

Impact of Rational Emotive Behavioral Therapy Intervention in the Management of Economic Hardship Induced-Depression in a Sample of Nigerian Undergraduates' Population

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KEYWORDS:

REBT, economic hardship induced- depression and Nigerian undergraduates

WORD COUNT:

367

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ABSTRACT

There have been a shred of empirical studies which supported that undergraduates with economic hardship-induced depression are at an alarming rate on a daily basis. This necessitated the calls for immediate intervention to manage this wave of economic hardship induced depression affecting the well-being of Nigerian undergraduates. On this note, the present study investigated on impact of rational emotive behavioral therapy intervention (rebt) in the management of economic hardship induced- depression in a sample of Nigerian undergraduates' population.

The study used a randomized control-trial-pretest-posttest design. The researchers used the sample size of 286 of Nigerian undergraduates identified with economic hardship induced depression through the inclusion criteria based. The adapted Beck Depression Inventory-II (BDI-II) by Beck et al (1996) in English language which consists of 21 items was used to identify economic-induced depressed Nigerian undergraduates for data collection. The item statements indicated various levels of symptom severity rated on a 4-point likert scale, (0) Not at all, (1) Hardly True, (2) Mostly True and (3) Exactly True. Using Cronbach Alpha in this study, the reliability of BDI was estimated at 0.86. The Analysis of Covariance (ANCOVA) was the statistical technique used to ascertain the impact of REBT in the management of economic hardship induced- depression affecting Nigerian undergraduates' population. Again, the effect size of REBT was gotten through Partial eta square and adjusted R² values. The result of this study showed that the impact of rational emotive behavioral therapy intervention (REBTI) in the management of economic hardship induced depression in a sample of Nigerian undergraduates' population was significant. In other words, the strength and managerial ability of REBT on economic hardship induced depression affecting Nigerian undergraduates was effective. Based on the finding of this study, the researchers recommended that the Nigerian university management, school counsellors and school administrators should employ the services/activities of REBT and its principles in managing economic hardship induced depressive symptoms impeding the well-being of Nigerian undergraduates especially in Alex Ekwueme Federal University Ndufu Alike Ebonyi State (AEFUNAI). Financial and material support should be provided by the government, NGOs and individuals to ensure that the activities of REBT intervention is been carried out without stress; since it has been empirically proven to be significant in the management of depression.

HOW TO CITE

Onwu A.O, Ogba F.N, Okechineke B.C, Agujiobi U.P & Okechineke C.S. (2026). Impact of Rational Emotive Behavioral Therapy Intervention in the Management of Economic Hardship Induced-Depression in a Sample of Nigerian Undergraduates' Population. *International Journal of Educational Perspectives*, 14(1), 109-122.



Introduction

The menace of economic hardships ravaging the well-being of Nigerian population is a critical issue of concern with a global attention (Esther et al, 2015; Avcin et al.2011). The attention is necessary, considering that the cost of living is geometrically increasing on a daily basis. Recently, the researchers observed that many angry Nigerians mostly in the Northern and Western regions of Nigeria, protested that the rate of hardship is alarming and has created more tension in the country which is already bedeviled with incessant insecurity attacks and other related social problems. As reported by (Ogbonna, 2024), the economic hardship in Nigeria has been attributed to the fuel subsidy removal, ended policy of pegging the price of currency/naira which skyrocketed the prices of commodities in the market. Consequently, National Bureau of Statistics (2023) revealed that the average prices of basic food items by naira value in Nigeria as of 2022/2023 December, significantly changed to a total of 54% in food inflation. Further evidence-based report (National Bureau of Statistics, 2024) shows a similar increase of inflation rate from 29.9% to 31.7%. This staggering rise of food prices is not only disturbing but may push a lot of economic disadvantaged Nigerians into begging, anti-social behaviours or other hard ways to survive which may likely affect their mental well-being or cause psychological distress to them as time goes on. At this point of experiencing economic hardship in Nigeria, those who are most likely to be affected could be the Nigerian undergraduates who may be induced to depression. This however, provoked the interest of this study which focus on the impact of rational emotive behavioural therapy (REBT) in the management of economic hardship-induced depression among Nigerian undergraduates. In other words, the thematic interest of this study is to contribute in managing economic hardship-induced depression affecting Nigerian undergraduates, using the REBT as a psychological intervention tool. The contribution of this study is necessary and unique from the most previous documented studies which focused on Predictive analytics for economic crisis triggered depression risk level identification among individuals (Ojokoh et al., 2021), including independent associations between multiple analyzing of economic hardships

indicators and psychological health challenges confronting humanity (Ahnquist & Wamala, 2009).

However, a growing of evidences established that individuals including Nigerian undergraduates battling with economic hardships are prone to mental health issues, depression, among others. A study on economic hardships in adulthood and mental health in Sweden revealed a significant connection between mental health challenges and widespread of economic hardships (Ahnquist & Wamala, 2009). Previous studies (Wang et al. 2010; Avcin et al., 2011) have revealed that work force population in Alberta which has a total of 3579 workers and Slovenia with 590 staff (46.6%) showed depressive symptoms as induced by the economic hardship. In addition, Choudhury et al. (2019) argued that in Bangladesh, higher learners' experience of depression using the Beck Depression Inventory (BDI) assessment questionnaire were traced to many factors, including challenging situations that are socio-economically based. In Nigeria, the economic hardship has been identified as a critical factor causing high rate of depressive symptoms (Ojokoh et al., 2021). The World health Organization (2017) shows that 322 million persons, representing 4.4% individuals are affected with depression across the world. This disheartening reports indicates that economic induced depression is one of the most common form of mental related problems affecting individuals, which among them are the undergraduates (Choudhury et al. 2019). Studies (Choudhury et al. 2019; WHO, 2008) revealed that these undergraduates who are mentally affected, may be experiencing low mood and aversion to activity with traits of self-dislike, changes in sleep patterns, confused thinking, regret, hopelessness, worthlessness, among others. Other awful conditions of economic hardship induced depression affecting undergraduates include: rise in stealing, dysfunctional impulsivity, diverse related mental imbalance ranging from suicidal wishes, anxieties, among others (Ross, 2016 & Bechtel, 2012).

In this study, Nigerian undergraduates with economic hardships induced depression are considered a disturbing condition that has a lot of tension and traumatic related experiences. The researchers observed that many Nigerian



undergraduates are living poor and cannot afford to meet adequately their usual essential daily needs, including engaging effectively in academic activities. Some of the undergraduates in struggling to survive the harsh economy now venture into small scale businesses within the school environment. For instance, some of them are into bakery production and selling of chops/snacks, stationaries, airtime, data for browsing, internet/POS services, home/lodge catering and laundry services, to mention but a few. In most cases, where their parents/guardians are also affected with economic hardships, some undergraduates may sell off some of their home/lodge appliances and gadgets to raise money and settle most of their pressing needs capable of making them feel depressed. As a result of Nigerian undergraduates being depressed, running of smooth academic activities and active participation of undergraduates in teaching-learning process may likely be affected. Furthermore, economic hardship induced depression affecting Nigerian undergraduates may expose them to experience poor social interactions, low life style of living, loss of interest, high physical stress and tension, among others. It is also necessary to note that economic hardship-induced depression if not psychologically managed may continue to make the Nigerian undergraduates feel more helplessness, sad, hopelessness, worthlessness and can posed a severe psycho-socio threat to the well-being of people around them. This therefore, calls for a timely intervention on the basis that most manifestation of depressive symptoms among individuals, including undergraduates may be traced to negative cognitive-behavioural dispositions. Again, the undergraduates dispositions or life style/thinking to the factors (economic hardship) making them depressed could be cognitively faulty which must be corrected and replaced rationally therefore helping in managing depressed related factors, including economic hardship experience. In other words, Nigerian undergraduates tends to experience economic hardship induced depression as a result of faulty cognitive processes which could be modified and replaced with more rational one. In doing this, the researchers proposed that Rational Emotive Behavioural Therapy (REBT) may likely be significant in disputing those irrational cognitive-behavioural perceptions and dispositions capable of causing economic hardship-

induced depression among Nigerian undergraduates.

Rational Emotive Behavioural Therapy (REBT) is a therapeutic intervention tool which could be used to manage severe emotional challenges affecting the well-being of individuals. As a theory, REBT stands that faulty thinking interpretations of activities of life or experiences can develop to negative emotions capable of impeding roles, and responsibilities of persons (Ellis, 1995). Rational Emotive Behavioural Therapy (REBT) employs the principle of activating event, beliefs, consequences, disputation and new effect (ABCDE) model to manage dysfunctional perceptions and emotions, including physical reactions related to the individuals' experiences of issues of life (e.g., economic hardship-induced depression). Accordingly, principle A- stands for activation of activities, principle B- Belief represents the rational or irrational belief system of individuals, principle C- implies Consequence which is the consequence of irrational or rational belief. Irrational beliefs system develop to unhealthy consequences while rational beliefs system can lead to healthy consequences, principle D- Disputation is a step employed to change irrational beliefs into a rational belief. The last which is the principle of E stands for New Effect or effective world view (Ellis, 1975). Arguing on the basic principles of REBT, it is the outcome of the modified dysfunctional beliefs that result into rational dispositions /consequences. The result of rational dispositions may likely support Nigerian undergraduates affected with economic hardship-induced depression to become better. This likely may help in managing depressive related symptoms of low mood and aversion to activity including inability to think rationally, regret, loss of energy, self-hatred, pessimism, hopelessness, worthlessness and other related psychological conditions.

Exploring on this study, shred of empirical supports have reported effectiveness of REBT-based interventions in ameliorating behavioural and cognitive induced challenges facing many individuals. A study on management of police subjective well-being and work ability using rational emotive occupational health coaching however, revealed that REBT significantly



managed the police subjective well-being and work ability (Onyishi et al., 2020). In a quasi-experimental study on efficacy of rational emotive behavior therapy (REBT) on emotional distress among adolescents, REBT has been revealed as a useful psychological tool in the management of emotional distress (Saleh et al., 2022). Ugwuanyi et al (2021) conducted a study on management of work stress in science education lecturers' population using rational emotive occupational health coaching (REOCHC): Implication for educational evaluators. The result found that REOCHC which is an aspect of REBT significantly managed work stress as related emotional problems affecting science education lecturers. Other review of literature on the related research and application of REBT as educational intervention for children and adolescents with emotional related issues, however, supported that effective usage of REBT has the capacity to reduced emotional disorders affecting children (Banks & Zions, 2009). While a study using rational emotive behavior therapy also reported significant reduction in managing stress and irrational beliefs among special education teachers in Nigerian elementary schools (Onuigbo et al., 2018). Another recent related study on the management of PTSD among teachers in security affected areas found that REBT significantly minimized emotional related problems including PTSD of teachers than those in the control group (Diara et al., 2023). Further studies (Bistamin, et al., 2015 & Adomeh, 2006) revealed that structured group counseling using REBT principles were found to be effective in the treatment of individuals with psychological problems such as anxiety and depression.

In spite of the various empirical studies captured in support of the efficacy of REBT in reducing behavioural and cognitive related problems affecting many individuals across the globe, this study aimed at investigating the impact of rational emotive behavioural therapy (REBT) in the management of economic induced-depression in a sample of Nigerian undergraduates' population. Again, to the best knowledge of the researchers, REBT may likely not been vividly explored for the management of economic induced-depression affecting Nigerian undergraduates. With this in mind, this study is yet to be ascertain. Hence, the need for this presents research. The researchers

therefore hypothesized that there will be a significant impact of Rational Emotive Behaviour Therapy (REBT) in the management of economic induced-depression affecting Nigerian undergraduates compared to the control group. However, the management of the economic-induced depression will be significant to the Nigerian undergraduates exposed to REBT intervention.

Method

Ethical adherence

The researchers adhered to the ethical standard of conducting research in the Faculty of Education, Alex Ekwueme Federal University Ndufu –Alike Ikwo, Ebonyi State (AEFUNAI). The researchers ensured that the useful information of the participants of this study were strictly confidential.

Measure

The adapted Beck Depression Inventory-II (BDI-II) by Beck et al (1996) in English language which consists of 21 items was used to identify economic-induced depressed Nigerian undergraduates for data collection. The item statements indicated various levels of symptom severity rated on a 4-point likert scale, (0) Not at all, (1) Hardly True, (2) Mostly True and (3) Exactly True. Accordingly, Nigerian undergraduates are instructed to tick the scale ranging from 0-3 so as to ascertain their categories of depression including low, moderate and severe depression. In this study, Nigerian undergraduates with high symptom severity in the BDI is suffering from economic hardship induced depression. BDI-II has been considered as a valid and reliable psychometric tool for depression (Adewuya, Ola & Aloba, 2007; Abubakar et al. 2016). BDI has also been previously validated in Nigeria for the Predictive analytics of economic crisis triggered depression risk level identification among adults population (Ojokoh et al., 2021), which has estimated reliability score of 0.96. Using Cronbach Alpha in this study, the reliability of BDI was estimated at 0.86.

Participants of the study

The participants of 286 Nigerian undergraduates through the random selected departments in the various faculties of education, humanities, social sciences and medical sciences of (AEFUNAI) with economic-induced depression were identified as



those who met the criterion for inclusion. The inclusion criteria for a participant to be eligible in this study are (1) the Nigerian undergraduates must have been identified to suffer a high severity of depression using Beck Depression Inventory (BDI-II) as psychometric tool, (2) the participants must be undergraduates in Nigerian universities (e.g., AEFUNAI) (3) The participants must complete the interest/consent form, and (4), must not be in any related ongoing psychological treatment programme in the university or elsewhere. The exclusion criteria are thus:(1) the Nigerian undergraduates with obvious/severe health problems were not included (2) Nigerian undergraduates engaged in other

experimental/intervention study during the era of this study were not included and (4) Nigerian undergraduates with depression without clear interest to participate in the study through the interest form were not included. The inclusion and exclusion criteria guided the researchers to select the sample size of (286) Nigerian undergraduates (participants) identified with economic induced depression. The respective demographic details of the participants are presented in **Table 1 below**. Table 1 shows that the REBT group had 68 males (23.78%) and 80 (27.97%) females; the waitlist control group had 66 males (23.07%) and 72(25.18%) for females.

Variables	REBT Group n (%)	Waitlist control Group N (%)	Total n (%)
Gender			
Male	68(23.78%)	66 (23.07%)	134 (46.85%)
Female	80(27.97%)	72 (25.18 %)	152(53.15%)
Total	148(51.75%)	138 (48.25%)	286 (100%)
Age			
16years & below	32(11.19%)	30(10.49%)	62(21.68%)
17-20years	70(24.48%)	68(23.77%)	138(48.25%)
21years and above	46(16.08%)	40(13.99%)	86(30.07%)
Total	148(51.75%)	138(48.25%)	286(100%)
Marital status			
Married	38(13.29%)	35(12.23%)	73(25.52%)
Single	102(35.66%)	98(34.27%)	200(69.93%)
Others	8(2.8%)	5(1.75%)	13(4.55%)
Total	148(51.75%)	138(48.25%)	286(100%)
Faculty	54(18.88%)	46(16.08%)	100(34.96%)
Education	36(12.59%)	33(11.54%)	69(24.13%)
Humanities	30(10.49%)	32(11.19%)	62(21.68%)
Social Sciences	28(9.79%)	27(9.44%)	55(19.23%)
Medical Sciences	148(51.75%)	138(48.25%)	286(100%)
Total			
Level			
100	26(9.09%)	23(8.04%)	49(17.13%)
200	50(17.49%)	47(16.43%)	97(33.92%)
300	43(15.03%)	40(13.99%)	83(29.02%)
400&others	29(10.14%)	28(9.79%)	57(19.93%)
Total	148(51.75%)	138(48.25%)	286(100%)

n=number of participant, REBT=Rational Emotion Behavioural Therapy, %=Percentage, REBT Group n (%) Waitlist control group and Tn (%) = total number of percentage



The participants of those in the REBT group within the age of 16 years below were 32 (11.19%), 17-20 years were 70 (24.48%) and 21 years and above were 46 (16.08%). In the waitlist control group, 30 participants with (10.49%) were within the age of 16 years and below, 68 (23.77%) were within the age of 17-20 years, 40 (13.99%) were within the age of 21 years and above. In the REBT group for marital status, 38 participants with (13.29%) were for the married, 102 (35.66%) represented the single, 8(2.8%) were for the others. In the waitlist control group, 35 participants with (12.23%) were for the married, 98 participants (34.27%) represented the single and 5 participants with (1.75%) were for the others. In the REBT group for the faculty, 54 participants with (18.88%) were for the education, 36 participants (12.59%) were for the humanities, 30 participants (10.49) were for the social sciences and 28 participants with (9.79%) were for the medical sciences. In the waitlist control group for faculty, 46 participants with (16.08%) represented the education faculty, 33 participants (11.54%) were for the humanities, 32 participants (11.19%) were for the social sciences and 27 participants with (9.44%) were for the medical sciences. In the REBT group for the level of the participants, 26 participants with (9.09%) represented the 100 level, 50 participants (17.49%) were for the 200 level, 43 participants (15.03%) were for the 300 level and 29 participants with (10.14%) were for the 400 and other levels. In the waitlist control group, 23 participants with (8.04%) were for the 100 level, 47 participants (16.43%) represented those in 200 level, 40 participants with (13.99%) were for the 300 level and 28 participants with (9.79%) were for the 400 and other levels.

Procedure

The researchers got the AE-FUNAI ethical approval (official permission) before proceeding to identify Nigerian undergraduates with economic hardship induced depression. The researchers further notify them (AEFUNAI) of the intervention programme using six weeks sessions of Rational Emotive Behaviour Therapy (REBT) to manage depression affecting undergraduates due to economic hardship. To ascertain the depression initial differences of (286) undergraduates with economic-hardship induced depression who are also known as participants, the researchers used Beck Depression Inventory (BDI-II) with the 21-

item as Time 1 (pretest) to examined them. This however guided the researchers to assigned undergraduates with economic hardship depression to the experimental and waitlist control group (see figure 1). Participants in the treatment group were subjected to REBT principles while those in the control group were exposed to conventional counseling. The REBT was administered by the researchers to the participants using English Language as a common means of communication. In other words, the researchers and their assistants used the principles of REBT in the treatment of undergraduates with economic hardship induced depression for the period of six weeks.

In the first week, the researchers had meetings with the participants so as to formally inform them about the programme. The researchers after the meetings familiarized with the participants and assured them of their confidentiality throughout the psychological intervention. In the second week, the researchers applied the principle of activation (A) technique to provoke thoughts about depression among undergraduates with experience of economic hardship. The researchers and the assistants were able to engage the A-technique of REBT to initiate discussion on issues of mental health like depression. Nigerian undergraduates with economic hardship induced depression were meant to perceive depression as a psychological problem debilitating human population across the world. They were also encouraged to discuss/share freely the emotional issues that have caused them challenges of feeling low mood and aversion to activity, inability to think rationally, regret, loss of energy, self-hatred, pessimism, hopelessness, worthlessness and other related psychological conditions. In the third week session, the belief (B) technique was used on the experimental group. The B-technique made undergraduates with economic hardship induced depression to understand that they are actually placing erroneous belief system on the challenges and emotional issues of life facing them on daily basis. Undergraduates with economic hardship induced depression learnt that the irrational belief system and their source of disorder are as a result of the interpretations given to the emotional related situations in their vicinity (e.g., economic hardship induced depression).



The sources of irrational belief based on depression were identified by the undergraduates with the help of the researchers to include: constant low mood, aversion to activity, worry over the future, negative life events, etc. In the fourth week session, the researchers after assisting the undergraduates with economic hardship induced depression to divulge the sources of their erroneous beliefs moved in to support them understand the consequences of not being rational in behaviour and cognition towards such erroneous ideological disposition. Positive or negative behavior arise from the individuals rational or irrational beliefs. This was carried out using the technique referred to as the C-Consequence. On this note, undergraduates with economic hardship induced depression using this technique were able to understand that depression could result to poor interpersonal relationships, negative cognitive style dispositions or confused thinking, regret, hopelessness, worthlessness to the affected individuals and even death. Another consequence(s) is that engaging proactively in academic activities may be difficult for Nigerian undergraduates battling with economic hardship induced depression. In the fifth week session, the researchers after supporting the undergraduates with economic hardship-induced depression to reveal the consequences of untreated depression as a result of their erroneous beliefs used the disputation technique to address their behavioural and ideological disposition. This was also carried out by using the technique known as the D-disputation.

This technique was engaged to dispute the irrational belief connected with economic induced-depression affecting undergraduates. Disputation involves the use of questioning thoughts and beliefs that causes undergraduates depressed due to irrational beliefs. The irrational beliefs were turned into rational beliefs. Purposefully, those irrational thoughts and belief system that have negative

consequences were disputed to become rational thoughts and beliefs. In the sixth session and final week, the researchers used the E-technique known as the New Effect. This was performed by the introduction of relaxation, hypnosis and mediation in order to bring in new effects. This technique is a wonderful way of managing undergraduates with economic hardship-induced depression to have a feeling of new effect and leave a healthier life after disputation. In other words, this E-technique is necessary in promoting the psychological well-being of undergraduates. However, undergraduates with economic hardship induced depression can take the consequences of their rational belief systems or take responsibility of their actions. In all these weeks and sessions of this programme, the in-school adolescents with ADHD in the treatment group met once in a week for the six weeks. During the six weeks session of REBT intervention, it was noted that the **286** participants completed the treatment session in full compliance. The impressive level of compliance and commitment could be that the participants were interested to this study which contributed enormously to their mental wellness after using the intervention of REBT for six weeks sessions. After the six weeks REBT intervention programme, Time 2 assessment was conducted for the two groups of undergraduates with economic hardship-induced depression.

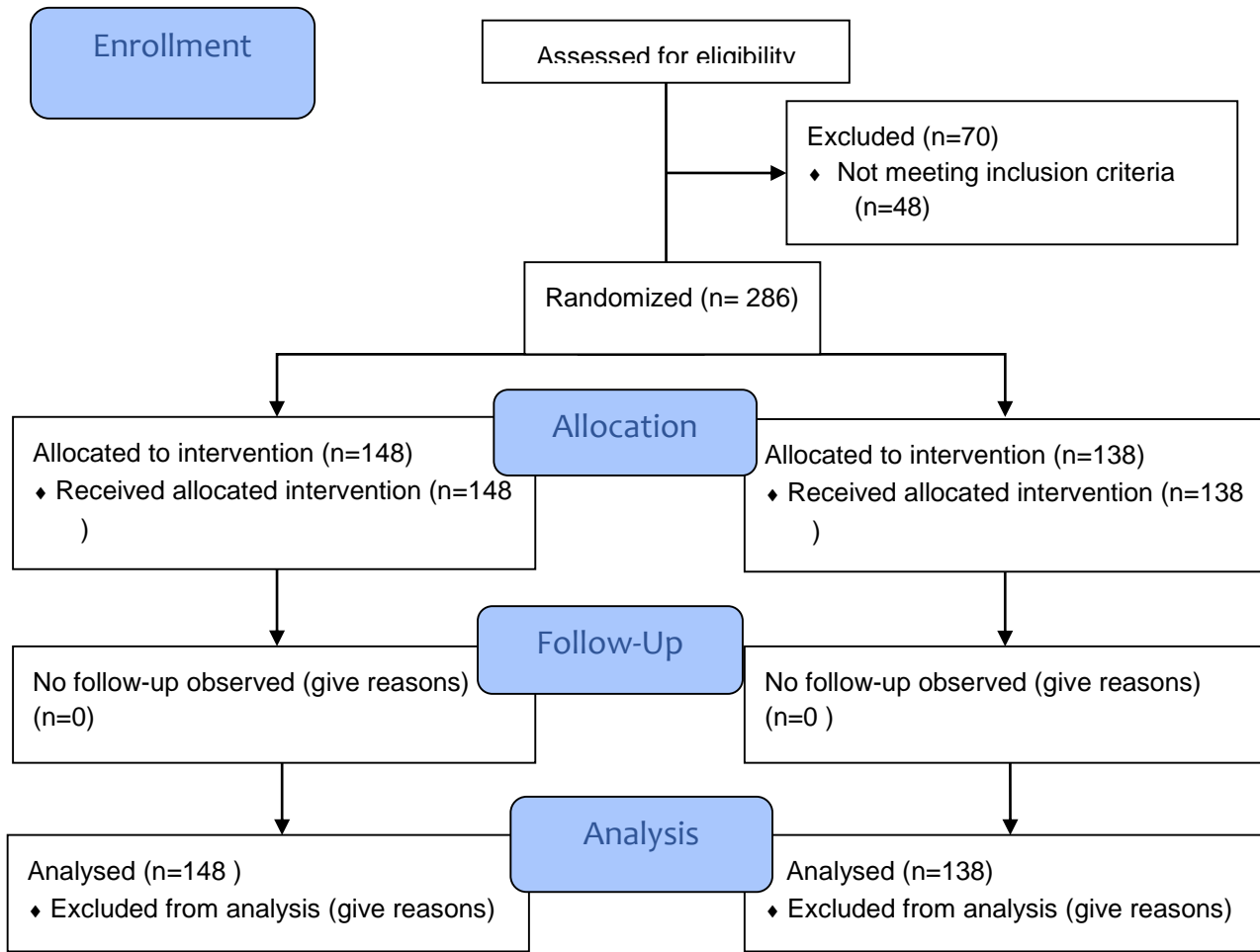


Figure 1. Consort flow chart for participants’ allocation
Study design and Data Analysis

This study used a randomized control-trial-pretest-posttest design. The design is used because it allows the allocation of the participants into the experimental and control groups (Murray, 1997). Again, it permits randomization into groups so as to ascertain the establishment of internal validity through intervention clinical trials (Ezegbe et al. 2019; Ede et al. 2019; Nwokeoma et al. 2019; Onyishi et al., 2020; Okide et al., 2020; Ede et al., 2020; Abiogu et al., 2020; Ugwuanyi et al., 2020; Ugwuanyi, Gana et al., 2020; Ugwuanyi, Okeke &

Agboeze, 2021; Igwe et al., 2021; Agboeze et al., 2020). There is also tendency of equal random assignment of the subjects to the groups (Cohen et al. 2007). However, effect size of REBT was determined by using Partial eta square and adjusted R2 values. The analysis was adequately managed and carried out through the modern technological package/software, known as Statistical Package for Social Sciences (SPSS) version 21.0.

Results

Table 2: Mean and standard deviation scores of the effect of REBT in the management of economic hardship-induced depression among undergraduates

Groups	N	Pretest		Posttest		Mean loss	Mean loss difference
		M	Std	M	Std		
Experimental group	148	33.06	1.68	70.69	4.97	-37.63	26.56
Waitlisted Group	138	31.27	4.22	42.34	3.99	-11.07	

Data on table 2 revealed that undergraduates in the experimental group have mean and standard deviation scores of ($M=33.06$ and $Std=1.68$) at the pretest and mean and standard deviation scores of ($M=70.59$ and $Std=4.97$) at the posttest respectively. The table also revealed that undergraduates in the waitlisted group have mean and standard deviation scores of ($M=31.27$ and $Std= 4.22$) at the pretest and mean and standard deviation scores of ($M=42.34$ and $Std= 3.99$) at the posttest respectively. The mean loss of 37.63

economic hardship-induced depression for the undergraduates in the experimental group is greater than the mean loss of 11.07 for undergraduates in the waitlisted group. Therefore, undergraduates who are in the experimental group and received REBT had reduced economic hardship-induced depression more than those in the waitlisted group. This result output really reflected the efficacy of the REBT in managing economic hardship-induced depression affecting undergraduates.

Analysis of Covariance (ANCOVA) of the effect of REBT in the management of economic hardship-induced depression among undergraduates

Tests of Between-Subjects Effects

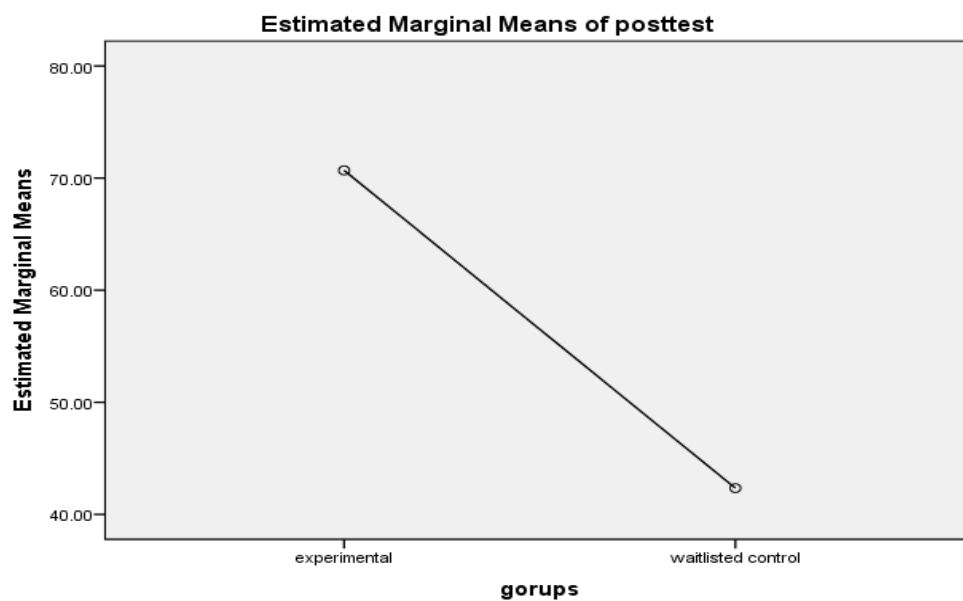
Dependent Variable: posttest

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	57390.344 ^a	2	28695.172	1395.645	.000	.908
Intercept	8676.003	1	8676.003	421.974	.000	.599
Pretest	.071	1	.071	.003	.953	.000
Groups	53084.698	1	53084.698	2581.876	.000	.901
Error	5818.625	283	20.561			
Total	992765.000	286				
Corrected Total	63208.969	285				

a. R Squared = .908 (Adjusted R Squared = .907)

Data on table 2 revealed that the degrees of freedom are 2 and 283 with ANCOVA value (F) of 2581.876. $F_{(2, 283)} = 2581.876$, $p=0.00 < 0.05$. The hypothesis is significant because the significant value of 0.00 is less than the alpha value of 0.05. Therefore, REBT is effective in the management of

economic hardship-induced depression among undergraduates. The Partial eta square and adjusted R values of 0.901 and 0.907 showed that REBT has a very high effect size in the management of economic hardship-induced depression among undergraduates.



Covariates appearing in the model are evaluated at the following values: pretest = 32.1958



Discussion

The result of this study shows that after the post-treatment/interventions, the impact of rational emotive behavioral therapy intervention (REBTI) in the management of economic hardship induced depression in a sample of Nigerian undergraduates' population was significant. The significant result of this study simply means that economic hardship-induced depression affecting the undergraduates was able to be managed through the intervention of rational emotive behavioural therapy (REBT). In other words, the undergraduates identified with symptoms of economic hardship-induced depression were exposed to the principle of activating event, beliefs, consequences, disputation and new effect (ABCDE) model of REBT to manage dysfunctional perceptions and emotions, including physical reactions related to the individuals' experiences of issues of life (e.g., economic hardship-induced depression). However, the effectiveness of REBT in this study is in tandem with the other related empirical-based studies which found that REBT has been a vital intervention tool for minimizing/curbing emotional distress issues such as stress and irrational beliefs affecting science teachers and special education teachers in Nigerian elementary schools (Onuigbo et al., 2018; Ugwuanyi et al 2021 & Saleh et al., 2022). The result of this study agrees with the study of (Banks & Zions,2009) on the application of REBT as educational intervention for children and adolescents with emotional related issues, which found that the usage of REBT has the strength to reduced emotional disorders (depression) affecting children. The findings of this study also confirmed with other review studies (Bistamin, et al., 2015 & Adomeh, 2006) which revealed that structured group counseling using REBT principles was active in reducing psychological problems such as anxiety and depression affecting the well-being of individuals. The results of this study further corroborate with related shred of research based evidences (Onyishi et al., 2020; Diara et al., 2023) which revealed that REBT significantly enhanced the police subjective well-being, work ability, and as well, managed the emotional distress conditions including PTSD affecting teachers in Nigeria.

Conclusion

Based on the result of this study, the researchers concluded that after the post-treatment or interventions, the application of rational emotive

behavioral therapy intervention (REBTI) principles in the management of economic hardship induced depression in a sample of Nigerian undergraduates' population was effective. The strength and managerial ability of REBT on economic hardship induced depression affecting Nigerian undergraduates was significantly sustained.

Recommendations

Given that REBT contributed significantly in the management of economic hardship induced depression in a sample of Nigerian undergraduates' population, the researchers recommended that the Nigerian university management, school counsellors and school administrators should employ the services/activities of REBT and its principles in managing economic hardship induced depressive symptoms impeding the well-being of Nigerian undergraduates especially in Alex Ekwueme Federal University Ndufu Alike Ebonyi State (AEFUNAI). Financial and material support should be provided by the government, NGOs and individuals to ensure that the activities of REBT intervention is been carried out without stress; since it has been empirically proven to be significant in the management of depression.

Conflict of Interest: The researchers did not experience any form of interest clash in the execution/process of this study.

Acknowledgements:

The process of this study would have been so difficult without the active commitment and hard work of all the researchers of this study which is highly commendable. The researchers profoundly appreciate all the authors/scholars whose intellectual materials were used by the researchers in making the intervention programme of this study a huge success. Thanks to the participants who diligently engaged with the researchers during the completion of the study. The great effort of the statistician, who analysed the data gathered for this study cannot be taken for granted.

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