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Research Paper

Depression and Emotional Intelligence among University Students

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ABSTRACT

The current study was conducted to investigate the relationship between depression and emotional intelligence among the university students in the Bangladeshi cultural context. For this purpose, 1128 students from the University of Rajshahi, Bangladesh, were investigated. The participants were selected using a purposive sampling technique. Required data were collected from the participants by administering the Bangla version of the Beck Depression Inventory-II (BDI-II) and Emotional Intelligence Scale (EIS). The statistical software SPSS (version 22) was used to analyze the data with descriptive statistics, correlation, and regression analyses. Results revealed a significant inverse relationship between depression and emotional intelligence among the university students. Moreover, emotional intelligence was found to be a protective factor of depression. It was also found that the severe and moderate depression rate was higher among females than males. Additionally, male students showed slightly higher emotional intelligence than female.

Keywords: *University Students, Emotional Intelligence, Depression*

The mental health of university students can be substantially affected by the numerous academic, social, and personal pressures they encounter. Depression is one of the most prevalent mental health concerns. Depression is a condition marked by persistent sadness, low motivation, and loss of interest in daily activities (American Psychiatric Association, 2013). In other words, it is a mood disorder that is marked by significant levels of sadness, lack of energy, low self-worth, and guilt, and other symptoms (Comer, 2015). Bayram and Bilgel (2008) found that approximately 27% of the university students they studied exhibited moderate to severe symptoms of depression. Untreated depression in students may hinder academic performance, elevate dropout rates, and result in suicide thoughts (Hysenbegasi et al., 2005).

Depression is prevalent among university students due to difficulties like academic pressure, financial problems, social isolation, and worry about the future (Ibrahim et al., 2013). Transitioning to university life frequently comes with more academic workloads, less social interaction, and a search for one's identity, which makes students more likely to be vulnerable to emotional distress (Bayram & Bilgel, 2008). Student depression is not solely

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caused by academic pressures; rather, it is influenced by a variety of bio-psychosocial stressors (Hysenbegasi et al., 2005). Several factors have been associated with university students' poor mental health, including living away from home, concerns regarding future employment (Pan et al., 2016), financial challenges (Richardson et al., 2017), academic pressure, a competitive atmosphere, and interpersonal relationships (Waqas et al., 2015), psychological characteristics such as low resilience (Sun et al., 2011) and low emotional intelligence (Zarei et al., 2019).

Emotional intelligence (EI) is the ability to perceive, understand, regulate, and use emotions effectively, and it has become a prominent psychological construct associated with mental health outcomes (Mayer et al., 2004). It also means the capacity to know and interpret emotions and to recognize their significance and relation to problems, including their causes and solutions (Salovey & Meyer, 1990). Moreover, EI significantly influences psychological distress due to the potential for failure and negative outcomes. Consequently, EI is a way by which individuals can effectively manage the emotions that create tension and interact with the emotions of others. Nevertheless, EI is not solely concerned with emotions; it is a composite of emotions, thoughts, feelings, and behaviors (Vandervoort, 2006).

Two essential models are dominant in the domain of emotional intelligence. The ability model (Mayer & Salovey, 1997) describes emotional intelligence as a set of cognitive abilities associated with the processing of emotional information. The mixed model (Goleman, 1995) also integrates emotional competencies with personality traits, including motivation and social skills. The two viewpoints suggest that those with elevated emotional intelligence are more competent at adjusting to stressful circumstances and sustaining psychological well-being. People who have high emotional intelligence are frequently better able to handle stress, interact with other people, and deal with problems, which may lower their chances of being depressed (Schutte et al., 2007).

Numerous studies have shown a negative correlation between EI and depression in young adults, suggesting that those with lower EI are more vulnerable to depressive symptoms (Extremera & Fernández-Berrocal, 2006; Goldenberg et al., 2006; Salovey et al., 2002). The ability to perceive and manage emotions in social contexts reduces the chance of developing depression (Sergi et al., 2021). EI could function as a protective factor through enhancing emotional regulation and fostering adaptive coping mechanisms throughout academic or personal challenges (Vučenović et al., 2022; Fernández-Berrocal & Extremera, 2006). Schutte et al. (2007) found that EI is an effective predictor of positive mental health. Self-awareness and emotional regulation, which are elements of EI, are defenses against emotional disorders. Students who effectively regulate their emotions are less prone to internalizing stress, hence decreasing the risk of developing depression (Salovey et al., 2002). Furthermore, other studies suggest that gender may influence both depression levels and emotional intelligence. Females often report higher levels of emotional awareness but may also exhibit higher depressive symptoms (Nolen-Hoeksema, 2001). Vučenović et al. (2022) reported that girls have a higher level of depression than boys. Grant et al. (2002) found a higher likelihood of depression in male students compared to female students. Besides, in a study males showed higher EI as compared to females (Ahmad et al., 2009). In another study female students were found to be more emotionally intelligent than their counterparts (Kant, 2019). However, findings are mixed, and cultural context can significantly impact these patterns.

Rationale of the Study

To formulate effective prevention and intervention strategies, it is essential to comprehend the relationship between emotional intelligence and depression in university students. As the mental health of students increasingly receives focus in educational settings, assessing emotional competencies that might mitigate mental distress is essential. International studies have shown a correlation between emotional intelligence (EI) and depression; however, research in the Bangladeshi academic environment is still insufficient. Most current research utilizes Western samples, resulting in a gap in comprehension of the influence of cultural, social, and academic variables on this connection in non-Western settings. Depression among university students continues to be underdiagnosed and undertreated, despite the increasing awareness of the condition. Emotional intelligence has demonstrated potential in alleviating these circumstances; however, there is a paucity of research that examines this correlation in the Bangladeshi cultural context. This study attempts to address this gap by investigating the correlation between emotional intelligence and depression in university students.

Objectives of the Study

The study was conducted with a view-

1. To assess the status of depression among the university students.
2. To assess the EI status among the university students.
3. To investigate the relationship between EI and depression among the university students.

METHODOLOGY

Sample

The sample of the study comprised 1128 undergraduate students from the University of Rajshahi, Bangladesh. Males made up 630 (55.9%) of the total, while females made up 498 (44.1%). Their ages varied from 18 to 28 years (M=22.35, SD=1.41). Among them, 778 (69%) participants were from rural residential backgrounds, 263 (23.3%) were from urban areas, and 87 (7.7%) were from suburban areas.

Research design

The study was conducted following a cross-sectional correlational research design.

Instruments

Two important measures (Bangla version) were used in this study,

1. **Depression Inventory-II (BDI-II):** The 21-item BDI-II (Beck et al., 1996) is a psychometric tool utilized to evaluate the severity of depression symptoms. Higher summative scores, ranging from 0 to 63, tend to indicate the severity (minimal=0-13; mild=14-19; moderate=20-28; and severe=29-63) of depression. Each item is evaluated on a scale of 0 (normal) to 3 (most severe). Individuals who are 13 years or older are permitted to take this test. The administration process requires five to ten minutes. The internal consistency of the BDI-II among college students is satisfactory ($\alpha = 0.93$), and the factorial and content validity have been confirmed (Beck et al., 1996). The Bangla version (Hasan & Khan, 2025) of the BDI-II is consisted of 19 items. It possesses high reliability (Chronbach's $\alpha = 0.90$) and validity (Hasan & Khan, 2025).
2. **Emotional Intelligence Scale (EIS):** To assess the emotional intelligence of the participants, the Bangla version (Uzzaman & Karim, 2017) of the EIS (Hyde et al., 2002) was administered. The instrument has 33 questions with four answer

alternatives, ranging from "very much important" = 1 to "not at all important" = 4. Cronbach's α for the Bangla version of the EIS was 0.92. The significant item-total correlations ranged from 0.33 to 0.84, with a mean of 0.58. The inter-factor correlations (Pearson's r) ranged from 0.39 to 0.66 and were all favorably significant. It examines seven factors that are substantially linked with the whole EIS, with coefficients ranging from .70 to .79. The cumulative score of a response might vary from 33 to 132. A higher score implies higher emotional intelligence, whereas a lower score signifies poor emotional intelligence.

Procedure

The required data were collected from the participants in both classroom settings and online using a Google Forms link. The link was circulated via email and other social media platforms, including Facebook, WhatsApp, etc. In classroom settings, the researchers built rapport with the participants prior to the commencement of the procedure, ensuring their confidence and the confidentiality of their responses. Before distributing all of the questionnaires to them, their consent was taken. Additionally, written instructions were printed on the questionnaires. In the case of online, full instructions and a consent form were provided in the first section of the questionnaires. All participants took part in the investigation on a voluntary basis.

Ethical Approval

This study received ethical approval [249(35)/320/IAMEBBC/IBSc] from the Institutional Animal, Medical Ethics, Biosafety and Biosecurity Committee (IAMEBBC) of the Institute of Biological Sciences (IBSc.) at the University of Rajshahi, Bangladesh. During the research, all ethical rules were carefully maintained and followed.

Statistical Analysis

The results of the study were analyzed using descriptive statistics (*M, SD*), correlation, and regression analysis to reach conclusions. The statistical software IBM SPSS (version 22) was employed to conduct these analyses.

RESULTS

In order to assess the status of depression and EI mean and standard deviations were calculated for both male and female participants (see **Table 1**).

Table No. 1 Mean and standard deviation value of depression an EI of males and females

Type	Variable	*N*	*M*	*SD*
Male	Depression	630	12.58	9.459
	EI	630	128.93	18.983
Female	Depression	498	14.90	10.721
	EI	498	125.78	20.244
Total	Depression	1128	13.60	10.097
	EI	1128	127.54	19.604

From **table 1** it is observed that the average level of depression for the total sample of the study is 13.60, and its SD is 10.097. It is also clear that the mean of the level of depression for males is 12.58 and its SD is 9.459, while the mean of depression level for females is 14.90 and its SD is 10.721. Additionally, the average value and SD of EI for the total

sample, males, and females are 127.54 & 19.604, 128.93 & 18.983, and 125.78 & 20.244, respectively.

Table No. 2 Percentage of the participants according to their depression level

Depression Level / Participants' Type	Level of depression							
	Minimal		Mild		Moderate		Severe	
	N	(%)	N	(%)	N	(%)	N	(%)
Male (*N=630*)	378	60.0	108	17.1	102	16.2	42	6.7
Female (*N=498*)	262	52.6	76	15.3	105	21.1	55	11.0
Total (*N=1128*)	640	56.7	184	16.3	207	18.4	97	8.6

Table 2 represents the frequencies and the percentages of the respondents on the basis of their depression levels (minimal, mild, moderate, and severe). It is noticed that the severe depression rate (11.0) is almost double among females than males (6.7). It is also presented in the following figure.

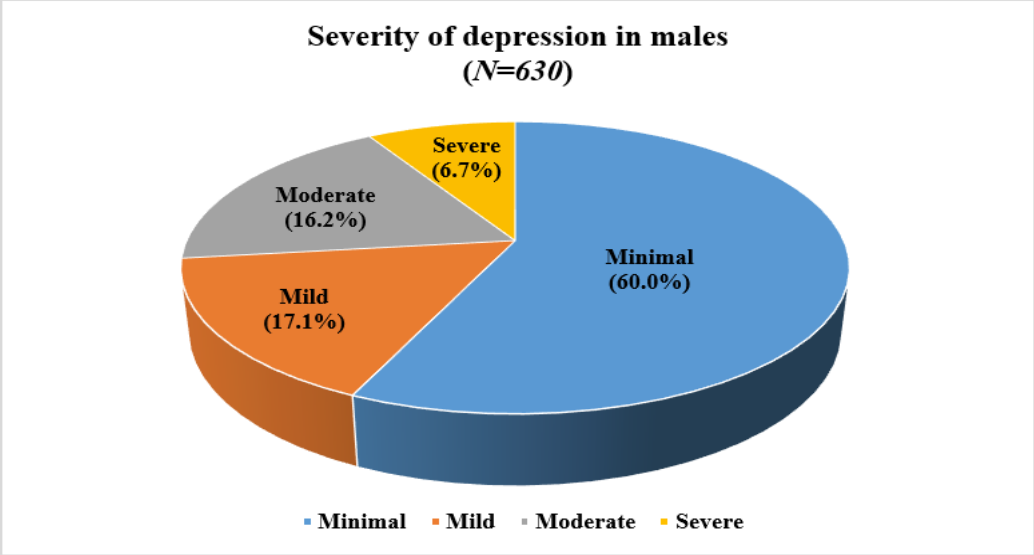

Figure No. 1 Severity of depression in percentage among the male students

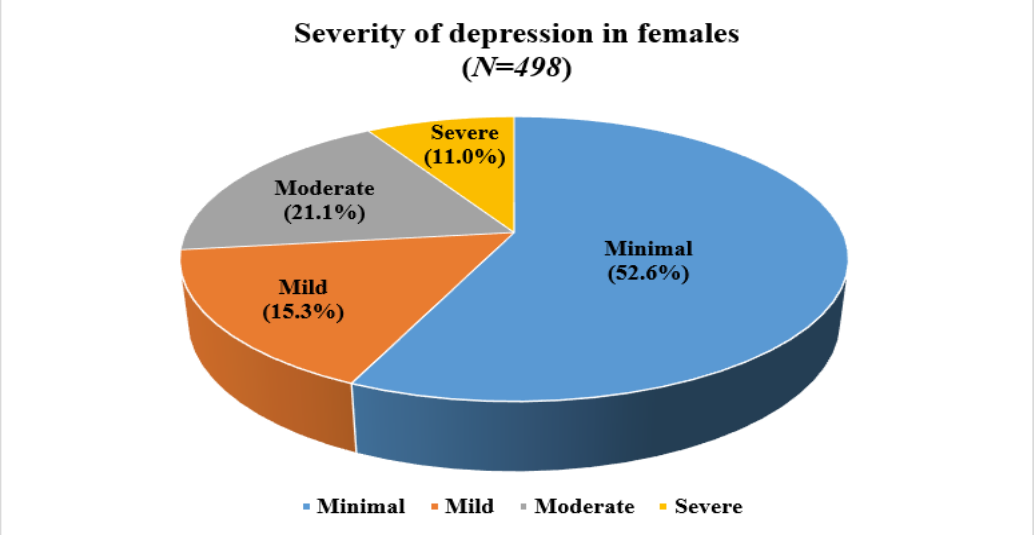

Figure No. 2 Severity of depression in percentage among the female students

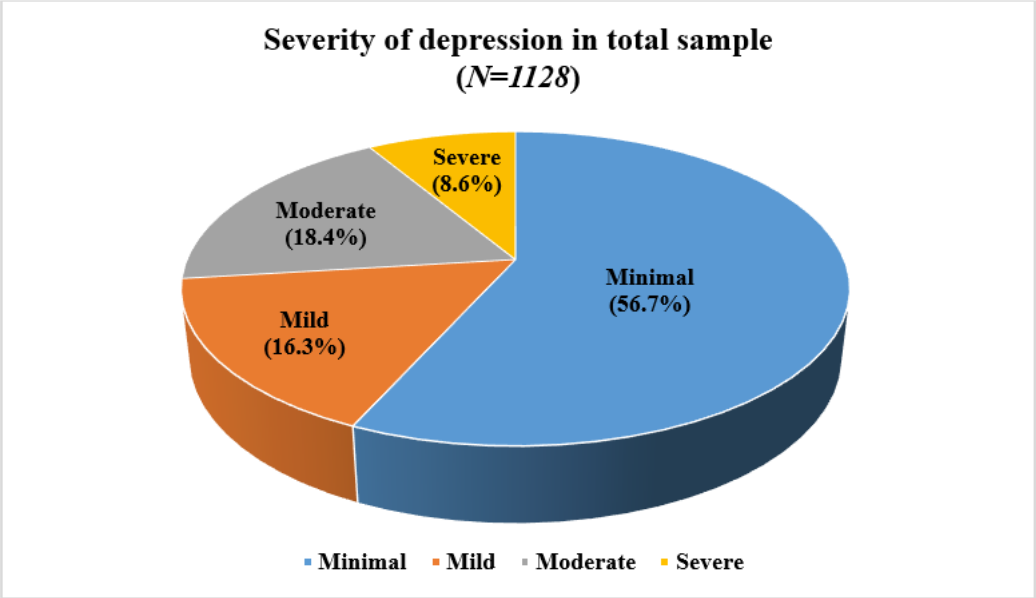

Figure No. 3 Severity of depression in percentage among the total students

Table No. 3 Results of correlation between depression and EI among the participants

Participants	Variable	Correlation (*r*)	Significance level
Male	Depression EI	- 0.511	**< 0.01**
Female	Depression EI	- 0.554	**< 0.01**
Total	Depression EI	- 0.536	**< 0.01**

Figures from **table 3** indicated that an inverse relationship exists between EI and depression. The values of the correlation coefficient (*r*) were found to be -0.511, -0.554, and -0.536 for the males, females, and total sample, respectively; those are also to be found statistically significant ($\alpha = 0.01$).

Table No. 4 Results of regression analysis between depression and EI

Dependent Variable	Predictor Variable	R^2	Unstandardized Coefficients		Standardized Coefficients	t	*p*-value
			B	Std. Error	Beta		
Depression	**EI**	0.287	-0.276	0.013	-0.536	-21.296	< 0.001

As indicated in **table 4**, we can see that the R-square value for EI is 0.287, which means that the EI causes a 28.7% change (reduction) in depression. It also indicates that the beta value is -0.536, which is a prominent value and negative in magnitude. This suggests that a one-unit increase in EI will result in a 0.536-unit decrease in depression. Therefore, it might be argued that EI works as a protective factor against depression among the participants.

DISCUSSION

This study was conducted to investigate the relationship between depression and EI with a large sample of university students. Descriptive statistics (*Mean, SD*) were calculated for

male, female, and total samples distinctively. The mean score indicated that the depression level of female students is slightly higher than that of male students. The average score of depression for the total sample was found to be 13.60, indicating a minimal level of depression experienced by most of the students. In the case of EI, the mean score of male students was higher than the females. For the total sample, the average score was 127.54, indicating high EI of the university students (see **Table 1**). These findings are consistent with several previous studies (Vučenović et al., 2022; Mirza et al., 2021; Koly et al., 2021; Mridha et al., 2021; Tareq et al., 2020; Islam et al., 2018; Puthran et al., 2016; Lei et al., 2016; Ahmad et al., 2009; Mikolajczyk et al., 2008).

Frequency and percentage were also calculated for the different levels (*minimal, mild, moderate, and severe*) of depression. Results showed that 8.6% of the university students are facing severe levels of depression, while 18.4% of them are suffering from moderate levels of depression (see **Table 2**). Moreover, results also indicated that more female students (almost double) are suffering from severe depression as compared to male students. Similarly, more female students are experiencing moderate levels of depression than their counterparts. It is clearly shown in **Figure 1-3** through the pie charts. Similar findings were reported by several previous studies (Hasan & Al Amin, 2024; Mridha et al., 2021; Tareq et al., 2020; Islam et al., 2018; Puthran et al., 2016; Othieno et al., 2014). Perhaps female students face more challenges than male students do in terms of academic pressures, adapting to a new environment and social life (Kumaraswamy, 2013); developing a proper plan for their professional careers (Uehara et al., 2010); and dealing with biological risk factors throughout their life course (ul Haq et al., 2018). Furthermore, the cultural practices and gender norms that are prevalent in South Asian nations may make females more vulnerable to depression (Afzal et al., 2008).

To investigate the relationship between depression and EI, the correlation coefficient (***r***) was determined. Results revealed that EI is negatively correlated with depression, and the relationship was significant (see **Table 3**). A number of earlier studies have also supported this finding (Zarei et al., 2019; Amirifard et al., 2017; Rasooli et al., 2013; Nolidin et al., 2013; Arora et al., 2011; Goldenberg et al., 2006; Extremera & Fernández-Berrocal, 2006; Salovey et al., 2002). Individuals with high emotional intelligence (EI) are better at problem-solving, regulating emotions, controlling impulses, and tolerating stress (Tannous & Matar, 2010) and possess better subjective well-being (Llamas-Díaz et al., 2022), which may reduce their vulnerability to depression. Additionally, the ability to self-regulate emotional states enhances better psychological adjustment (Fernandez-Berrocal et al., 2006), which may also contribute to this relationship between EI and depression.

Finally, linear regression analysis was employed to investigate the predictive relationship between depression and EI in university students. The findings showed a statistically significant and meaningful relationship between the two variables. Results from the regression analysis indicated that EI significantly predicted the level of depression among the university students (see **Table 4**). The R^2 value of 0.287 suggests that EI can explain 28.7% of the variance in depression. The standardized coefficient (B = -0.536) shows that for every one-unit increase in EI, there is a decrease of 0.536 units in depression scores. This negative relationship confirms that higher EI is associated with lower levels of depression. The corresponding *t*-value (-21.296) and *p*-value (< 0.001) confirm that this relationship is statistically significant at the 0.001 level. Therefore, the results affirm that EI is a strong and significant negative predictor of depression among university students. The finding is consistent with previous research indicating an inverse connection between emotional

intelligence and depressive symptoms (Lloyd et al., 2012; Schutte et al., 2007; Extremera & Fernández-Berrocal, 2006). Individuals with high EI may better control unpleasant emotions and use adaptive coping strategies, minimizing their sensitivity to depression (Mavroveli et al., 2007). Therefore, it can be argued that enhancing EI might be a useful means for psychological support and intervention in educational settings.

Limitations of the study

It is important to acknowledge certain constraints of the study. Social desirability bias could have influenced self-report surveys. Furthermore, the sample was restricted to a single institution and was on a non-random basis.

Recommendations for Future Research

This study might play a significant role in the prevention of depression and enhancing emotional intelligence among the university students. Future studies should consider using longitudinal designs to examine changes in EI and depression over time. Future studies should also incorporate qualitative methods to gain a deeper understanding of the emotional experiences of students.

CONCLUSION

The findings of the study suggest that EI training might be an effective strategy for reducing depression among university students. Educational institutions could consider including programs that enhance emotional intelligence in mental health initiatives.

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Conflict of Interest

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