

Impact of Procrastination on Students Anxiety and Depression

Pushpendra Pandey

M. Sc. Clinical Psychology, Shuats (Prayagraj)

ABSTRACT

This study looks at the connection between depression, anxiety, and procrastination among 14–17-year-old adolescents. Intentionally delaying assignments despite the repercussions is known as procrastination, and it has a serious detrimental influence on students' academic performance and mental health. Important psychological elements like perfectionism, fear of failing, poor time management, and low motivation were found to be contributing causes to procrastination through research of 100 students (50 males and 50 females). The findings demonstrate a clear positive correlation between procrastination and both anxiety and despair, underscoring the need for targeted interventions. Teachers and counselors can assist kids in creating healthy coping mechanisms by addressing the psychological causes of procrastination, which will enhance their mental health and academic performance.

- The study's conclusions are:
- Procrastination and mental health are strongly correlated: The study demonstrates that procrastinating students often face increased emotional distress, academic difficulties, and decreased general well-being, confirming a significant association between procrastination, anxiety, and depression.
- Important Psychological and Behavioral Factors: Procrastination is largely caused by academic perfectionism, poor self-regulation, low motivation, and low self-efficacy. These elements emphasize the need for focused behavioral and psychological therapies by generating a vicious cycle of avoidance, stress, and poor performance.
- Holistic interventions are necessary to counteract the negative effects of procrastination. Academic settings should include time management training, cognitive-behavioral approaches, self-efficacy enhancement programs, and mental health support to increase student productivity, emotional resilience, and overall well-being.

Keywords: Procrastination, Depression, Anxiety, Adolescents, Academic performance, Mental health, Perfectionism, Fear of failure. Time management, Low motivation, Self-efficacy, Self-regulation, Emotional distress, Cognitive-behavioral approaches.

INTRODUCTION

PROCRASTINATION

Procrastination is commonly understood as the intentional delay of tasks, even when one is aware of the negative outcomes (Steel, 2007). It has been thoroughly investigated in educational contexts, where it adversely affects students' academic performance and overall well-being (Solomon & Rothblum, 1984; Rothblum et al., 1986). Academic procrastination is specifically characterized by the deferral of study-

related activities, frequently resulting in increased stress and anxiety (Steel & Klingsieck, 2016). Multiple studies have pinpointed significant psychological factors that contribute to procrastination, such as fear of failure, perfectionism, ineffective time management, and low self-control (Lay, 1994; Wang et al., 2019). Research has also correlated procrastination with heightened anxiety and depression levels, as students experience emotional turmoil due to avoiding tasks and the pressures of last-minute work (Van Eerde, 2003; Ferrari, 2010). Investigations by Lay & Schouwenburg (1993) and Covington indicate that procrastination functions as both a coping strategy and a contributor to academic stress. The relationship between procrastination and mental health challenges like anxiety, depression, and distress has been extensively documented (Tice & Baumeister, 1997; Knaus, 2010). Psychological studies emphasize that procrastination is not simply an issue of time management. This proposal aims to explore these relationships further, examining how procrastination influences students' mental well-being and proposing strategies to mitigate its impact on academic performance.

DEPRESSION

Depression is a widespread yet significant mood disorder that influences an individual's emotional state, thought processes, and ability to manage everyday tasks. It goes beyond merely feeling unhappy or experiencing a difficult time. Depression can lead to intense symptoms that disrupt a person's capacity to perform at work, at home, and in social interactions. According to the American Psychological Association (APA), depression is a prevalent and serious medical condition that adversely impacts your emotions, thoughts, and behaviors. This illness brings about feelings of sadness and/or a lack of interest in activities that were once pleasurable. It has the potential to result in various emotional and physical challenges and can diminish a person's capacity to function effectively both in professional and domestic environments.

SYMPTOMS OF DEPRESSION

Depression can manifest in various ways, and symptoms can vary from person to person. However, some common symptoms include:

Emotional Symptoms:

- Persistent sadness, anxiety, or "empty" feelings.
- Feelings of hopelessness or pessimism.
- Irritability.
- Feelings of guilt, worthlessness, or helplessness.
- Loss of interest or pleasure in hobbies and activities that were once enjoyed

Cognitive Symptoms:

- Difficulty concentrating, remembering, or making decisions.
- Thoughts of death or suicide, or suicide attempts.

Physical Symptoms:

- Fatigue or decreased energy.
- Insomnia, early-morning wakefulness, or oversleeping.
- Changes in appetite or weight (unintentional weight loss or gain).
- Aches or pains, headaches, cramps, or digestive problems without a clear physical cause that do not ease even with treatment.

Behavioral Symptoms:

- Social withdrawal.

- Neglecting responsibilities or self-care.
- Increased substance use (alcohol, drugs).
- Difficulty in managing tasks at work or home.

In the context of Procrastination

Prolonged stress, feelings of inadequacy, and the adverse effects of procrastination in academic, professional, and personal areas often lead to depression. Those who procrastinate may feel guilt, self-blame, and a sense of worthlessness as a result of not meeting deadlines or reaching their objectives. Over time, these negative feelings can create a downward spiral of depressive symptoms, which further diminishes motivation and worsens procrastination habits.

Anxiety:

Anxiety is a frequent emotion that people experience as a reaction to stress or perceived dangers. Although experiencing occasional anxiety is typical and can even be beneficial, chronic or overwhelming anxiety can become an issue and disrupt daily life. Anxiety disorders are defined by intense and enduring feelings of fear, worry, or apprehension that are not aligned with the actual threat or circumstance. These emotions can present in various forms, and individuals may encounter a mix of physical, cognitive, and behavioral symptoms. Some common symptoms of anxiety include:

Physical Symptoms:

- Rapid heartbeat or palpitations
- Shortness of breath or difficulty breathing
- Muscle tension or trembling
- Sweating or clammy hands
- Gastrointestinal disturbances such as nausea or diarrhea
- Fatigue or restlessness
- Headaches or migraines
- Dizziness or lightheadedness

Cognitive Symptoms:

- Excessive worry or rumination about future events or potential outcomes
- Difficulty concentrating or mind going blank
- Irrational or catastrophic thinking
- Heightened vigilance or hypervigilance to potential threats
- Racing thoughts or intrusive thoughts
- Difficulty making decisions or feeling indecisive
- Memory problems or forgetfulness

Behavioral Symptoms:

- Avoidance of situations or activities that trigger anxiety
- Procrastination or avoidance of responsibilities
- Restlessness or fidgeting
- Seeking reassurance from others
- Increased use of safety behaviors or rituals (e.g., checking, counting)
- Difficulty sleeping or insomnia - Impaired social or occupational functioning.

In the context of Procrastination

Persistent concern, dread, or uneasiness about finishing tasks or meeting deadlines is known as anxiety.

Those who procrastinate frequently experience anxiety related to the tasks they are delaying. Several factors can contribute to this anxiousness, including such as perfectionism, a lack of trust in one's skills, a fear of failing, or concerns about the repercussions of not completing the assignment on time. As the deadline approaches, anxiety levels increase, which intensifies the procrastination loop. People who are afraid of not meeting expectations or performing to a sufficient degree may become immobilized and put off taking action to prevent or lessen these upsetting emotions.

NEED AND SIGNIFICANCE OF STUDY

Students frequently struggle with procrastination, which has a negative impact on both their academic achievement and mental health. Students' rising rates of anxiety and despair, which are frequently connected to procrastination, underscore how vital it is to comprehend this phenomenon. Although procrastination may appear to be a straightforward behavioral problem, research shows that it has profound psychological roots, including perfectionism, fear of failure, and poor self-regulation. Because it examines the complex relationship among procrastination, anxiety, and depression, this study is important because it offers insightful information to legislators, educators, and counselors. Developing successful interventions to lessen procrastination's negative effects on students' academic and personal life will be made easier with an understanding of its causes and effects. This study also emphasizes the value of goal-setting techniques, time management training, and counseling services in reducing stress associated with procrastination. This study helps to improve the academic environment by addressing the psychological triggers that underlie it, which in turn improves students' well-being, productivity, and emotional resilience.

OBJECTIVES OF STUDY:

1. To identify the factors those, contribute to procrastination among students.
2. To identify the levels of procrastination, anxiety and depression among the students.
3. To suggest interventions and strategies that can help students overcome procrastination and reduce their anxiety and depression levels.

RATIONALE

Students frequently suffer academically and experience greater anxiety and despair because of procrastinating. Many students put off assignments despite being aware of the deadlines because of things like perfectionism, fear of failing, and a lack of self-control. To find successful solutions, this study investigates the relationship between procrastination and mental health. The results will assist educators and mental health specialists in creating plans to improve the academic performance and general well-being of students.

REVIEW OF LITERATURE

Gupta & Bhatia (2015) – Found a strong positive correlation between academic procrastination and depression among Indian undergraduate students. The study emphasized the importance of addressing procrastination as a potential risk factor for mental health issues, as students with higher procrastination tendencies exhibited more depressive symptoms.

Sharma & Kaur (2016) – Identified fear of failure and poor time management as significant contributors to academic procrastination among Indian students. The study highlighted that procrastination is a

widespread issue in academic settings and stressed the need for time management training and psychological support to reduce its prevalence.

Sharma & Dang (2017) – Established a significant link between procrastination and anxiety among Indian college students. The study emphasized the cultural and contextual influences on this relationship and suggested the need for interventions that address both procrastination behaviors and anxiety to improve student well-being.

Patel & Sharma (2018) – Reported that academic procrastination significantly correlates with anxiety and depression among high school students in urban India. The study emphasized the necessity of early intervention programs in schools to help students develop coping strategies and prevent long-term mental health consequences.

Singh & Narang (2019) – Linked maladaptive perfectionism to academic procrastination, showing that students with high perfectionistic tendencies often delay tasks due to fear of failure. The study emphasized the need to address perfectionism in interventions, helping students set realistic goals and manage their fear of making mistakes.

Singh & Singh (2020) – Confirmed that procrastination is a predictor of anxiety and depression among college students. The study emphasized the need for structured academic interventions, such as goal-setting techniques and study support programs, to mitigate the negative effects of procrastination on students' mental health.

Nair & Sinha (2021) – Found that low self-efficacy is a significant predictor of procrastination. Students who lacked confidence in their academic abilities were more likely to delay tasks, which in turn increased their anxiety and depression levels. The study suggested incorporating self-efficacy enhancement programs in schools to help students build confidence and reduce procrastination.

Jain & Kulkarni (2022) – Demonstrated the effectiveness of cognitive-behavioral strategies in reducing procrastination and improving mental health among Indian college students. The study suggested integrating cognitive-behavioral interventions into student support services to help students develop better coping mechanisms and reduce procrastination-induced stress.

RESEARCH DESIGN

A quantitative research design is used in this study to methodically examine the research problem. With this method, numerical data can be gathered and analyzed to objectively look at relationships, behaviors, or events. Students enrolling in private coaching institutes were the focus of the study, which was carried out in Prayagraj, Uttar Pradesh. To guarantee that various demographic subgroups were fairly represented, a stratified random sampling technique was used, improving the precision and dependability of the results. One hundred teenage kids who were enrolled in secondary schools at the time of the study made up the sample. Using statistical methods, this study design guarantees precision, control, and applicability of the findings to a larger group of students.

TECHNIQUES AND TOOLS TOOL -1

The Depression Anxiety Stress Scale (DASS-21), developed by Lovibond and Lovibond (1995), is a self-report questionnaire designed to measure symptoms of depression, anxiety, and stress among adolescent students. It consists of 21 items, divided into three subscales, each rated on a 0 to 3 scale based on symptom severity. The scores are summed and multiplied by 2 to obtain final scores, which help assess mental health status and guide intervention strategies. The **DASS-21** has demonstrated high reliability and

validity across various clinical and non-clinical populations globally. The tool was administered in print format, with students providing informed consent before completing the questionnaire.

TOOL – 2

The Adolescents' Academic Procrastination Scale is a 32-item self-report instrument designed to measure procrastination tendencies in academic settings. Responses are rated on a five-point scale ranging from Never to Always, with scoring adjusted for positive and negative items. Higher total scores indicate greater levels of academic procrastination. The scale is widely used in educational research to assess students' time management behaviors and learning habits, with an average response time of 25-30 minutes. These tools collectively provide insights into the psychological and behavioral patterns of adolescent students, aiding in comprehensive data analysis.

ADMINISTRATION OF TEST:

The questionnaires, which included instructions, a permission form with sociodemographic information, and the purpose and objectives of the study, were printed and given to the target group. The informed consent form was filled out by the participants prior to answering the questionnaires. The participants were cautioned against overthinking or taking too long to respond to each topic.

INSTRUCTIONS GIVEN WERE AS FOLLOWS:

“Please read each statement carefully There are no right or wrong answers. Do not spend too much time on any one statement. This assessment is not intended to be a diagnosis. If you are concern about your results in any way, please speak with a health professional.”

RESULTS AND DISCUSSION

Table 1 Gender wise Distribution of Respondents (N=100)

Gender	Frequency	Percentage
Male	50	50%
Female	50	50%
Total	100	100%

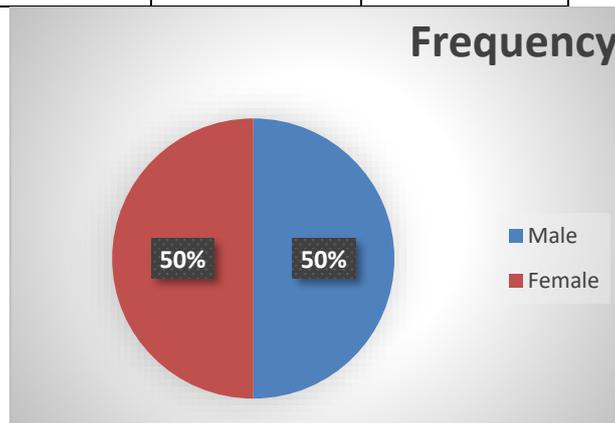


FIGURE 1

This is further explained by the figure (1) which shows the Gender Wise Distribution of respondents through Bar Graph representation. The total no. of the respondents were 100 out of which 50% were males and 50% were females.

Table 2 Factors of Academic Procrastination

Factors of Academic Procrastination	Frequency of Items	Percentage
Academic Perfectionism	11	34%
Academic Motivation	7	22%
Self - Regulation	6	19%
Conscientiousness	5	15%
Academic self - efficacy	3	10%
Total	23	100%

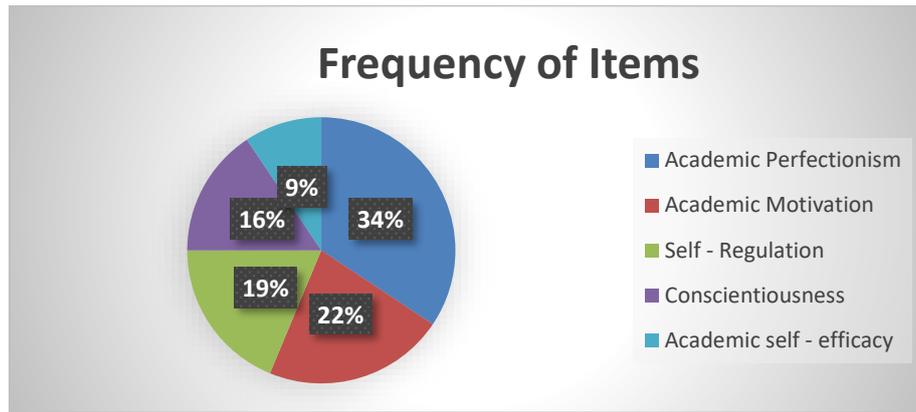


FIGURE 2

This is further explained by the figure (2) that academic perfectionism (34%) is the leading cause of procrastination, followed by low motivation (22%), poor self-regulation (19%), low conscientiousness (15%), and low self-efficacy (10%).

Table 3 Levels of Procrastination among Adolescent Students

Levels of Procrastination	Frequency	Percentage
Moderate	40	40%
Low	24	24%
Very Low	15	15%
High	13	13%
Extremely Low	8	8%

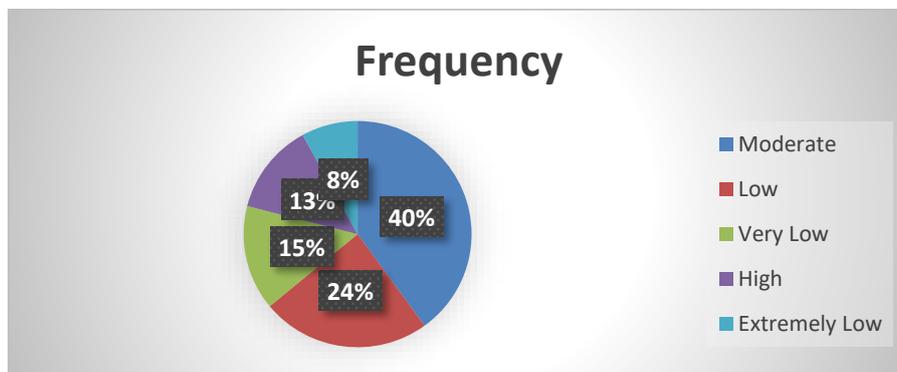


FIGURE 3

This is further explained by the figure (3) which shows that the majority of adolescent students (40%) experienced moderate levels of procrastination. This is followed by 24% of the students reported low levels of procrastination. Very low and high levels of procrastination are observed in 15% and 13% of students, respectively. Only a small portion of the students (8%) exhibit extremely low levels of procrastination.

Table .4 Levels of Anxiety among Adolescent Students

Levels of Anxiety	Frequency	Percentage
Extremely Severe	35	35%
Moderate	31	31%

Severe	20	20%
Mild	9	9%
Normal	5	5%
Total	100	100%

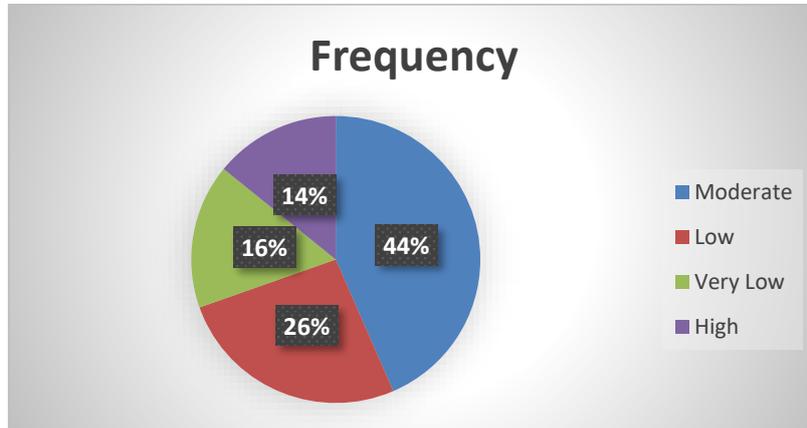


FIGURE 4

This is further explained through the figure (4) which shows the levels of anxiety among adolescent students have been given. The data Show that majority of the respondents has a extremely severe level of anxiety with 35% and 31% of the respondents have a moderate level of anxiety and 20% of the respondents have a severe level of anxiety. 9% of the respondents' level of anxiety is mild. Only 5% of the respondents have a normal level of anxiety.

Table 5 Levels of Depression among Adolescent Students

Levels of Depression	Frequency	Percentage
Moderate	31	31%
Extremely Severe	29	29%
Mild	20	20%
Normal	10	10%
Severe	10	10%
Total	100	100%

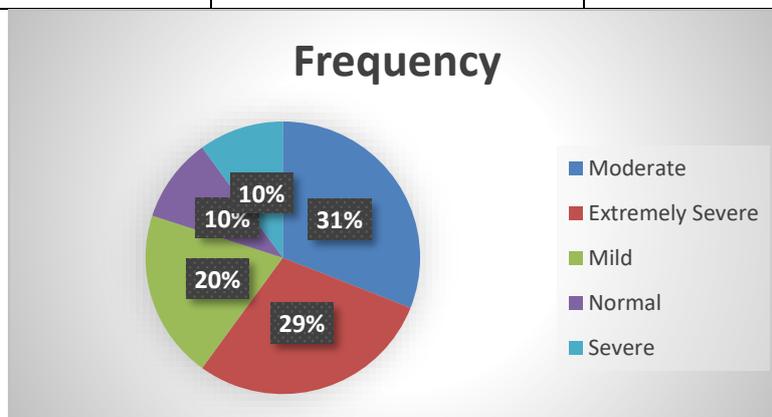


FIGURE 5

This is further explained through the figure 4.4 which shows that the depression level of the adolescent

students with its frequency and percentage. Through the data analysis, we find that 31% of respondents have a moderate level of depression. 29% of the respondents have an extremely severe level of depression, there are 20% of the respondent with mild level of depression. There are 10% of the respondents with normal level of depression and 10% of the respondents with severe level of depression.

Few supported research is given below:

- Solomon, L. J., & Rothblum, E. D. (1984). Academic procrastination: Frequency and cognitive-behavioral correlates. *Journal of Counseling Psychology*, 31(4), 503-509.
- Van Eerde, W. (2003). A meta-analytically derived nomological network of procrastination. *Personality and Individual Differences*, 35(6), 1401-1418.
- Steel, P., & Klingsieck, K. B. (2016). Academic procrastination: Psychological antecedents revisited. *Australian Psychologist*, 51(1), 36-46.

Major Findings of this study are:

- **Strong Link Between Procrastination and Mental Health:** The study confirms a significant relationship between procrastination, anxiety, and depression, showing that students who procrastinate frequently experience heightened emotional distress, academic struggles, and reduced overall well-being.
- **Key Psychological and Behavioral Factors:** Academic perfectionism, poor self-regulation, low motivation, and low self-efficacy are major contributors to procrastination. These factors create a cycle of avoidance, stress, and impaired performance, emphasizing the need for targeted psychological and behavioral interventions.
- **Need for Holistic Interventions:** To mitigate the negative effects of procrastination, a combination of time management training, cognitive-behavioral strategies, self-efficacy enhancement programs, and mental health support should be integrated into academic settings to improve student productivity, emotional resilience, and overall well-being.

Interventions and Strategies to Overcome Procrastination

- **Cognitive-Behavioral Therapy (CBT) & Counseling**
 - Challenge negative thoughts and replace them with positive, realistic beliefs.
 - Use behavioral activation and exposure therapy to reduce avoidance.
 - Provide a supportive environment through regular counseling.
- **Mindfulness & Stress Reduction**
 - Practice mindfulness meditation, deep breathing, and progressive muscle relaxation.
 - Implement mindfulness-based stress reduction (MBSR) programs in schools.
 - Enhance self-awareness to recognize and manage stress effectively.
- **Peer Support & Mentoring**
 - Create peer groups for shared experiences and motivation.
 - Establish mentoring programs for guidance and emotional support.
 - Encourage goal setting and confidence-building activities.
- **Physical Activity & Healthy Lifestyle**
 - Promote regular exercise to reduce anxiety and improve mood.
 - Encourage balanced nutrition, hydration, and adequate sleep.
 - Link physical health with mental resilience and academic performance.

- **Academic Support & Flexible Policies**

- Provide tutoring, study skill workshops, and writing labs.
- Offer flexible deadlines and reduced course loads during high-stress periods.
- Ensure students are aware of and comfortable using support resources.

- **Technology & Digital Interventions**

- Utilize apps for task management, meditation, and mental health support.
- Provide virtual counseling and cognitive-behavioral exercises online.
- Integrate digital tools into students' routines for accessible support.

CONCLUSION

This study demonstrates the close relationship between procrastination, anxiety, and depression in adolescents. It also shows that a considerable proportion of students engage in moderate to high levels of procrastination, which is frequently caused by traits like perfectionism, low motivation, and poor self-control. According to the research, procrastination increases anxiety and depressed symptoms, which highlights the necessity of efficient treatments. Its detrimental effects can be lessened by addressing procrastination using time management training, self-regulation methods, and cognitive-behavioral procedures. Teachers, therapists, and legislators should collaborate to establish safe learning settings that encourage better coping strategies, which will ultimately enhance kids' mental health and academic performance.

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