

Abstract

Previous research has indicated that more stress that is associated with experiencing challenging life events is related to worse mental health. The purpose of this research was to examine whether individuals' procrastination (i.e., inability to meet deadlines) mediates the link between more stress and worse global mental health. Participants were 332 undergraduates (mean age = 22.02, SD = 6.15; 77.1% female; 91.6% White) who completed online surveys. Stressful life events were assessed using the Social Readjustment Rating Scale (Holmes & Rahe, 1967); procrastination was assessed using the Active Procrastination Scale (Choi & Moran, 2009); and global mental health was assessed using a modified version of the SF-12 (Ware, Kosinski, & Keller, 1996). Preliminary analyses indicated that older participants reported less procrastination (r = -.13, p = .021) and males reported better mental health (M = 3.65) than did females (M = 3.34), t(330) = 3.21, p < .001. Therefore, primary analyses controlled for age and gender. Mediation analyses revealed that there was a significant indirect effect of more stress on worse mental health via more procrastination, *ab* = -.07, BCa CI [-0.12, -0.04]. Thus, more procrastination appeared to function as a partial mediator explaining the association between experiencing more stress due to challenging life events and worse mental health. Overall, this research suggests that clinicians could focus on striving to reduce tendencies to procrastinate when individuals are adjusting to stressful life events, which in turn may strengthen their global mental health.

Does Procrastination Explain the Link between Stress and Worse Mental Health? Dakota Smith, Psychology Major

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Background

Previous Research on Procrastination Passive procrastination

- Postponing tasks because individuals are unable to make decisions to act in a timely manner
- Leads to poor outcomes
- Active procrastination
- Intentionally postponing tasks as a time management strategy, using motivation
- from time pressure to meet deadlines
- Leads to satisfactory outcomes
- (Choi & Moran, 2009)

Participants and Procedures

Participants

- N = 332
- Mean age: 22.02, SD = 6.15
- 77.1% Female
- 91.6 % White
- Procedures
- Participants were recruited into the
- Everyday Life Study via the Regional
- Campus subject pool
- All completed online surveys

Instruments

Procrastination

•	Active Procrastination Scale (Choi & Moran, 2009) Scale: Ability to Meet Deadlines 4 items: e.g., "Please indicate how true the following statements are for you: I'm often running late when getting things done." Rated: 1 (<i>not true at all</i>) to 5 (<i>very true</i>)		
•	M = 2.80 (SD = 1.03); Cronbach's alpha = .81		
Stressful life events			
•	Social Readjustment Rating Scale	<u> </u>	-ig
	(SRRS; Holmes and Rahe, 1967)	n	ne
•	40 Items: e.g., I roubles with the boss (23 points),	е	Ve
	Rated using a weighted sum of total events	n	ne
	150 to 300 points indicates moderate stress	а	ıb
•	Sample range = 0 to 770 stress points;	n	ne
	M = 218.18 ($SD = 139.46$)	0	of t
Mental Health			
•	Short Form Health Survey	n	00
•	(SF-12; Ware, Kosinski, & Keller, 1996)	2	in
•	6 items: e.g., "How much of the time during the	ti	m
	past 4 weeks have you felt downhearted and	()	
	Diue?" Detect: 1 (none of the time) to	(1	
	5 (all of the time)	*:	**
•	M = 3.41 (SD = 0.76) Cronbach's alpha = 0.78		
	$m = 0.11$ (00° 0.10), oronbuon 5 alpha = 0.10		

Preliminary analyses

- age and gender.

Research Question #1 Are more stressful life events related to worse mental health?



Figure 1: Direct pathway shows more stressful life events predict worse mental health.

Research Question #2 Does procrastination explain the relation between more stressful life events and worse mental health?



<u>ure 2: Mediated pathway shows partial</u> ediation, whereby more stressful life ents indirectly influenced individuals' ental health via more procrastination, = -.07, BCa CI [-0.12, -0.04]. The diator accounted for approximately 20% the total effect ($P_M = 21\%$).

te: Hayes' (2020) bootstrapping process cro for SPSS was used for the mediation alyses, with each test resampled 5,000 es, yielding 95% confidence intervals

p < .001

Results

Being older was related to less procrastination (r = -.13, p = .021). In addition, males reported better mental health (M = 3.65) than did females (M = 3.34), t (330) = 3.21, p < .001.• Therefore, primary analyses control for



Limitations

Conclusions

worse mental health.

worse mental health.

Clinical Applications

may help with adjustment.

increase global mental health,

Conclusions • Overall, it appears that experiencing more stressful life events is linked to Importantly, procrastination helps to explain why more stress associated with challenging life events is related to Clinicians should consider individuals' tendencies to procrastinate, particularly when adjusting to stressful life events. Developing interventions focused on decreasing tendencies to procrastinate Ultimately, decreasing individuals" tendencies to procrastinate may, in turn, particularly when adjusting to stress. and Future Directions Future studies should study procrastination as a mediator longitudinally to show causal links **Primarily Caucasian females limits** generalizability to other groups. Future research should replicate findings with more diverse groups of individuals, including those of other ages, race, gender, etc.

Cross-sectional analyses

- Do not allow for causal interpretations.
- between variables.

Homogenous sample

- •

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