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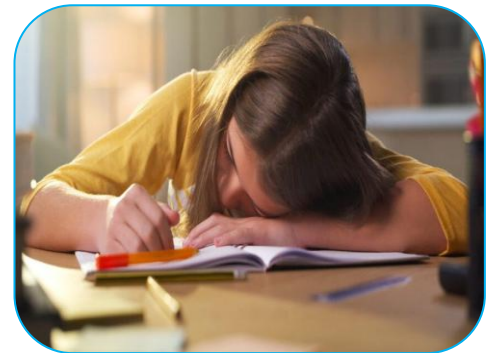
“ROLE OF GENDER IN PROCRASTINATION AND MENTAL HEALTH AMONG COLLEGE STUDENTS”

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ABSTRACT

The study aimed to explore the role of gender in procrastination and mental health among college students. Specifically, the objectives were to examine procrastination levels and investigate mental health differences between male and female students. The research was conducted on a sample of 100 college students (50 males and 50 females) from Nashik City, Maharashtra, with an age range of 18 to 25 years (Mean = 22.35, SD = 3.54). Two research tools were employed: Samvaidna's Procrastination Scale (Abraham, 2013) and the Mental Health Inventory (Jagdish & Srivastav). The Procrastination Scale measured procrastination behaviors on a 5-point Likert scale, with scores ranging from 30 to 150. The Mental Health Inventory assessed overall mental health with a reliability coefficient of 0.73 and a construct validity of 0.54. The study tested two hypotheses: (1) There would be no significant difference in procrastination between male and female students; (2) There would be no significant difference in mental health between male and female students. However, statistical analysis revealed significant differences in both dimensions. Male students exhibited higher levels of procrastination, while female students reported better mental health. These findings underscore the importance of considering gender differences when addressing procrastination and mental health among college students.



KEYWORDS: Procrastination, Mental Health, Gender, College Students.

INTRODUCTION:

Procrastination, delaying or postponing tasks, is an expected behavior among college students that can negatively affect academic performance and mental health. Mental health issues such as anxiety, depression, and stress are prevalent among students, and procrastination often exacerbates these problems. Understanding the role of gender in procrastination and its impact on mental health is crucial for developing targeted interventions to support students.

GENDER DIFFERENCES IN PROCRASTINATION

Research has shown that gender differences in procrastination are complex and influenced by various factors, including personality traits, socialisation processes, and cultural expectations.

- 1. Personality Traits:** Some studies suggest that women are more likely to procrastinate than men due to higher levels of conscientiousness and perfectionism. Women may delay tasks because of a fear of failure or a desire to produce perfect work. Conversely, men may procrastinate due to lower

conscientiousness and impulsivity, preferring short-term rewards over long-term goals (Steel, 2007).

- 2. Socialization and Gender Roles:** Gender socialisation plays a significant role in shaping procrastination behaviors. Traditional gender roles often place higher expectations on women to be organized, responsible, and detail-oriented, leading to a tendency to procrastinate due to pressure to meet these standards. Conversely, men may procrastinate due to societal norms that encourage risk-taking and reward-seeking behaviors (Nolen-Hoeksema & Jackson, 2001).
- 3. Cultural Expectations:** Cultural factors also influence gender differences in procrastination. In some cultures, women may experience greater societal pressure to succeed academically, leading to increased anxiety and procrastination. In contrast, men may face less pressure to conform to academic expectations, resulting in different procrastination patterns (Balkis & Duru, 2009).

GENDER DIFFERENCES IN MENTAL HEALTH

Gender also plays a critical role in the mental health of college students, with women generally reporting higher levels of anxiety, depression, and stress than men. These differences may be attributed to various factors, including biological, psychological, and social influences.

- 1. Biological Factors:** Hormonal differences between men and women can influence mental health. For example, fluctuations in estrogen levels have been linked to mood disorders in women, particularly during menstruation, pregnancy, and menopause (Albert, 2015). Additionally, women are more likely to experience stress-related hormonal imbalances, which can contribute to anxiety and depression (Kuehner, 2017).
- 2. Psychological Factors:** Women are more likely to ruminate, a cognitive process where individuals repeatedly focus on negative emotions. Rumination is strongly associated with depression and anxiety and may contribute to higher rates of these mental health issues among women (Nolen-Hoeksema, 2012). Men, on the other hand, are more likely to engage in problem-focused coping strategies, which may help them manage stress more effectively.
- 3. Social Factors:** Gender-based socialization and cultural expectations significantly impact mental health. Women often face societal pressures to conform to traditional roles, which can lead to feelings of inadequacy, stress, and depression. Men may experience mental health challenges due to societal norms that discourage emotional expression and vulnerability, potentially leading to issues such as substance abuse and aggression (Mahalik et al., 2003).

The Interplay Between Procrastination, Gender, and Mental Health

Procrastination can exacerbate mental health issues in college students, and the relationship between procrastination and mental health may vary by gender.

- 1. Women:** Women who procrastinate may experience higher levels of anxiety and depression due to the pressure to meet academic and societal expectations. The tendency to ruminate can further intensify these feelings, creating a vicious cycle where procrastination leads to increased mental health problems, which in turn leads to more procrastination (Sirois & Tosti, 2012).
- 2. Men:** For men, procrastination may be linked to a different set of mental health challenges. The tendency to avoid tasks or seek short-term rewards can lead to academic underachievement, which may result in feelings of failure and low self-esteem. However, men may be less likely to seek help for mental health issues due to societal norms that discourage vulnerability (Rice et al., 2015).

OBJECTIVES:

1. To examine procrastinations among male and female college students.
2. To Investigate the Mental Health among male and female college students.

HYPOTHESES:

1. There will be no significant difference between male and female college students in the dimension of procrastination.

2. There will be no significant difference between male and female college students in the dimension of mental health.

Sample:

For the present study, 100 subjects were selected from Nashik City, Maharashtra State. The adequate sample consisted of 100 subjects 50 male college students, and 50 female college students. The age range of subjects was 18 to 25 (Mean 22.354, SD = 3.54).

Research Tools:-

1) Samvaidna’s Procrastination Scale (Abraham, 2013):

Abraham, 2013 constructed Procrastination Scale. The response was measured on a 5-point Likert Scale. A weight of 5 was assigned to the strongly agree response, 4 for agree, 3 for undecided, a weight for disagree and 1 for the strongly disagree response. The total scores are obtained by adding the weights assigned. The total range is from 30-150.

2) Mental Health Inventory:

Mental health inventory constructed by Dr. Jagdish and Dr. A K Srivastav. 56 items are in the questionnaire and each of the items has four responses – 1. Almost always true, 2. Some time true, 3. Rarely true and 4. Almost never true. The reliability of the inventory was determined by split-half method using odd-even procedure. Overall mental health reliability coefficients is .73 and Construct validity mental health inventory and general health questionnaire (Gold beig, 1978) it was found to be .54

Variable

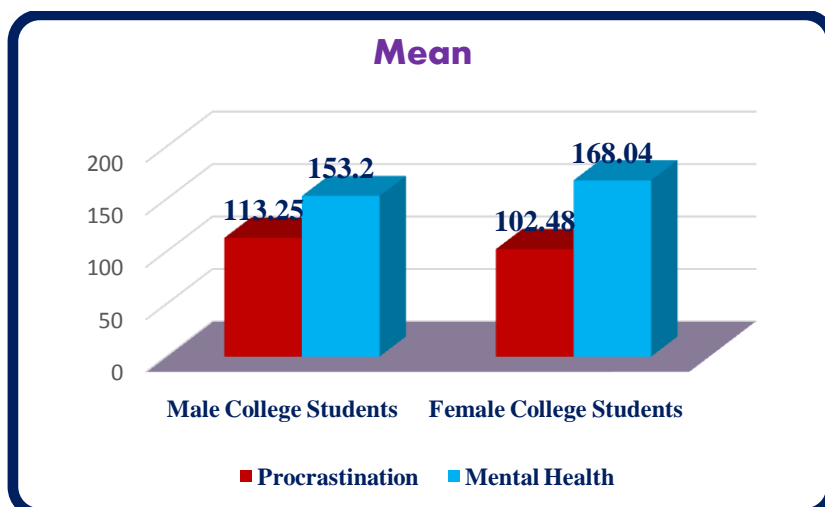
Independent variable-	Types of Procrastination	a) High	b) Low
Dependent Variable	1. Procrastination	2. Mental Health	

Statistical Interpretation and Discussion

Mean S.D. and “t” Value of Procrastination and Mental Health among male and female college students.

Dimensions	College Students				df	“t”
	Male		Female			
	Mean	SD	Mean	SD		
Procrastination	113.25	5.63	102.48	4.77	98	10.32**
Mental Health	153.20	5.45	168.04	5.90	98	13.06**

*Significant Level *0.05 = 1.98, **0.01 = 2.58*



Male Students: The mean score for procrastination among male students is 113.25 with a standard deviation of 5.63. Female Students: The mean score for procrastination among female students is lower, at 102.48 with a standard deviation of 4.77. t-Test Analysis: The t-value is 10.32, which is significantly higher than the critical value at both the 0.05 (1.98) and 0.01 (2.58) significance levels. This indicates a statistically significant difference in procrastination levels between male and female students, with males procrastinating more than females.

Male Students: The mean score for mental health among male students is 153.20 with a standard deviation of 5.45. Female Students: The mean score for mental health among female students is higher, at 168.04 with a standard deviation of 5.90. t-Test Analysis: The t-value is 13.06, which is also significantly higher than the critical values at both the 0.05 and 0.01 significance levels. This suggests a statistically significant difference in mental health scores, with female students reporting better mental health compared to their male counterparts.

The statistical analysis reveals significant gender differences in both procrastination and mental health among college students. The higher procrastination scores among male students align with existing literature that suggests men may engage in more procrastination due to factors such as lower conscientiousness and higher impulsivity. This behavior may be linked to societal norms that encourage men to focus on short-term rewards rather than long-term planning (Steel, 2007). The lower procrastination scores among female students may reflect their higher levels of conscientiousness and the pressure they face to perform well academically, despite potential fears of failure (Balkis & Duru, 2009).

The analysis indicates that female students report better mental health compared to male students. This finding is interesting given that previous research often suggests that women are more likely to experience anxiety and depression. However, in this context, it might be that the pressures leading to procrastination among males have a more direct negative impact on their mental health. This supports the idea that procrastination may be a mediating factor that worsens mental health outcomes, particularly for men (Sirois & Tosti, 2012).

The results emphasize the importance of addressing gender-specific factors in procrastination and mental health interventions for college students. Given the significant differences observed, tailored approaches that consider the unique challenges faced by male and female students are necessary to support their academic and psychological well-being effectively.

CONCLUSION:

- 1) Statistically significant difference in procrastination levels between male and female students, with males procrastinating more than females.
- 2) Statistically significant difference in mental health scores, with female students reporting better mental health than their male counterparts.

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