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Clinical Psychology

DEPRESSION AMONG PROFESSIONAL AND NON-PROFESSIONAL STUDENTS: EMPIRICAL ANALYSES

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ABSTRACT Students pursuing different programs in the colleges and universities experiences a lot of pressure. Shifting to colleges and universities exert a pressure on them due to required changing skills required to adapt to these new situation. The pressure experienced by the students is a function of multiple factors. One of the factors that determine this the nature of course one is enrolled in. Professional courses like MBA, MCA, Medical etc exerts more pressure and stress in the students due to the nature curriculum and course requirements as compared to students enrolled in non-professiona academic programs like MA, M.Ss etc. Stress often lead to mental health issues like depression and clinical anxiety. The current research attempts to explore and compare depression among students pursuing professional and non-professional programs. The aim of the current research was to examine depression among these groups. Depression was examined by administering PHQ-9 scale. The sample of 99 students was collected using convenience sampling from Private Universities and Colleges of Delhi-NCR region. In the sample, 52 were female students and 47 were male students. Of the total sample of 99 students, 32 were pursuing Post Graduate professional courses and 49 were pursuing non-professional Graduate courses. The sample also comprised 10 students who were doing technical courses and 8 were doing PhD. In the current research, these were also operationalized as professional courses. The mean age of the students was 22.98 and age range was 18-25 years. .The score on PHQ-9 was found to be 9.75 in professional group while it was 4.56 in non-professional group of students. Independent t test was used to compare group difference on the variable of depression. The result indicate significant group difference on the studied variable. Professional group scored higher on PHQ-9 than non-professional group. The current research has significant implications for incorporating mental health intervention plan for all students and more so for those pursuing Professional programs. students mental health in colleges and universities and the availability of trained mental health professionals for psychotherapeutic interventions for college youth Besides, the framing of mental health policies by the academic institutions in the country.

KEYWORDS : Depression, Professional Students, Non-professional Students, Mental Health

INTRODUCTION

The incidence of depressive symptoms has been increasing among college students especially those pursuing professional programs.. According to a study of college students receiving counseling services between the years of 1988 and 2001, a 20% increase occurred in the number of students seeking help for depressive symptoms during that time period (Benton, Robertson, Tseng, Newton, & Benton, 2003). In a survey of university counseling center directors completed in 2006, it was found that 91.6% of the respondents reported that they had observed an increase in the number of students experiencing psychological problems in the recent years (Blanco, et. al, 2008). In a nationwide study, 43% of college students reported feelings depressed that it was difficult for them to study (American College Health Association, 2009).In 2012, the American College Health Association– National College Health Assessment (ACHA–NCHA) a nationwide survey of college students at 2- and 4-year institutions found that about 30 percent of college students reported feeling "so depressed that it was difficult to function" at some time in the past year.

Besides depression, anxiety is also common mental health problems among students pursuing professional programs. At any given time, 25% of student population report symptoms of dysfunctional anxiety (Beck & Young 1978).

Depression can be explained through multiple models. Cognitive model was propounded by Aaron Beck in 1967. He posits that people think negatively about themselves, their immediate world and their future based on their experiences. This combination is often known as *cognitive triad*. Beck argues that depression may result from a tendency to interpret everyday events in a negative way. Learned helplessness model was propounded by Martin Seligman in 1967. The basic idea of this model is depression occurs when people feel helpless and believe that whatever they do, it won't change the apparently negative and aversive situation based on their experiences. Behavioral theory of depression propounded by Peter Lewinsohn in 1973. A key tenet of the approach is the assumption that a low rate of positive reinforcement constitutes a critical antecedent condition for the occurrence of depressive behaviors. Self-control model of Depression was given by Lynn Rehm in 1977. It is based on the three processes included in a feedback loop model of self-control: self-monitoring, self-evaluation, and self-reinforcement. In nutshell, depression is the outcome of multiple factors.

Sharma and Kirmani (2015) studied emotional distress among university students. They found that depression showed a significant association with emotion regulation difficulties and academic stress. Based on this evidence, such findings indicated that students suppressing the expression of emotions were likely to report depressive symptoms. Iqbal, Gupta, and Venkatarao (2015) on medical undergraduates found that almost a third of the respondents had moderate to severe depressive symptoms, and a high prevalence of distress was reported by females. Renuka and Goyal (2019) studied a sample of 100 students in Dehradun City using stratified random sampling using Mental Health Inventory of Jagdisha and Srivastava (2005) and compared mental health of those who were pursuing professional & non professional courses. They did not find significant difference between professional and non-professional courses students on overall mental health. Pant and Sharma (2021) studied a sample 60 male students , 30 were pursuing professional programs like MBA, MCA and were pursuing non-professional programs like MA etc in one of the public universities at Haridwar. Mental health variable was assessed using Mental Health Inventory (2003) using purpose sampling. Among mental health dimensions depression and anxiety were the core ones. The age range of the sample was 21-25 years. The result found significant differences on depression among professional & non-professional students. The same research found insignificant differences on the variable of anxiety among the two groups.

Dinesh (2021) studied a sample 200 students pursuing professional programs in one of the public universities at Aligarh. Mental health

variable was assessed using Jagdisha and Srivastava's Mental Health Inventory (2005). The result found no significant differences on mental health among professional & non-professional students. Sonali (2020) studied a total 120 students pursuing different professional and non-professional colleges of Patna University. Data was collected through simple random sampling method. Mental Health Inventory developed by Jagdish and Srivastava (1983) was used for the data collection. The result found significant difference in the mental health of professional students from non-professional ones. The mental health of students pursuing professional courses was sound to be better than the comparative group. Sharma, Mathur and Halder (2022) studied 100 students pursuing professional courses such as MBBS, B.Tech, MBA and BA-LLB using standardized mental health scales. The findings indicated that depression levels were higher among MBA students compared to other groups. Rishi, Banthiya and Singh (2021) conducted a study on 292 professional course students in India using the Beck Depression Inventory. The results revealed that a significant number of students experienced symptoms of depression due to academic stress and social pressure. Fatimah et al (2016) studied a sample 451 students pursuing Medical and Engineering courses in Pakistan using the Beck Depression Inventory II inventory. They found that 22.5% of Engineering students and 15% of Medical students reported depression and the result was statistically significant. Shukla and Joshi (2017) studied a sample of 400 students including 200 boys from I.I.T. from one of the Public Universities. Student Stress Scale which was used to assess students' stress and result showed there was significant difference between non-professional students and professional students. Karmakar et al (2021) studied a sample of 310 students of North East India examining depression, anxiety and stress among Medical and Engineering students. The result indicated significant differences in both the groups highlighting that students of both professional courses exhibit symptoms of depression, anxiety and stress. Deb et al. (2016) investigated psychological health among Indian college students and found that a substantial proportion of students reported moderate to severe depressive symptoms. The study highlighted that academic competition, parental expectations, and academic workload significantly contributed to psychological distress among students. Dwivedi et al. (2021) conducted a meta-analysis on depression among Indian medical students and reported that a large proportion of students experienced depressive symptoms during their training. The authors suggested that intensive academic demands, long study hours, and competitive environments contribute to increased psychological stress among professional students. Dutta et al. (2023) conducted a systematic review and meta-analysis examining depression among medical students in India and reported a high pooled prevalence of depressive symptoms. The findings suggested that professional education environments may place students at greater risk for mental health problems.

Rao et al. (2023) compared levels of depression among students enrolled in professional courses such as medicine and engineering with those in other academic programs. The study found that professional students reported slightly higher levels of depression, which the authors attributed to the demanding nature of professional training and higher academic expectations. Sarokhani et al. (2013) conducted a global meta-analysis examining depression among university students across several countries and reported a significant prevalence of depressive symptoms. The authors suggested that factors such as academic stress, lifestyle changes, and social pressures contribute to increased vulnerability among students. Rotenstein et al. (2016) conducted a systematic review including medical students from multiple countries and found that more than one-quarter of students experienced depressive symptoms. This study highlighted the need for mental health interventions within educational institutions. Research focusing specifically on professional students in India has also demonstrated high levels of depression. Overall, the existing literature indicates that depression is a widespread issue among university students across different cultural contexts. Both professional and non-professional students experience significant levels of psychological distress; however, professional students may face additional pressures due to rigorous academic demands and competitive environments.

These findings highlight the importance of developing mental health support systems, counseling services, and preventive interventions within university settings to promote students' psychological well-being.

Methodology

Measures administered

1) **Socio Demographic Data Sheet:** It was developed by the investigator indicating subject's sociodemographic variables like name, age, gender, and course.
2) **Patient Health Questionnaire (PHQ-9):** It was developed by Bhat et al in 2018.The Patient Health Questionnaire-9 (PHQ-9) is a widely used tool for assessing depressive symptom severity and as a screening tool in the diagnosis of major depression. In the current research,it was used to assess the prevalence of depression among university students. PHQ-9 is a self-administered tool which uses nine criteria on which Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV) diagnosis of depressive disorders is based upon and is derived from the primary care evaluation of mental disorders tool. Each of the PHQ-9's nine items is rated on a scale from 0 to 3. The score ranges from 0 to 27. Respondents are asked to rate each item based on how bothered they have been by the corresponding item content over the last two weeks on the following rating scale: 0 = "*Not at all*", 1 = "*Several days*", 2 = "*More than half the days*", and 3 = "*Nearly every day*"). This tool has been often used with the Indian Population for epidemiological and clinical studies. It has sufficient psychometric properties. The Cronbach alpha of this has been found to range from 0.86 to 0.89. The sensitivity and specificity has been found to be 75-99% & 74-96% respectively.

Analysis of Data

The data were analyzed using descriptive statistics like mean and SD. The other statistical measures used were frequency and percentage and inferential statistics. t test was used to find group differences.

Aim

The aim of the present study was to examine differences in depression between students pursuing professional programs and non-professional programs college going students.

In this research, operationally the term "college" includes also the universities from where the data was taken.

Objectives

1. To examine the following in a sample of college going students:
(i) Depression among students pursuing professional programs
(ii) Depression among students pursuing non-professional programs
(iii) Examine group differences in the examined variable.

Hypothesis

H_0: There is no significant difference between students of professional courses and non-professional courses with respect to their scores.

Sample

The sample consisted of 99 college going students from the Private Universities and colleges in Delhi NCR. Of the total 99 sample ,52 were females (52.52%) and 47 were males (47.47%). The mean age of the sample was 22.98. The age range was from 18-25 years. The students were taken from different Postgraduate professional programs (N=32) and Graduate non-professional Program (N=49). Professional programs include M.Tech, M.Sc Nursing, MBA & Physiotherapy. Non-professional prograns include B.Sc & B.A. Sample also included 08 PhD students and 10 students pursuing technical courses. The analyses were done PG Professional and non-professional graduation courses.

The data was collected offline during January and February 2026 in group. Before taking the data, permission was taken from the management of the institutes and the respondents after explaining the purpose of the research very clearly.

RESULTS & DISCUSSION

Table 1 (a): Distribution of Students According to Courses (N=99)

Sl. No.	Class	Students	
		Frequency	Percent
1	Professional Postgraduate	32	32.33 %
2	Non professional Graduate	49	49.49 %
3	Technical Courses (Professional Courses)	10	10.10 %
4	PhD (Professional Courses).	8	8.08%
	Total	99	100%

Table 1 (b): Distribution of Students According to Gender (N=99)

Sl. No.	Gender	Students	
		Frequency	Percent
1	Females	52	52.52 %
2	Males	47	47.47 %
	Total	99	100%

Table 1 (c): Distribution of Students According to Religion/Faith (N=99)

Sl. No.	Gender	Students	
		Frequency	Percent
1	Hindus	79	79.79 %
2	Muslims	11	11.11 %
3	Christians	5	5.05%
4	Jain	4	4.04%
	Total	99	100%

Table 1 (d): Group Differences Students Pursuing Professional & Non-professional Programs(N=99)

Group	N	Mean	SD	t-value	df	Level of Significance
Professional Courses	50	9.75	1.71			
Non-Professional Courses	49	4.56	0.96	15.64*	79	Significant at 0.01

< 0.01

Table 1 (d) shows the comparison between students of professional courses and non-professional courses. The mean score on PHQ-9 of post graduate professional programs students is 9.75 with a standard deviation of 1.71, whereas the mean score of PHQ-9 of non-professional programs students is 4.56 with a standard deviation of 0.96.

The calculated t-value is 15.64 with 79 degrees of freedom. The obtained t-value is greater than the table values at both 0.05 and 0.01 levels of significance. Hence, the null hypothesis is rejected. This indicates that there is a significant difference between post graduate professional and graduate non-professional program students with respect to their scores on the measured variable. The mean scores on PHQ-9 is higher in the group of professional post graduate students than those of graduate non-professional students meaning thereby that higher score group experiencing more depression than that of lower score group. It means that post graduate professional group students seem to have more depression in comparison to graduate non-professional group. This difference may be due to differences in academic structure, practical exposure, and curriculum orientation in professional program. The current authors posit that factors such as academic stress of professional programs , lifestyle changes, and social pressures might contribute to increased depression among them. The consistent findings were found in the research work of many researchers (Sharma, Mathur & Halder,2022., Rishi, Banthiya and Singh,2021., Dwivedi et al., 2021., Dutta et al, 2023, Rao et al, 2023., Sarokhani et al. 2013., Rotenstein et al. 2016, Sonali, 2020).

Depression among Students pursuing professional programs can be explained through the models of stress. Professional programs often act as continuous stress and pressure among students based on the course requirement and time urgency. Lindholdt (2022) argues that stress is often associated with psychiatric conditions including depression. Professional course requirements are often unpredictable and often uncontrollable thereby increasing the chances of possibility of more stress thereby depression. These findings can also be explain through appraisal model of stress (Lazarus & Folkman, 1984) The model posits that perhaps the students pursuing professional program appraise their respective courses as threatening and may perceive that they don't have enough available resources to deal with the course challenges leading to stress thereby increasing the chances of depression in them.

The current research findings are inconsistent with the work of many researchers (Renuka & Goyal,2019., Dinesh, 2021., Karmakar et al,2021). These inconsistent findings can arise due to multiple factors including differences in research design, target population, tools used, whether it cross-sectional or longitudinal etc.

CONCLUSION

99 students from different private colleges and universities were selected for the purpose of current research. The findings have revealed that post graduate professional students reported more depression score than graduate non-professional students.

Scope for Improvement

The current research would have given more meaningful insights into the area of students' mental health if demographic variables like rural, urban, religion etc would have incorporated in the research. Narrative analyses of the sample would have given more clear picture of their inner thoughts, emotions which would have wider implications.

Implications and Future Directions

The professional course students need to be highly monitored and assessed on their mental health parameters. The students can be trained in dealing with the reported mental health symptoms. There is a need that university must have mental health centers for mental health related problems. It is important to note that in India, to date, universities still lack the facility of counselling centers, where trained counselors and psychologists can assist students at an early stage of stress in order to prevent further complications like clinical depression.

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