



Prospective Associations Between Family Stress and Depressive Symptoms Among College Students

Taylor Wolf & David Kerr, Ph.D.

Purpose of Study

The current study sought to clarify the associations stressful life events have with symptoms of depression among college students. Consistent with work by Schultheiss and Blustein (1994), both family-related stressors and other stressors may be related to the well-being of students in a college environment, and family-related stressors may be more salient for some groups of students. Understanding these associations may suggest targets for preventive intervention.

Background

Associations between depressive symptoms and stress have been extensively studied in college students (Safford et. al., 2007; Skowen, Wester, & Azen, 2004). However, there is a lack of research on how stressful life events from the family of origin versus other sources may relate to symptoms of depression among college students. Additionally, family stress may more strongly impact women, students when they first enter college (freshman year), and students during the beginning of Fall term (when they have had more recent and intense contact with family).

Hypothesis

We hypothesized that family and other types of stress would be independently associated with current and subsequent symptoms of depression (see Figure 1). We also explored whether family stress might be more strongly associated with depressive symptoms among women compared to men, among freshmen compared to non-freshmen, and at the beginning of Fall term, as opposed to later in Fall term.

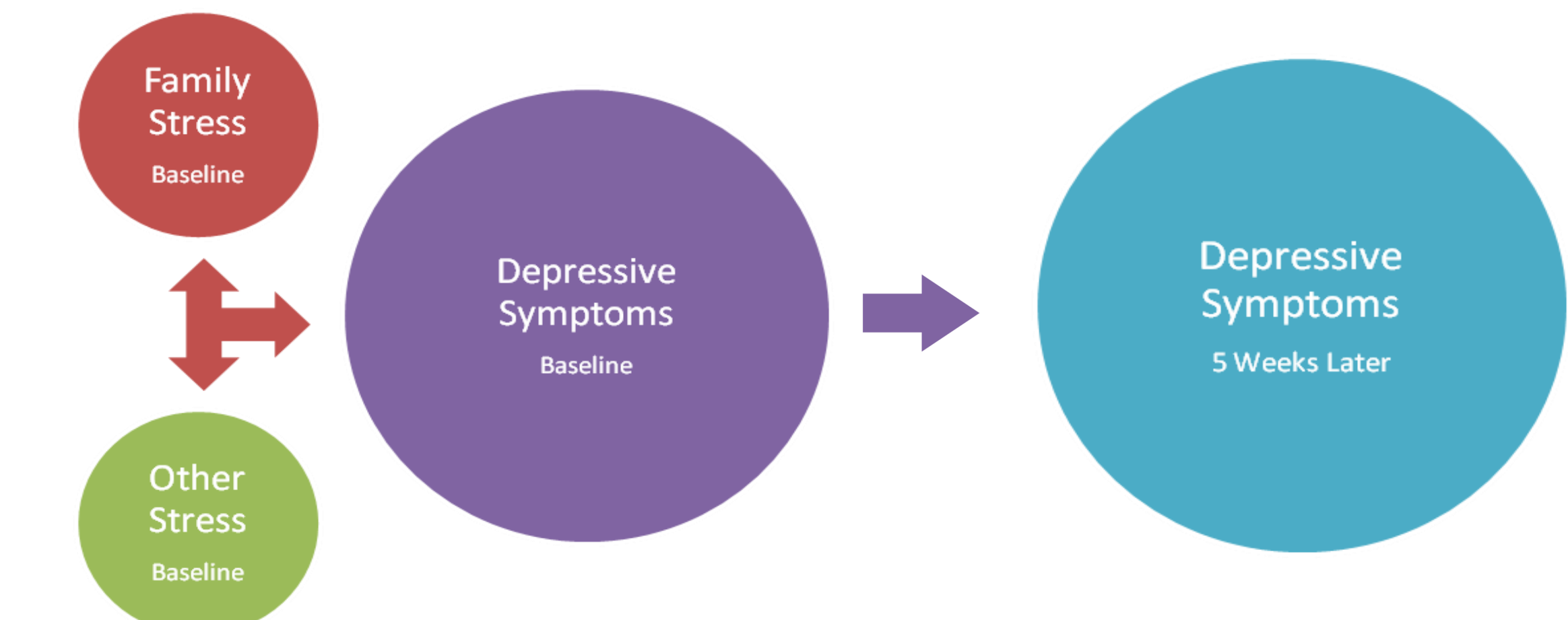


Figure 1. Hypothesized model

Methods

Participants

220 undergraduates (171 women) ages 18-25 years participated in this study during Fall 2010, Winter 2011, or Spring 2011. Participants identified primarily as White/Caucasian (85.1%), Asian (14.1%), and/or Hispanic (7.7%). Participants were 42.3% freshmen, 24.5% sophomores, 18.2% juniors, and 15% seniors.

Measures

Participants completed the Life Events Scale (Needles & Abramson, 1990), a measure of life events at baseline. Questions were categorized into family stress (i.e., “betrayed by family member”), and other stress (i.e., “important piece of property was lost”). Participants also completed the Center for Epidemiologic Studies of Depression (CESD; Radloff, 1977) at baseline and again five weeks later.

Methods (continued)

Procedures

Participants volunteered through the online Sona recruitment system. Informed consent was obtained by trained research assistants after the study was thoroughly described. Participants completed an online survey at baseline and weekly online surveys for the next 5 weeks. After completing the study, the participants received extra credit toward their psychology classes. Since confidentiality was stressed to ensure accurate self reports, the participants were made aware that the study staff would not be able to directly help the participant if necessary. To ensure the participant’s safety, information was given during consent and after each survey for available psychological services to facilitate self-referral.

Results

At baseline, 25% of participants scored in the clinical range ($CESD \geq 16$) on the depression scale. Five weeks later, 22% scored in the clinical range. Among those who participated at both time points, 14% scored in the clinical range at both times, 25% at one time point only, and 61% at neither time point.

Group differences in depressive symptoms and stress.

Gender. Women reported higher levels of depressive symptoms at baseline and five weeks later ($t = -2.34$ and -2.11 , respectively, $p < .05$) than men did, but did not report different levels of stress.

Class. Compared to non-freshmen, freshmen reported more family stress ($t(221) = -3.73$, $p < .001$), but not other stress ($t(221) = -.743$), and there was a trend toward more depressive symptoms among freshman ($t(222) = -1.97$, $p = .05$).

Time since summer break. Among participants recruited during Fall term, those recruited earlier in the term reported more depressive symptoms at baseline ($r = -.22$, $p < .05$) than those recruited later; but this association did not hold 5 weeks later. The timing of recruitment was not associated with family or other stress.

Only non-family stress was uniquely associated with depressive symptoms.

Cross-sectional findings: At baseline, depressive symptoms were correlated both with family and other stress ($r = .22$ and $.34$, respectively, $p < .01$); family and other stress were associated ($r = .33$, $p < .001$). However, based on a linear regression, only non-family stress ($\beta = .30$, $p < .001$) was independently associated with depressive symptoms; family stress was not ($\beta = .12$, $p = .08$).

Longitudinal findings: Baseline non-family stress (but not family stress) also was associated with depressive symptoms five weeks later ($\beta = .20$, $p < .05$). However, this appeared to be explained by the strong continuity in depressive symptoms over time, as this association weakened ($\beta = .08$, $p = n.s$) once baseline depressive symptoms were controlled ($\beta = .55$, $p < .001$).

No moderation by gender, class standing, and time since summer break.

Neither gender, class standing (freshmen vs. non-freshmen), or time since the summer break moderated the associations that baseline stress had with depressive symptoms concurrently or five weeks later.

Conclusion

The current results support that both family and other types of stress are associated with symptoms of depression. However, the hypothesis that family stress would be independently associated with current and subsequent symptoms of depression was not supported. Rather, there was stronger evidence of an association between other types of stress and symptoms of depression. There are several possible explanation for this finding:

1. Measurement of “other stress” included stress related to important non-family relationships (e.g., close friends); and “family stress” may have included stress related to non-valued relationships (e.g., cousins). Future research should consider interpersonal vs. other stress. The importance of the individual contexts of stress is also noted in previous research (Schultheiss & Blustein, 1994).
2. Family stress (parent loses job) may impact other stressors (personal finances) that may more directly impact depressive symptoms (see Figure 2). Results are consistent with this mediation mechanism.

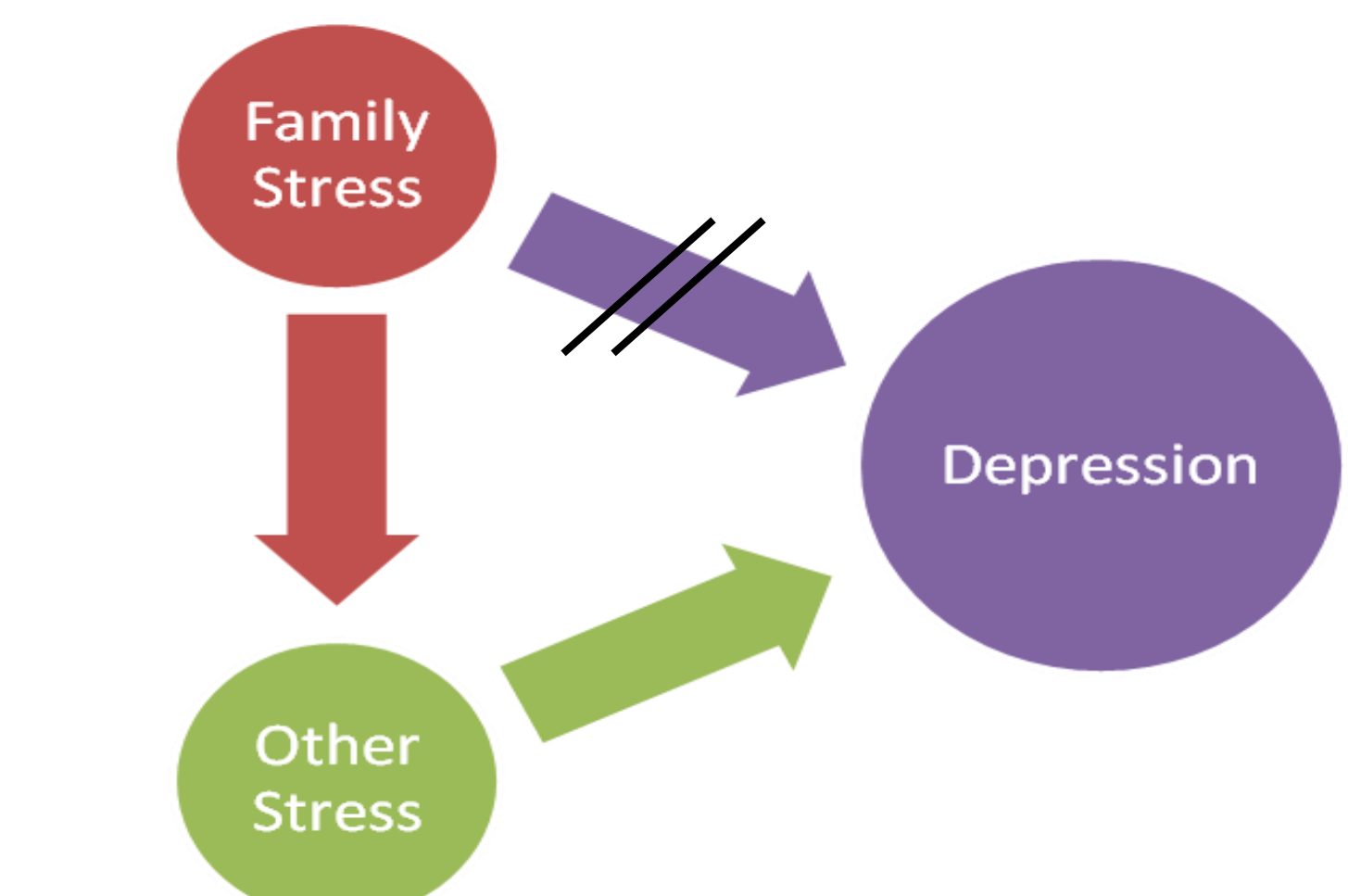


Figure 2. Mediated model

3. There were more items in the other stress than in the family stress measure, which may account for its ability to better explain for variation in depressive symptoms.

Interestingly, freshmen showed more family stress than did other students. More research should be directed toward understanding the specific aspects of family stress that influence freshmen in college. For example, stress from family crises (e.g., parent loses job) may impact students differently than stress from family conflict.

Overall, these findings build on previous research by specifically examining life events pertaining to family and depressive symptoms among college students.

References

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