

A Correlational Study of Learned Helplessness and Irrational Beliefs on Depression Among Students

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ABSTRACT

Depression among college students remains a pressing mental health issue, often linked to cognitive factors like learned helplessness and irrational beliefs. This study aimed to investigate the relationship between learned helplessness, irrational beliefs, and depression among 100 college students (50 males and 50 females) aged 18–24 years, using a correlational design. Participants completed the Learned Helplessness Scale, Irrational Beliefs Inventory, and Beck Depression Inventory. Statistical analysis revealed a strong and statistically significant positive correlation between learned helplessness and depression ($r = .780, p < .01$), indicating that students with higher levels of helplessness reported greater depressive symptoms. Additionally, a moderate positive correlation ($r = .469, p < .01$) was found between irrational beliefs and depression, suggesting that rigid, maladaptive thinking patterns also contribute to depressive symptoms.

Keywords: *Learned helplessness, irrational beliefs, depression*

Depression is characterized by persistent sadness, loss of interest or pleasure, feelings of worthlessness or excessive guilt, fatigue, impaired concentration, and sometimes suicidal thoughts (American Psychiatric Association, 2013). Studies have reported alarming rates of depression among college students worldwide. For instance, Bayram and Bilgel (2008) found that approximately 27.1% of university students in Turkey reported moderate to severe depressive symptoms. Similarly, Eisenberg et al. (2007) reported that nearly 15.6% of college students in the United States met criteria for depression.

This high prevalence of depression among students can negatively impact their academic achievement, interpersonal relationships, and overall psychological well-being (Richardson, Abraham, & Bond, 2012). Therefore, identifying cognitive factors that contribute to depression among students is crucial for effective prevention and intervention strategies.

Depression is recognized as one of the most common and debilitating mental health conditions worldwide, significantly affecting academic, social, and emotional functioning among students (World Health Organization, 2021). Research shows that college students are particularly vulnerable to experiencing depressive symptoms due to academic pressures,

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identity exploration, and psychosocial stressors (Eisenberg, Gollust, Golberstein, & Hefner, 2007). Within this context, psychological constructs such as learned helplessness and irrational beliefs have emerged as important cognitive factors linked to the development and maintenance of depressive symptoms (Abramson, Seligman, & Teasdale, 1978; Ellis, 1994).

Learned helplessness and depression

The concept of learned helplessness originated from experimental research by Seligman and Maier (1967), who observed that animals exposed to uncontrollable and unavoidable stressors later failed to escape avoidable shocks, even when escape was possible. Building on this, Abramson et al. (1978) proposed the reformulated learned helplessness theory, which emphasizes the role of cognitive attributions.

Subsequent research has supported the link between learned helplessness and depression. For example, Peterson, Maier, and Seligman (1993) showed that individuals with a helpless attributional style were at greater risk for depression. Similarly, Metalsky, Abramson, Seligman, Semmel, and Peterson (1982) found that college students who attributed academic failures to stable and global causes were more likely to experience depressive symptoms.

Learned helplessness theory highlights how students' perceived lack of control over academic or personal stressors can foster feelings of hopelessness and depression (Alloy, Abramson, & Francis, 1999).

Irrational beliefs and depression

The theory of irrational beliefs, proposed by Ellis (1962, 1994) through Rational Emotive Behavior Therapy (REBT), posits that individuals often hold unrealistic and absolutist beliefs that lead to emotional distress. Examples of irrational beliefs include demands for perfection, catastrophizing failures, and low frustration tolerance (Dryden & Branch, 2008). Empirical studies have consistently demonstrated the relationship between irrational beliefs and depression. For instance, David, Montgomery, Macavei, and Bovbjerg (2005) found that students who endorsed higher levels of irrational beliefs experienced greater depressive symptoms. Similarly, Chang and Bridewell (1998) reported that irrational beliefs contributed to both the onset and severity of depressive symptoms in college students.

Irrational beliefs may function as cognitive vulnerabilities that distort students' interpretations of academic and interpersonal challenges, leading to heightened feelings of failure, guilt, and sadness (DiGiuseppe, Leaf, Exner, & Robin, 1988). Students who rigidly demand success or approval may experience intense disappointment and self-criticism when confronted with setbacks, thereby increasing their risk of depression.

Interplay between learned helplessness, irrational beliefs, and depression

Both learned helplessness and irrational beliefs reflect maladaptive cognitive processes that heighten vulnerability to depression. While learned helplessness focuses on attributions about control and causality (Abramson et al., 1978), irrational beliefs emphasize rigid, absolutist thinking patterns that magnify distress (Ellis, 1994).

These constructs are theoretically complementary. For example, students who believe they are powerless to influence outcomes (learned helplessness) may also catastrophize failures and demand perfection (irrational beliefs), thereby deepening depressive symptoms (Chang & Sanna, 2001). Recent studies have highlighted this interaction. For instance, Hu, Zhang, and

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Wang (2015) found that negative attributional styles and irrational beliefs independently and interactively predicted depressive symptoms among university students. Understanding how these cognitive patterns jointly contribute to depression may help in designing integrated cognitive-behavioural interventions targeting both helplessness and irrational thinking among students.

The present study investigates the relationship between learned helplessness, irrational beliefs, and depression among college students. By examining these constructs together, the study aims to contribute to a deeper understanding of cognitive vulnerability factors that may predispose students to depression.

Rationale and Significance of the Study

Although prior studies have examined learned helplessness and irrational beliefs separately in relation to depression, few have explored their combined effect among college students in the Indian context. Cultural factors such as parental expectations, academic competition, and stigma related to mental health may influence students' cognitive processes and emotional well-being (Deb, Strodl, & Sun, 2015). Therefore, it is essential to investigate these constructs together to better understand students' vulnerability to depression.

This study aims to fill this gap by conducting a correlational analysis to explore how learned helplessness and irrational beliefs relate to depression among college students. The findings can inform psychoeducational programs and cognitive-behavioural interventions that focus on modifying maladaptive attributional styles and irrational beliefs to reduce depressive symptoms.

REVIEW OF LITERATURE

Bhargava and Sethi (2018) this study found among Delhi university students that irrational beliefs especially those involving catastrophizing and perfectionistic demands were significantly associated with higher depression levels. **Chang and Bridewell (1998)** this study tested a diathesis–stress model and showed that irrational beliefs predicted both the onset and severity of depression, even when accounting for negative life events. **Choudhary and Bhatnagar (2017)** this study studied secondary school students in Uttar Pradesh and found that helplessness mediated the relationship between academic stress and depression. **David, Montgomery, Macavei, and Bovbjerg (2005)** this study found that university students who scored higher on irrational belief measures also reported significantly higher depressive symptoms. **Deb, Strodl, and Sun (2015)** this study reported that in the Indian context, academic pressure and parental expectations contribute significantly to feelings of helplessness, thereby increasing depressive symptoms among students. **DiGiuseppe, Leaf, Exner, and Robin (1988)** this study developed tools like the *Irrational Beliefs Inventory (IBI)*, showing that higher irrational belief scores were moderately associated with depression across diverse student samples. **Hamamci and Büyüköztürk (2004)** this study demonstrated that REBT-based group counseling significantly reduced both irrational beliefs and depression among Turkish university students. **Hu, Zhang, and Wang (2015)** this study found that a negative attributional style, central to learned helplessness, was significantly associated with higher depression scores. **Kaur and Kaur (2015)** this study studied college students in Punjab and reported that those with higher learned helplessness scores also reported higher levels of depression, confirming a strong and statistically significant positive correlation. **Kumari and Abraham (2013)** this study found that a cognitive-behavioral intervention helped students replace irrational beliefs with more flexible, rational alternatives, reducing depressive

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symptoms. **Peterson and Seligman (1984)** this study reported that individuals with a pessimistic explanatory styles cognitive hallmark of learned helplessness were at greater risk for developing depression, confirming a robust positive correlation. **Rao and Rao (2013)** this study examined engineering students in Karnataka and found that helpless attributional style significantly predicted depressive symptoms, especially during exam periods. **Sharma and Gaur (2014)** this study found that adolescents from urban schools in Jaipur who scored higher on learned helplessness scales reported significantly higher depressive symptoms. **Sodhi and Chugh (2016)** this study conducted a study in Haryana and reported that perceived helplessness, measured by the Learned Helplessness Scale, was strongly associated with higher depression scores among adolescents. **Sodhi and Chugh (2016)** this study suggested including resilience and coping-skills training in school curricula to counter helpless thinking patterns. **Thompson, Kaslow, Weiss, and Nolen-Hoeksema (1998)** this study demonstrated that helpless attributional style was a significant predictor of depressive symptoms in college students.

Statement of the Problem

Depression among students has become an urgent mental health concern, often linked to cognitive vulnerabilities such as learned helplessness and irrational beliefs. Learned helplessness involves perceiving situations as uncontrollable, fostering hopelessness, while irrational beliefs reflect rigid, unrealistic thinking patterns that amplify distress. Although research supports their relationship with depression, limited studies have jointly explored these variables among Indian students, who experience unique cultural and academic pressures. This study seeks to investigate the correlation of learned helplessness and irrational beliefs with depression among college students, aiming to clarify how these cognitive factors contribute to depressive symptoms within the Indian context.

Objectives of the Study

- To examine the relationship between learned helplessness and depression among college students.
- To examine the relationship between Irrational Beliefs and depression among college students.

Hypotheses of the Study

- There will be no significant positive correlation between levels of learned helplessness and depression among college students.
- There will be no significant positive correlation between levels of Irrational Beliefs and depression among college students.

METHODOLOGY

Sample

The present study employed purposive sampling, a non-probability sampling technique, to select a sample of 100 college students (50 males and 50 females) aged between 18 and 24 years. Participants were recruited from two urban colleges to ensure they shared comparable educational and socio-cultural environments.

Research Design

The present study utilized a correlational research design to examine the relationship between key psychological variables among college students. Statistical analyses, including Pearson's

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correlation coefficients, were used to determine the strength and direction of relationships between variables.

VARIABLES

- **Independent Variables-**
 - 1) Learned helplessness
 - 2) Irrational Beliefs

- **Dependent Variables-**
 - 1) Depression

- **Control Variables-**
 - 1) Age (limited to 18–24 years)
 - 2) Gender (equal number of males and females)
 - 3) Educational level (all participants are undergraduate students)
 - 4) Location (all participants from urban colleges)

Operational Differentiation

1. **Learned Helplessness-** learned helplessness is operationally defined as the tendency of students to perceive situations as uncontrollable and feel unable to change negative outcomes, leading to passive behavior and hopelessness.
2. **Irrational Beliefs-** Irrational beliefs refer to rigid, unrealistic, and absolutist thought patterns that distort reality and contribute to emotional distress.
3. **Depression-** depression is defined as the presence and severity of depressive symptoms, including sadness, hopelessness, guilt, and loss of interest in activities.

Research Tools

- 1) **Learned Helplessness Scale:** Learned Helplessness Scale (LHS) was developed by Quinless and Nelson (1988). It consists of 20 items rated on a Likert-type scale. Scoring involves summing responses, with higher scores indicating greater helplessness. The scale demonstrates good reliability (Cronbach's $\alpha \approx 0.85$) and acceptable validity, supported by correlations with depression and related constructs.
- 2) **Irrational Beliefs Inventory (IBI):** The Irrational Beliefs Inventory was developed by Koopmans et al. (1994). It consists of 50 items measuring irrational thinking across five dimensions. Responses use a Likert scale; higher scores indicate stronger irrational beliefs. The IBI demonstrates good reliability ($\alpha \approx .80$) and acceptable validity, making it useful in cognitive-behavioral research.
- 3) **Beck Depression Inventory:** The Beck Depression Inventory (BDI), developed by Aaron T. Beck et al. (1961), includes 21 items rated on a 0–3 scale. Total scores reflect depression severity. The BDI shows high reliability (Cronbach's $\alpha \approx 0.85–0.90$) and strong validity, with significant correlations to clinical diagnoses and other depression measures.

Procedures of Data Collection

The data collection procedure began with obtaining formal permission from college authorities to approach students. Participants were informed about the study's purpose, assured of confidentiality, and invited to participate voluntarily. Standardized tools, including the Learned Helplessness Scale, Irrational Beliefs Inventory, and Depression Scale, were administered in small groups in classroom settings. Clear instructions were provided to ensure

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understanding, and participants completed the questionnaires under the researcher's supervision. The average time to complete the tools was approximately 25–30 minutes. Completed responses were checked for missing data and scored according to standardized guidelines before statistical analysis was conducted.

Statistical Treatment

At the first stage, data were analyzed using descriptive statistical techniques, including calculation of mean and standard deviation to understand the distribution and central tendencies of the scores. To examine relationships between variables, Pearson's product-moment correlation (r) was computed. All analyses were performed using SPSS software for accuracy and reliability.

STATISTICAL INTERPRETATION AND DISCUSSION

Relationship between Learned Helplessness and Depression

Table No.01 Show the Mean, SD and 'r' Value between Learned Helplessness and Depression

Factor	Mean	SD	N	R Value	Sign.
Learned Helplessness	46.15	4.55	100	.780	0.01 (2 Tailed)
Depression	70.75	6.25	100		

The present study aimed to examine the relationship between Learned Helplessness and Depression among college students. The analysis revealed a strong and statistically significant positive correlation between learned helplessness ($M = 46.15$, $SD = 4.55$) and depression ($M = 70.75$, $SD = 6.25$), with a Pearson correlation coefficient (R) of 0.780, significant at the 0.01 level (2-tailed).

This high correlation coefficient indicates that students reporting higher levels of learned helplessness also tend to report higher levels of depressive symptoms. According to Cohen (1988), an R value above 0.50 typically reflects a strong relationship, underscoring the magnitude of the observed association. The result supports the theoretical framework proposed by Seligman (1975), who introduced the concept of learned helplessness to explain how exposure to uncontrollable negative events could lead to depressive affect and cognitive passivity. Subsequent studies (e.g., Alloy et al., 1999) have similarly documented that helplessness-related cognitive patterns are significant predictors of depression severity, particularly in youth and student populations. The significant positive correlation suggests that learned helplessness could be considered an important risk factor contributing to the variance in depression scores among students. Although correlation does not establish causality, the strength and direction of the relationship align with prior empirical evidence that helplessness-related cognitions are closely associated with depressive symptoms (Peterson & Seligman, 1984).

Relationship between Irrational Beliefs and Depression

Table No.02 Show the Mean, SD and 'r' Value between Irrational Beliefs and Depression

Factor	Mean	SD	N	R Value	Sign.
Irrational Beliefs	22.78	3.59	100	.469	0.01 (2 Tailed)
Depression	70.75	6.25	100		

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The study examined the relationship between irrational beliefs ($M = 22.78$, $SD = 3.59$) and depression ($M = 70.75$, $SD = 6.25$) among a sample of 100 college students. The Pearson correlation analysis yielded a coefficient (R) of 0.469, which was statistically significant at the 0.01 level (2-tailed).

This study indicates a moderate positive correlation (Cohen, 1988), suggesting that students with stronger endorsement of irrational beliefs tend to report higher levels of depressive symptoms. Although this relationship is weaker than the observed correlation between learned helplessness and depression, it remains both meaningful and significant. These findings are consistent with the theoretical assumptions of Ellis's Rational Emotive Behavior Therapy (REBT) (Ellis, 1962), which posits that maladaptive cognitive patterns such as rigid demands, catastrophizing, and low frustration tolerance contribute significantly to emotional disturbances, including depression. Empirical research (David, Szentagotai, Klinger, & Macavei, 2017) also supports the link between irrational beliefs and depressive symptomatology. From a statistical perspective, the moderate correlation suggests that while irrational beliefs explain part of the variance in depression scores, other cognitive or contextual factors such as learned helplessness, attributional style, or coping strategies are also likely to play a role in students' depressive experiences. Furthermore, the relatively low standard deviation in irrational beliefs scores implies that this relationship emerges within a fairly homogeneous group, reducing the chance that it is driven by a few extreme scores.

the significant correlation found in this study reinforces the theoretical perspective that cognitive distortions and irrational beliefs are important correlates of depression. These results underscore the potential value of integrating cognitive restructuring interventions into student mental health and counseling programs to reduce depressive symptoms by identifying and challenging maladaptive belief patterns.

CONCLUSION

1. There is a strong and statistically significant positive correlation between learned helplessness and depression among students.

The present study revealed a strong and statistically significant positive correlation between learned helplessness and depression among students. This finding aligns with existing research suggesting that students who experience higher levels of learned helplessness are also more prone to depressive symptoms (Seligman, 1975; Alloy et al., 1990). Learned helplessness, conceptualized as the perception that one's actions have little impact on outcomes, often leads to feelings of hopelessness, low motivation, and diminished self-efficacy. These psychological processes can directly contribute to the onset and persistence of depressive symptoms.

In an academic context, students who perceive repeated failures or uncontrollable negative events may internalize these experiences, reinforcing a helpless explanatory style. This style not only impairs academic motivation but also fosters negative emotions and cognitive patterns characteristic of depression, such as rumination and pessimism (Peterson & Seligman, 1984). The strong correlation observed in this study supports the theoretical model that helplessness and depression are closely linked constructs.

Moreover, this relationship may be exacerbated by external factors common in student populations, such as high academic pressure, fear of failure, and limited coping resources. These stressors can intensify feelings of helplessness, thereby increasing vulnerability to

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depression. The findings underscore the need for interventions that promote adaptive coping strategies, resilience training, and attributional retraining to reduce learned helplessness and, by extension, alleviate depressive symptoms. The significant positive relationship between learned helplessness and depression observed in this study not only confirms prior theoretical frameworks but also highlights the importance of addressing cognitive and motivational factors to support students' mental health.

2. There is a moderate positive correlation, indicating that students who hold stronger irrational beliefs tend to report higher levels of depressive symptoms.

The present study identified a moderate yet statistically significant positive correlation between irrational beliefs and depressive symptoms among college students. This suggests that students who more strongly endorse irrational or maladaptive beliefs are also more likely to experience elevated levels of depression. This finding is consistent with the cognitive theory of depression (Beck, 1967) and Rational Emotive Behavior Therapy (REBT) framework proposed by Ellis (1962), both of which highlight the central role of distorted or irrational thinking in the development and maintenance of depressive symptoms. Irrational beliefs such as catastrophizing, overgeneralization, and Demandingness often lead individuals to interpret life events in a rigid and negatively biased manner. Such cognitive distortions can exacerbate feelings of hopelessness, worthlessness, and helplessness, which are hallmark features of depression (Beck et al., 1979). For students, these irrational beliefs may manifest in academic settings as excessive fear of failure, perfectionistic standards, and the belief that personal worth depends solely on external achievements. When students fail to meet these unrealistic standards, it may trigger or deepen depressive mood.

The moderate strength of the correlation observed in this study suggests that while irrational beliefs significantly contribute to depression, other factors such as learned helplessness, coping style, social support, and environmental stressors may also play an important role in influencing depressive symptoms. Nevertheless, the results support interventions aimed at identifying and restructuring irrational beliefs through cognitive-behavioral strategies. Programs that promote flexible and rational thinking could help reduce vulnerability to depression and improve psychological well-being among students. The significant relationship found between irrational beliefs and depression underlines the importance of addressing maladaptive cognition in mental health interventions targeting student populations.

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Conflict of Interest

The author(s) declared no conflict of interest.

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