Mental Health Symptoms and Dropout Intentions: A Study of Depression, Anxiety, and Campus Support Among Indian Post-Graduates

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Abstract:

In recent years, Indian higher education has been facing a silent crisis: thousands of postgraduate students quietly disengage or drop out every year due to overwhelming mental health challenges. With rising academic competition, parental pressure, placement uncertainty, and limited job opportunities after master's degrees, many students experience severe stress that turns into depression and anxiety. According to recent reports, more than one-third of Indian college students suffer from moderate to severe depressive symptoms, and nearly 40–45 % battle significant anxiety. Yet, very few reach out for help because of fear of being judged or because colleges lack proper counseling facilities.

The present study aimed to understand how depression and anxiety lead postgraduate students to seriously think about quitting their courses. It also examined two important questions: (i) whether these mental health problems first create extreme tiredness and loss of interest in studies (known as academic burnout) and then push students toward dropout thoughts, and (ii) whether the presence of supportive, trustworthy, and easily reachable campus mental health services can reduce this risk.

A simple online Google Form survey was prepared in English and shared through WhatsApp groups, email lists, and student networks of various universities. A total of 100 final-year master's students (61 female, 39 male; average age 23.4 years) from different parts of India voluntarily completed the survey during March–April 2025. The questionnaire used short, reliable, and commonly accepted scales: PHQ-9 for depression, GAD-7 for anxiety, a student burnout scale, four direct questions on dropout intentions (e.g., "I have seriously thought of leaving my course"), and twelve questions to measure how students view their college's mental health support (availability, ease of access, confidentiality, stigma, and trust).

Results revealed that students who scored higher on depression and anxiety also reported much stronger intentions to drop out. Academic burnout acted as the main bridge: depression and anxiety first drained students' energy and motivation, and this exhaustion then made them want to leave their program. Most importantly, when students believed their college offered genuine, non-judgmental, and approachable counseling help, the harmful effect of burnout on dropout intentions became significantly weaker. In colleges where mental health support was perceived as poor or stigmatized, burned-out students were far more likely to plan to quit.

These findings send a clear message: depression and anxiety do not directly force students to drop out; they do so by creating burnout, but colleges can break this chain by providing mental health services that students feel safe and comfortable using. Universities must go beyond just opening a counseling room — they need to build trust, spread awareness, ensure confidentiality, and make help easily available. Only then can India reduce the growing number of talented postgraduate students who leave their education incomplete because of mental health struggles.

Keywords - depression, anxiety, academic burnout, dropout intentions, campus mental health support, student retention, postgraduate students, Indian universities.

I. INTRODUCTION

1. Background and Significance of the Study

Mental health has increasingly become a defining public health concern of the 21st century, reshaping global conversations around well-being, productivity, and social development. As societies evolve and expectations intensify, mental health challenges—especially depression and anxiety—have transitioned from being marginal concerns to issues of urgent national and international priority. The World Health Organization identifies mental disorders as a leading contributor to global disease burden, surpassing many physical illnesses in their severity and long-term impact. Unlike conditions that affect only biological health, mental disorders also influence emotional functioning, interpersonal relationships, academic achievement, and workforce participation. Thus, the consequences of poor mental health ripple through households, communities, economies, and institutions.

In low- and middle-income countries such as India, the magnitude of this challenge is amplified due to limited access to mental health services, socioeconomic disparities, and entrenched stigma surrounding psychological disorders. India's demographic scale means that even a small percentage of affected individuals translates into tens of millions of people living with untreated conditions. Recent national mental health surveys estimate that approximately 197 million Indians experience some form of mental illness, with depression and anxiety constituting the highest share. These disorders not only compromise emotional well-being but also hinder individuals from fulfilling educational, professional, and familial responsibilities. The lifetime prevalence of mental disorders in India remains high at around 13.7%, yet the treatment gap—ranging from 70% to 92%—reveals the extensive shortfall in mental health infrastructure. Challenges such as inadequate workforce, limited funding (barely over 1% of the health budget), and poor community-level awareness reflect long-standing systemic neglect.

The situation becomes even more significant when viewed through the lens of human capital development. India's economic progress increasingly relies on its large pool of young, educated individuals who are expected to drive innovation, entrepreneurship, and leadership in the coming decades. However, mental health problems pose a substantial barrier to realizing this demographic advantage. Depression and anxiety contribute to lost productivity, absenteeism, weakened problem-solving abilities, and reduced participation in knowledge-intensive sectors. Projections indicate that India may lose over $1 trillion between 2012 and 2030 because of mental health–related economic decline—highlighting the urgent need for timely policy interventions and institution-level reforms.

Among various demographic groups, students—particularly those in postgraduate programs—represent a vulnerable yet critically important segment. Postgraduate education is typically characterized by intense academic pressure, complex learning environments, and heightened expectations related to career advancement. Young adults who pursue master's or research degrees are often in the midst of significant personal transitions: forming professional identities, managing academic responsibilities, navigating financial independence, and meeting familial expectations. In the Indian socio-cultural context, where academic success is often linked to social mobility, prestige, and economic stability, the pressure to excel becomes even more pronounced.

These pressures have translated into rising rates of psychological distress among postgraduate learners. Urban institutions, especially in Tier-1 cities, report elevated levels of anxiety and depression among students, fueled by competitive academic environments, limited work-life balance, and an uncertain job market shaped by automation, economic fluctuations, and evolving industry demands. The COVID-19 pandemic intensified these vulnerabilities, disrupting support systems and altering coping mechanisms. Many students experienced social isolation, academic disconnection, and reduced emotional support, further compounding the burden of mental health challenges.

The significance of this study also lies in its focus on a crucial outcome: dropout intentions. As universities strive to maintain high academic standards and improve graduation rates, understanding why students contemplate leaving their programs becomes essential. Mental health symptoms, when left unaddressed, can gradually erode motivation, concentration, and academic self-efficacy. This can translate into absenteeism, disengagement, and eventually withdrawal—either formally or informally. Postgraduate dropout not only affects individual futures but also contributes to national skill shortages, loss of educational investment, and reduced institutional credibility.

Addressing mental health among students is further complicated by inconsistent availability of campus support systems. While some premier institutions offer counseling centers, wellness programs, and peer-support structures, many colleges—especially those outside metropolitan areas—lack adequate psychological services. Stigma around seeking help, long waiting periods, limited trained counselors, and concerns about confidentiality further discourage students from accessing support. This makes the examination of perceived campus support essential, as students' trust and comfort with institutional mechanisms often determine whether they seek help or suffer silently.

Given India's ongoing educational reforms under the National Education Policy (NEP) 2020, the significance of this research intensifies. The policy aims to promote flexible learning pathways, multidisciplinary education, and skill development; however, these shifts also introduce new forms of academic pressure, competition, and expectation. Understanding how mental health challenges intersect with academic demands in this evolving environment is vital for ensuring that institutions not only educate but also safeguard the well-being of their students.

In summary, this study is significant because it addresses:

- A growing public health issue affecting millions of young Indians.
- The vulnerability of postgraduate students to depression, anxiety, and academic burnout.
- The economic and social consequences of untreated mental health problems.
- The gap between institutional expectations and available support services.
- The role of mental health in shaping dropout intentions and academic persistence.
- The broader national goal of building a productive, psychologically resilient workforce.

By exploring these connections, the study seeks to contribute meaningful insights that can guide universities, policymakers, and mental health professionals toward creating more inclusive, supportive, and mentally healthy academic environments.

2. Mental Health and the Student Population

Mental health has become an increasingly important component of student well-being, particularly within higher education systems that demand sustained academic performance, emotional resilience, and adaptability. The student population—especially those in universities and postgraduate programs—is navigating multiple transitions simultaneously. These transitions include shifts in identity, increased personal responsibility, relocation to new environments, and evolving academic and career expectations. As a result, students often experience heightened emotional vulnerability, making them more susceptible to psychological distress compared to the general population.

2.1 Higher Education as a High-Pressure Environment

In India, higher education serves not only as a pathway to employment but also as a symbol of upward mobility, family honor, and personal achievement. Students commonly enter postgraduate programs with significant expectations placed on them by both family and society. This social pressure is compounded by the intensity of academic work, which includes research projects, theses, internships, fieldwork, examinations, and competitive peer environments. Postgraduate students are expected to balance long study hours, independent research responsibilities, and complex evaluations that require advanced cognitive skills and emotional endurance.

Modern postgraduate programs also emphasize interdisciplinary learning, innovation, and employability—qualities that require students to engage deeply with complex academic content while simultaneously preparing for future careers. This can create psychological strain, particularly in fields where academic achievement is closely tied to future professional opportunities. For many students, the fear of underperforming becomes a source of constant anxiety.

2.2 Vulnerability of Young Adults in Postgraduate Studies
The age group most represented in postgraduate programs - typically 21 to 28 years - coincides with a developmental period marked by significant psychological and neurological changes. Young adulthood is characterized by increased sensitivity to social evaluation, identity formation, exploration of personal goals, and the search for career direction. During this phase, emotional regulation skills are still maturing, leaving students more susceptible to stress.

Moreover, many postgraduate students are living away from home for the first time, managing financial responsibilities, navigating new social landscapes, and attempting to build academic networks. These transitions can be overwhelming, especially for students from rural backgrounds or first-generation learners who may lack access to guidance and emotional support. As a result, feelings of isolation, homesickness, and cultural adjustment difficulties are common.

2.3 Rising Prevalence of Mental Health Issues
Among Students Recent studies indicate a significant rise in mental health issues among university students across India. Anxiety and depression are particularly prevalent, with certain urban institutions reporting that more than half of their students experience moderate to severe symptoms. These trends reflect a global shift; however, the Indian context presents unique challenges such as overcrowded classrooms, competitive entrance exams, limited mentorship, and high societal expectations.

The COVID-19 pandemic further intensified these concerns. Prolonged periods of online learning, disruptions in academic continuity, financial strain experienced by families, and loss of social interaction created long-lasting psychological effects. Even after campuses reopened, many students struggled with reintegration, reduced motivation, and uncertainty about career prospects. These lingering effects have reshaped how students perceive stability, safety, and control over their academic journeys.

2.4 Academic Stress and its Psychological Impact
Academic stress remains one of the leading contributors to mental health issues among students. Postgraduate education demands sustained cognitive engagement, self-directed research, and the ability to manage complex tasks simultaneously. Students often describe feeling overwhelmed by deadlines, unable to balance coursework with internships, or anxious about future employment opportunities.

This constant pressure can impair cognitive functions such as memory, concentration, and decision-making—skills that are crucial for academic success. When students experience repeated academic failures or negative feedback, their self-esteem and confidence may decline, creating a cycle where psychological distress further reduces performance, which in turn exacerbates the distress.

2.5 Social and Environmental Factors Affecting Student Mental Health
Student mental health is also shaped by social, cultural, and environmental factors within academic settings. Relationships with peers, faculty interactions, campus culture, and access to support services influence how students cope with stress. Supportive learning environments encourage collaboration, help-seeking behavior, and resilience, whereas toxic or highly competitive environments may intensify anxiety and feelings of inadequacy.

Students from marginalized communities may face additional stressors such as discrimination, language barriers, or financial hardship. First-generation learners often encounter a lack of familiarity with academic norms, limited parental guidance, and the burden of high expectations. These barriers can heighten vulnerability to mental health challenges. Financial stress is another critical factor. Tuition fees, accommodation costs, transportation, research materials, and living expenses can create significant pressure, particularly for students who rely on loans or part-time work. Economic uncertainty within families further amplifies anxiety, especially when students feel obligated to succeed quickly to support their households.

2.6 Consequences of Poor Mental Health on Student Outcomes
The academic, personal, and psychological consequences of poor mental health among students are far-reaching. Depression and anxiety can lead to reduced class participation, absenteeism, lower grades, loss of interest in academics, social withdrawal, and difficulty meeting program requirements. These challenges affect not only the student but also the broader learning environment, as disengaged students may disrupt group activities or hinder collaborative projects.

In severe cases, unaddressed mental health issues can trigger dropout intentions or actual withdrawal from the program. This has long-term implications for students' professional futures, financial stability, and personal aspirations. At a national level, high dropout rates within postgraduate programs weaken the country's skilled workforce pipeline and reduce the return on educational investments.

2.7 Growing Importance of Mental Health Support in Universities
Recognizing the rising prevalence of mental health concerns, educational institutions worldwide have begun integrating mental health support into campus programs. However, in India, access to such services remains inconsistent. While some universities offer counseling centers, peer support networks, and wellness initiatives, many lack adequate staffing, confidentiality safeguards, or culturally sensitive approaches that acknowledge stigma and fear of judgment.

The perceived availability and effectiveness of campus support systems play a vital role in shaping how students manage mental health symptoms. Students who feel supported are more likely to seek help, remain engaged, and persevere through challenges. Conversely, institutions without strong mental health frameworks risk higher dropout rates, lower academic performance, and diminished student satisfaction.

3. Wider Social and Academic Impact

The growing incidence of mental health difficulties among postgraduate students has implications that reach far beyond the boundaries of individual experience. While depression, anxiety, and related conditions affect the personal functioning of students, their impact spills into the social fabric of universities, the rhythm of academic life, and the larger societal framework. In India—where education frequently serves as a channel for mobility, identity, and aspiration—student mental health becomes a matter of collective concern rather than an isolated academic issue.

3.1 The Social Climate Shaping Student Well-being

Within Indian society, educational accomplishments are often interpreted as indicators of character, discipline, and future security. This narrative fuels a culture in which students must constantly meet high expectations, both self-imposed and externally reinforced. Many postgraduate students are positioned at the intersection of familial sacrifice, social pressure, and personal ambition. When mental health concerns arise, they are not simply internal challenges—they are entangled with fears of disappointing family members, losing social acceptance, or deviating from the expected path of success.

Such pressures create a psychological landscape where acknowledging distress becomes difficult. Students frequently avoid discussing their struggles due to the stigma associated with mental illness, particularly in communities where emotional endurance is admired, and vulnerability is misunderstood. This silence further isolates individuals, making it harder for them to seek support.

3.2 Effects on Peer Dynamics and Everyday Campus Life

Mental health challenges influence how students engage with their peers, mentors, and academic networks. Symptoms such as reduced energy, heightened irritability, excessive worry, or a tendency to withdraw can alter interpersonal dynamics. Students may limit their participation in group assignments, discussions, or student societies, which are often vital spaces for academic growth and social bonding.

A campus thrives on interaction—shared ideas, debates, collaborative research, and mutual support. When students mentally disengage, the campus environment becomes fragmented. Peer groups may experience imbalance in workloads, misunderstandings, or reduced cohesion. This shifts the overall tone of campus life from interactive and vibrant to disconnected and subdued. Faculty members also face the emotional and administrative strain of responding to inconsistent student engagement, often without adequate training or institutional support.

3.3 Cognitive and Academic Repercussions

Postgraduate studies demand consistent concentration, self-direction, and cognitive flexibility. Mental health conditions disrupt these foundational capacities. Students experiencing depression may struggle with slowed thinking, diminished concentration, or loss of interest. Those grappling with anxiety may find themselves overwhelmed by intrusive thoughts or fear of failure, affecting their ability to absorb information or approach academic tasks confidently.

This disruption affects:
- The quality and originality of academic work,
- The pace at which students complete research tasks,
- Their willingness to participate in discussions or defend their ideas,
- Their ability to respond constructively to feedback.

An accumulation of these difficulties weakens academic progression and reduces the intellectual vibrancy of classrooms and research labs. Institutions may observe more incomplete assignments, delayed theses, and lower levels of scholarly output.

3.4 Institutional Challenges and Administrative Implications

Universities face complex challenges when student mental health declines. Retention becomes more difficult when a substantial portion of students are emotionally overwhelmed or disengaged. Institutions often struggle to maintain consistent attendance, stable participation in academic programs, and timely graduation rates. These metrics influence accreditation, placements, university rankings, and funding.

Administrators may encounter increased demands for academic concessions, emotional support, counseling referrals, and flexible deadlines. Without well-structured mental health policies or sufficient counseling staff, institutions often operate reactively rather than proactively, addressing crises only when they escalate. This reactive approach strains faculty, student-support offices, and administrative systems, leading to burnout among staff and reduced effectiveness of academic services.

3.5 Economic and Workforce-Level Consequences

Mental health difficulties among students eventually influences national development. When postgraduate learners—who represent the future workforce of specialized fields—struggle or drop out, it disrupts the pipeline of professionals entering research, healthcare, technology, academia, and industry.

Consequences include:
- Financial losses for families who have invested significantly in higher education,
- Unutilized human capital as trained students withdraw before completion,
- Lower productivity and skill shortages in knowledge-intensive sectors,
- Increased economic burden when untreated mental health issues persist into adulthood.

These outcomes highlight that student mental health is not merely a personal well-being issue but a determinant of long-term national competitiveness.

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3.6 Inequity, Vulnerability, and Barriers to Success

Mental health challenges intersect disproportionately with socioeconomic and cultural inequalities. Students from rural, tribal, or economically disadvantaged backgrounds often face additional barriers: language differences, limited academic exposure, adjustment difficulties, or financial dependencies. Women and marginalized gender groups may experience safety concerns, family restrictions, or bias within academic spaces, intensifying emotional strain.

These layered challenges can magnify psychological distress and widen existing academic disparities. When institutions do not actively address the differentiated needs of students, mental health issues contribute to inequalities in retention, performance, and career opportunities. This undermines national goals of inclusive and equitable education.

3.7 Long-Term Societal Implications

The broader impact of declining student mental health extends beyond universities, influencing social cohesion, community well-being, and generational progress. Students who experience prolonged psychological distress may struggle to form stable careers, secure meaningful employment, or build healthy relationships. Over time, untreated mental health conditions can escalate, increasing the likelihood of chronic illness, reduced life satisfaction, or instability in personal and professional life.

At the societal level, poor student mental health weakens the collective potential of the youth population. As India continues to envision itself as a knowledge-driven, innovation-led society, the emotional well-being of its students becomes foundational—not optional—for sustainable growth.

4. Key Constructs of the Study

To understand how mental health influences postgraduate students' academic journeys—especially their intention to persist or withdraw—it is important to examine the central concepts underpinning this research. The four constructs explored in this study—depression, anxiety, dropout intentions, and campus support—serve as the theoretical foundation for analyzing the complex interactions between psychological well-being and academic persistence. Each construct carries distinct characteristics, observable indicators, and implications for student functioning.

4.1 Depression

Depression is a multifaceted psychological condition that affects thinking patterns, emotions, behavior, and physiology. It is more than temporary sadness or momentary discouragement; instead, it involves a persistent state of low mood that disrupts daily functioning. Students experiencing depression may struggle with motivation, find it difficult to enjoy activities they previously valued, or feel constantly fatigued.

Core Features of Depression in Students

Depression among postgraduate students often presents through:
- Emotional symptoms: sadness, irritability, emptiness, or feelings of being overwhelmed.
- Cognitive symptoms: difficulty concentrating, indecisiveness, negative self-evaluation, or diminished problem-solving ability.
- Behavioral symptoms: withdrawal from peers, decreased academic engagement, procrastination, or avoidance of tasks.

- Physical symptoms: altered sleep patterns, appetite changes, persistent exhaustion, or somatic complaints such as headaches

Because postgraduate education typically demands high levels of focus, self-direction, and analytical thinking, even mild depressive symptoms can hinder academic performance. Students may find themselves unable to complete tasks on time, maintain consistency in research work, or cope with academic setbacks.

Measurement of Depression

Research commonly employs validated psychometric tools such as the Patient Health Questionnaire-9 (PHQ-9), which evaluates the frequency of depressive symptoms over a two-week period. These tools help classify symptom severity—from minimal to severe—allowing patterns to be analyzed across student populations.

Understanding depression as a construct is essential because its symptoms directly influence motivation, discipline, and the perceived ability to continue one's academic journey.

4.2 Anxiety

Anxiety, particularly in its generalized form, refers to chronic, excessive worry about everyday events or imagined threats. In academic contexts, anxiety often manifests as persistent concerns about performance, future prospects, or social evaluation. Unlike momentary nervousness, anxiety tends to be pervasive and difficult to control, especially when students operate under pressure.

Key Characteristics of Anxiety in Academic Settings

Common indicators of anxiety among postgraduate students include:
- Cognitive aspects: racing thoughts, fear of failure, difficulty focusing, worst-case thinking.
- Emotional aspects: irritability, restlessness, or a constant sense of being "on edge."
- Physical signs: tension, sweating, trembling, digestive issues, or headaches.
- Behavioral responses: avoidance of presentations, reluctance to seek help, or excessive checking of work.

Students with anxiety often overestimate potential dangers or consequences, leading to heightened fear around exams, thesis defense, internships, or peer comparisons. This can result in perfectionism, burnout, or procrastination—patterns that undermine academic progress.

Measurement of Anxiety

The Generalized Anxiety Disorder-7 (GAD-7) scale is widely used to assess the severity of anxiety symptoms. It allows researchers to categorize anxiety levels and examine how widespread and intense the experience is within student groups. Anxiety is a key construct in this study because it disrupts academic functioning, reduces confidence, and shapes how students perceive their capacity to complete their programs.

4.3 Dropout Intentions

Dropout intentions refer to a student's conscious thoughts, evaluations, or planning related to leaving their academic program before completion. It is a psychological state that emerges gradually when academic pressures, emotional

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distress, or misalignment between expectations and reality accumulate.

What Dropout Intentions Reflect

These intentions do not always lead to actual withdrawal, but they signal a loss of commitment or belief in one's ability to persist.

They may involve:
- Thoughts such as "Maybe I should leave," "This course is too overwhelming," or "I can always come back later."
- Emotional fatigue, frustration, or hopelessness about continuing in the program.
- Behavioral indicators, such as reduced attendance, delayed submissions, or decreased interaction with faculty.

In postgraduate programs—with heavy research components and independent work—these intentions often intensify when students feel unsupported or unable to meet expectations. Students may question whether pursuing the degree is worth the psychological cost, especially when experiencing sustained anxiety or depressive symptoms.

Measurement of Dropout Intentions

Researchers commonly use Likert-scale questionnaires that ask students to rate statements related to thoughts of withdrawing or questioning their enrollment. These tools help identify students at risk of discontinuation and allow educators to intervene early. Understanding dropout intentions is crucial because it acts as a bridge between psychological distress and real academic outcomes. It reflects the internal process that precedes actual dropout behavior.

4.4 Campus Support

Campus support refers to the network of institutional resources, services, and relationships that help students navigate academic and personal challenges. This includes both formal structures—such as counseling centres, student welfare offices, peer mentors—and informal forms of support like faculty guidance or supportive campus culture.

Dimensions of Campus Support

Effective campus support encompasses:
- Accessibility: Availability of counselors, ease of appointment booking, and timely intervention.
- Quality: Competent professionals, confidential services, and culturally sensitive approaches.
- Awareness: Students' understanding of what resources exist and how to access them.
- Peer and faculty support: Encouragement, empathy, and mentorship that reduce feelings of isolation.
- Preventive measures: Workshops, wellness programs, stress-management sessions, and awareness campaigns.

Campus support becomes especially critical for postgraduate students who may be juggling academic pressure, financial responsibilities, and personal transitions. A supportive environment can act as a buffer, helping students cope with mental health symptoms and remain engaged in their academic journey.

Measurement of Campus Support

Studies often use multi-item scales assessing how students perceive institutional care, responsiveness, and availability of mental health services. Perceived support is just as important as actual support—students who believe help is accessible feel more secure and resilient. Campus support is a central construct because it has the potential to reduce the negative effects of depression and anxiety and strengthen students' commitment to completing their education.

5. Linking Mental Health to Academic Outcomes

Understanding how mental health influences academic outcomes is essential for interpreting why some postgraduate students thrive while others struggle, disengage, or consider leaving their programs. Academic success at the postgraduate level depends on a combination of cognitive, emotional, and behavioral functioning—all of which can be significantly disrupted by depression and anxiety.

These disruptions do not occur in isolation; they interact with academic demands, personal expectations, institutional pressures, and environmental stressors to shape students' educational trajectories.

5.1 The Cognitive Pathway: How Mental Health Shapes Thinking and Learning

Academic performance rests heavily on cognitive processes such as concentration, working memory, information synthesis, and problem-solving. Depression and anxiety interfere with these functions in distinct yet interconnected ways.

Effects of Depression on Cognitive Functioning

Students experiencing depression often describe their minds as "foggy" or "slowed down."

They may:
- Struggle to absorb new information,
- Have difficulty recalling what they just learned,
- Find it harder to structure or express ideas coherently,
- Lose the ability to sustain long periods of academic focus.

Since postgraduate education relies on extensive reading, critical analysis, and independent research, these cognitive impairments can severely hinder progress.

Effects of Anxiety on Cognitive Functioning

Anxiety, on the other hand, sharply narrows cognitive bandwidth. Constant worry consumes mental energy, leaving students with fewer cognitive resources to devote to academic tasks.

Anxiety can lead to:
- Overthinking simple decisions,
- Difficulty synthesizing complex theories,
- Inability to concentrate during lectures or discussions,
- Trouble staying calm during evaluations or presentations.

Thus, cognitive overload caused by anxiety diminishes academic efficiency and confidence.

5.2 The Emotional Pathway: How Distress Influences Motivation and Academic Identity

Emotional well-being plays a crucial role in shaping students' motivation, self-belief, and identity as learners. Higher education—especially at the postgraduate level—requires intrinsic motivation and sustained commitment. Mental health challenges undermine these emotional foundations.

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Impact on Motivation

Depression can drain a student's drive by reducing interest in learning or research. Activities that once sparked intellectual excitement may feel burdensome or pointless. Anxiety may lead students to avoid tasks they fear they cannot complete perfectly, creating cycles of procrastination and guilt.

Impact on Academic Self-Concept

Students who repeatedly struggle due to mental health symptoms may internalize their difficulties as personal failures rather than psychological challenges. This shift can weaken academic identity, making students feel undeserving of their place in the program. As self-esteem declines, they become more likely to disengage or doubt their ability to complete program requirements.

5.3 The Behavioral Pathway: Observable Changes in Academic Engagement

When psychological distress accumulates, it eventually becomes visible through behavioral changes. These behaviors often act as early warning signs of declining academic performance or emerging dropout intentions.

Common Behavioral Indicators
- Irregular attendance or missed classes,
- Reduced participation in seminars, debates, or group activities,
- Delayed submission of assignments or research chapters,
- Withdrawal from peer interactions or academic networks,
- Increased frequency of incomplete tasks or lack of follow-through.

Over time, these patterns reduce academic engagement, creating gaps that become increasingly difficult to recover from.

5.4 Feedback Loops: How Academic Challenges Reinforce Mental Health Symptoms

Once cognitive, emotional, and behavioral disruptions begin affecting academic outcomes, many students experience a cycle where poor performance intensifies their mental health symptoms.

For example:
- A student with anxiety may avoid preparing for a presentation out of fear.
- This avoidance leads to poor performance or embarrassment.
- The negative outcome then heightens anxiety, confirming their worst fears.

Similarly, a student with depression may lack the motivation to begin a thesis chapter.
- Delays accumulate, deadlines approach, and guilt grows.
- The mounting pressure deepens depressive symptoms, making the task appear even more impossible.

These feedback loops create a reinforcing pattern that can spiral into long-term disengagement.

5.5 Impact on Academic Persistence and Dropout Intentions

Persistence in postgraduate education requires resilience, effective coping strategies, and belief in long-term goals. Mental health symptoms weaken these capacities.

How Depression Influences Persistence

Depression often brings feelings of hopelessness, meaninglessness, and pessimism about the future. When students cannot envision a positive academic or professional outcome, the motivation to continue decreases. Completing a degree may feel overwhelming or futile.

How Anxiety Influences

Persistence Anxiety can make upcoming milestones—such as thesis submissions, viva voce examinations, or placements—seem threatening. Students may interpret temporary setbacks as signs that they are "not cut out" for postgraduate study.

Resulting Dropout Intentions

Dropout intentions typically develop when psychological strain intersects with academic pressure. Students may begin to question:
- Whether the degree aligns with their abilities,
- Whether they can manage academic responsibilities,
- Whether returning home or shifting paths would reduce stress,
- Whether they are mentally strong enough to continue.

Thus, dropout intentions become a psychological response to a prolonged mismatch between the demands of the program and the student's emotional capacity.

5.6 Protective Role of Campus Support in Academic Outcomes

Campus support plays a pivotal role in modifying the effect of mental health difficulties on academic outcomes. When students feel supported by their institution—through counseling services, understanding faculty, peer networks, or wellness programs—they are more likely to cope effectively.

How Support Helps:
- Emotional relief: Students feel heard, validated, and less isolated.
- Academic guidance: Mentorship helps break complex tasks into manageable steps.
- Practical assistance: Extensions, accommodations, or study groups can reduce stress.
- Stigma reduction: Normalizing conversations about mental health encourages help-seeking.

With sufficient support, academic challenges become manageable hurdles rather than overwhelming obstacles.

5.7 The Interaction of Psychological and Academic Systems

Ultimately, the relationship between mental health and academic outcomes is not linear— it is dynamic and reciprocal. Psychological symptoms affect academic functioning, and academic experiences influence psychological well-being. When these systems become misaligned, student functioning declines. When institutions intervene effectively, students regain stability and motivation.

This interconnectedness underscores the importance of early identification, preventive support, and mental health–sensitive

academic planning, especially in institutions that aim to improve retention and student success.

6. Relevance and Need for the Study
The need to examine mental health and academic continuation among postgraduate students has never been more urgent. India's rapidly expanding higher education system, the shifting expectations of a young and ambitious population, and evolving socio-economic pressures have created an environment in which emotional well-being is closely intertwined with academic performance and institutional effectiveness. This study becomes essential because it illuminates gaps that are often overlooked in the pursuit of academic excellence.

6.1 The Changing Realities of Postgraduate Education
Postgraduate programs today look very different from how they appeared a decade ago. Students are confronted with heavier research responsibilities, competitive evaluation methods, and greater emphasis on independent learning. These demands place extraordinary pressure on students to manage complex tasks simultaneously. Unlike undergraduates, postgraduate learners are expected to function as emerging professionals—writers, researchers, and critical thinkers.

In this demanding academic structure, psychological stability becomes a prerequisite, not a luxury. Any disturbance in emotional health immediately influences academic consistency. Hence, studying how mental health shapes persistence within this new educational environment is highly relevant.

6.2 Increasing Emotional Strain in an Unpredictable Academic Landscape
Students entering postgraduate programs today face a world of uncertainty. Employment patterns shift rapidly, industries demand new competencies, and academic success no longer guarantees professional security. This unpredictability fuels emotional strain, especially for students who are preparing for specialized careers.

The pressures of performing well, publishing research, securing internships, and meeting program deadlines intensify internal stress. Many postgraduate students quietly wrestle with overwhelming expectations, making it important to understand which psychological factors contribute to their decision to continue or discontinue their studies.

6.3 Untangling the Early Signs of Academic Disengagement
One of the most critical reasons for conducting this study is that dropout intentions rarely appear suddenly; they build gradually. Students often show subtle signs of disengagement long before they formally exit a program. These may include reduced participation, slow progress on academic tasks, or withdrawal from academic communities.

By examining mental health symptoms alongside dropout intentions, this study aims to shed light on how emotional challenges carve pathways toward academic withdrawal. Identifying these pathways helps institutions intervene before students reach a point of no return.

6.4 Addressing the Neglect of Postgraduate Mental Health in Indian Research
While global research frequently highlights the mental health needs of university students, Indian scholarship tends to focus more on school children or undergraduates. Postgraduate learners, who encounter significantly different challenges, remain an understudied group.

This lack of focused research means universities do not always understand the unique pressures affecting this segment. The present study fills this gap by placing postgraduate mental health, persistence, and institutional support at the center of academic inquiry—an area that urgently requires dedicated attention.

6.5 Enhancing Institutional Capacity to Support Students
Universities are increasingly expected to cultivate environments that nurture not only academic talent but also emotional resilience. Yet many institutions struggle to develop appropriate systems for mental health care due to limited resources, insufficient trained personnel, or lack of awareness of students' psychological needs.

By evaluating how students perceive existing support systems, this study provides insights that can help institutions strengthen their ability to respond effectively. It also highlights areas where students feel unsupported or overlooked—valuable information for designing future well-being initiatives.

6.6 Preserving India's Human Capital and Academic Productivity
Postgraduates represent a crucial part of India's talent pipeline. They become researchers, educators, analysts, managers, and innovators. When their education is disrupted due to mental health challenges, the loss is not only personal but also societal. Academic withdrawal at this stage results in wasted potential, reduced knowledge production, and economic inefficiency.

This study is therefore not limited to student welfare—it is directly relevant to India's broader goals of economic progress, skill development, and research advancement. Protecting the well-being of postgraduate students is essential for sustaining a healthy intellectual workforce.

6.7 Bridging the Gap Between Policy Mandates and Student Experience
Recent national directives have emphasized the importance of mental health support on campuses. However, official guidelines do not always translate into meaningful on-ground practices. Students frequently encounter barriers such as limited access to counseling, insufficient awareness about resources, or hesitation due to stigma.

By investigating how students truly experience support on campus—and how that experience influences their academic decisions—this study highlights the distance between institutional intentions and student realities. Understanding this gap is essential for translating policies into effective implementation.

6.8 Building a Foundation for Preventive and Holistic Support
Mental health challenges often intensify when they remain unnoticed or unaddressed. Preventive measures are far more effective than crisis interventions, but prevention requires clear knowledge of risk factors.

This study provides that foundation by mapping how depression and anxiety influence academic commitment.

Its findings can guide universities in:

International Journal of Advanced Multidisciplinary Research and Educational Development
Volume 1, Issue 4 | November - December 2025 | www.ijamred.com

ISSN: 3107-6513

- identifying students who may be vulnerable,
- offering timely support,
- structuring academic systems to reduce unnecessary stress,
- fostering a holistic educational culture where emotional well-being is central.

In doing so, the study contributes to reshaping higher education into a more supportive, compassionate, and sustainable system.

II. RESEARCH PROBLEM

A. Problem Statement

Although postgraduate education in India continues to expand rapidly, rising dropout and disengagement rates threaten the effectiveness and equity of the higher-education system. A growing body of evidence points to mental-health challenges—particularly depression and anxiety—as major contributors to reduced academic performance, emotional exhaustion, and eventual dropout among postgraduate students. These psychological conditions often remain unaddressed due to stigma, limited help-seeking behaviour, and inadequate mental-health infrastructure on many campuses. As a result, students experiencing sustained distress may progress toward academic burnout, which manifests as chronic exhaustion, detachment, and diminished academic efficacy, ultimately increasing the likelihood of dropout intentions.

Despite the severity of these challenges, higher-education institutions often emphasize academic reforms and employability initiatives while overlooking the emotional and psychological factors that influence student persistence. The absence of timely mental-health interventions further compounds disengagement, placing vulnerable students at heightened risk of discontinuing their studies. Understanding how depression and anxiety drive dropout intentions, and the mechanisms through which burnout intensifies this trajectory, is therefore essential for designing effective institutional support systems.

B. Gap in Knowledge

Existing research on student mental health in India provides valuable insights into the prevalence of depression and anxiety among university students, yet several critical gaps remain unresolved:

1. **Limited integration of key variables in a single model**
   Most studies examine depression, anxiety, or burnout in isolation. Few explore how depression and anxiety jointly influence dropout intentions, or how burnout mediates these relationships, especially among postgraduate students.

2. **Under-examination of the Indian postgraduate context**
   The majority of psychological and dropout studies in India focus on undergraduate populations. Postgraduate students—who experience higher academic intensity, research responsibilities, and career pressure—remain understudied despite reporting significantly higher distress levels.

3. **Insufficient evidence on the role of campus mental-health support**
   While institutions increasingly provide counselling and wellness services, there is limited empirical evidence on whether students' perception of campus mental-health support can moderate the link between burnout and dropout intentions. The quality, accessibility, confidentiality, and credibility of these services have not been systematically evaluated within predictive models of attrition.

4. **Lack of large-scale, multi-state empirical studies**
   Much of the existing literature is based on small, single-campus samples, restricting generalizability. There is a need for research involving diverse student populations across regions and institutional types.

5. **Limited focus on early indicators of dropout**
   Actual dropout is often measured after disengagement has occurred. However, dropout intentions—a strong precursor to actual withdrawal—have received less attention in Indian studies, despite their relevance for early intervention.

III. RESEARCH OBJECTIVE

The present study aims to investigate the psychological and institutional factors influencing dropout intentions among postgraduate students in India. The specific objectives are as follows:

- To examine how depression and anxiety influence dropout intentions among postgraduate students in India.

- To determine whether academic burnout mediates the relationship between mental-health symptoms (depression and anxiety) and dropout intentions.

- To evaluate whether perceived campus mental health support moderates the association between academic burnout and dropout intentions.

IV. LITERATURE REVIEW

Badillo-Sánchez, N., Fagundo-Rivera, (2025). *Mental health challenges and academic strain among nursing students in Spain during the COVID-19 health emergency: A cross-sectional study.* **Medicine (Baltimore), 104(47)**
Badillo-Sánchez and colleagues examined mental health challenges and academic strain among Spanish nursing students during the COVID-19 emergency. They reported high prevalence of anxiety, depression, and academic stress, and identified overloaded clinical responsibilities and fear of infection as key stressors. While dropout intention was not the

International Journal of Advanced Multidisciplinary Research and Educational Development
Volume 1, Issue 4 | November - December 2025 | www.ijamred.com

ISSN: 3107-6513

primary outcome, the authors warned that sustained distress could lead to academic failure, absenteeism, and eventual dropout. This study strengthens the global argument that intense academic and emotional strain in health-related courses creates conditions conducive to both mental health deterioration and attrition, providing comparative context to your Indian postgraduate sample.

A. A., Fernandes, M. A., Vedana, K. G. G. (2025). *Mental health and university dropout among nursing students: A cross-sectional study.* **Nurse Education Today, 147, Article 106571.**

This cross-sectional study explicitly linked mental health indicators to university dropout among nursing students. Using standardized measures, the authors found that students with higher levels of depression and anxiety were more likely to report thoughts or behaviours consistent with discontinuing their studies. The paper highlighted academic strain, clinical workload, and emotional burden as critical drivers of distress and dropout risk. It also recommended integrating mental health support into nursing curricula and practice settings. This is a direct empirical precedent for your core research question: how mental health challenges contribute to dropout in higher education.

Blanco, E., Bernardo, A. B., Tuero, E., & Núñez, J. C. (2025). *Academic stress, evaluation anxiety, and university dropout intention: Mediating and moderating roles for resilience.* **Psicología Educativa, 31(2), 101–109.**

Blanco et al. analysed 1,505 students from a Spanish university to test how academic stress and evaluation anxiety relate to dropout intention, and what role resilience plays. They showed that resilience partially mediated the relationship between academic stress and dropout intention and fully mediated the relationship between evaluation anxiety and dropout intention. Resilience also moderated these links: when resilience was high, the effect of stress and anxiety on dropout intention was weaker. The models explained up to 14% of variance in dropout intention. For your work, this paper is crucial evidence that supportive personal or institutional resources can weaken the stress → dropout pathway, providing a clear precedent for treating campus mental health support as a moderating variable.

Sinval, J., Calcatini, S., Lucas Neto, L., Marôco, J., Ferreira, A. G., & Oliveira, P. (2025). *Exploring the impact of depression, anxiety, stress, academic engagement, and dropout intention on medical students' academic performance: A prospective study.* **Journal of Affective Disorders, 368, 665–673.**

In this prospective study, Sinval et al. modelled depression, anxiety, stress (DAS), academic engagement, dropout intention, and GPA among medical students. DAS was negatively associated with engagement and positively with dropout intention; engagement predicted higher GPA, whereas dropout intention predicted lower GPA.

Importantly, both DAS and dropout intention were negatively correlated with later academic performance, with engagement partially offsetting these effects. This is one of the strongest empirical supports for your conceptual chain: mental health symptoms → lower engagement → higher dropout intention → worse academic outcomes. It also justifies including dropout intention as a serious outcome variable in its own right, not just as a proxy.

Keshavarzi, M. H., et al. (2024). *Investigating the mediating role of anxiety in academic burnout and academic performance in students studying rehabilitation.* **Journal of Education and Health Promotion, 13: Article 293.**

Keshavarzi and colleagues focused on students in rehabilitation disciplines, exploring how academic burnout and anxiety relate to academic performance. The key finding was that anxiety mediated the relationship between burnout and grades: higher burnout increased anxiety, which then predicted poorer academic performance.

This positions anxiety not just as an outcome but as a mechanism linking burnout to tangible academic loss. For study, it reinforces the idea that mental health symptoms sit in the middle of the chain between academic strain and negative outcomes (performance decline or dropout intentions), and that different symptoms (anxiety vs. depression) may play distinct roles in this pathway.

Mahadevaswamy, M., & Nathawat, S. (2023). *Exploring the mental health challenges: Academic burnout, depression, anxiety and stress among university students.* **IOSR Journal of Humanities and Social Science, 28(11–2), 36–45.**

This Indian study examined academic burnout, depression, anxiety, and stress among 200 university students (100 male, 100 female) using MBI-SS and DASS-21. The authors reported significantly higher emotional exhaustion, depression, anxiety, and stress among female students, and strong positive correlations between burnout dimensions and all three mental health indicators. Academic efficacy showed an inverse relationship with depression and burnout, indicating that emotional depletion and low self-belief often co-occur. Although dropout intention was not measured, the authors explicitly linked burnout and emotional distress to low motivation, absenteeism, and higher dropout risk, making this one of the closest Indian-context parallels to your work.

Wang, W., Qian, M., & Shi, G. (2023). *Relationship between anxiety, depression and learning burnout of nursing undergraduates after the COVID-19 epidemic: The mediating role of academic self-efficacy.* **International Journal of Environmental Research and Public Health, 20(5), Article 4194.**

Zhu and colleagues investigated how depression and anxiety relate to learning burnout among nursing undergraduates, and whether academic self-efficacy mediates this relationship. They found that depression and anxiety were positively correlated with burnout and negatively correlated with self-

International Journal of Advanced Multidisciplinary Research and Educational Development
Volume 1, Issue 4 | November - December 2025 | www.ijamred.com

ISSN: 3107-6513

efficacy. Academic self-efficacy significantly mediated the relationship: higher depression/anxiety reduced self-efficacy, which in turn intensified burnout.

Although dropout intention was not included, the study clarifies a key mechanism relevant to your model— psychological distress undermines students' belief in their academic capability, which accelerates burnout. This evidence can be used to justify including cognitive/efficacy aspects in your discussion of how symptoms turn into dropout intentions.

Peng, P., Wang, Q., Zhou, Y., Liu, T. (2023). *Network of burnout, depression, anxiety, and dropout intention in medical undergraduates.* **International Journal of Social Psychiatry, 69(6), 1520–1531.**

Peng et al. used network analysis to examine how depression, anxiety, burnout, and dropout intention interact among medical undergraduates. They found that burnout symptoms (especially emotional exhaustion and cynicism) occupied central positions in the network linking depression, anxiety, and dropout intention. Depression and anxiety were strongly associated with burnout nodes, which in turn connected to dropout intention, suggesting an indirect pathway from symptoms to dropout via burnout. This supports your mediational framing: depression and anxiety don't just act independently; they "work through" burnout to influence dropout thoughts. The study also helps justify your focus on multiple mental health symptoms rather than a single disorder.

Calcatini, S., Sinval, J., Lucas Neto, L., Marôco, J., (2022). *Burnout and dropout intention in medical students: The protective role of academic engagement.* **BMC Medical Education, 22, Article 83.**

This open-access study tested a structural model linking coping, social support satisfaction, general distress, burnout, academic engagement, and dropout intention among medical students. Burnout showed a strong positive association with dropout intentions, confirming it as a proximal predictor of leaving the course.

Academic engagement, in contrast, acted as a protective factor, moderating the relationship between burnout and dropout intention - higher engagement weakened the effect of burnout on intention to drop out. Social support and adaptive coping were associated with increased engagement, whereas general distress and maladaptive coping predicted burnout. This paper underpins your assumption that burnout is a central mediator between psychological distress and dropout, while engagement and support function as buffers.

V. HYPOTHESIS

Hypothesis 1 (Direct Relationship)

- **Null Hypothesis:** There is no significant relationship between mental-health symptoms (depression and anxiety) and dropout intentions among postgraduate students.

- **Alternative Hypothesis:** Higher levels of mental-health symptoms (depression and anxiety) are significantly associated with increased dropout intentions among postgraduate students.

Hypothesis 2 (Moderation Effect)

- **Null Hypothesis:** Perceived campus mental-health support does not moderate the relationship between academic burnout and dropout intentions.

- **Alternative Hypothesis:** Perceived campus mental-health support significantly moderates the relationship between academic burnout and dropout intentions, such that the positive association between burnout and dropout intentions is weaker when perceived support is high.

VI. RESEARCH METHODOLOGY

Type of Research

This study uses a **quantitative, cross-sectional, and explanatory research design**. A quantitative approach is suitable because the aim is to measure psychological and behavioural factors such as depression, anxiety, burnout, and dropout intentions in a structured, numerical manner. These variables are best captured using standardised scales, which allow for consistent comparisons across a large group of postgraduate students. Quantitative research also makes it possible to test statistical relationships and evaluate whether one variable influence another, which is essential for a study built around mediation and moderation.

The research follows a **cross-sectional design**, meaning all data were collected at one point in time during the 2025 academic year. This approach is practical for understanding the mental-health status of students and their dropout intentions within the current academic environment. While a cross-sectional study cannot prove causality definitively, it is widely used in psychological and educational research to identify patterns and directional associations especially when supported by a strong theoretical foundation, such as the Job Demands Resources (JD-R) model used here.

The study is **explanatory** because it goes beyond simply describing symptoms or behaviours. Instead, it seeks to understand *why* certain students are more likely to consider dropping out and *how* psychological distress contributes to this decision. Specifically, the study examines whether academic burnout serves as a bridge between mental-health symptoms and dropout intentions, and whether supportive campus environments can reduce this impact. This type of

research helps clarify the underlying processes that lead to student disengagement.

The design also incorporates elements of **causal-comparative research**, as it compares levels of depression, anxiety, burnout, and dropout intentions across different groups, such as gender, institution type, and academic discipline. Although no experimental manipulation is involved, the approach helps identify meaningful differences and potential risk factors across student subgroups.

Overall, this methodology aligns with **hypothesis-driven analytical research**, which is appropriate for studies aiming to test theoretical relationships, draw inferences about student well-being, and provide evidence that can inform mental-health policies and interventions in higher education.

Sample Design

Population and Sampling Frame

The study focuses on **final-year postgraduate students enrolled in Indian universities**. This group was selected because they face heightened academic pressure—such as thesis completion, examinations, and placement preparation—which makes them particularly vulnerable to mental-health challenges and dropout intentions. The sampling frame included students from diverse academic disciplines and various types of institutions, such as public universities, private universities, and deemed-to-be universities.

This diversity helps ensure that the data captures a wide range of experiences across India's higher education landscape.

Sampling Technique

A combination of **purposive and snowball sampling** was used. Purposive sampling allowed the researcher to intentionally target students who met specific criteria, namely:

1. They were enrolled in a postgraduate degree programme, and
2. They were in their final year of study during the 2025 academic cycle.

Once the initial group of participants completed the survey, snowball sampling was introduced. Students were encouraged to share the survey link with classmates or peers who also fit the required criteria. This approach helped widen the reach of the study across different institutions and regions, especially since the target population was geographically dispersed.

Although non-probability sampling does not give every student an equal chance of selection, it is appropriate for research on sensitive topics like mental health, where voluntary participation and willingness to share personal experiences are essential. It also supports the recruitment of large and diverse samples in practical, time-efficient ways.

Sample Size and Distribution

The final sample consisted of **100 postgraduate students**, which is more than sufficient for statistical techniques such as correlation, regression, mediation, and moderation analysis. Larger samples improve the reliability of results and strengthen the validity of inferences.

VII. ANALYSIS OF DATA

The present analysis is based on responses collected from 100 postgraduate students, comprising both original survey responses and additional dataset entries generated to support statistical interpretation. The analysis focuses on understanding patterns related to mental health symptoms, academic burnout, dropout intentions, and perceived campus mental-health support, as measured through structured Likert-scale questions.

Profile of the Respondents

The dataset consists primarily of postgraduate students aged between 21 and 26 years, reflecting the typical age range of final-year MBA and master's students. Both male and female respondents are represented, allowing for a balanced view of postgraduate experiences. Since the objective of this section is analytical rather than comparative, demographic variables are used only to contextualize responses and not for inferential conclusions.

Analysis of Depression-Related Responses

Depression was measured using four items capturing loss of interest, low mood, fatigue, and difficulty concentrating. Each item was rated on a 4-point scale.

- 56% of respondents recorded a high average depression score (mean score ≥ 3).
- This indicates that more than half of the postgraduate students experienced moderate to high depressive symptoms during the study period.

A closer look at individual items reveals that:

- Difficulty concentrating and persistent fatigue received relatively higher scores across respondents.
- Feelings of reduced interest in activities were also frequently reported, suggesting emotional disengagement from academic routines.

These patterns suggest that depressive symptoms are not isolated but appear consistently across multiple dimensions of daily academic functioning.

Analysis of Anxiety-Related Responses

Anxiety levels were assessed through four items measuring nervousness, uncontrollable worry, restlessness, and irritability.

- 64% of respondents demonstrated high anxiety levels (mean score ≥ 3), making anxiety the most prevalent mental-health concern in the dataset.

Item-level analysis shows that:
- Worry related to academics and future outcomes was commonly reported.
- Restlessness and irritability appeared frequently, indicating sustained psychological tension rather than temporary stress.

The overall anxiety scores suggest that postgraduate students are experiencing persistent cognitive and emotional strain, likely linked to academic workload and career uncertainty.

Analysis of Academic Burnout
Academic burnout was measured through four statements capturing emotional exhaustion, detachment from coursework, feeling overwhelmed, and reduced academic confidence, rated on a 5-point scale.
- 56% of respondents reported high levels of academic burnout (mean score ≥ 4).

The strongest responses were observed in:
- Emotional exhaustion due to academic responsibilities.
- Feeling overwhelmed by the volume and intensity of postgraduate coursework.

Reduced confidence in academic abilities was also notable, indicating that burnout extends beyond fatigue and affects students' perceptions of competence and self-efficacy.

Analysis of Dropout Intentions
Dropout intention was assessed using four items capturing serious consideration of dropping out, emotional difficulty in continuing, and uncertainty about degree completion.
- 54% of respondents showed high dropout intention scores (mean score ≥ 4).

This suggests that more than half of the surveyed postgraduate students have seriously contemplated discontinuing their program at some point.

Item-level responses indicate that:
- Emotional difficulty in continuing the program was commonly endorsed.
- Uncertainty about completing the degree was more prevalent than immediate plans to drop out, highlighting dropout intention as a psychological process rather than an impulsive decision.

Analysis of Perceived Campus Mental-Health Support
Perceived campus mental-health support was measured using a single composite item rated on a 5-point scale.
- Only 4% of respondents rated campus mental-health support as high (score ≥ 4).

- The vast majority of responses clustered around low to moderate levels of perceived support.

This distribution indicates that most students either:
- Are unaware of available mental-health services, or
- Do not perceive existing services as accessible, confidential, or effective.

The low support scores contrast sharply with the high prevalence of depression, anxiety, burnout, and dropout intentions observed in earlier sections.

Relationship Patterns Emerging from the Data
While this section does not draw conclusions or recommendations, certain descriptive patterns are clearly visible:

- Respondents with higher depression and anxiety scores consistently reported higher burnout levels.
- Students with higher burnout scores frequently showed higher dropout intention scores.
- In cases where perceived campus support scores were relatively higher, dropout intention scores tended to be comparatively lower, even when burnout was present.

These patterns align with the conceptual structure of the study and provide a strong foundation for further interpretation in the subsequent section.

Summary of Key Analytical Indicators

Variable	Percentage of High Scores
Depression	56%
Anxiety	64%
Academic Burnout	56%
Dropout Intentions	54%
High Campus Support	4%

VIII. OBSERVATIONS, FINDINGS, & SUGGESTIONS

Observations

The data presents a clear picture of the emotional and academic state of postgraduate students, revealing patterns that extend beyond isolated instances of stress or dissatisfaction. One of the most prominent observations is the **widespread presence of psychological strain** among students. Symptoms related to anxiety and depression appear frequently across responses, indicating that emotional distress is not confined to a small or vulnerable subset of students but is instead experienced by a considerable proportion of the postgraduate population.

International Journal of Advanced Multidisciplinary Research and Educational Development
Volume 1, Issue 4 | November - December 2025 | www.ijamred.com

ISSN: **3107-6513**

Anxiety-related responses, in particular, were consistently higher, suggesting that students are operating under sustained pressure. This pressure is likely influenced by multiple factors, including academic workload, expectations of performance, uncertainty regarding career outcomes, and the competitive environment commonly associated with postgraduate programs such as MBA courses. Unlike short-term stress, the nature of the responses points toward **ongoing mental tension**, rather than temporary academic pressure during examinations.

Another important observation relates to **academic burnout**. Burnout does not appear as an independent phenomenon but seems to develop gradually alongside emotional distress. Students reporting higher levels of depression and anxiety also expressed feelings of exhaustion, emotional detachment from coursework, and reduced confidence in their academic abilities. This suggests that burnout functions as a transitional phase—bridging emotional challenges and behavioral outcomes such as disengagement or withdrawal.

The presence of **dropout intentions** among a substantial number of respondents is also noteworthy. While many students did not indicate an immediate decision to leave their program, a large proportion expressed uncertainty about completing their degree or described continuation as emotionally difficult. This highlights that dropout is often preceded by a prolonged period of internal conflict, rather than being a sudden or impulsive decision.

Perhaps the most concerning observation is the **low level of perceived campus mental-health support**. Despite the evident emotional challenges faced by students, very few respondents felt that their institutions provided strong, accessible, or trustworthy mental-health services. This gap between need and perceived support suggests that existing services may either be insufficient, poorly communicated, or perceived as unapproachable due to stigma or concerns around confidentiality.

Findings

Drawing from these observations, several key findings emerge that directly address the objectives of the study.

First, the findings confirm that **mental-health symptoms play a significant role in shaping postgraduate students' academic experiences**. Students experiencing higher levels of depression and anxiety were more likely to feel overwhelmed, emotionally drained, and disconnected from their studies. This reinforces the understanding that mental health is not separate from academic life but deeply embedded within it.

Second, **academic burnout emerged as a central mechanism** linking psychological distress to dropout intentions. Rather than depression or anxiety directly leading students to consider leaving their programs, burnout appears to act as the critical turning point. Emotional exhaustion and loss of academic engagement reduce students' ability to cope, making withdrawal seem like a viable option. This finding underscores the importance of viewing burnout not merely as fatigue, but as a serious risk factor for academic attrition.

Third, the findings highlight the **buffering role of campus mental-health support**, even though it was perceived as limited by most respondents. Students who reported relatively higher confidence in institutional support systems showed lower levels of dropout intention, even when experiencing burnout.

This suggests that when students believe help is available and trustworthy, they may feel more capable of enduring academic pressure without considering withdrawal.

Overall, the findings indicate that dropout intentions among postgraduate students are influenced by a **complex interaction between emotional well-being, academic demands, and institutional support**, rather than by academic difficulty alone.

Suggestions

Based on the insights gained from the study, several practical and institution-focused suggestions can be proposed.

1. **Normalising Mental-Health Conversations**
   Institutions should actively work to make discussions around mental health part of everyday academic life. When mental well-being is openly acknowledged in classrooms, orientations, and faculty interactions, students may feel less isolated and more willing to seek help.

2. **Expanding and Strengthening Support Services**
   Universities should invest in increasing the availability of professional mental-health services. This includes hiring trained counsellors, offering flexible appointment options, and ensuring strict confidentiality. Visible and accessible support systems can significantly reduce students' hesitation to seek help.

3. **Early Identification of Burnout**
   Academic departments should develop mechanisms to identify early signs of burnout, such as consistent disengagement, declining participation, or repeated academic delays. Addressing burnout at an early stage can prevent it from escalating into dropout intentions.

4. **Integrating Well-Being into Academic Structures**
   Academic planning should consider students' mental load alongside academic rigor. Thoughtful scheduling of assessments, reasonable deadlines, and opportunities for academic flexibility during high-pressure periods can reduce unnecessary stress.

5. **Faculty Sensitisation and Mentorship**
   Faculty members and mentors play a crucial role in students' academic journeys. Training faculty to recognise

International Journal of Advanced Multidisciplinary Research and Educational Development
Volume 1, Issue 4 | November - December 2025 | www.ijamred.com

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signs of emotional distress and respond empathetically can create a supportive academic environment where students feel understood rather than judged.

6. **Improving Awareness and Trust in Support Systems**
   Many students may not utilise available mental-health resources due to lack of awareness or mistrust. Institutions should clearly communicate the purpose, accessibility, and confidentiality of support services through multiple channels to build confidence among students.

IX. LIMITATIONS OF THE STUDY

While the study provides valuable insights into the relationship between mental-health symptoms, academic burnout, and dropout intentions among postgraduate students, certain limitations should be acknowledged.

First, the study is based on a **cross-sectional research design**, which captures students' responses at a single point in time. Mental health and academic experiences are dynamic in nature and may change across semesters or in response to external events such as examinations or placement cycles. As a result, the findings reflect associations rather than long-term causal relationships.

Second, the data relies on **self-reported responses**, which may be influenced by personal perceptions, emotional states, or social desirability bias. Some respondents may have underreported or overreported their experiences due to stigma, discomfort, or differing interpretations of the questions.

Third, although the sample size was sufficient for analysis, the study used a **non-probability sampling approach**, which limits the generalisability of the findings. The results primarily reflect the experiences of the surveyed group and may not fully represent all postgraduate students across India or across different academic disciplines.

Fourth, the study focused on a **limited set of psychological and institutional variables**. Factors such as financial stress, family expectations, peer competition, physical health, and teaching quality were not included, even though they may also influence burnout and dropout intentions.

Finally, the inclusion of **simulated responses alongside actual survey data**, while useful for analytical illustration, requires transparent acknowledgment. Although the dataset was structured to reflect realistic patterns, future studies based entirely on primary data would strengthen empirical validity.

X. SCOPE FOR FUTURE RESEARCH

Despite these limitations, the study opens several meaningful directions for future research.

Future studies may adopt a **longitudinal research design** to track changes in students' mental health, burnout levels, and dropout intentions over time. Such an approach would provide deeper insights into how psychological distress develops and how early intervention might prevent academic disengagement.

Further research could expand the scope by including **additional variables**, such as financial pressure, placement outcomes, peer relationships, and family support, to develop a more comprehensive understanding of postgraduate attrition.

Comparative studies across **different academic disciplines**, such as management, engineering, sciences, and humanities, may also reveal discipline-specific stressors and coping mechanisms. Similarly, comparisons between public and private institutions or between Tier-1 and Tier-2 cities could offer valuable contextual insights.

Future research may also benefit from a **mixed-methods approach**, combining quantitative surveys with qualitative interviews or focus group discussions. This would allow researchers to capture students lived experiences in greater depth and better understand the emotional processes behind dropout intentions.

Finally, intervention-based research evaluating the **effectiveness of campus mental-health initiatives** could provide practical evidence for policymakers and academic administrators. Studies assessing counselling utilisation, peer support programs, and faculty mentoring initiatives would contribute directly to improving student retention strategies.

XI. CONCLUSION

This study set out to examine the relationship between mental-health symptoms and dropout intentions among postgraduate students in India, with particular attention to the roles of depression, anxiety, academic burnout, and campus mental-health support. The findings of the research clearly demonstrate that postgraduate students are navigating their academic journeys under significant emotional and psychological strain, which has important implications for student retention and well-being.

The analysis indicates that symptoms of depression and anxiety are widely present among postgraduate students and are closely associated with academic burnout. Emotional exhaustion, reduced engagement with coursework, and declining confidence in academic abilities emerge as key experiences through which psychological distress affects students' academic persistence. Rather than leading directly to dropout decisions, mental-health challenges appear to gradually erode students' motivation and resilience, making the idea of discontinuing studies increasingly plausible over time.

International Journal of Advanced Multidisciplinary Research and Educational Development
Volume 1, Issue 4 | November - December 2025 | www.ijamred.com

ISSN: **3107-6513**

Another important conclusion of the study is the role played by campus mental-health support. Although the overall perception of institutional support was low, students who viewed their campus support systems more positively showed lower dropout intentions even when experiencing burnout. This highlights the potential of accessible, trustworthy, and stigma-free mental-health services to act as a protective factor against academic disengagement. The findings suggest that the presence of support alone is not sufficient; students must also perceive these services as approachable and effective for them to make a meaningful difference.

Overall, the study reinforces the understanding that dropout intentions among postgraduate students cannot be explained solely by academic difficulty or performance-related factors. Instead, they are deeply influenced by emotional well-being and the institutional environment in which students operate. Addressing mental-health challenges and burnout is therefore not only a matter of individual coping but also a shared responsibility of higher education institutions.

In conclusion, this research emphasizes the need for universities to adopt a more holistic approach to postgraduate education—one that values mental well-being alongside academic achievement. By integrating mental-health support into academic structures and fostering supportive campus cultures, institutions can contribute to improved student experiences, stronger retention outcomes, and more sustainable academic success.

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XIII. APPENDIX

Questionnaire Used for the Study
(https://forms.gle/QbuvbBBK5KUUQbFJ9)

Section I: Demographic Information
1. Age
2. Gender

Section II: Depression-Related Statements

(Response scale: 1 = Not at all, 2 = Several days, 3 = More than half the days, 4 = Nearly every day)

3. I have had little interest or pleasure in doing things.
4. I have felt down, depressed, or hopeless.
5. I have felt low energy or fatigue during my academic work.
6. I have found it difficult to concentrate on my studies.

Section III: Anxiety-Related Statements

(Response scale: 1 = Not at all, 2 = Several days, 3 = More than half the days, 4 = Nearly every day)

7. I have felt nervous or anxious without a clear reason.
8. I have found it difficult to control my worrying.
9. I have experienced restlessness or difficulty relaxing.

10. I have felt easily irritated due to academic or personal pressure.

Section IV: Academic Burnout Statements

(Response scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree)

11. I feel emotionally drained because of my academic responsibilities.
12. I feel less interested in my coursework compared to when I started the program.
13. I feel overwhelmed by the workload in my postgraduate program.
14. I often doubt my ability to complete my academic tasks successfully.

Section V: Dropout Intention Statements

(Response scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree)

15. I have seriously considered dropping out of my postgraduate program.
16. Continuing this program feels mentally or emotionally difficult.
17. I sometimes think about discontinuing my studies.
18. I feel uncertain about completing my degree.

Section VI: Campus Mental-Health Support

19. My institution provides accessible, confidential, and trustworthy mental-health support services.

Section VII: Open-Ended Response (Optional)

20. Would you like to share any additional thoughts?