experience. Please circle the option that represents your experience

Ser.no	Social Support Questionnaire	Response
SSQ 1	How many people are so close to you that you can Count on them if you have serious personal problems (choose one option)?	1. None
		2. 1 or 2
		3. 3-5
		4. More than 5
SSQ 2	How much concern do people show in what you are doing (choose one option)?	5. A lot of concern and interest
		4. Some concern and interest
		3. Uncertain
		2. Little concern and interest
		1. No concern and interest
SSQ 3	How easy is it to get practical help from friends or dorm-mates' if you should need it (choose one option)?	5. Very easy
		4. Easy
		3. Possible
		2. Difficult
		1. Very difficult

PART.6. Question to assess Substance use

Instruction 6: This Question is about your Substance use. Please circle the option that represents your experience and write appropriate answer on the space.

No	Substance use	Response
SU1	How often do you used or Chewed Khat?	1.Never-Skip to question number SU3 2. Monthly or less

		3.2-4 times a month 4.2-3 times a week 5.4 or more times a week
SU2	When did you chew Khat for the last time?	1. One or more months back 2. 2-4 weeks back 3. Within this two weeks
SU3	How often do you have a drink containing alcohol like Beer, Araki, Tej, and Tella....? (If never is the answer, even you do not drink at all tella on holidays?)	0.Never--skip to question number SU7 1.Monthly or less 2.2-4 times a month 3.2-3 times a week 4.4 or more times a week
SU4	What type of alcoholic beverages do you prefer?	1. Beer 2. Wine 3. Draft 4. Araki 1. Tej 6. Tella 7.Others(specify)_____
SU5	When did you have a drink containing alcohol for the last time?	1. One or more months back 2. 2-4 weeks back 3. Within this two weeks
SU6	Amount of alcohol used in number	1. Beer(Bottle)_____ 2. Wine:- a. Glass _____ b. Bottle _____ 3. Draft(Glass)_____ 4. Araki:-a. Melekia_____ b. Bush _____ 5. Tej:-a. Birile _____ b.Bottle _____ 6. Tella(Tassa,birciko)_____ 7. Others _____
SU7	How much is your maximum intake alcohol at a time?	1. Beer(Bottle)_____ 2. Wine(Glass, Bottle)_____

		3. Draft(Glass)_____
		4. Araki(Melekia, Bush)____
		5. Tej(Birile, Bottle)_____
		6. Tella(Tassa,birciko)_____
		7. Others(specify)_____
SU8	During the past year, have you found that you were not able to stop Drinking once you had started?	1. Yes 2. Never
SU9	If yes to SU8, how often?	1. Less than monthly 2. Monthly 3. Weekly 4. Daily or almost daily
SU10	During the past year, have you failed to do what was normally expected of you because of drinking?	1. Yes 2. Never
SU11	If yes to SU10, how often	1. Less than monthly 2. Monthly 3. Weekly 4. Daily or almost daily
SU12	During the past year, have you needed a drink in the morning to get Yourself going after a heavy drinking session?	1. Yes 2. No
SU13	If yes to SU12, how often?	1. Less than monthly 2. Monthly 3. Weekly 4. Daily or almost daily
SU14	During the past year, have you had a feeling of guilt or remorse after drinking?	1. Yes 2. Never
SU15	If yes to SU14, how often?	1. Less than monthly 2. Monthly 3. Weekly 4. Daily or almost daily
SU16	During the past year, have you been un able to	1. Yes

	remember what happened the night before because you had been drinking?	2. Never
SU17	If yes to SU16, how often?	1. Less than monthly 2. Monthly 3. Weekly 4. Daily or almost daily
SU18	Have you or someone else been injured as a result of your drinking?	1. Yes 2. No
SU19	If yes to SU18, when?	2. But not in the last year 4. During the last year
SU20	Has a relative or friend, doctor or other health worker been concerned about your Drinking or suggested you cut down?	1. Yes, 2. No
SU21	If yes to SU20, when?	2. But not in the last year 4. During the last year
SU22	How often do you smoke Cigarette?	1. Never-skip to question number SU24 2. Monthly or less 3. Two to four times a month 4. Two to three times a week 5. Four or more times a week
SU23	When did you smoke Cigarette for the last time?	1. One or more months back 2. 2-4 weeks back 3. Within this two weeks
SU24	How often do you smoke Shisha?	1. Never-skip to question number SU26 Monthly or less 2. Two to four times a month 3. Two to three times a week 4. Four or more times a week
SU25	When did you smoke Shisha for the last time?	1. One or more months back

		2. 2-4 weeks back 3. Within this two weeks
SU26	How often do you use Ganja?	1. Never-skip to question number SU28 Monthly or less 2. Two to four times a month 3. Two to three times a week 4. Four or more times a week
SU27	When did you use Ganja for the last time??	1. One or more months back 2. 2-4 weeks back 3. Within this two weeks
SU28	Specify if you use other psychoactive substance or medication?	_____
SU29	How often do you use specified psychoactive substance or medication?	1. Monthly or less 2. Two to four times a month 3. Two to three times a week 4. Four or more times a week
SU30	When did you use specified psychoactive substance or medication for the last time?	1. One or more months back 2. 2-4 weeks back 3. Within this two weeks

PART.8. Question to assess Negative life events

Instruction 8: This Question is about Negative life events. Please circle the option that represents your experience and write appropriate answer on the space.

No	Negative life events	Response
NLE1	Have you ever been hit by a sexual partner?	1. Yes 2. No
NLE 2	Have you ever been forced to have sex?	1. Yes 2. No
NLE 3	Have you ever been hit, slapped, kicked, or otherwise physically hurt by someone during	1. Yes 2. No

	childhood?	
NLE 4	Have you ever experienced one of the following during childhood? You may encircle more than one choice.	<ol style="list-style-type: none"> 1.Never 2.Incest 3.Penetrative sex or rape 4.Others intentionally engaged in sexual activity in front of you 5. Encouraging you to engage in prostitution.
NLE 5	Have you ever experienced one of the following acts which diminished the sense of your identity, dignity, and self-worth by someone during childhood? You may encircle more than one choice.	<ol style="list-style-type: none"> 1.Never 2.Confinement(Detention) 3.Isolation(seclusion) 4.Verbal assault(Verbal attack) 5.Humiliation(embarrassment) 6.Intimidation(terrorization) 7.Infantilization(Being treated as child when you are not) 8. Specify any other treatment.....
NLE6	Have you ever had one of the following deficits in meeting your basic needs from others during childhood? You may encircle more than one choice.	<ol style="list-style-type: none"> 1.Never 2.Basic physical health care 3.Supervision 4. Nutrition 5.Emotional 6.Education 7.Safe housing
NLE 7	Have you ever witnessed parental violence (An act of aggression as one against a person who resists)?	<ol style="list-style-type: none"> 1.Yes 2.No
NLE 8	Have you ever out migrated of birth country?	<ol style="list-style-type: none"> 1.Yes 2.No
NLE 9	Are your parents alive now?	<ol style="list-style-type: none"> 1.Yes

		2.No
NLE 10	If your answer to question number NLE9 is No who is Dead?	1.Father 2.Mother
NLE 11	If your answer to question number NLE9 is No how old are you at that time (at death time)?
NLE 12	Did you have multiple caretakers in you early life?	1.Yes 2.No

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መጠይቅ

የፍቃድኝነት እና የመረጃ ቅጽ/ገጽ

የአዕምሮ ህመም ያለባቸው ወጣቶች በግዜ ህመሙ እንዳለባቸው ካልታወቁ እና በአግባቡ ህክምና ካላገኙ በከፍተኛ ደረጃ ጤናቸው ይቃወሳል፡፡ ስለዚህ የዚህ ጥናት ውጤት በመማር ላይ ለሚገኙ እና ለተመራቂ ተማሪዎች ወደፊት ስኬታማ ህይወት እንዲኖራቸው ጠቀሜታው እጅግ የጎላ ነው፡፡ ከዚህም በተጨማሪም በመካከላቸው ጥናቱ በሚያተኩርባቸው የአዕምሮ ህመም የሚጠቁ ተማሪዎች ካሉ በፍጥነት አስፈላጊውን የጤና እርዳታ እንዲያገኙ እና ትምህርታቸውን እንዲቀጥሉ ይረዳል፡፡ ይህንን ጥናት የምናካሂደው ተማሪዎች በአዕምሮ ህክምና ትምህርት ክፍል ውስጥ የምገኝ ተመራቂ ተማሪ ስምን ለድህረ ምረቃ ዲግሪ ማሟያነት ያገለግላኛል፡፡ የዚህ ጥናት ዋና አላማ የድብርት (Depression) ጤና እክልና ተዛማጅ ናቸው ተብለው የሚታሰቡ ችግሮች ከድብርት ጋር ያላቸውን ግድግዳ በጅም ዩኒቨርሲቲ ዋና ግቢ በቅድመ ምረቃ መርህ ግብር የሚማሩ ተማሪዎች በ 2016 ዓ.ም ላይ ማጥናት ነው፡፡

መጠይቁን ለመሙላት የሚያደርጉት ተሳትፎ ሙሉ በ ሙሉ በፍቃድኝነቱ ላይ የተመሰረተ ነው፡፡ መመለስ የማይፈልጉትን ጥያቄዎችን መዝለል/አለመመለስ ይቻላሉ ወይም በተለያዩ ምክንያቶች የተነሳ የጥናቱ መጀመሪያ ላይ እንዲሁም መጠይቁን መሙላት ከጀመሩ በኋላ መሳተፍ ካልፈለጉ መጠይቁን መሙላት ማቋረጥ እና በጥናቱ ላይ አለመሳተፍ ይቻላሉ፡፡ መጠይቁን በታማኝነት በመሙላት የሚያደርጉት ትብብር ትክክለኛ ውጤት እንዳገኝ ይረዳኛል፡፡ ምክንያቱም የሚሰጡኝ መረጃ ከአገር ጥቅም አንፃር ሲታይ በዋጋ የማይታመን መሆኑን ልገልጽለት እወዳለሁ፡፡ ይህም ለወደፊት አስፈላጊ የሆነ ቅድመ ጥንቃቄ እንዲደረግ ለሚመለከታቸው አካላት ለመጠቀም ይረዳኛል፡፡ ስለዚህ መጠይቁን ለራስዎ ታማኝ ሆነው እንዲሞሉት እጠይቃለሁ፡፡ መጠይቁ ላይ ለመረዳት የሚከብዱ ጥያቄዎች ካሉ ግልጽ እንዲሆንልዎት መጠየቅ ይቻላሉ፡፡ በተጨማሪም እርሶ የሚሰጡኝ መረጃ በሀገሪቱ ውስጥ ያሉ ወጣቶች አስፈላጊውን የጤና እርዳታ እንዲያገኙ ይረዳቸዋል፡፡

ስሞዎን በመጠይቁ ላይ ፈፅሞ አይጻፍም/ አይጽፉም፡፡ በ ጥናቱ ላይ ማን እንደተሳተፈ አይታወቅም፡፡ እርሶ ለጥያቄዎች ያደረጉት ምላሽ የሚታወቀው በተሰጠው መለያ መሰረት ብቻ ይሆናል፡፡ የሚሰጡኝ መረጃ ሚስጥራዊነቱ የተጠበቀ ይሆናል፤ የጥናቱም ውጤት በአጠቃላይ እንጂ በግለሰብ ደረጃ አይወጣም፡፡

በጥናቱ ለመሳተፍ ፈቃደኛ ናዎት?	ሀ. አዎ	ለ. አይደለሁም
ለተሳትፎዎ እና መሰግናለን፡፡		
መጠይቁን ያስሞላው ሰው ስም	-----	-----
የተቆጣጣሪ ስም	-----	-----

ክፍል-1: የስነ መሀበራዊ እና ስነ ህዝብ መለያ መጠይቅ

መመርያ 1: ይህ የስነ መሀበራዊ እና ስነ ህዝብ መለያ መጠይቅ ነው። እባክዎ እርሶዎን የሚወክለውን ምርጫ ያክብቡ እንዲሁም ተገቢውን መልስ በባዶ ቦታው ላይ ይሙሉ።

ቁጥር	የስነ መሀበራዊ እና ስነ ህዝብ መለያ መረጃ	መልስ
BG1	እድሜ	_____
BG2	ፆታ	1. ወንድ 2. ሴት
BG3	የትምህርት ሁኔታ:	6. ያገባ (ች) 2. ያላገባ (ች) 3. የፈታ (ች) 4. የተለያየ (ች) 5. የሞተበት (ባት)
BG4	ብሄር:	1. አሮሞ 2. አማራ 3. ትግሬ 4. ጉራጌ 5. የም 6. ሌላ ከሆነ ይግለጹ _____
BG5	ሀይማኖት	1. ሙስሊም 2. ኦርቶዶክስ 3. ፕሮቴስታንት 4. ካቶሊክ 5. ሌላ ከሆነ ይግለጹ _____
BG6	በልጅነት ጊዜዎ የት ነበር የሚኖሩት?	1. ገጠር 2. ከተማ

ክፍል-2: የወላጅ ቤተሰብ የስነ መሀበራዊ እና ምጣኔ ሀብት መለያ መጠይቅ

መመርያ 2: ይህ የወላጅ የስነ መሀበራዊ እና ምጣኔ ሀብት መለያ መጠይቅ ነው። እባክዎ የእርሶዎን ወላጅ የሚወክለውን ምርጫ ያክብቡ እንዲሁም ተገቢውን መልስ በባዶ ቦታው ላይ ይሙሉ።

ቁጥር	የወላጅ የስነ መሀበራዊ እና ምጣኔ ሀብት መረጃ	መልስ
PSF1	የወላጅዎ አመካጃ የወር ገቢ መጠን ስንት ይሆናል ብለው ይገምታሉ?	_____ ብር
PSF2	በወር ባጠቃላይ ስንት የኪስ ብር ይላክሎታል?	_____ ብር
PSF3	የ እናትዎ የትምህርት ደረጃ	1. ያልተማረች ወይም 0 ክፍል 2. የመጀመሪያ ደረጃ ወይም 1-8 ክፍል 3. የሁለተኛ ደረጃ ወይም ከ9-12 ክፍል 4. ዩኒቨርሲቲ
PSF4	የአባትዎ የትምህርት ደረጃ	1. ያልተማረ ወይም 0 ክፍል 2. የመጀመሪያ ደረጃ ወይም 1-8 ክፍል

		3.የሁለተኛ ደረጃ ወይም ከ9-12 ክፍል
		4. ዩኒቨርሲቲ
PSF5	የእናት ና አባትዎ ግንኙነት ምን ይመስላል?	1. ጥሩ ወይም መልካም 2. መካከለኛ/ደህና 3. መጥፎ ወይም መልካም ያልሆነ
PSF6	በቤተሰብው ውስጥ የአእምሮ ህመም ያለበት ሰው አለ?	1. አዎ 2.የለም
PSF8	ለጥያቄ ቁጥር PSF6 መልስዎት አዎ ከሆነ በቤተሰብዎ ውስጥ የአእምሮ ህመም ያለበት ሰው መኖሩን ከየት ሰሙ?	1. ከ ዘመናዊ ጤና ተቋም 2. ከበሃላዊ ህክምና ሰጪዎች 3.ሌላ ካለ ይግለጹ _____
PSF9	እርስዎ ስር የሰደደ የአካል ህመም አምዎት ያውቃል?	1. አዎ 2.የለም
PSF10	ለጥያቄ ቁጥር PSF9 መልስዎት አዎ ከሆነ እባክዎ የህመሙን አይነት ይግለጹ/ይጥቀሱ?	_____

ክፍል-3:የትምህርት ነክ መረጃ መጠይቅ

መመርያ 3:ይህ የትምህርት ነክ መረጃ መጠይቅ ነው።እባክዎ እርሶዎን የሚወክለውን ምርጫ ያክብቡ እንዲሁም ተገቢውን መልስ በባዶ ቦታው ላይ ይሙሉ።

ቁጥር	የትምህርት ነክ መረጃ መጠይቅ	መልስ
AI1	ኮሌጅ	_____
AI2	የትምህርት ዘርፍ (ዲፓርትመንት)	_____
AI3	የትምህርት ደረጃ	1. አንደኛ ዓመት 2. ሁለተኛ ዓመት 3.ሶስተኛ ዓመት 4.ዐራተኛ ዓመት 5.አምስተኛ ዓመት
AI 4	የትምህርት ጫና አለቦዎት?	1. አዎ 2.አይደለም
AI 5	የትምህርት ብቃት ወይም ውጤት።እባክዎትን የባላፋት ሁለት ሴሚስቴር አማካይ ውጤት ይጥቀሱ።	1. የ2007 ሁለተኛ ሴሚስቴር አማካይ የትምህርት ውጤት _____ 2. የ2008 የአንደኛ ሴሚስቴር አማካይ የትምህርት ውጤት _____
AI6	በዋናነት በሚያጠኑት የትምህርት አይነት ያለዎት ደስተኝነት ምን ይመስላል?	1. ጥሩ ወይም መልካም 2. መካከለኛ/ደህና 3.ዝቅተኛ ወይም መልካም ያልሆነ
AI7	የፈተና መርሃ ግብር ጫና መብዛት አለቦዎት?	1. አዎ 2.አይደለም

ክፍል-4:ቤክ የድብርት ህመም መለያ መጠይቅ

መመርያ 4:ይህ መጠይቅ 21 ጥያቄ የያዘ ሲሆን እያንዳንዱ መላሽ በጥንቃቄ በማንበብ በያንዳንዱ ግሩፕ ውስጥ ካሉት ዝርዝር እርሶዎን ሊገልጽ የሚችለውን ማለትም ባለፉት ሁለት ሳምንታት የሚሰማዎትን (ዛሬን ጨምሮ) ፊት ለፊት ያለውን ቁጥር በማክበብ ይግለጹ።ሆኖም በሰንጠረዥ ውስጥ ከአንድ በላይ የሚሰማዎትን ክፍተኛ የሆነ ምርጫ ያለውን ቁጥር ያክብቡ ከ 1 በላይ መልስ ያለ መምረጥዎትን ያረጋግጡ።

ማሳሰቢያ:-በዚህ ጥናት ውስጥ ከሚሳተፉ ተማሪዎች መካከል አንዳንዶቹ ምናልባትም በዚህ የመረጃ መሰብሰቢያ ቅጽ ውስጥ የተጠቀሱ ችግሮች ሊገኝባቸው ይችላሉ ይሆናል ብዬ አስባለሁ። እነዚህም ተማሪዎች በግል አነጋግረውኝ እርዳታ የሚያገኙበትን መንገድ በእኔ በኩል የተዘጋጀ ስለሆነ እንዲያነጋግሩኝ አሳስባለሁ። ይህም ልክ እንደ መጠይቁ ምስጢራዊ ይሆናል።እነዚህን ተማሪዎች የህክምና እርዳታ እንዲያገኙ ሳይጠቁሙ ለጥናት ብቻ ተጠቅሞ መሄድ ካንድ ተመራማሪ የማይጠበቅ እና ስነምግባር የጎደለው ተግባር መሆኑ ይታወቃል።ስለዚህ እነዚህን የህክምና እርዳታ የሚያስፈልጋቸውን ተማሪዎችን ብቸኛው ማግኛ መንገድ አሁን ያለንበት ክፍል አራት ቤክ የድብርት (Depression) መለያ ላይ ባለው ውጤት ነው። ስለዚህ በክፍል አራት ላይ ያሉትን ጥያቄዎች ድምር ባለው ክፍት ቦታ ላይ እንዲሞሉ እጠይቃለሁ።የደመሩት ውጤት ከ20 በላይ ከሆነ እና በጥያቄ ተራ ቁጥር BD9 የመረጡት መልስ 1፣2፣3 ከሆነ የህክምና እርዳታ ስለሚያስፈልጉት በ ስልክ ቁጥር 0910058532 አቶ ጉተማ አህመድ ወይም 0910107507 አቶ ዮናስ ተስፋዬ ብለው በመደወል እርዳታ ማግኘት ይችላሉ።

ቁጥር	ቤክ ድብርት ህመም መለያ	መልስ
BD1	የሀዘን (የመከፋት) ስሜት -በማያውቁት ምክንያት	0 የሀዘን (የመከፋት) ስሜት አይሰማኝም 1 አብዛኛውን ጊዜ የሀዘን (የመከፋት) ስሜት ይሰማኛል. 2 ሁሌም የሀዘን (የመከፋት) ስሜት ይሰማኛል 3 መቋቋም በማልቸለው መጠን ክፍተኛ የሀዘን (የመከፋት) ወይም ደስተኛ ያለመሆን ስሜት ይሰማኛል
BD2	ጨለምተኝነት /መጥፎ ነገር ብቻ አለ ወይም ይመጣል (ይደርሳል) ብሎ ማሰብ	0 ለወደፊት ህይወት ያቀድኳቸው አቅዶች ይደናቀፋሉ (ስኬታማ አይሆኑም) ብዬ አላስብም 1 ከበሬቱ በበለጠ ባሁኑ ወቅት የወደፊት ህይወቴ ስኬታማ እንደሚሆን ይሰማኛል 2 ነገሮች ለእኔ ይሳኩኛል ብዬ አልጠብቅም 3 በወደፊት ህይወቴ እድለቢስ የሆነኩ እና ከዚህም የሚብስ እንደሚሆን ይሰማኛል
BD3	ያለፈው ጊዜ ህይወት አለመሳካት (ውድቀት)	0 የከዚህ በፊት ህይወቴ በውድቀት የተሞላ ነው የሚል ስሜት የለኝም 1 ከምንምተው በላይ ውድቀት ደርሶብኛል 2 የቀድሞ ህይወቴን ወደኋላ ዞርብዬ ስመለከት ብዙ ውድቀቶች ይታዩኛል 3 ህይወቴ በሙሉ በውድቀት የተሞላ አንደሆነ ይሰማኛል
BD4	የደስተኝነት መጥፋት ስሜት	0 ከዚህ በፊት ደስታ የሚሰጡኝ ነገሮች አሁንም ደስታን ይሰጡኛል 1 ከዚህ በፊት ደስታ የሚሰጡኝ ነገሮች እንደቀድሞ ደስታ እየሰጡኝ አይደሉም

		<p>2 ከዚህ በፊት በምደባትባቸው ነገሮች አሁን እጅግ በጣም ጥቂት ደስታ ነው የማገኘው</p> <p>3 ከዚህ በፊት ደስታን የሚሰጡኝ ነገሮች አሁን ምንም ደስታ አይሰጡኝም</p>
BD5	የመፀፅ ስሜት	<p>0 ምንም አይነት የመፀፅ ስሜት አይሰማኝም</p> <p>1 ከዚህ በፊት ማድረግ ሳይኖርብኝ በደረግኳቸው ወይም ማድረግ የሚገባኝን ብዙ ነገሮች ባለማድረግ የመፀፅ ስሜት ይሰማኛል</p> <p>2 በአብዛኛው ጊዜ በመጠኑ የመፀፅ ስሜት ይሰማኛል</p> <p>3 ሁልጊዜ ጊዜ የመፀፅ ስሜት ይሰማኛል</p>
BD6	የመቀጣሁ ስሜት (በሆነ ሀይል)	<p>0 እየተቀጣሁ መሆኔ አይሰማኝም</p> <p>1 እየተቀጣሁ ሊሆን ይችላል ብዬ አስባለሁ</p> <p>2 ቅጣት እንደሚጠብቀኝ አስባለሁ/እጠብቃለሁ</p> <p>3 እየተቀጣሁ አንደሆነ ይሰማኛል</p>
BD7	ራስን መጥላት	<p>0 ስለራሴ እንደ ድሮ ይሰማኛል</p> <p>1 በራሴ መተማመንን አጥቻለሁ</p> <p>2 በራሴ ቅር ተሰኝቻለሁ</p> <p>3 ራሴን ጠልቻለሁ</p>
BD8	ራስን መውቀስ ወይም መንቀፍ	<p>0 ከበፊቱ በተለየ ራሴን አልወቅስም ወይም አልነቅፍም</p> <p>1 ከበፊቱ በበለጠ ራሴን ወቅሳለሁ፡፡ነቅፋለሁ</p> <p>2 ለሁሉም ሰህተቶቼ አራሴን ወቅሳለሁ፡፡ነቅፋለሁ</p> <p>3 በተከሰቱት መጥፎ ነገሮች በጠቅላላ ራሴን ወቅሳለሁ፡፡ነቅፋለሁ</p>
BD9	እራስን የማጥፋት ሀሳብ ወይም ምኞት	<p>0 እራሴን የማጥፋት ምንም ሀሳብ የለኝም</p> <p>1 እራሴን ለማጥፋት አስባለሁ ግን አላደርግም ወይም አልፈፅምም</p> <p>2 እራሴን ባጠፋ ይሻለኛል</p> <p>3 እድል ባገኝ አራሴን ከማጥፋት ወደኋላ አልልም</p>
BD10	ማልቀስ	<p>0 ከዚህ በፊት ከማለቅሰው በላይ አላለቅስም</p> <p>1 ከዚህ በፊት ከማለቅሰው በላይ አለቅሳለሁ</p> <p>2 በጥቃቅን አሉታዊ ክስተቶች/ነገሮች አለቅሳለሁ</p> <p>3 አልቅሼ እንዲወጣልኝ እፈልጋለሁ ግን ፈፅሞ አይቻለኝም</p>
BD11	መቁነጥነጥ/መቅበጥ በ ጥ/እረፍት ማጣት	<p>0 ከዚህ በፊት ከነበረው በተለየ አልቁነጥነጥም/አልቅበጠበጥም</p> <p>1 ከዚህ በፊት ከነበረው በበለጠ የመቁነጥነጥ/የመቅበጠበጥ ስሜት ይሰማኛል</p> <p>2 አንድ ቦታ ለመቀመጥ በሚያዳግት ሁኔታ አቁነጥነጥ/አቅበጠበጥ</p>

		3 በጣም ከመቁነጥነጤ/መቅበጥበጤ የተነሳ መንቀሳቀስ ወይም የሆና ነገር ማድረግ አለብኝ
BD12	የፍላጎት ማጣት	<p>0 በሌሎች ሰዎች ወይም ድርጊቶች ላይ ፍላጎት አላጣሁም</p> <p>1 በሌሎች ሰዎች ወይም ነገሮች ላይ ከዚህ በፊት ከነበረኝ የተወሰነ ፍላጎት አጥቻለሁ</p> <p>2 በሌሎች ሰዎች ወይም ነገሮች ላይ ከነበረኝ ፍላጎት አብዛኛውን (ፍላጎቴን) አጥቻለሁ</p> <p>3 በማንኛውም ነገር ላይ ፍላጎት ማግኘት አዳጋች ሆኖብኛል</p>
BD13	የመወሰን ወይም ውሳኔ የመስጠት ችግር	<p>0 ከዚህ በፊት ከነበረው በተመሳሳይ ሁኔታ ውሳኔ እሰጣለሁ</p> <p>1 ከዚህ በፊት ከነበረኝ በበለጠ ውሳኔ ለመስጠት እቸገራለሁ</p> <p>2 ከዚህ በፊት ከነበረው በበለጠ መልኩ ውሳኔ ለመስጠት በከፍተኛ ሁኔታ ተቸግሪያለሁ</p> <p>3 በማንኛውም ነገር ላይ ውሳኔ ለመስጠት ከበፊቱ ሁኔታ አቅቶኛል</p>
BD14	ዋጋቢነት ወይም የማልረባ ሰው ነኝ ብሎ ማሰብ	<p>0 ዋጋቢ ወይም የማልረባ ሰው ነኝ የሚል ስሜት አይሰማኝም</p> <p>1 ከዚህ በፊት እንደነበረው ተፋላጊ ወይም ጠቃሚ ሰው ነኝ ብዬ አላስብም</p> <p>2 ከሌሎች ሰዎች ጋር እራሴን ሳነፃፅር የበለጠ የማልረባ ሰው እንደሆንኩ ወይም የዋጋቢነት ስሜት ይሰማኛል</p> <p>3 ፍፁም (ሙሉ በሙሉ) የዋጋቢነት ስሜት ይሰማኛል</p>
BD15	የአቅም (ጉልበት) ማጣት	<p>0 ከዚህ በፊት የነበረኝን ያህል/የክል አቅም አሁንም አለኝ</p> <p>1 ከዚህ በፊት ከነበረኝ ያነሰ አቅም አለኝ</p> <p>2 ስራዎችን በተፈለገው መጠን ለማከናወን በቂ አቅም የለኝም</p> <p>3 ማንኛውንም ነገር ለመስራት አቅም የለኝም</p>
BD16	የእንቅልፍ መዛባት ስርአት	<p>0 የእንቅልፍ ስርአት መዛባት አላጋጠመኝም</p> <p>1 ከዚህ በፊት ከነበረኝ በዛም አነሰም እተኛለሁ</p> <p>2 ከዚህ በፊት ከነበረኝ በበለጠ ብዙ/ጥቂት እተኛለሁ</p> <p>3 አብዛኛውን የለሊትም ሆነ የቀን ጊዜ በእንቅልፍ አሳልፋለሁ ወይም ከቀድሞም 1-2 ሰአት ቀድሜ ከእንቅልፌ እነቃና እንቅልፍ መልሶ አይወስደኝም</p>
BD17	መሰሪያ/መነጫ/መነጫ	<p>0 ከዚህ በፊት ከነበረው በበለጠ ሁኔታ ብስጩ/ነጭናጫ አይደለሁም</p> <p>1 ከዚህ በፊት ከነበረው በላይ ብስጩ/ነጭናጫ ነኝ</p> <p>2 ከዚህ በፊት ከነበረው በላይ አጅግ ብስጩ/ነጭናጫ ነኝ</p> <p>3 ሁሌም ብስጩ/ነጭናጫ ነኝ</p>
BD18	የምግብ ማጣት መዛባት	0 የምግብ ፍላጎቴ ተለዋውጦ አይውቅም

		1 የምግብ ፍላጎት ከተለመደው ከፍ ወይም ዝቅ ብሏል 2 የምግብ ፍላጎት ከመጠን በላይ ከፍ ወይም ዝቅ ብሏል 3 ከወትሮ እጅግ በበለጠ ምግብ ያስፈልገኛል ወይም ሙሉ በሙሉ የምግብ ፍላጎት ጠፍቷል
BD19	ሀሳብ የመሰብሰብ ወይም የቴክኒክ ችግር	0 እንደማንኛውም ጊዜ ሀሳቤን መሰብሰብ እችላለሁ 1 እንደቀድሞ ጊዜ ትኩረት ማድረግ አልችልም 2 አዕምሮዬን /ልቦናዬን/ ቀልቤን በአንዳንድ ጉዳዮች ላይ ለረጅም ጊዜ ማቆየት አልችልም 3 በምንም ነገር ላይ ትኩረቴን አሰባስቤ ማቆየት አልችልም
BD20	ድካም/መዛል	0 ከተለመደው በተለየ አይደክመኝም 1 ከተለመደው በተለየ በቀላሉ ይደክመኛል 2 ቀድሞ የማከናወናቸውን ብዙ ድርጊቶች ሳከናውን ከተለመደው በላይ በጣም ይደክመኛል 3 ቀድሞ የማከናወናቸውን አብዛኛውን ድርጊቶች ሳከናውን ከተለመደው በላይ እጅግ በጣም ይደክመኛል
BD21	የወሲብ መጥፋት ፍላጎት	0. በቅርቡ ምንም አይነት የወሲብ ፍላጎት መቀነስ አይታይብኝም 1. በፊት ከነበረው ሁኔታ የወሲብ ፍላጎት ቀንሷል 2. አሁን ያለኝ የወሲብ ፍላጎት በጣም ዝቅተኛ ነው 3. የወሲብ ፍላጎቴን ባሁን ጊዜ ባጠቃላይ አጥቻለሁ
Total score		

ክፍል-5: ለአደጋ የሚያጋልጡ ወሲባዊ በህሪያት መጠይቅ

መመርያ 5: ይህ አደጋ የሚያጋልጡ ወሲባዊ በህሪያት መጠይቅ ነው። እባክዎ እርሶዎን የሚወክለውን ምርጫ ያክብቡ እንዲሁም ተገቢውን መልስ በባዶ ቦታው ላይ ይሙሉ።

ቁጥር	ለአደጋ የሚያጋልጡ ወሲባዊ በህሪያት	መልስ
RSB1	በህይወትዎ የወሲብ አጋር ወይም ጉዋደኛ ኖሮዎት ያውቃል?	1. አዎ 2. አይደለም
RSB2	ለጥያቄ ቁጥር RSB1 መልስዎት አዎ ከሆነ በህይወትዎ ስንት የወሲብ አጋር ወይም ጉዋደኛ ኖሮዎት ያውቃል?	_____
RSB3	ወሲብ ሲፈፀሙ ኮንዶም ይጠቀማሉ?	1. አዎ 2. አይደለም
RSB4	ከወሲብ አጋርዎ ወይም ጉዋደኛዎት ጋር ወሲብ ሲፈጽሙ ኮንዶም ምን ያህል ጊዜ ይጠቀማሉ?	1. ሁል ጊዜ አጠቀማለሁ 2. አልፎ አልፎ አጠቀማለሁ 3. ለጥቂት ጊዜ

		ተጠቅሚያለሁ	
RSB5	የኤች ኣይ ቪ ህመም አለብኝ ብለው ተጨንቀው ያውቃሉ?	1. አዎ	2. አይደለም
RSB6	የኤች ኣይ ቪ ህመም አለብኝ ብለው ተጨንቀው የምክር አገልግሎት ባለሙያ ጋር ሂደው ያውቃሉ?	1. አዎ	2. አይደለም
RSB7	ህክምና ቦታ ሂደው ወይም በህኪም የኤች ኣይ ቪ ህመም አለብዎት ተብለው ያውቃሉ?	1. አዎ	2. አይደለም
RSB8	ህክምና ቦታ ሂደው ወይም በሃኪም ሌላ የአባላዘር ህመም አለብዎት ተብለው ያውቃሉ?	1. አዎ	2. አይደለም
RSB9	ለጥያቄ ቁጥር RSB10 መልስዎት አዎ ከሆነ በህክምና ቦታ ሂደው ወይም በሃኪም አለብዎት የተባለውን የአባላዘር ህመም ይጥቀሱ።		
RSB10	አስካሪ መጠጥ ከጠጡ ቡጎላ ወሲብ ፈጽመው ያውቃሉ?	1. አዎ	2. አይደለም

ክፍል 6 : የማህበራዊ ግንኙነት መጠይቅ

መመርያ 6 : ከዚህ በመቀጠል የሚመጡት ሦስት ጥያቄዎች የእርስዎን እና የግል ተሞክሮዎን ይመለከታሉ። እባክዎትን የእርስዎን የግል ተሞክሮ የሚመለከተውን ምርጫ ብቻ በማክበብ ይተባበሩን።

ቁጥር	የማህበራዊ ግንኙነት መጠይቅ	መልስ
SSQ1	ምን ያህል ሰው አደጋ (ችግር) በሚያጋጥሙት ጊዜ በቅርብ የችግርዎ ተካፋይ ሊሆኑልዎት ይችላሉ? (አንድ ምርጫ ብቻ ያክብቡ)	<ol style="list-style-type: none"> 1. ምንም 2. 1 ወይም 2 3. 3-5 4. ከ 5 በላይ
SSQ2	ምን ያህል ሰው ስለ እርስዎ ድርጊት ግድ ይለዋል? (አንድ ምርጫ ብቻ ያክብቡ)	<ol style="list-style-type: none"> 5. ብዙ 4. ጥቂት 3. አርግጠኛ አይደለሁም 2. በጣም ትንሽ 1. ምንም
SSQ3	ከ ጎደኞችዎ ወይም አብረው የጋራ መኝታ ቤት ከሚጋሩዎቻቸው ሠዎች ተጨባጭ እርዳታ የማግኘት እድልዎ ምን ያህል ነው? (አንድ ምርጫ ብቻ ያክብቡ)	<ol style="list-style-type: none"> 5. በጣም ቀላል 4. ቀላል 3. መጠነኛ 2. ከባድ 1. በጣም ከባድ

ከፍል-7:የእፅ አጠቃቀም መረጃ መጠይቅ

መመርያ 7:ይህ የእፅ አጠቃቀም መረጃ መጠይቅ ነው።እባክዎ እርሶዎን የሚወክለውን ምርጫ ያከብቡ እንዲሁም ተገቢውን መልስ በባዶ ቦታው ላይ ይሙሉ።

ቁጥር	እፅ አጠቃቀም	መልስ
SU1	ስንት ጊዜ ጫት ይጠቀማሉ ወይም ይቅማሉ?	1.በፍፁም ቅጫ አላውቅም (መልስዎት ከሆነ ወደ ጥያቄ ቁጥር SU3 ይለፉ) 2. በየወሩ ወይም ከዚያ በታች 3. በወር ውስጥ ከ2-4 ጊዜ 4.በሳምንት ውስጥ 2-3 ጊዜ 5. በሳምንት ውስጥ 4 ጊዜና ከዚያ በላይ
SU2	ለመጨረሻ ጊዜ ጫት የተጠቀሙት ወይም የቃሙት መቼ ነው?	1.አንድ ወር እና ከዚያ በፊት 2.ከሁለት-አራት ሳምንት በፊት 3.ባለፉት ሁለት ሳምንታት ውስጥ
SU3	እንደቢራ፣ ወይን፣ ጠላ፣ ጠጅ ፣አረቄ የመሳሰሉትን አልኮልንት ያላቸውን መጠጦች በየስንት ጊዜው ይጠጣሉ? (ቢያንስ በአመት በዓል ጊዜ እንኳን ጠላ አይጠጡም?)	0.በፍጹም አልጠጣም (መልስዎት ከሆነ ወደ ጥያቄ ቁጥር SU22 ይለፉ) 1. በየወሩ ወይም ከዚያ በታች 2. በወርከ 2-4 ጊዜ 3. በሳምንት ከ 2-3 ጊዜ 4. በሳምንት 4 ጊዜ እና ከዚያ በላይ
SU4	ምን አይነት መጠጥ ይመርጣሉ?	1. ቢራ 2. ወይን 3.ድራፍት 4.አረቄ 5.ጠጅ 6. ጠላ. 7.ሌላ ካለ ይግለፁ_____
SU5	ለመጨረሻ ጊዜ አስካሪ መጠጥ የተጠቀሙት ወይም የጠጡት መቼ ነው?	1.አንድ ወር እና ከዚያ በፊት 2.ከሁለት-አራት ሳምንት በፊት 3.ባለፉት ሁለት ሳምንታት ውስጥ
SU6	በሚጠጡበት ጊዜ በቀን በአማካይ ምን ያህል ይጠጣሉ?	1. ቢራ.....ጠርሙስ 2. ወይን (ትንሹ/ትልቁጠርሙስ) ----- 3. ድራፍት (ሲንግል/ጃምቦ) ----- 4. አረቄ (መለኪያ/ቡሽ)-----

		5. ጠጅ (ብርሌ/ጠርሙስ)----- 6. ጠላ (ጣሳ/ብርጭቆ)----- 7. ሌላ-----
SU7	በአንድ ጊዜ ብቻ ብዙ በጠጡበት አጋጣሚ ምን ያህል ጠጥተው ያውቃሉ /ይጠጣሉ ?	1. ቢራ (ጠርሙስ)----- 2. ወይን (ትንሹ/ትልቁጠርሙስ)----- 3. ድራፍት (ሲንግል/ጃምቦ)----- 4. አረቄ (መለኪያ/ቡሽ)----- 5. ጠጅ (ብርሌ/ጠርሙስ)----- 6. ጠላ (ጣሳ/ብርጭቆ)----- 7. ሌላ-----
SU8	ባለፈው አመት ውስጥ መጠጣት ለማቆም ወስነው ሳይሳካልዎት የቀረዎት ጊዜ አለ?	1. አዎ 2. በፍጹም
SU9	ካለ በየሰንት ጊዜው ያጋጥምዎታል?	1. ከአንድ ወር በታች 2. በየወሩ 3. በየሳምንቱ 4. በየቀኑ/ብዙ ጊዜ
SU10	ባለፈው አመት ውስጥ በመጠጣት ምክንያት መስራት የሚገባዎትን ስራ ሳይሰሩ የቀሩበት ጊዜ አለ?	1. አዎ 2. በፍጹም
SU11	ካለ በየሰንት ጊዜው ያጋጥምዎታል?	1. ከአንድ ወር በታች 2. በየወሩ 3. በየሳምንቱ 4. በየቀኑ/ብዙ ጊዜ
SU12	ባለፈው አመት ውስጥ ማታ ብዙ ጠጥተው በማግስቱ የእለት ተእለት ስራዎትን በንቃት ለማካሄድ በጠዋት መጠጣት አስፈልጎዎት ያዉቃል?	1. አዎ 2. በፍጹም
SU13	ካለ በየሰንት ጊዜው ያጋጥምዎታል?	1. ከአንድ ወር በታች 2. በየወሩ 3. በየሳምንቱ 4. በየቀኑ/ብዙ ጊዜ
SU14	ባለፈው አመት ውስጥ በመጠጣት ምክንያት የመፀፀትና ራስዎን የመወቀስ ስሜት ተሰምቶዎት ያዉቃል?	1. አዎ 2. በፍጹም

SU15	ካለ በየሰንት ጊዜው ያጋጥምዎታል?	<ol style="list-style-type: none"> 1. ከአንድ ወር በታች 2. በየወሩ 3. በየሳምንቱ 4. በየቀኑ/ብዙ ጊዜ
SU16	ባለፈው አንድ አመት ጊዜ በመጠጣትዎ ምክንያት በእለቱ የተፈጠሩትን ነገሮች ማስታወስ ተስኖዎት ያዉቃል?	<ol style="list-style-type: none"> 1. አዎ 2. በፍጹም
SU17	ካለ በየሰንት ጊዜው እንደዚህ አይነት ነገር ያጋጥምዎታል?	<ol style="list-style-type: none"> 1. ከአንድ ወር በታች 2. በየወሩ 3. በየሳምንቱ 4. በየቀኑ/ብዙ ጊዜ
SU18	እርስዎ በመጠጣትዎ ምክንያት በርስዎ ወይም በሌላ ሰው ላይ ጉዳት ደርሶ ያዉቃል?	<ol style="list-style-type: none"> A. አያዉቅም B. አዎ
SU19	መልሶዎት አዎ ከሆነ መቼ?	<ol style="list-style-type: none"> 2. ከአንድ አመት በፊት 4. በአንድ አመት ዉስጥ
SU20	ጓደኛ፣ዘመድ ወይም ሀኪም ስለ እርስዎ መጠጣት አሳስቦት ወይም መጠጣት አንዲያቆሙ መክሮዎት ያዉቃል?	<ol style="list-style-type: none"> 1. አያዉቅም 2. አዎ
SU21	መልሶዎት አዎ ከሆነ መቼ?	<ol style="list-style-type: none"> 2. ከአንድ አመት በፊት 4. በአንድ አመት ዉስጥ
SU22	በህይወትዎ ስንት ጊዜ ሲጋራ አጢሰው ያውቃሉ?	<p>0.በፍጹም አላጨስኩም (መልስዎት ከሆነ ወደ ጥያቄ ቁጥር SU24 ይለፉ)</p> <ol style="list-style-type: none"> 1.በየወሩ ወይም ከዚያ በታች 2. በወር ውስጥ ከ2-4 ጊዜ 3.በሳምንት ውስጥ 2-3 ጊዜ 4. በሳምንት ውስጥ 4 ጊዜ እና ከዚያ በላይ
SU23	ለመጨረሻ ጊዜ ሲጋራ ያጨሰት መቼ ነው?	<ol style="list-style-type: none"> 1.አንድ ወር እና ከዚያ በፊት 2.ከሁለት-አራት ሳምንት በፊት 3.ባለፉት ሁለት ሳምንታት ውስጥ
SU24	በህይወትዎ ስንት ጊዜ ሺሻ አጢሰው ያውቃሉ?	<p>0.በፍጹም አልጠጣም (መልስዎት ከሆነ ወደ ጥያቄ ቁጥር SU26 ይለፉ)</p> <ol style="list-style-type: none"> 1.በየወሩ ወይም ከዚያ በታች 2. በወር ውስጥ ከ2-4 ጊዜ

		3. በሳምንት ውስጥ 2-3 ጊዜ 4. በሳምንት ውስጥ 4 ጊዜና ከዚያ በላይ
SU25	ለመጨረሻ ጊዜ ሺሻ ያጨሰት መቼ ነው?	1. አንድ ወር እና ከዚያ በፊት 2. ከሁለት-አራት ሳምንት በፊት 3. ባለፉት ሁለት ሳምንታት ውስጥ
SU26	ስንት ጊዜ ጋንጃ ተጠቅመው ያውቃሉ?	0. በፍጹም አልጠጣም (መልስዎት ከሆነ ወደ ጥያቄ ቁጥር SU28 ይለፉ) 1. በየወሩ ወይም ከዚያ በታች 2. በወር ውስጥ ከ2-4 ጊዜ 3. በሳምንት ውስጥ 2-3 ጊዜ 4. በሳምንት ውስጥ 4 ጊዜና ከዚያ በላይ
SU27	ለመጨረሻ ጊዜ ጋንጃ የተጠቀሙት መቼ ነው?	1. አንድ ወር እና ከዚያ በፊት 2. ከሁለት-አራት ሳምንት በፊት 3. ባለፉት ሁለት ሳምንታት ውስጥ
SU28	በህይወትዎ ሌላ አደንዛኝ እጽ ወይም መድሃኒት ተጠቅመው ካወቁ አባክዎትን ይጥቀሱ?	
SU29	ስንት ጊዜ የጠቀሱትን አደንዛኝ እጽ ወይም መድሃኒት ተጠቅመው ያውቃሉ?	1. በየወሩ ወይም ከዚያ በታች 2. በወር ውስጥ ከ2-4 ጊዜ 3. በሳምንት ውስጥ 2-3 ጊዜ 4. በሳምንት ውስጥ 4 ጊዜና ከዚያ በላይ
SU30	ለመጨረሻ ጊዜ የጠቀሱትን አደንዛኝ እጽ ወይም መድሃኒት የተጠቀሙት መቼ ነው?	1. አንድ ወር እና ከዚያ በፊት 2. ከሁለት-አራት ሳምንት በፊት 3. ባለፉት ሁለት ሳምንታት ውስጥ

ክፍል-8: በህይወት የሚያጋጥሙ አሉታዊ ክስተቶች መጠይቅ

መመርያ 8: ይህ በህይወት የሚያጋጥሙ አሉታዊ ክስተቶች መጠይቅ ነው። እባክዎ እርሶዎን የሚወክለውን ምርጫ ያክብቡ እንዲሁም ተገቢውን መልስ በባዶ ቦታው ላይ ይሙሉ።

ቁጥር	በህይወት የሚያጋጥሙ አሉታዊ ክስተቶች	መልስ
NLE1	በወሲብ አጋርዎ ወይም ጓደኛዎት ተመተው ወይም ተደብድበው ያውቃሉ?	1. አዎ 2. አይደለም
NLE 2	ያለፍላጎቶዎ ወሲብ እንዲፈጽሙ ተገደው	1. አዎ 2. አይደለም

	ያውቃሉ?	
NLE 3	በልጅነትዎ በሰዎች ተደብድበው፣ በጥሬ ተመተው፣ በግር ተረግጠው፣ አካላዊ ጥቃት ወይም ጉዳት ደርሶብዎት ያውቃል?	1. አዎ 2. አይደለም
NLE 4	በልጅነትዎ በሰዎች ከዚህ በታች የተጠቀሱት ጥቃቶች ደርሶብዎት ያውቃል? ከአንድ በላይ ምርጫ መምረጥ ይችላሉ።	1. በፍፁም ደርሶብኝ አያውቅም 2. ከዘመድ ጋር የግብረ ስጋ ግኑኝነት መፈፀም 3. በህይወት ወሲብ እንዲፈፀሙ መደረግ ወይም አስገድዶ መደፈር 4. ሌሎች ሰዎች ሆን ብለው ከርሶ ፊትለፊት ወሲብ መፈፀም 5. ሴተኛ አዳሪ ሆነው እንዲሰሩ እርሶን ማበረታታት
NLE 5	በልጅነትዎ በሰዎች ከዚህ በታች ከተጠቀሱት የርሶን ማንነትዎን፣ ከብርዎን የሚቀንስ ቃል ወይም ድርጊት ደርሶብዎት ያውቃል? ከአንድ በላይ ምርጫ መምረጥ ይችላሉ።	1. በፍፁም ደርሶብኝ አያውቅም 2. ታፍኖ መዋል/መታገት 3. መገለል 4. የቃላት ጥቃት 5. መዋረድ 6. ዛቻ ወይም ማስፈራራት 7. በሰዎች ዘንድ አድገው ሳለ አሁንም እንደ ህፃን መታየት 8. ሌላ ጥቃት ካለ ይጥቀሱ _____
NLE6	በልጅነትዎ በሰዎች ከዚህ በታች ከተጠቀሱት መሰረታዊ ፍላጎቶች ያለመሟላት ወይም ቸል መባል ወይም ተወት መደረግ ኢንዱሁም መረሳት አጋጥመዎት ያውቃል? ከአንድ በላይ ምርጫ መምረጥ ይችላሉ።	1. በፍፁም ደርሶብኝ አያውቅም 2. መሰረታዊ የጤና አገልግሎት ያለመሟላት 3. የቁጥጥር ማነስ 4. ምግብ አለመቅረብ 5. ስሜቶዎን አለመረዳት 6. ለትምህርት አስፈላጊ የሆኑትን ነገሮች ያለመሟላት 7. ደህንነቱ ያልተጠበቀ /የማያስተማምን መኖሪያ ቤት
NLE 7	ወላጅዎት ሲጋጩ ወይም ሲማቱ (ጠብ የመጫር ድርጊት ሌላኛው ሰው በሚከላከልበት ሁኔታ) አይተው ያውቃሉ?	1. አዎ 2. አይደለም
NLE 8	ከተወለዱበት አገር ተሰደው ያውቃሉ?	1. አዎ 2. አይደለም
NLE 9	ወላጅዎት አሁን በህይወት አሉ?	1. አዎ 2. አይደለም
NLE 10	ለጥያቄ ቁጥር NLE 9 መልስዎት	1. አባት

	አይደለም ከሆነ ማነው በሂይወት የሌለው? 2.እናት
NLE 11	ለጥያቄ ቁጥር NLE 9 መልስዎት 1. 11 ዓመት ወይም ከዚያ በታች አይደለም ከሆነ ወላጅዎት በሚያርፉበት 2. ከ11 ዓመት በላይ ጊዜ እድሜዎት ስንት ነበር?
NLE 12	ወላጅ ቤተሰብዎ በመሞታቸው ምክኒያት 1. አዎ በልጅነትዎ ብዙ የተለያዩ ሰዎች በሀላፊነት 2.አይደለም ተረክብዎት/ወስደዎት አሳድገውት ያውቃሉ?

Afan Oromo Version Questionnaire

Guca waligaltee

Dhibeen sammuu yeroo ammaa dargaggootaa fi shammarran irratti yeroodhaan barame yoo hin yaalamin sadarkaa olaanaadhaan dhukkuboota argaman keessaa isa tokko ta’a jedhame yaadama.Kanaafu bu’aan qu’anno kanaa barattoota ebbifamani fi isinifis kaayyo keessan galmaan ga’udhaaf ni fayyada akkasumas barattoonni dhibee kanaaf saaxilaman yoo jiraatan gargaarsa ogeessa fayyaa akka argatan ni goodhama.Qu’anno kana kan adeemsisuf barumsa sadarkaa maastarsi integrated clinical and community mental health galmaan ga’uf.Kaayyon qu’anno kanaa heeddumina dhibee mudanno gaddisisaa fi wantoota isa wajjin qunnamti qaban barattoota yunivarsiiti Jimmaa kaampaasi guddaa kan bara 2016 beekuu dha. Eyyamummaan fi haqummaan gaaffi kana guutuuf hirmaachun keessan bu’aa dhugaa ta’e naaf kenna akkasumas rakkoo kana furuf na qarqaara,kanaafu haqummaan akka hirmaattaan kabajaan isin gaafadha.Hirmaannan gaaffile kana guutuu fi qabiyyeen qu’anno kanaa guutumaa gututti feedhi keessan irratti kan murtaa’e dha.Gaaffile debisu hin barbaanne yoo jiraate irra darbu dandessu garu gargaarsa keessan ni barbaanna.Gaaffilen isinif hin galle yoo jiraate ibsa nu gaafachu dandessu.Sababa adda addaatiin qu’anno kanarratti yoo hirmaachu hin barbaanne yeroo kamittu addaan kutuu ni dandeessu haa ta’u malee hirmaannaan keessan kan qarshitti hin shallagamne fi karaa biroottiin namoota dhibee kanarraa rakko adda addaa dabarsaa jiran gargaaraa jiraachu keessan akka hubattan barbaanna. Qu’anno kanarratti goonkumaa maqaan keessan hin barraa’u akkasumas ragaan isin kennitan lakkofsa isinif kennameen addaan baafama.Ragaawwan isin kennitan goonkumaa nama birootti hin himamu/kennamu.Bu’aan qu’anno kanaa kan ibsamu waligalaan malee gonkuma dhunfaadhaan hin dhihaatuu/ibsamu.

Qoranno kana irratti hirmaachuf eyyamamo dha?

- 1. Eyyeen
- 2.Lakki

Maqaa to’ataa.....Mallatoo.....Guyyaa.....

Maqaa Dursaa Qoraticha.....Mallatoo.....Guyyaa.....

Kutaa 1^{ffaa}.Gaaffile dhimma hawaasumma fi enyummaa addaan baasan

Ajaja 1^{ffaa} Gaffile armaan gadi deebii filattan irra marsudhaan akkasumas gaffile tokko tokkof bakka duwwaa irratti gutudhan deebisaa

Lakk	Enyummaa fi hawaasumma	Deebii
BG1	Umri	_____
BG2	Saala	1. Dhiira 2. Dubara/Dhalaa
BG3	Haala maati/Sadarkaa fuudhaa fi heerumaa	1. Kan Fuudhe/Heerumtee 2. Kan Hin Fuune/ Heerumtee 3. Kan Walgadhise/te 4. Kan iddo adda addaa jiraatan 5. Kan abbaan ykn haati manaa jalaa du'e/te
BG4	Sabummaa	1. Oromoo 2. Amaara 3. Tigre Tigee 4. Gurage Guraage 5. Yem yam 6. kan biro yoo ta'e ibsii.....
BG5	Amantii	1. Muslima 2. Ortodoksii 3. Prootestaanti 4. Kaatooliki 5. Waaqeffataa 6. Kan biro yoo ta'e ibsii_____
BG6	Iddoon jireenyaa yeroo ijoolumma eessa ture?	1. Baadiyyaa 2. Magaalaa

Kutaa 2^{ffaa}.Gaaffile Waa'ee hawaasumma fi dinagde haadha fi Abbaa

Ajaja 2^{faa} Gaffile armaan gadi deebii filattan irra marsudhaan akkasumas gaaffile tokko tokkof bakka duwwaa irratti gutudhan deebisaa

Lakk	Waa'ee hawaasumma fi dinagde haadha fi Abbaa	Deebii
PSF1	Galii Maatii ji'a tokko jiddugaleessaa meeqa ta'a jette yaadda?	Birri _____
PSF2	Wali galaan ji'a tokko keessatti qarshin kiisaaf siif ergamu hammam ta'a?	Birri _____
PSF3	Sadarkaa barumsaa kan haadhaa	1. Kan hin baranne-waggaa 0 2. Sadarkaa 1 ^{ffaa} ykn Kuutaa 1-8 3. Sadarkaa lammaffaa ykn kutaa 9-12 4. Yunivarsitii
PSF4	Sadarkaa barumsaa kan Abbaa	1. Kan hin baranne-waggaa 0 2. Sadarkaa 1 ^{ffaa} ykn Kuutaa 1-6 3. Sadarkaa lammaffaa ykn kutaa 7-12 4. Yunivarsitii
PSF5	Walqunnamtin Haadhaa fi Abbaa kee giddu jiruu maal fakkaata?	1. Gaarii 2. Gidduu galessa 3. Badaa/hamaa/Xinnoo
PSF6	Maati kee keessa namni dhibee sammu qabu jiraa?	1. Eyyen 2. Lakki
PSF7	Deebiin gaaffi PSF6 Eyyeen yoo ta'e dhibee sammu ta'usaa eessa barte ykn hubatte?	1. Mana yaala hammayyaa 2. Mana yaalaa aadaa 3. Kan biro yoo jiraate barreessaa _____
PSF8	Maati kee keessa namni dhibee qaamaa qabu jiraa?	1. Eyyen 2. Lakki
PSF9	Deebiin gaaffi PSF8 Eyyeen yoo ta'e maqaa/gosa dhibee qaamaa barreessi?	

Kutaa 3^{faa} Gaaffilee Odeffanno Barumsaa

Ajaja 3^{ffaa} Gaffile armaan gadi deebii filattan irra marsudhaan akkasumas gaffile tokko tokkof bakka duwwaa irratti gutudhan deebisaa

Laakk	Gaaffilee Odeffanno Barumsaa	Deebii
AI1	Koollejji	_____
AI2	Dipaartimanti/Gosa barumsa Qoo’ataa/Barataa Jirtan	_____
AI 3	Waggaa turti barumsaa	1. 1 ^{ffaa} 2. 2 ^{ffaa} 3. 3 ^{ffaa} 4. 4 ^{ffaa} 5. 5 ^{ffaa}
AI 4	Hojiin barummsaa isinitti Baay’ataa ykn dhiibbaa barumsaa qabduu?	1. Eeyyee 2. Lakki
AI 5	Qabxii Baruumsaa-Bu’aa giddu galeessa seemisteeraa lamaan darbani barressaa	1. Bu’a semistara lammaffaa kan bara 2007 _____ 2. Bu’a semistara tokkoffaa kan bara 2008 _____
AI 6	Gosa barumsaa barataa jirtanif feedhin ykn Jaalalii isin qabdan maal fakkaata?	1. Gaarii 2. Gidduu galessa 3. Badaa/hamaa/Xinnoo
AI7	Sagantaa Qormataatiin dhipachun ykn dirqamni isinitti heedumaachun jiraa?	1. Eyyee 2. Lakki

Kutaa 4^{ffaa} Gaaffile Mudanno Gaddisaa Beek Diprashini Invariantii

Ajaja 4^{ffaa} Gaffile armaan gadi deebii filattan irra marsudhaan akkasumas gaaffile tokko tokkof bakka duwwaa irratti gutudhan deebisaa. Filanna caala filachuun hin danda’amu

Hubachiisa; Bu’aa qu’anno kanarraa namoota dhibe sammu gaddisaa qaban kan qarqaarsa ogeessa fayyaa dhibe sammu barbaadan ni arganna jenne yaanna dabalataan namoota kana qo’anno duwwaf fayyadamani oto qarqaarsa tokkolle hin godhiin dhiisuun seeraan fi akkuma namummaattu wanta fudhatama hin qabne. Karaan nuti namoota kana ittin argannu eedda

barataan waraqaticha guutee debisee booda ida'ama mallatto dhibee sammu gaddisaa kan amma irra geennee jirruu ykn kutaa 4^{ffaa} (BDI) jalatti jiruu laaludhaani. Kanaafu maaloo ida'ama tokkon tokko filanno keessanii iddo duwwaa dhuma sanduqaa jalatti total score fuulduratti guutaa .Yoo ida'amni bu'aa sanduuqa kutaa 4ffaa (BDI) waligalaan 20 ol ta'eefi deebiin gaaffi filanno BD9 filattan 1, 2, ykn 3 yoo ta'e maaloo to'ataa qo'annichaa keessan dubbisaa ykn Laakk. Bilbilaa 0910058532 obbo Gutamaa Ahmad ykn 0910107507 Obboo Yonaas jeedhaati bilbilaa.Galatoomaa

Lakk	Beek	Deebii
	Diprashini Invantarii	
BD1	Gaddu	0 Gaddi natti hin dhgahamu 1 Yeroo heddu keessi koo gaddi natti dhagahama 2 Yeroo hunda gaddi natti dhagahama 3 Gammachu dhabu fi gaddi hamma danda'urra natti hammaatera
BD2	Dukkanaa'u/ wanti hamaan /badaan ni dhufa jedhani yaaduu	0 Kaayyon jiru koo fulduraa galma hin ga'u jedhe abdi hin muradhu/Kutadhu 1 kanduraanirra yeroo ammaa kaayyoon ko galma naaf hin ga'u jedhee yaada 2 Jiruun koo galma naaf ga'a jedhee hin yaaduu 3 Jiruun koo kan fulduraa kan abdi hin qabne fi kan kana caala hammaatu ta'unsaa natti dhagahama
BD3	Kufaati jiru duuraani/darbe e	0 Jiruun koo inni duraani kufaatiidhaan kangutame jedhe hin yaadu 1 Hamma yaadurra kafaatin narra ga'e jedhee yaada 2 Jiru koo isa duraani yeroo of duuba debi'e ilaalu kufaati heddu natti mul'ata 3 Jiruun koo guutumaan gututti kafaatiidhaan kangutame ta'unsaa natti dhagahama
BD4	Miirri Gammachu dhabuu namatti dhagahamu	0 Wantoonni Kanaan dura gammachu naaf kennan ammas gammachu naaf kennu 1 Wantoonni Kanaan dura gammachu naaf kennan akka duraanitti gammachu naaf kennaa hin jiran

			2 Wantoonni Kanaan dura gammachu naaf kennan amma gammachu baay'e xinno naaf kennu
			3 Wantoonni Kanaan dura gammachu naaf kennan amma goonkumaa gammachu naaf hin kennan
BD5	Miirri Gaabbi namattii dhagahamu	0	Miirrii gaabbi tokkole natti hin dhagahamu 1 Wantoota heeddu kanaan dura oto hojjachun narra hin jiraatin hojjadhe fi kan oto hojjachu qabu hin hojjatin hafeef gaabbin natti dhagahama 2 Yeroo heddu giddu galeessaan gaabbin natti dhagahama 3 Yeroo hundaa miirri gaabbi natti dhagahama
BD6	Miira Adabamu	0	Miirrii adabbirra jiraachu natti hin dhagahamu 1 Adabbiin narra ga'a jedhee abdi godha 2 Adabbin akka na eeggataa jiru nan yaada 3 Akkan adabbirra jiru natti dhagahama
BD7	Of jibbu	0	Ilaalchi ofif qabu kan duraanitin tokkuma 1 Ofitti amanamumma koo dhabee jira 2 Ofii kootitti mufadheera 3 Of jibbeera
BD8	Of ciipha'u	0	Haala duraanirraan addatti of hin ciipha'u 1 Haala duraanirraan caalatti of ciipha'a 2 Dogogorra koo hundaafu ofin ciipha'a 3 Wantoota hamaa/ badaa raawwatamanif/ Mudataniif hundaafuu ofin ceepha'a
BD9	Feedhi yookin yaada of ajjeesuu	0	Yaada of ajjeesu hin qabuu 1 Of ajjesuuf nan yaada garuu hin raawwadhu 2 Otoon of ajjeese naaf wayya 3 Otoon carraa argadhe of ajjeesuudhaaf gara dubaatti hin jedhu
BD10	Boo'u	0	Hamma Kanaan dura bo'urra caalatti hin boo'u 1 Hamma Kanaan dura bo'urra caalatti boo'a 2 Wantoota xixinno na mudatan hundaafu nan boo'a 3 Akkan boo'ee naaf ba'u barbaada garuu boo'uu hin danda'u

BD11	Keessikee Boqonnaa dhabu	0 1 2 3	Hamma Kanaan dura adda ta'en keessi koo boqonnaa hin dhabu Hamma Kanaan duraa caalaatti keessi koo boqonnaa ni dhaba Hamma bakka tokko taa'uun natti ulfaatutti keessi koo boqonnaa ni dhaba Keessi koo boqonna dhabuurra kanka'e socho'un yookin hoji hojjachun narra jiraata
BD12	Feedhi Dhabu	0 1 2 3	Feedhii namootaafi Hoojidhaaf qabu hin dhabne Feedhii namootaafi Hoojidhaaf Kanaan dura qaburra fedhi xinno tokko dhabeere Feedhii namootaafi Hoojidhaaf Kanaan dura qaburra feedhi heeddu dhabeera Wantoota hundarraayyu feedhi dhabeera ykn feedhi qabaachun dhabuukotin baay'e natti ulfaateera
BD13	Rakko murte kennu dhabuu	0 1 2 3	Akkuma kanaan duraa salphaatti murte kennu nan danda'a Akka kanaan duraatti murte kennun na rakkisa Hamma kanaan dura murte kennun na rakkisu caalaatti amma murtee kennuf nan rakkadha Wantoota hundarratti murte kennun yeroo ammaa kanduraani caalaa na dhiba/Rakkisa
BD14	Ani nama faaydaa hin qabne jedhani yaaduu	0 1 2 3	Ani nama faaydaa hin qabne mirri jedhu natti hin dhagahamu Akka kanaan duraatti ani nama barbaachisaa ykn faydaa qabu mirri jedhu natti hin dhagahamu Yeroo nama biro wajji of dorgomsisu ani caalatti nama faydaa hin qabne mirri jedhu natti dhagahama Aniguutuuman gututti nama faaydaa hin qabne mirri jedhu natti dhagahama
BD15	Humna Ykn Giidoo dhabu	0 1 2 3	Humna ykn giidoo Kanaan dura qabu ammas nan qaba Humna/Giidoo Kanaan dura qaburra xinno kan hir'ate nan qaba Hoojiwwan koo haala barbaachisaa ta'en raawwachudhaaf humna/giidoo ga'aa hin qabu Hooji kamiyyu raawwachudhaaf humna/ giidoo hin qabu

BD16	Sirni hirribaa jijjiramu	0 Jijjiramni hirribaa na hin qunnamne 1 Haala Kanaan duraa irraa xinnaatus/ Guddatus nan rafa 2 Haala Kanaan duraarra caalaatti /Hirriba bicuu/xinno nan rafa 3 Sa'aati heddu Guyyaafi fi halkani hirribaana dabarsa Yookin haala duraanirra sa'aati 1-2 durse erga ka'ee booda hirribatti debi'uun na rakkisa
BD17	Aaruu	0 Akka duraanirra haala adda ta'en hin aaru 1 Haala kanaan duraarra amma xinno nan aara 2 Haala kanaan duraarra heddu /caalaatti nan aara 3 Yeroo hundaa akkuma areetti/yeroo heddu nan dallana/aara
BD18	Sirni feedhi nyaataa jijjiramu	0 Jijjiramni feedhi nyaataa hin jiruu 1 Kan duraanirra feedhin nyaataa koo dabalee yokin hir'ate jira 2 Kan duraanirra feedhin nyaataa koo caalaatti /baay'e dabalee yokin hir'ate jira 3 Kan duraanirra daran nyaata ammaa amma na hawwisisa ykn guutumaan gututti feedhin nyaataa kooti badeera
BD19	Rakko xinxallu/ yaada sassaabu	0 Akkuma kanaan duraa yaada koo nan sassaaba 1 Akka kanaan duraatti yaada koo sassaabu hin danda'u 2 Sammun koo wanta tokkorratti akka duraanitti naaf hin turu/hin sassaabamu 3 Wantoota hundarrattu yaada /sammu koo sassaabu hin danda'u
BD20	Dadhabbin namatti dhagahamu	0 Haala kanaan duraarra adda ta'een dadhabbin natti hin dhagahamu 1 Haala kanaan duraarra adda ta'een salphatti dadhabbin natti dhagahama 2 Dalagaawwan kanaan duraa raawwadhu yoo raawwadhu hedduu/baay'e na dadhabsiisaa 3 Dalagaawwan heeddu kanaan duraa hojjadhu yoo raawwadhu hedduu/baay'e na dadhabsiisa
BD21	Feedhi qunnamti saalaa dhabuu	0 Dhiheenya kana jijjiramni feedhi qunnamti saalaa dhabu natti hin mul'anne 1 kan duraanirra feedhin qunnamti saalaa koo hir'ateera

2 Yeroo kamiyyu caalaa amma fedhin qunnamti saalaa ko hir'ateera
3 Gutumaan gututti fedhiin qunnamti saalaaf qabuu badeera
Total Score

Kutaa 5^{ffaa} Amala saalqunnamti hamaa

Ajaja 5^{ffaa} Gaaffile armaan gadi deebii filattan irra marsudhaan akkasumas gaaffile tokko tokkof bakka duwwaa irratti gutuudhan deebisaa. Filanna caala filachuun hin danda'amu

No	Amala saalqunnamti hamaa	Deebii
RSB1	Jiruu keessan kessatti hiriyyaa qunnamti saalaa ni qabdu?	1. Eyyeen 2. Lakki
RSB 2	Deebii gaaffi RSB1 eyyeen yoo ta'e hamma ammaatti hiriyyaa qunnamti saalaa meeqa qabdu?	
RSB 3	Yeroo qunnamti saalaa gootan kondomi ni fayyadamtuu?	1. Eyyeen 2. Lakki
RSB4	Hiriyyaa wajjin qunnamtii saalaa hogguu gootan yeroo hammam kondoomi fayyadamtani beektuu?	1. Yeroo hunda 2. Darbee darbee 3. Yeroo muraasaaf
RSB5	Dhibeen HIV na qabeera jeettani yaaddani beektuu?	1. Eyyeen 2. Lakki
RSB6	Dhibee HIV nan qaba jeettani yaaddani ogeessa xinsammu / Counseler bira deemtani beektuu?	1. Eyyeen 2. Lakki
RSB7	Kanaan dura mana yaalaattii ykn ogeessa fayyaatiin dhibee HIV ni qabdu jedhamtani beektuu?	1. Eyyeen 2. Lakki
RSB8	Kanaan dura mana yaalaattii ykn ogeessa fayyaatiin dhibee walqunnamtii saalaatiin darbuu kan biro ni qabdu jedhamtani beektuu?	1. Eyyeen 2. Lakki
RSB9	Deebiin gaaffi RSB10 eyyeen yoo ta'e maalo maqaa dhibichaa fuldura sanduuqa kanaatti nuuf barressaa.	_____
RSB10	Dhuugaati nama macheessu erga dhugdani boodde qunnamti saalaa gootani beektuu?	1. Eyyeen 2. Lakki

Kutaa 6^{ffaa} Gaaffile Walqunnamti hawaasummaa

Ajaja 6^{ffaa} Gaaffile armaan gadi deebii filattan irra marsudhaan akkasumas gaaffile tokko tokkof bakka duwwaa irratti gutudhan deebisaa

Lakk	Walqunnamti hawaasummaa	Deebii
SSQ1	Namoota meeqatu yeroo rakkoon isin qunname isin qaqqaba jeettani yaaddu? Filanno tokko ol filachun hin danda'amu.	<ol style="list-style-type: none"> 1. Homaa na hin qaqqaban 2. 1 ykn 2 3. 3-5 4. 5 fi Sanaa ol
SSQ2	Namoota meeqatu wanta isin dalagdaniif dhimmama ykn yaaddawa? Filanno tokko ol filachun hin danda'amu	<ol style="list-style-type: none"> 5. Heddu 4. Xinnoo/Muraasa 3. Hin barree 2. Baay'e xinnoo 1. Homaa
SSQ 3	Hiriyyoota keessan keessaa ykn namoota siree wajjin hirattan irraa gargaarsa qabatama qabu argachuun keessan akkami?	<ol style="list-style-type: none"> 5. Baay'e salphaa 4. Salphaa 3. Giddu galeessa 2. Rakkisaa 1. Baay'ee rakkisaa

Kutaa 7^{ffaa} Gaaffile Wantoota sammu nama hadoochan fayyadamu

Ajaja 7^{ffaa} Gaaffile armaan gadi deebii filattan irra marsudhaan akkasumas gaaffile tokko tokkof bakka duwwaa irratti guutuudhan deebisaa

Lakk	Wantoota sammu nama hadoochan fayyadamu	Deebii
SU1	Yeroo meeqaaf caatii qaamtani ykn fayyadamtani beektuu?	<ol style="list-style-type: none"> 0. Tasumaa iyyuu hin Qaamne (gara gaaffi SU3 tti darbi) 1. Ji'atti al tokko ykn isaa gadi 2. Ji'atti yeroo 2-4tti 3. Torbanitti yeroo 2-3tti 4. Torbanitti yeroo 4 ykn isaa oli
SU2	Yeroo dhumaatiif caatii kan qaamtan ykn fayyadamtan yoomi?	<ol style="list-style-type: none"> 1. Ji'a tokkofi sanaaol 2. Torbaan 2-4 3. Torbaan lamaan darban keessatti

SU3	Dhugaati alkoolii of keessaa qaban kan akka biiraa, waynii, farsoo, daadhii, araqee, kan kana fakkaatan yeroo meeqa dhugduu? (Yoo dhugaatii hin dhugdan ta'ellee guyyaa ayyaanaa Farsoo hin dhugdani?)	0. Tasumaa iyyuu hin dhugu (gara gaaffi SU22 tti darbi) 1. Ji'atti al tokko ykn isaa gadi 2. Ji'atti yeroo 2-4tti 3. Torbanitti yeroo2-3tti 4. Torbanitti yeroo 4 ykn isaa oli
SU4	Dhugaatii gosa isa kam dhuguu filattan?	1. Biiraa 2. Waynii 3. Diraaftii 4. Araqee 5. Daadhii 6. Farsoo 7. Kanneenbiraa
SU5	Yeroo dhumaatiif dhugaati alkoolii qabu kan nama macheessu yoom dhugdan?	1. Ji'a tokkofi sanaaol 2. Torbaan 2-4 3. Torbaan lamaan darban keessatti
SU6	Guyyaa tokkotti jiddu galeessaan hangam dhugdan?	1. Biiraa (shuggeedhaan)----- 2. Wayinii:Birciqqoo dhaan_____ -shuggeedhaan----- 3. Diraaftii (Birciqqoodhaan)----- 4. Araqee:-Malakkee_____ -Buushii_____ 5. Daadhii:-Birillee_____ -Birciqqodhaan_____ 6. Farsoo (xaasaa,birciqqoo)----- 7. Kan biraa yoo ta'e ibsi-----
SU7	Yeroo dhugaati heeddu/olaanaa jedhamu dhugdanitti hagam dhugdu?	1. Biiraa (shuggeedhaan)----- 2. Wayinii:-Birciqqodhaan_____ -shuggeedhaan----- 3. Diraaftii(Birciqqoodhaan)-----

		<p>4. Araqee:-Malakkee_____</p> <p>-Buushii_____</p> <p>5. Daadhii:-Birillee_____</p> <p>-Birciqqoodhaan_____</p> <p>6. Farsoo (xaasaa,birciqqoo)-----</p> <p>7. Kanbiraa -----</p>
SU8	Bara darbee keessa dhugaati dhaabuudhaaf murteessitani osoo hin milkaain yeroon haftan jiraa?	1. Eyyen 2. Lakki
SU9	Yoo jiraatee yeroo meeqa meeqaan isin qunnama	<p>1. Yeroo Ji'a tokko kan hin gutne keessaatti</p> <p>2. Ji'a ji'aan</p> <p>3. Torbaan torbaniin</p> <p>4. Guyyaadhaan ykn garacaalu yeroo hundaa</p>
SU10	Bara/Yeroo darbee keessatti sababbii dhugaatiif hojii hojjechuun sirraa eegamuu otuu hin hojjatin haftee beektaa?	<p>1. Eyyee</p> <p>2. Lakki</p>
SU11	Yoo jiraate yeroo hammamiif?	<p>1. Ji'a tokko kan hin guutne keessatti</p> <p>2. Ji'a ji'aan</p> <p>3. Torban torbaaniin</p> <p>4. Guyyaa dhaan ykn gara caalu yeroo hundaa</p>
SU12	Hojii idilee kee hojjachuun dura dhugaatii alkoolii dhuguuf yeroo ati itti dirqamtee ni jiraa?	<p>1. Eyyee</p> <p>2. Lakki</p>
SU13	Deebiin kee eyyee yoo ta'e yeroo meeqa si mudatee beeka?	<p>1. Ji'a tokko kan hin gutnee keessatti</p> <p>2. Ji'aan</p> <p>3. Torbaniin</p> <p>4. Guyyaa dhaan ykn gara caalu yeroo hundaa</p>
SU14	Bara/Yeroo darbee keessatti miirrii arii/gaabuu erga dhugaatii dhugdee	<p>1. Eyyee</p> <p>2. Lakki</p>

booda sitti dhaga'amee beekaa?	
SU15 Yoo deebiin kee eeyyeen ta'e yeroo meeqa gaabbitee beekta?	<ol style="list-style-type: none"> 1. Ji'a tokko kan hin guutne keessatti 2. Ji'aan 3. Torbaniin 4. Guyyaa dhaan ykn gara caalu yeroo hundaa
SU16 Bara/yeroo darbe keessatti wanta yeroo sanata'e sababii dhugaa turteef yaadachuu dadhabdeettaa?	<ol style="list-style-type: none"> 1. Eyyee 2. Lakkii
SU17 Yoo deebiinkee eeyyeen ta'e si'a meeqa siqunnamee beeka?	<ol style="list-style-type: none"> 1. Ji'a tokko kan hin guutnee keessatti 2. Ji'aan 3. Torbaniin 4. Guyyaadhanykngaraacaaluyeroo
SU18 Sababii isin dhugaatii dhugdaniif balaan isiinirra ykn nama biroo irra ga'ee jiraa?	<ol style="list-style-type: none"> 1. Eyyee 2. Lakki
SU19 Yoo deebiin kee lakk.17 eeyeen ta'e yoom muudatee beeka?	<ol style="list-style-type: none"> 2. Waggaa tokko dura 4. Waggaa kana keessa
SU20 Firrii ykn hiriyyaankee, hojjeetaan/ogeessi fayyaa waa'ee dhugaatii keetii yaadda'e akka ati dhaabduu sitti himee beekaa?	<ol style="list-style-type: none"> 1. Eyyee 2. Lakki
SU21 Yoo deebiinke eeyyee ta'e yoom sitti himee beeka?	<ol style="list-style-type: none"> 2. Waggaa tokkoon dura 4. Waggaa kana keessa
SU22 Yeroo meeqaaf sigaaraa ykn tamboo xuuxxan?	<p>0. Tasumaa iyyuu hin Xuuxne (gara gaaffi SU24 ttidarbi)</p> <ol style="list-style-type: none"> 1. Ji'atti al tokko ykn isaa gadi 2. Ji'atti yeroo 2-4tti 3. Torbanitti yeroo 2-3tti 4. Torbanitti yeroo 4 ykn isaa oli

SU23	Yeroo dhumaatiif tamboo kan xuuxxan yoomi?	<ol style="list-style-type: none"> 1. Ji'a tokkofi sanaaol 2. Torbaan 2-4 3. Torbaan lamaan darban keessatti
SU24	Yeroo meeqaaf shisha arsiitani ykn xuuxxani beektuu?	<p>0. Tasumaa iyyuu hin Xuuxnee (gara gaaffi kutaa SU26 ttidarbi)</p> <ol style="list-style-type: none"> 1. Ji'atti al tokko ykn isaa gadi 2. Ji'atti yeroo 2-4tti 3. Torbanitti yeroo2-3tti 4. Torbanitti yeroo 4 ykn isaa oli
SU25	Yeroo dhumaatiif shisha kan xuuxxan yoomi?	<ol style="list-style-type: none"> 1. Ji'a tokkofi sanaaol 2. Torbaan 2-4 3. Torbaan lamaan darban keessatti
SU26	Yeroo meeqaaf Gaanjaal/ Maariwaanaa fayyadamtani beektuu?	<p>0. Tasumaa iyyuu hin fayyadamne (gara gaaffi kutaa SU28 tti darbi)</p> <ol style="list-style-type: none"> 1. Ji'atti al tokko ykn isaa gadi 2. Ji'atti yeroo 2-4tti 3. Torbanitti yeroo2-3tti 4. Torbanitti yeroo 4 ykn isaa oli
SU27	Yeroo dhumaatiif Gaanjaa ykn Mariwaanaa kan fayyadamtan yoomi?	<ol style="list-style-type: none"> 1. Ji'a tokkofi sanaaol 2. Torbaan 2-4 3. Torbaan lamaan darban keessatti
SU28	Umri keessan keessatti qoricha sammu nama hadochu kan biroo yoo fayyadamtan maaloo nuuf ibsaa	
SU29	Yeroo meeqaaf qoricha sammu nama hadochu kan biroo fayyadamtan?	<ol style="list-style-type: none"> 1. Ji'atti al tokko ykn isaa gadi 2. Ji'attiyeroo 2-4tti 3. Torbanitti yeroo2-3tti 4. Torbanitti yeroo 4 ykn isaa oli
SU30	Yeroo dhumaatiif qoricha sammu nama hadochu kan biroo kan fayyadamtan yoomi?	<ol style="list-style-type: none"> 1. Ji'a tokkofi sanaaol 2. Torbaan 2-4 3. Torbaan lamaan darban keessatti

Kutaa 8^{ffaa} Gaaffile mudanno jiruu hamaa

Ajaja 8^{ffaa} Gaffile armaan gadi deebii filattan irra marsudhaan akkasumas gaffile tokko tokkof bakka duwwaa irratti gutudhan deebisaa

Lakk	Mudanno jiruu hamaa	Deebii
NLE1	Hiriyyaa qunnamti saalaa ykn jaalalle keetiin rukutamtee beektaa?	1.Eyyee 2. Lakki
NLE 2	Dirqisifamte feedhi kee malee qunnamti saala akka gootee beektaa?	1. Eyyee 2. Lakki
NLE 3	Yeroo ijoolluma keessani namootaan tumamtani, Kaballaan dhahamtani, miilaan dhitamtani, miidhaan qaamaa isinirra gahee beekaa?	1. Eyyee 2. Lakki
NLE 4	Yeroo ijoollumma keessanitti namootaan miidhaawwan armaan gaditti ibsaman isinirra gahani beekuu?Filanno tokko ol filachuun ni danda'ama	1.Lakki narra gahee hin beeku 2.Namoota firaa wajjin walqunnamti saalaa raawwachu 3.Humnaan akka qunnamti raawwattan godhamu ykn dirqisifamani gudeedamu 4.Namoonni biro otuu beekanu isin fulduratti qunnamti saalaa raawwachu 5.Akka isin mana bunaa dalagdan isin jajjabeessu
NLE 5	Yeroo ijoollumma keessaniti namootaan jechoota ykn gochoota armaan gaditti ibsaman kan namumma ykn kabajaa keessan tuqu ykn balleessu isinirra gahee beekaa? Filanno tokko ol filachuun ni danda'ama	1. Lakki narra gahee hin beeku 2.Ukkaanfamani fudhatamu/dhoksamu 3.Namootarraa adda baafamu 4.Dhiibbaa/ Midhaa Jechootaa 5.Salphifamu 6.Sodaachifamu/ 7.Namoota biratti otoo isin umridhaan guddatani jirtan ammalle akka daa'imaatti

		laalamu	
		8.Dhiibbaan biroo yoo jiraate ibsaa_____	
NLE6	Yeroo ijoollumma keessaniti namootaan fedhi bu'uraa armaan gaditti ibsaman otuu isini hin guutamin ykn dagatamu ykn dhiifamu isinirra gahee beekaa? Filanno tokko ol filachuun ni danda'ama	1. Lakki narra gahee hin beeku 2.Tajaajila fayyaa dhabuu 3.Namni isin to'achu dhiisuu/hanqachu 4. Nyaata isinif dhiheessu dhiisuu 5.Feedhii/keessa keessan isin hubachu dhabu 6.Baruumsaaf wanta isin barbaachisan guutamu dhabu 7.Tajaajila manaa kan nagenyi isaa nama hin amansiisne	
NLE7	Maatiin (abbaa fi haadha) keessan yeroo walitti bu'an ykn wal-lolan (ala tokko ofirra dhowwu inni kuun dallanu/rukutu) argitee beektaa?	1.Eyyee	2.Lakki
NLE8	Biyya (country) dhalattan irraa goodantani beektuu?	1. Eyyee	2.Lakki
NLE9	Abbaa fi haatii kee lubbudhaan jiruu?	1.Eyyee	2.Lakki
NLE10	Deebiin Gaaffii NLE9 lakki yoo ta'e enyutu du'e?	1. Abbaa	2. Haadha
NLE11	Deebiin Gaaffii NLE9 lakki yoo ta'e yeroo maatiin kee du'an sanatti umriin keessan meeqa ture?	1. kudha tookkofi achi gadii 2. Kudha tokko ol	
NLE12	Yeroo ijoolummaa keessanitti sababbi maatiin keessan du'anif namoota adda addaatiin guddifamtani beektuu?	1.Eyyee	2.Lakkii

DECLARATION

I, the undersigned, declare that this thesis is my original work, has not been presented for a degree in this or any other university and that all sources of materials used for the thesis have been fully acknowledged.

Name: _____

Signature: _____

Name of the institution: _____

Date of submission: _____

This thesis has been submitted for examination with my approval as University advisor

Name and Signature of the first advisor _____

Name and Signature of the second advisor _____
