

## Relationship of Learned Helplessness with Anxiety, Depression, and Stress Among Undergraduate Students

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### ABSTRACT

The present study examined the relationship between learned helplessness and three major psychological outcomes anxiety, depression, and stress among undergraduate students. A purposive sample of 100 students (50 males, 50 females), aged 18–21 years, was drawn from colleges in Aurangabad. Participants completed the Learned Helplessness Scale and the Anxiety, Depression, and Stress Scale (ADSS). Data were analyzed using Pearson's product-moment correlation. Results revealed significant and strong positive correlations between learned helplessness and anxiety, depression and stress.

**Keywords:** *Learned Helplessness, Anxiety, Depression, Stress, Undergraduate Students*

Undergraduate students occupy a developmental window marked by rapid cognitive, social, and emotional change, and the university context introduces novel academic demands, social expectations, and identity challenges. These pressures make college life a high-risk period for the emergence or worsening of common mental-health problems such as anxiety, depression, and stress.

Learned helplessness is a well-established psychological concept first described in animal studies and later extended to human psychopathology by Martin Seligman and colleagues. At its core, learned helplessness refers to a cognitive motivational state that arises when an individual experiences uncontrollable adverse events and subsequently comes to expect that their responses are ineffective, producing passivity, reduced problem-solving, and negative affect (Seligman, 1972). This model was an early attempt to explain how exposure to uncontrollable stressors can produce enduring changes in motivation and mood, and it became foundational to cognitive theories of depression.

Conceptually, learned helplessness overlaps with cognitive risk factors implicated in anxiety and depression. When students perceive academic setbacks, social rejection, or repeated failure as beyond their control, they may adopt a pessimistic explanatory style attributing negative events to stable, global, and internal causes which in turn fosters hopelessness, withdrawal, and dysphoric moods (Miller & Seligman, 1975). This cognitive pattern reduces active coping and increases vulnerability to depression; it may also amplify stress reactivity and anxiety because perceptions of uncontrollability heighten perceived threat and reduce perceived self-efficacy.

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Received: March 22, 2021; Revision Received: March 26, 2021; Accepted: March 30, 2021

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Empirical evidence from student samples supports links between learned helplessness and poorer academic and mental-health outcomes. Studies have shown that helplessness-like beliefs predict lower engagement, impaired performance, and higher depressive symptoms among university students, and that learned helplessness can mediate the relationship between adverse academic conditions (e.g., effort–reward imbalance) and downstream outcomes such as disengagement and psychological distress. These findings suggest learned helplessness functions both as an outcome of uncontrollable stressors and as a mechanism that propagates anxiety, depression, and stress in academic settings.

Studying the relationship of learned helplessness with anxiety, depression, and stress among undergraduates thus fills both theoretical and applied gaps. Theoretically, such research refines our understanding of cognitive motivational pathways through which environmental and academic stressors produce psychopathology. Practically, it informs campus mental-health policies and preventive programming by identifying students at heightened risk (those with helplessness cognitions) and by validating targets for cognitive-behavioral and resilience-building interventions. Moreover, because academic failure and perceived uncontrollability are common in college contexts (e.g., exam failure, competitive grading, financial strain), findings about learned helplessness have direct implications for academic support services, counseling centers, and faculty-led classroom strategies aimed at promoting student agency and adaptive coping. The interplay between learned helplessness and common forms of student distress—anxiety, depression, and stress—represents a robust line of inquiry that integrates classical cognitive theory with contemporary concerns about student mental health. Given the high prevalence of emotional difficulties among undergraduates and the plausible mechanistic role of helplessness cognitions in producing and maintaining distress, focused empirical investigation is warranted. The present study, by examining these relationships in an undergraduate sample, aims to clarify effect sizes, identify potential moderators (e.g., social support, self-compassion), and suggest practical interventions to reduce the burden of psychological distress in higher education.

### REVIEW OF LITERATURE

**Bhatnagar and Singh (2018)** this study found that undergraduate students exhibiting higher levels of learned helplessness reported significantly elevated anxiety scores, indicating that helpless cognitions amplify anticipatory fears and worry patterns. **Klein et al. (2011)** this study found that individuals with higher helplessness tendencies reported significantly greater trait anxiety, even after controlling for depressive symptoms. **Kumari and Bhatnagar (2011)** this study examined LH and coping strategies among employed and non-employed married women in Pune. They found that non-employed women scored significantly higher on LH and lower on adaptive coping, suggesting that occupational engagement may buffer against helplessness and its related stress. **Mehta and Kaur (2016)** this study observed that learned helplessness predicted both general and examination-related anxiety in college students, suggesting its role in academic maladjustment. **Mishal and Thomas (2017)** investigated the relationship between social support and depression among 120 adolescents (60 males, 60 females) in Kannur, Kerala. Using the Beck Depression Inventory and PRQ-2000, results showed a significant negative correlation ( $r = -.398, p < .01$ ), indicating that higher social support is associated with lower depression. **Patel and Desai (2020)** this study examined engineering undergraduates and found that those with high learned helplessness experienced greater perceived stress levels, especially during exam periods. **Patil and Kumar (2010)** this study investigated pharmaceutical R&D professionals and reported that a controlling and rigid organizational culture fostered LH, which in turn was associated with

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higher stress levels and reduced work engagement. **Prasad and Thomas (2018)**, this study noted that helplessness impairs problem-solving abilities, thus intensifying the stress response. **Seligman (1975)**, this study refers to a condition where individuals perceive a lack of control over outcomes, leading to passivity and emotional distress. Several studies in India have examined its link to anxiety among students. **Sharma and Saini (2017)** this study found a strong positive correlation between learned helplessness scores and depressive symptoms among undergraduates, highlighting the role of cognitive defeatism in mood disorders. **Verma and Bhat (2019)** this study reported that helplessness tendencies were significantly higher in students experiencing persistent sadness and low self-esteem, supporting the helplessness–hopelessness model of depression.

### *Statement of the Problem*

The present study seeks to examine the relationship between learned helplessness and the psychological variables of anxiety, depression, and stress among undergraduate students, aiming to understand how feelings of powerlessness may contribute to heightened emotional distress and mental health challenges in this population.

### *Objective of the Study*

1. To investigate the relationship between learned helplessness and anxiety among undergraduate students.
2. To investigate the relationship between learned helplessness and depression among undergraduate students.
3. To investigate the relationship between learned helplessness and stress among undergraduate students.

### *Hypothesis of the Study*

1. There is likely to be a significant positive relationship between learned helplessness and anxiety among undergraduate students.
2. There is likely to be a significant positive relationship between learned helplessness and depression among undergraduate students.
3. There is likely to be a significant positive relationship between learned helplessness and stress among undergraduate students.

## **METHOD**

### *Sample*

The sample for the present study consisted of 100 undergraduate college students selected through purposive sampling from colleges in Aurangabad, Maharashtra. The participants were aged between 18 and 21 years ( $M = 19.32$ ,  $SD = 1.12$ ), with an equal gender distribution comprising 50 males and 50 females. All participants were regular college-going students and had no diagnosed psychological disorders, ensuring the homogeneity of the sample with respect to the variables under study.

### *Research Design*

The present study adopted a correlational research design to examine the relationship between learned helplessness (independent variable) and anxiety, depression, and stress (dependent variables) among undergraduate students. This design was chosen because it allows for the measurement of the strength and direction of associations between variables without manipulating them.

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### *Variables of the Study*

- **Independent Variables-** Learned Helplessness
- **Dependent variables-** 1) Anxiety 2) Depression 3) Stress

### *Research Tools*

#### **Learned Helplessness Scale**

The Learned Helplessness Scale, based on Dr. Martin Seligman's theoretical framework and adapted for use in the Indian context, is designed to assess the extent to which individuals perceive a lack of control over life events and outcomes. It typically consists of multiple statements rated on a Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree). Higher scores reflect greater levels of helplessness, indicating a stronger belief that personal efforts have little impact on results. The scale has demonstrated good reliability, with Cronbach's alpha values generally exceeding 0.70, making it a dependable tool for psychological research and assessment.

#### **Anxiety, Depression, and Stress Scale (ADSS)**

The Anxiety, Depression, and Stress Scale (ADSS), developed by Pallavi Bhatnagar and validated for the Indian population, is a standardized psychological tool designed to measure three major negative emotional states: anxiety, depression, and stress. It comprises three distinct subscales, each containing multiple items rated on a Likert scale ranging from 0 (did not apply to me at all) to 3 (applied to me very much or most of the time). Each dimension is scored separately, with higher scores reflecting greater severity of the respective emotional state. The ADSS demonstrates good internal consistency, with reliability coefficients typically ranging from 0.75 to 0.85.

### *Procedures of Data Collection*

The data for the present study were collected following a systematic procedure to ensure accuracy and reliability. First, permission was obtained from relevant authorities, such as school/college principals or organizational heads, to approach the target participants. The purpose of the study was clearly explained to the respondents, and informed consent was obtained prior to participation. Standardized tools, namely the *Learned Helplessness Scale* and the *Anxiety, Depression, and Stress Scale (ADSS)*, were administered either individually or in small groups under the researcher's supervision. Participants were given clear instructions regarding how to respond to the items, and adequate time was provided to complete the questionnaires. The researcher ensured a quiet and comfortable environment to avoid distractions. After completion, all responses were collected, checked for completeness, and securely stored for analysis, maintaining confidentiality and ethical research standards.

### *Statistical Techniques*

The data obtained from the participants were analyzed using descriptive statistics, including the Mean and Standard Deviation (SD), to examine the central tendency and variability of scores for each variable. Additionally, the Pearson Product-Moment Correlation Coefficient ( $r$ ) was calculated to determine the strength and direction of the relationships between the variables.

## **RESULTS AND DISCUSSION**

The analysis of data interpretation and discussion of the results are reported.

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**Table No.01. Mean, SD and R Value of IV on DV**

<b>Factor</b>	<b>Mean</b>	<b>SD</b>	<b>N</b>	<b>R Value</b>	<b>p-value</b>	
Learned Helplessness	72.45	8.32	100	0.679	< .001	positive strong correlations
Anxiety	68.21	7.84	100			
Learned Helplessness	72.45	8.32	100	0.652	< .001	positive strong correlations
Depression	70.34	8.15	100			
Learned Helplessness	72.45	8.32	100	0.631	< .001	positive strong correlations
Stress	71.56	7.98	100			

The descriptive statistics for Learned Helplessness revealed a mean score of 72.45 (SD = 8.32) for the total sample (N = 100). Pearson’s product-moment correlation was conducted to examine the relationship between Learned Helplessness and Anxiety. The results indicated a strong and positive correlation between Learned Helplessness and Anxiety ( $r = 0.679$ ,  $p < .001$ ), suggesting that higher levels of learned helplessness are associated with higher levels of anxiety among participants. These findings indicate a statistically significant positive relationship between Learned Helplessness and Anxiety. Specifically, as individuals experience heightened feelings of helplessness characterized by the perception that their actions have little or no effect on outcomes their anxiety levels tend to increase correspondingly. This pattern aligns with the reformulated theory of learned helplessness proposed by Abramson, Seligman, and Teasdale (1978), which suggests that individuals who attribute negative outcomes to stable, global, and internal causes are more susceptible to anxiety and other emotional disturbances. Similarly, Seligman (1975) emphasized that learned helplessness is associated not only with depression but also with anxiety disorders, as the perception of a lack of control over events triggers chronic stress responses. The strong positive correlation observed in the present study ( $r = 0.679$ ) is consistent with prior empirical evidence. For example, Hiroto and Seligman (1975) found that exposure to uncontrollable aversive events increased anxiety-like behaviors in both experimental and real-life contexts. Likewise, Metal et al. (2016) reported that college students with higher learned helplessness scores exhibited significantly elevated anxiety symptoms, highlighting learned helplessness as a notable cognitive vulnerability factor for anxiety disorders. From a psychological intervention perspective, these findings underscore the importance of cognitive-behavioral strategies designed to enhance perceived control, promote problem-solving skills, and reframe maladaptive attributions. Addressing learned helplessness may not only reduce anxiety but also foster greater psychological resilience and overall well-being.

The mean score for Learned Helplessness among the respondents was 72.45 (SD = 8.32), while the mean score for Depression was 70.34 (SD = 8.15). Pearson’s correlation analysis revealed a strong positive relationship between Learned Helplessness and Depression ( $r = 0.652$ ,  $p < .001$ ), indicating that higher levels of learned helplessness are associated with higher levels of depression among participants. These findings demonstrate a significant and positive association between learned helplessness and depression. The strong correlation ( $r = 0.652$ ) suggests that individuals who perceive themselves as having limited control over life events are more likely to experience depressive symptoms. This is consistent with Seligman’s (1975) theoretical framework, which describes learned helplessness as a cognitive state that develops following repeated exposure to uncontrollable situations, resulting in feelings of powerlessness and hopelessness. Previous research supports this relationship. Metalsky et al. (1987) found that learned helplessness was a significant predictor of depressive symptoms in both clinical and non-clinical populations. Similarly, Peterson, Maier, and Seligman (1993)

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argued that learned helplessness can impair motivation, cognition, and emotional well-being, thereby contributing to the onset and persistence of depression. The present study reinforces these conclusions, highlighting that maladaptive attributional styles such as attributing negative events to stable and global causes or blaming oneself can exacerbate depressive tendencies (Abramson, Seligman, & Teasdale, 1978). These findings have important implications for preventive mental health interventions. Programs that incorporate cognitive restructuring, resilience training, and problem-solving skills may help reduce learned helplessness and, in turn, lower the risk of depression. Consistent with Gillham et al. (2007), fostering a more optimistic explanatory style can serve as a protective factor against the development of depressive symptoms.

The mean and standard deviation (SD) for Learned Helplessness were  $72.45 \pm 8.32$ , while Stress scores had a mean of  $71.56 \pm 7.98$  for the total sample ( $N = 100$ ). Pearson's correlation analysis revealed a strong positive relationship between Learned Helplessness and Stress ( $r = 0.631$ ,  $p < .001$ ), indicating that higher levels of learned helplessness are associated with higher levels of stress among participants. These findings demonstrate a significant and strong positive association between learned helplessness and stress. Specifically, individuals who perceive themselves as unable to control or influence outcomes in their lives are more likely to experience elevated stress levels. According to Seligman's (1975) theoretical framework of learned helplessness, repeated exposure to uncontrollable events fosters a generalized expectation of helplessness, which contributes to emotional distress, including stress. Previous research supports these observations. Peterson and Seligman (1984) found that individuals with high learned helplessness tendencies exhibited greater stress responses when faced with challenging tasks. Similarly, studies by Liu et al. (2020) and Kim and Lee (2019) demonstrated that cognitive patterns associated with learned helplessness, such as negative attributional styles, significantly increase perceived stress in both academic and occupational settings. These results are also consistent with the cognitive-transactional model of stress (Lazarus & Folkman, 1984), which emphasizes that stress is shaped not only by external pressures but also by an individual's cognitive appraisal and perceived coping abilities. When perceptions of helplessness are high, coping resources are underutilized, resulting in sustained or amplified stress responses. Based on these findings, interventions targeting maladaptive attributional styles and promoting problem-focused coping strategies may effectively reduce stress in individuals prone to learned helplessness. Cognitive-behavioral approaches (Abramson, Alloy, & Metalsky, 1989) have demonstrated efficacy in modifying these maladaptive thought patterns and enhancing resilience.

### CONCLUSIONS

The findings of the present study indicate that learned helplessness is significantly and positively associated with anxiety, depression, and stress among undergraduate students.

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### ***Acknowledgment***

The author(s) appreciates all those who participated in the study and helped to facilitate the research process.

### ***Conflict of Interest***

The author(s) declared no conflict of interest.

***How to cite this article:*** Satonkar, S.D. (2021). Relationship of Learned Helplessness with Anxiety, Depression, and Stress Among Undergraduate Students. *International Journal of Social Impact, 6*(1), 95-102. DIP: 18.02.012/20210601, DOI: 10.25215/2455/0601012