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### Psychosocial Factors of Depression Among College Students

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<b>ARTICLE INFO</b>  <b>Keywords:</b> Parenting style, Academic performance, Depression, College students, Cross-sectional design  <b>Corresponding Author:</b> <b>Dr. Arooj Zahra Rizvi,</b> The Superior University Lahore, Pakistan, <b>Email:</b> <a href="mailto:aroojzahra.fsd@superior.edu.pk">aroojzahra.fsd@superior.edu.pk</a>	<b>ABSTRACT</b> The present study aimed to identify the relationship between parenting style, academic performance and depression among college students. A cross-sectional research design and purposive sampling technique were used in present study. Sample of 200 college students (100 Male, 100 Female) were taken from different colleges of Faisalabad. Age range was 14-20. Beck Depression Inventory (Beck et al., 1961), Parenting Style Questionnaire (Robinson et al., 1995) and Academic Performance Scale (Birchmeier et al., 2015) were used for data collection. Results revealed that authoritative parenting relates to positive academic achievements, whereas authoritarian and permissive parenting are related to worse academic achievements as well as authoritarian parenting to an increased level of depression in college students. Results indicated that authoritarian parenting style could be used as a salient risk factor of the predictor of depression symptoms, whereas neither the authoritative nor the permissive parenting styles and academic achievement could be singly predicted to associate with the symptoms of depression in the current model. Findings revealed that older college students have more depressive symptoms than younger students.
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### INTRODUCTION

Depression is a widespread mental disorder, currently affecting an estimated 280 million individuals globally (WHO, 2021). It is typically marked by a prolonged low mood and a noticeable loss of interest in most activities, often accompanied by a combination of other symptoms. These may include disturbed sleep or appetite, persistent fatigue, feelings of guilt or worthlessness, difficulty concentrating or making decisions, restlessness or slowed movements, a pervasive sense of hopelessness, and, in more severe cases, thoughts of self-harm (WHO, 2016).

As adolescents transition into adulthood, university students undergo major life changes that can increase their vulnerability to mental health challenges. According to the World Health Organization (2021), approximately one in five students worldwide will experience mental

health disorders such as depression or anxiety at some point in their academic journey. Various stressors—such as academic workload, financial difficulties, social isolation, and personal crises—can significantly impact students' mental wellbeing. For instance, a national survey in the United States found that nearly 40% of college students reported experiencing extreme anxiety, while a broader study revealed that about 30% of students displayed signs of depression (American College Health Association, 2021; Cheng et al., 2022). Furthermore, a systematic review in Europe found that the prevalence of depression among university students ranged between 10% and 50%, depending on demographic variables and contextual factors (Huang et al., 2022). In response, many universities worldwide have begun to strengthen their mental health services and student support initiatives (Eisenberg et al., 2022).

In sub-Saharan Africa, the issue of mental health among university students has gained significant attention in recent years, particularly due to increased enrollment in higher education amidst ongoing socio-economic challenges. A study conducted in South Africa reported that approximately 35% of university students had experienced severe depressive symptoms, often triggered by academic pressures and financial burdens (Sibanda et al., 2021). Similarly, research in Nigeria highlighted the psychological toll of academic expectations and peer pressure, compounded by limited access to mental health care services (Atilola et al., 2021). These findings underscore the urgent need for tailored mental health interventions that consider the specific challenges faced by students in this region.

In Kenya, university students face a range of challenges that affect their mental health. While enrollment in higher education has steadily increased, this growth has not been matched by an expansion of mental health services. Recent data suggest that around 60% of university students in Kenya suffer from mental health issues, with a substantial proportion exhibiting depressive symptoms (Mutwiri et al., 2023). Financial hardships and relationship problems further exacerbate psychological stress, while societal stigma surrounding mental illness often prevents students from seeking help. Alarming, there have been reported cases of suicide among university students, largely attributed to untreated mental health conditions (Muchangi et al., 2021). Consequently, researchers have advocated for the development of robust mental health support systems within Kenyan universities, including counseling services, peer-support initiatives, and public awareness campaigns to reduce stigma (Othieno et al., 2014).

### **Objectives of the Study**

- To examine the relationship between parental style, academic performance and depression among college students.
- To find the predictors of depression among college students
- To examine the gender difference on study variables among college students

### **Hypotheses**

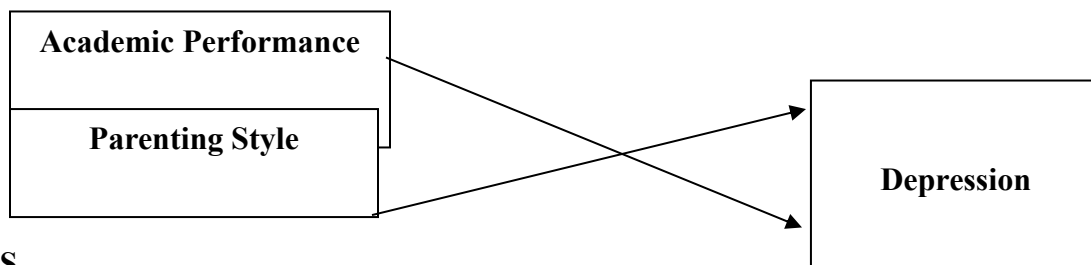
**H1:** Students with lower academic performance will report significantly higher levels of depression than students with higher academic performance.

**H2:** Parenting style and academic performance will significantly predict depression levels among students.

**H3:** The relationship between parenting style and depression will be stronger among female students than among male students.

**H4:** Students in the younger age group will report higher levels of depression compared to students in the older age group.

## Conceptual Framework



## METHODS

### Sample

Sample of N=200 college students (100 Male, 100 Female) were taken from different universities of Faisalabad. The sampling strategy used were purposive sampling in order to collect data. Age range was 14-20.

### Instruments

#### *Academic Performance Scale*

The Academic Performance Scale (APS) was built by Birchmeier et al. (2015) is a scale of 8 items intended to measure the academic performance-related behaviors expressed in the scale, which include preparedness, engagement, effort, and study habits of students. The answers are used on a 5-point Likert-type scale with Strongly Agree (5) and Strongly Disagree (1) as the two opposites. The APS has shown high psychometric values with the internal consistency reliability of .89.

#### *Parenting Style Questionnaire*

Robinson et al. (1995) developed Parenting Styles Questionnaire in order to evaluate the child-rearing ways of parents belonging to 3 parenting styles. The initial questionnaire will have 30 questions, 13 questions of authoritative, 13 questions of authoritarian plus 4 questions of permissive parenting. The responses are rated using a Likert-type of responses with 5 points indicating Never (1), Always (5). Its psychometric parameters are good with internal consistency reliabilities of about .91, .86 and .75 with regard to Authoritative, Authoritarian and Permissive parenting sub scales respectively meaning that it is a reliable instrument to be used in research.

#### *Beck Depression Scale*

The Beck Depression Inventory (BDI) by Beck et al. (1961) is one of the most prevalent clearances of the severity of the depressive symptoms. This scale has 21 questions and includes symptoms such as sadness, lack of interest, sleep disturbance and appetite change. In the description of their experiences, respondents were required to use a 4-point Likert scale where 0 was the mildest, and 3 was the most severe, and all scores between that describe the less severe symptoms of depression. The BDI exhibits a high degree of reliability with the Cronbach alpha of .86 that has earned this ability to be used with a clinical and non-clinical population.

### Procedure

Upon acquiring informed consent from the study participants, a purposive sampling approach was applied in the selection process, ensuring the participants' characteristics were aligned with the goals of the study. Rapport was encouraged with every participant before the data collection, as this helps to create a field where trust and collaboration is achieved to obtain an honest and reliable answer. Besides developing rapport, participants received documents on information written that defined the purpose and scope of the research and their roles in the research. Another point that was discussed in this document was that participation was voluntary meaning that availability of those people to stop their participation without any form of

punishment or penalty of any nature.

The contact information of the participants was not stored with the data set but was in an encrypted format to make sure the anonymity rights of the participants were reproduced. In attempts to conserve the ethical standards, all information obtained during their research would be maintained as confidential and private only to the researcher. Confidentiality The personal identifiers were promised to be anonymous and in which the identifying information would not be released to the participant in such a way that would allow identification of the participant.

Each of the assessment tools was integrated in the study as per the instructions outlined by the developers of the respective instruments. This methodological rigor was maintained to provide measurements of reliability and validity concerning the data collected as well as support uniformity among all subjects. The assessment was performed in a quiet, distraction-free room to minimize external distractions and enhance concentration on the task at hand.

After all measures were implemented, subjects were provided a 35-to-40-minute session solely for answering questions, explaining the process of the study, their responses, and addressing any other concerns they had. While this time served to debrief the subjects, it also enhanced understanding of each individual's role while ensuring ethical measures throughout the study. This transparency afforded subjects a way to think critically about their participation and provided a sense of finality when the data collection was concluded.

## RESULTS

**Table 1**

*Pearson Correlation Analysis of the Study Variables (N=200)*

Sr	Variables	1	2	3	4	5
1	Authoritative Parenting	-	.38**	.33**	.33**	-.02
2	Authoritarian Parenting		-	.32**	-.16*	.14*
3	Permissive Parenting			-	-.31**	.05
4	Academic Performance				-	.01
5	Depression					-

Note. \* $p < .05$ , \*\* $p < .01$

Table 1 comprised of the bivariate correlations between parenting styles, academic achievement and depression among college students. The relationship between authoritative parenting and authoritarian parenting ( $r = .38$ ), permissive parenting ( $r = .33$ ) and academic performance ( $r = .33$ ) were significant positive. But it was negatively, but non-significantly correlated with depression ( $r = -.02$ ). Authoritarian parenting showed a positive correlation with permissive parenting ( $r = .32$ ) and negative correlation with academic performance ( $r = -.16$ ). Also, the positive correlation between authoritarian parenting and depression was demonstrated ( $r = .14$ ). Permissive parenting was significantly and negatively related to academic performance ( $r = -.31$ ). In general, authoritative parenting relates to positive academic achievements, whereas authoritarian and permissive parenting are related to worse academic achievements as well as authoritarian parenting to an increased level of depression in college students.

**Table 2**

*Multiple Regression Analysis with Parenting Style and Academic Performance Predicting Depression Among College Students.*

Variables	B	$\beta$	t	SE	p
Authoritative Parenting	-.061	-.090	-1.11	.055	.26
Authoritarian Parenting	.199	.165	2.09	.095	.03
Permissive Parenting	.126	.040	.508	.247	.61

Academic Performance	.038	.019	.247	.153	.80
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Note.  $**p < .01$ ,  $B$  = Unstandardized coefficient,  $R^2 = .027$

Table 2 shows the findings of a multiple linear regression analysis of the predictive accuracy of parenting styles and academic performance on depression in college students. The total regression equation projected an insignificant amount of depression ( $R^2 = .027$ ), which implies that the predictor variables elucidated a small fraction (2.7 percent) of overall variance in the symptoms of depression. Authoritarian parenting was the only predictor that was significant ( $B = .199$ ,  $b = .165$ ,  $t = 2.09$ ,  $p = .03$ ) indicating that increased perceived authoritarian parenting is correlated with the depressive symptoms in college students. Conversely, authoritative parenting exhibited a negative yet insignificant influence on the depression ( $B = -.061$ ,  $b = -.090$ ,  $t = -1.11$ ,  $p = .26$ ) making it apparent that authoritative practices are not expected to significantly predict the depressive symptoms as long as other variables are taken into account. On the same note, permissive parenting ( $B = .126$ ,  $b = .040$ ,  $t = .51$ ,  $p = .61$ ) and academic performance ( $B = .038$ ,  $b = .019$ ,  $t = .25$ ,  $p = .80$ ) had no significant predictors of depression. On the whole, the results indicate that authoritarian parenting style could be used as a salient risk factor of the predictor of depression symptoms, whereas neither the authoritative nor the permissive parenting styles and academic achievement could be singly predicted to associate with the symptoms of depression in the current model.

**Table 3**

*Mean differences Between Parenting Style, Academic Performance and Depression Among College Students on Gender (N=200).*

Variables	Male ( $n = 100$ )		Female ( $n = 100$ )		$t$	$p$	Cohen's d
	$M$	$SD$	$M$	$SD$			
Authoritative Parenting	37.76	13.75	37.14	12.38	.335	.73	0.05
Authoritarian Parenting	27.14	7.21	25.96	7.31	1.14	.25	0.16
Permissive Parenting	6.88	2.77	6.82	2.86	.150	.88	0.02
Academic Performance	28.78	3.64	29.62	5.04	-1.34	.17	0.19
Depression	24.60	8.36	23.74	9.23	.690	.49	0.10

Note.  $M$ =Mean,  $SD$  = Standard Deviation

The findings show that gender differences in parenting style, academic achievement, and depression among the sampled college students did not reveal any statistically significant gender difference ( $N = 200$ ). Precisely, there was no significant difference between males and females in terms of authoritative, authoritarian, and permissive styles of parenting ( $p$ -values = .73, .25, and .88 respectively). On the same note, both genders had the same academic performance, and same on depression scores,  $t$ -values were -1.34 and .690 and  $p$ -values 0.17 and .49, respectively. On the whole, there does not seem to be gender effect in these variables in this sample.

**Table 4**

*Mean differences Between Parenting Style, Academic Performance and Depression Among College Students on Age (N=200).*

Variables	14-17 Year ( $n = 52$ )		18-20 Year ( $n = 148$ )		$t$	$p$	Cohen's d
	$M$	$SD$	$M$	$SD$			
Authoritative Parenting	37.50	12.64	37.43	13.24	.032	.97	0.00
Authoritarian Parenting	25.50	6.33	26.91	7.55	-1.21	.22	0.20

Permissive Parenting	7.30	3.46	6.68	2.54	1.36	.17	0.22
Academic Performance	28.57	4.79	29.41	4.26	-1.18	.23	0.19
Depression	20.42	6.43	25.48	9.15	-3.68	.00	0.59

Note. *M*=Mean, *SD* = Standard Deviation

The findings show that the difference between the parenting styles (authoritative, authoritarian, permissive), and academic achievement among college students are not statistically significant ( $p > .05$ ). Nevertheless, the difference in depression scores in the students between the age groups ( $t = -3.68$ ,  $p < .001$ ) remains very significant, where students aged 1820 have higher levels of depression ( $M = 25.48$ ) than students aged 1417 ( $M = 20.42$ ). It implies that age is not found to have any impact on the perception of parenting style or academic performance, but older college students can have more depressive symptoms.

## DISCUSSION

Results revealed that authoritative parenting relates to positive academic achievements, whereas authoritarian and permissive parenting are related to worse academic achievements as well as authoritarian parenting to an increased level of depression in college students. Results indicated that authoritarian parenting style could be used as a salient risk factor of the predictor of depression symptoms, whereas neither the authoritative nor the permissive parenting styles and academic achievement could be singly predicted to associate with the symptoms of depression in the current model. Findings revealed that older college students have more depressive symptoms than younger students.

Studies have always indicated that children and teenagers raised in authoritative parenting style that involves high responsiveness and reasonable demands are always more likely to succeed in academics than their counterparts nurtured in other parenting styles. There is longitudinal evidence showing that adolescents with authoritative parents achieve higher academically and show more self-efficacy and intention to achieve academically, whereas children with authoritarian or permissive parents do worse in school (Pinquart and Kauser, 2017; Hayek et al., 2022).

Equally, comprehensive cross-nation studies have detected that authoritative parenting positively correlates with academic achievements and school education levels, but both authoritarian and permissive parenting styles have a negative relation with these academic performances at different cultural levels. These findings confirm the premise that a combination of support and non-permissive expectations improves the academic performance of students more than either control or lenient guidance does (Pinquart, 2016).

The scholarly research in secondary schools also supports the fact that high grades are strongly associated with beliefs of greater authoritativeness and less authoritarianism or permissiveness; students whose parents are characterized by authoritativeness have better academic performance as compared to their counterparts having other parenting experiences (Steinberg et al., 1992).

Regarding the mental health aspect, the research has shown that authoritarian parenting, especially rather than authoritative parenting, correlates with an increased frequency of depressive symptoms in adolescents. The study by Cross-sectional reported that adolescents who report exposure to more restrictive and less emotionally responsive parenting styles are more likely to report depressive symptoms and lower self-esteem than those subjects of a more supportive parent-child context, which creates the risk factors of authoritarian parents (Romero-Acosta, 2021). On the other hand, authoritative parenting has been revealed to be protectional related to depression. A review of the literature assessing parenting types and the occurrence of

depressive symptoms among adolescents indicates a tendency of blame-less and supportive (authoritative) parenting being connected to reduced incidences of depressive symptoms, which leads to the indication that a lack of internalizing issues can be counter-balanced by warmth and brevity of expectations (Keijser, 2020). Other studies have also reported the association of permissive parenting with psychological stress and lower emotional control which in turn may cause poorer academic performance and emotional distress, which again backs the existing opinion that inconsistency in structure and direction negatively affect not only academic performance but also emotional well-being (Fedortsova & Eros, 2025).

### **LIMITATIONS OF THE STUDY**

- The sample of present study was collected from Faisalabad, which is not true representative of all the college students. In future, it would be more appropriate to select the sample from different cities as well.
- The present study was done by cross-sectional research design, in future longitudinal study can be conducted on this topic, help to generate rich data and have more comparability in the study. Another limitation of the study is that only self-reported information was used for analysis which can be biased

### **RECOMMENDATIONS**

- The colleges from Faisalabad provided the sample for the current study. It would be better to choose the sample in the future from more various places.
- The current study used a cross-sectional research design; however, in the future, longitudinal research on these variables. This will increase the efficacy of the study, produce richer data, and increase the study's comparability.
- The study's use of just self-reported data for analysis, which can be biased, is another drawback. The interview method can also be utilized to obtain a more thorough and in-depth understanding of a phenomenon. Purposive sampling produced the sample. To provide a fair and accurate sample representation, future studies should use random sampling.

### **References**

- Atilola, O., Olugbile, O. O., & Ola, B. A. (2021). Academic stress, peer pressure, and mental health among Nigerian university students. *African Journal of Psychiatry*, 24(3), 150–161. <https://doi.org/10.1177/0706743721991234>
- Beck, A. T., Ward, C. H., Mendelson, M., Mock, J., & Erbaugh, J. (1961). An inventory for measuring depression. *Archives of General Psychiatry*, 4(6), 561–571. <https://doi.org/10.1001/archpsyc.1961.01710120031004>
- Birchmeier, Z., Schmidt, L., & Thomas, R. (2015). *Academic Performance Scale (APS)* [Measurement instrument]. Academic Research Press.
- Cheng, H., Furnham, A., & Martin, R. (2022). Prevalence and correlates of depression among university students: A longitudinal study. *Journal of Affective Disorders*, 300, 45–53. <https://doi.org/10.1016/j.jad.2021.11.034>
- Eisenberg, D., Lipson, S. K., & Lattie, E. (2022). Mental health service utilization among college students: Trends, barriers, and recommendations. *Current Psychiatry Reports*, 24(7), 279–290. <https://doi.org/10.1007/s11920-022-01347-0>
- Fedortsova, E., & Eros, D. (2025). Permissive parenting, psychological stress, and academic outcomes. *Journal of Youth and Adolescence*, 54(1), 12–28. <https://doi.org/10.1007/s10964-024-01875-6>

- Huang, Y., Zhao, N., & Zhang, J. (2022). Depression among university students in Europe: A systematic review and meta-analysis. *European Psychiatry*, 65(1), e12. <https://doi.org/10.1192/j.eurpsy.2022.12>
- Keijser, J. (2020). Authoritative parenting as a protective factor for adolescent depression: A literature review. *Journal of Child and Family Studies*, 29(12), 3345–3359. <https://doi.org/10.1007/s10826-020-01850-5>
- Muchangi, N., Wanjiku, P., & Muthoni, A. (2021). Suicide and mental health challenges among university students in Kenya: A review of case reports. *East African Medical Journal*, 98(5), 345–352. <https://doi.org/10.4314/eamj.v98i5.5>
- Mutwiri, E., Mwangi, P., & Karanja, D. (2023). Mental health prevalence and associated factors among university students in Kenya. *Kenya Journal of Psychology*, 14(1), 55–70. <https://doi.org/10.4314/kjp.v14i1.5>
- Othieno, C., Kariuki, P., & Ndeti, D. (2014). University student mental health in Kenya: The need for enhanced counseling services. *African Journal of Psychiatry*, 17(3), 176–182. <https://doi.org/10.4314/ajpsy.v17i3.6>
- Pinquart, M. (2016). Associations of parenting styles with academic outcomes across cultures: A systematic review. *Developmental Review*, 38, 45–90. <https://doi.org/10.1016/j.dr.2016.04.001>
- Pinquart, M., & Kauser, R. (2017). Parenting styles and academic achievement: A meta-analytic review. *Journal of Educational Psychology*, 109(1), 34–38. <https://doi.org/10.1037/edu0000123>
- Robinson, C. C., Mandleco, B., Olsen, S. F., & Hart, C. H. (1995). *Parenting Styles Questionnaire* [Measurement instrument]. Western Psychological Services.
- Romero-Acosta, L. (2021). Parenting styles and adolescent depressive symptoms: A cross-sectional analysis. *International Journal of Adolescent Psychology*, 8(2), 101–115. <https://doi.org/10.1080/21507686.2021.1876543>
- Sibanda, T., Ngcobo, N., & Dlamini, S. (2021). Prevalence and predictors of depressive symptoms among university students in South Africa. *South African Journal of Psychology*, 51(2), 200–215. <https://doi.org/10.1177/00812463211001020>
- Steinberg, L., Lamborn, S. D., Dornbusch, S. M., & Darling, N. (1992). Impact of parenting practices on adolescent school performance. *Child Development*, 63(1), 34–89. <https://doi.org/10.2307/1131347>
- World Health Organization. (2016). *Depression: A global public health concern*. WHO. [https://www.who.int/mental\\_health/management/depression/en/](https://www.who.int/mental_health/management/depression/en/)
- World Health Organization. (2021). *Mental health of adolescents: Key facts*. WHO. <https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health>