

INDIAN STREAMS RESEARCH JOURNAL

ISSN NO: 2230-7850 IMPACT FACTOR: 5.1651 (UIF) VOLUME - 12 | ISSUE - 12 | JANUARY - 2023



"EFFECT OF PROCRASTINATION ON ANXIETY AND STRESS AMONG ADOLESCENTS"

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ABSTRACT:

The present study examined the effect of procrastination on anxiety and stress among adolescents. The objective of the study was to investigate whether significant differences existed in anxiety and stress between students with high and low levels of procrastination. The sample consisted of 100 college students from Aurangabad, Maharashtra, aged between 18 and 25 years (M = 21.63, SD = 2.48). Using Samvaidna's Procrastination Scale (Abrahim, 2013), participants were categorized into high and low procrastination groups. The Anxiety Stress Scale (ADSS; Bhatnagar, Singh, & Pandey, 2011) was employed to measure



levels of anxiety and stress. An independent samples t-test was applied to analyze group differences. Results revealed that students with high procrastination reported significantly higher anxiety (M = 5.36, SD = 1.67) compared to low procrastinators (M = 2.97, SD = 2.28), t(98) = 5.97, p < .01. Similarly, high procrastinators (M = 5.12, SD = 2.03) demonstrated significantly greater stress than low procrastinators (M = 2.80, SD = 1.75), t(98) = 6.12, p < .01. These findings confirm that procrastination has a detrimental effect on adolescents' mental health by increasing both anxiety and stress.

KEYWORDS: Procrastination, College Students, Anxiety, Stress, Depression.

INTRODUCTION:

Procrastination voluntarily delaying an intended and necessary task despite expecting that the delay will worsen the outcome—is a pervasive self-regulatory failure among adolescents (Steel, 2007). During adolescence, rapid biological maturation, expanding academic demands, and heightened social expectations converge, making timely action essential for successful adjustment. Yet many adolescents defer assignments, exam preparation, and health-promoting routines in favor of short-term mood repair and immediate rewards. Emerging evidence conceptualizes procrastination as an emotion-regulation strategy: youths defer aversive tasks to temporarily reduce negative affect, even though postponement often amplifies stressors later (Sirois & Pychyl, 2013). Within this lens, procrastination is not simply poor time management; it reflects difficulties with executive control, intolerance of discomfort, and motivational conflicts characteristic of this developmental period.

Anxiety and stress are common co-occurring difficulties during adolescence. Stress arises when environmental demands tax or exceed an individual's coping resources (Lazarus & Folkman, 1984), whereas anxiety encompasses persistent apprehension, physiological arousal, and cognitive worry (Spielberger et al., 1983). Academic evaluation, peer relations, family expectations, and digital distractions can all act as chronic stressors. The transactional stress model predicts that when

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adolescents appraise tasks as threatening and perceive low coping efficacy, avoidance becomes more likely, setting up a procrastination–stress cycle: delay increases time pressure and reduces preparedness, which in turn heightens anxiety and perceived stress, reinforcing further avoidance.

Empirical work links procrastination with poorer mental health, greater stress, and reduced well-being. Longitudinal and experimental studies with students have shown that early-term procrastination predicts later-term increases in stress and health problems as deadlines approach (Tice & Baumeister, 1997). Meta-analytic and integrative reviews further indicate small to moderate associations between trait procrastination, negative affect, and stress-related outcomes, often mediated by difficulties in emotion regulation and deficits in self-compassion (Sirois, 2014; Sirois & Pychyl, 2013; Steel, 2007). Although much of the foundational literature is based on university samples, similar mechanisms are likely to operate in adolescents, who face comparable evaluative pressures with fewer developed coping skills.

From a cognitive-behavioral perspective, procrastination maintains anxiety via short-term relief (negative reinforcement), while eroding mastery experiences that could disconfirm threat appraisals. Neurocognitive accounts suggest that heightened reward sensitivity and immature prefrontal control systems are prevalent during adolescence, biasing decisions toward immediate gratification and away from effortful, future-oriented actions. Social and contextual factors—such as parenting style, academic climate, sleep restriction, and the ubiquitous use of smartphones—may exacerbate this bias by increasing distraction and reducing the structured routines necessary for task initiation.

Given these converging lines of theory and evidence, the current study examines the effect of procrastination on anxiety and stress among adolescents. Clarifying these relationships in this age group has practical value: if procrastination contributes to dysregulated stress and anxiety, skill-based interventions targeting task initiation, tolerance of discomfort, and adaptive emotion regulation (e.g., implementation intentions, stimulus control, and brief CBT strategies) could reduce distress and improve academic functioning. The study aims to quantify associations between procrastination and both anxiety and perceived stress, and to discuss implications for school-based prevention and counseling services.

Conceptual models position procrastination as an emotion-regulation strategy that trades short-term mood repair for long-term costs (Sirois & Pychyl, 2013). In college samples, procrastination predicts increases in stress and illness symptoms across a semester, supporting a causal contribution of delay to later distress (Tice & Baumeister, 1997). Meta-analytic syntheses report reliable positive correlations between trait procrastination and indices of negative affect, including anxiety and perceived stress, with effects partially mediated by self-regulatory capacity and time-inconsistent preferences (Steel, 2007; Sirois, 2014). Cognitive-appraisal frameworks suggest that procrastinators tend to endorse higher threat appraisals and lower coping expectations, which intensifies stress responses as deadlines approach (Lazarus & Folkman, 1984).

OBJECTIVES:

1. To investigate the effect of procrastination on college students' Anxiety and stress.

HYPOTHESES:

1. There will be no significant difference between high and low procrastination in the dimension of Anxiety and Stress.

Sample:

For the present study, 100 subjects were selected from Aurangabad, Maharashtra State. The adequate sample consisted of 100 subjects (Procrastination was used as a scrutiny test), 50 high-procrastination college students, and 50 low-procrastination college students. The age range of subjects was 18 to 25 (Mean 21.63, SD = 2.48).

Research Tools:-

1) Samvaidna's Procrastination Scale (Abrahim, 2013):

Procrastination Scale was constructed by Abraham, 2013. The response was measured on a 5-point Likert Scale. A weight of 5 was assigned to the strongly agree response, 4 for agree, 3 for undecided, a weight for disagree and 1 for the strongly disagree response. The total scores are obtained by summing the assigned weights. The total range is from 30-150. If scores between 110-150 indicate high procrastination, 71-109 indicate average procrastination, 30-70 indicate low procrastination—a highly reliable and valid tool.

2) Anxiety Stress Scale (ADSS):

Bhatnagar P., Singh M. and Pandey M. (2011) were used to assess anxiety, depression and stress. ADSS comprises of 48 items divided in to three subscales which are- 1. Anxiety subscale-comprises of 19 items covering various symptoms that are manifestation of anxiety. 2. Depression subscale comprises of 15 items representing the different symptoms of depression. 3. Stress subscale having 14 items and they are covering the symptoms that people experience in the state of stress. Responses of the items are in terms of yes or no.

Variable

Independent variable-Types of Procrastinationa) Highb) LowDependent Variable1. Anxiety2. Stress

Statistical Analysis:-

't' Value was used for the present study.

Statistical Interpretation and Discussion

Mean S.D. and "t" Value of Anxiety and Stress among High and Low Procrastination college students.

Dimensions	Types of Procrastination					
	High Procrastination		Low Procrastination			
	Mean	SD	Mean	SD	df	"t"
Anxiety	5.36	1.67	2.97	2.28	98	5.97**
Stress	5.12	2.03	2.80	1.75	98	6.12**

Significant Level *0.05 = 1.98, **0.01 = 2.58

An independent samples t-test was conducted to compare the levels of anxiety and stress among students with high and low procrastination. As shown in Table 1, students in the high procrastination group reported significantly higher anxiety (M = 5.36, SD = 1.67) compared to those in the low procrastination group (M = 2.97, SD = 2.28). The obtained t(98) = 5.97, p < .01, indicates that the difference between the two groups was statistically significant. This finding suggests that students who procrastinate more frequently are more likely to experience heightened anxiety, possibly due to the pressure of incomplete tasks and looming deadlines.

Significant differences were observed in stress levels between the two groups. Students with high procrastination (M = 5.12, SD = 2.03) reported greater stress than those with low procrastination (M = 2.80, SD = 1.75). The calculated t(98) = 6.12, p < .01, confirmed that this difference was also statistically significant. This indicates that procrastination is not only associated with increased anxiety but also with elevated stress, supporting the idea that delayed task completion amplifies psychological strain.

The findings provide strong evidence that procrastination exerts a detrimental effect on adolescents' emotional well-being, increasing both anxiety and stress to a significant degree.

CONCLUSION:

1) Students with high procrastination reported significantly higher anxiety than students with low procrastination.

2) Students with high procrastination reported significantly higher stress than students with low procrastination.

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