

Original Article:

**UNPACKING SOCIAL AND ECONOMIC CONSERVATISM
AND DEPRESSIVE SYMPTOMS AMONGST CALIFORNIA
COMMUNITY COLLEGE STUDENTS**

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Abstract

With recent rises in depression amongst college students being tied to lower success rates and higher suicide incidents, depression has become an increasingly alarming public health concern on California Community College (CCC) campuses. Little research has honed-in on the mental health realities regarding complexities between political ideologies and mental health, as conservatives consistently have reported lower depression rates. This study explored associations between Social and Economic Conservatism and depressive symptoms among CCC students. Self-report data from 411 CCC students were analyzed using SPSS. The association between Social and Economic Conservatism and depressive symptoms was statistically significant. Results emphasize an understanding of psychosocial constructs, such as Conservatism, to facilitate addressing the unmet mental health needs of CCC students. Future research may explore the mechanisms that allow Conservatism to safeguard the presence or severity of psychopathology symptoms among CCC students.

Keywords: depressive symptoms, social and economic conservatism, California community college students, political psychology, clinical psychology

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INTRODUCTION

Depression has been recognized as a major public health issue by many international governments, including the United States where the fields of psychology and psychiatry have primarily focused on treatments rather than prevention (McLaughlin, 2011; Jacob, 2012). Severe depression can unfortunately lead to suicide, which has been the second leading cause of death between the ages of 15 and 24 years old (Patton et al., 2009). Within the United States, around 2,000 teenagers commit suicide per year; approximately 1,100 of those deaths take place on college campuses (Higbee & Dwinell, 1999; University of Michigan, 2024). Loss of interest, being constantly tired, trouble concentrating, and suicidal ideations can all be signs of depression (Bruce, 2023). In one survey, nearly 11% of students reported moderate to severe depression where trends are rising to a staggering 40.3% reports depression and 13.2% reporting suicidal ideation as of 2021 (Pompili, 2016; Aslanian & Roth, 2022). While suicide may be a horrific result of major depressive symptoms, college students can often experience persistent symptoms that over time can be huge barriers to their academic careers (e.g., difficulty remembering, inability to focus, easily distractable, and lacking interest in once enjoyable things (Spielberger, 1983; Bhujade, 2017). Depression has been shown to negatively impact college students' academic performances, namely lowering grade point averages, doubling drop-out rates, and being tied to substance abuse (Eisenberg et al., 2009; Dupéré et al., 2018; Bowe, 2023). Interestingly, depression is more prevalent among sexual, ethnic, and gender minorities, as they tend to score especially higher on the Patient Health Questionnaire (PHQ) measure compared to the general population (McElroy et al., 2016). Moreover, among college students, ethnic minorities have appeared to be an at-risk group for anxiety and depressive issues (Benton et al., 2003; Blanco et al., 2008; Hunt & Eisenberg, 2010). This is especially important considering that the demographic composition of most students enrolled in the California Community College System is comprised of students from historically marginalized minority communities (CCCCO, 2024a).

As political ideologies shape the political landscape, understanding their impact on perceptions of life satisfaction may come with consequences on mental health for folks in different positions within political spectrums. Given the significance mental health challenges have on community college students, it should be crucial to explore how external factors, such as the current political climate, might exacerbate these issues. Within the political sphere, rising tensions and polarity of ideologies have become the new norm (Pew Research Center, 2014; Boxell et al., 2022). Consequently, it's reasonable to infer that mental health has been greatly affected in the current political climate noted during the 2016 presidential election (Garner et al., 2021). Scientists such as Ford and colleagues (2023) have been increasingly affirming how politics affect mental health, as it can evoke negative emotions when exposed continuously. Politics and political policies can affect an individual's daily livelihood such as one's finances and the economy. Additionally, politics

is often intrinsically linked to people's moral beliefs, usually making it very personal (Kubin et al., 2021). Honing-in on political ideology, previous literature tends to assert that those who are conservative leaning tend to have better life satisfaction; more specifically, conservatives are less likely to be depressed than those who identify themselves as more liberal (Garner, 2021). Given that Conservatism has increasingly become an umbrella term; for this study, it was operationalized and broken down into two distinct constructs: Social Conservatism and Economic Conservatism. Economic Conservatism refers to attitudes concerned with the involvement of the government and the regulation of private affairs in the economic lives of its citizens (Crowson, 2009; Everett, 2013). Meanwhile, Social Conservatism revolves around ideologies of preserving moral traditions while believing that political problems are religious and moral problems (Kirk, 1953; Everett, 2013). For instance, holding conservative views on social issues such as LGBTQ rights or abortion tends to correlate with higher levels of homophobia and racial prejudice for individuals who identify as more socially conservative (Hodson & Dhont, 2015). In one study, participants who scored high on Social and Economic Conservatism tended to have more negative feelings toward female and male homosexuals, atheists, Hispanics, and Muslims (Beyer, 2020). In another study conducted with college students, 68% of conservative students stated that they felt concerned about social consequences that may come from peers due to voicing their conservative opinions in class and claimed that they have faced "distinctive challenges" when it came to voicing said opinions publicly, on top of 70% claiming that they are afraid they will even lose friends (Ryan et al., 2022).

Mental health is influenced by a complex set of factors that are time and place sensitive; as an extension of that, political ideology plays a crucial role in shaping mental health outcomes. Within a general lens, political divisiveness may be considered an acute cause for depressive symptoms, with 59% of Americans indicating that the division between ideologies had a significant cause of stress which increased in 2018 to 62% (APA, 2017; 2018). To explore mental health and its outcomes based on political ideology, a longitudinal study assessed depression and political demographics among adolescents and found that higher rates of depression have been prevalent among liberal students (Gimbrone et al., 2021). On the other side of the political spectrum, since 1972, conservatives have reported higher levels of happiness and meaning in their lives (Okulicz-Kozaryn et al., 2014; Newman et al., 2018; Taylor, 2008). Overall, Conservatism significantly predicted overall life satisfaction among young adults and was associated with a 17% to 24% decreased likelihood of depression (Miller & Gur, 2002; Butz, Kieslich, & Bless, 2017). Napier's (2008) study and Levine's (2023) research backed up this claim where their findings similarly concluded that conservatives were happier overall than liberals nationally and internationally. Possible explanations for the differences in depression levels between conservatives and liberals are the differences in ideology and attitudes toward certain topics, as supported by Schlenker and colleagues (2011) who

revealed conservatives score higher than liberals on personality and attitude measures which are associated with positive adjustment and mental health.

Differences in ideologies are most present when analyzing the core components of Conservatism: strong tendencies to rationalize economic inequalities and the protection of self-esteem, which may explain why liberals are less happy, where the inequality takes a greater psychological toll (Jost et al., 2003; Napier and Jost, 2008; Van Hiel & Brebels, 2011). This trend is noted by liberals' worrying about stress-inducing topics such as income inequality, gun violence, climate change, and racial injustice (Craig, 2023). The inference here is that Conservatism as a continuum plays as a factor in that relationship between these two groups. Within the university and community college setting, diverse identities and individuals have become celebrated and encouraged. Within the California Community College system specifically, there are multiple initiatives that are funded by the California legislature which focus on efforts of Diversity, Equity, Inclusion, and Accessibility (DEIA) to create campuses that are more inclusive and welcoming for minoritized and underserved students (CCCO, 2024b). The assumption here is that individuals are being exposed to diverse environments and ideologies at a higher intensity at places outside of campus. Therefore, given the many negative feelings conservatives tend to have towards certain groups, it's reasonable to assume that national trends of conservatives being 'happier' may not be parallel within this context (American Council on Education, 2012; Perkins, 2022).

The primary objective of this investigation was to determine whether California Community College students follow parallel to national trends and quantitatively assess the impact of Social and Economic Conservatism on safeguarding susceptibility and severity of depressive symptoms, with it being a potential psychosocial correlate of psychopathology. We used an online survey design to collect data that would fulfill our aims. One *a priori* hypothesis was tested: Social and Economic Conservatism will be negatively associated with depressive symptoms amongst our California Community College population.

METHOD

Participants

The sample included a diverse group of participants. The overall recruit sample included 411 college students from a large community college district in southern California. However, three participants were excluded based on age because they stated being 17 years old after initially misreporting their age as over 18 in the screening that proceeded with the survey itself. Therefore, the final sample size was 408. Of the final sample, 380 participants chose to disclose their exact age which ranged from 18 to 69 years old ($M = 23.04$, $SD = 7.84$). Most of the sample reported being between 18 to 20 years of age (60.30%, $n = 237$). When it comes to gender, a sizable 54.5% of the participants identified as cisgender women ($n = 207$). Sexuality-wise, one could note that 73.8% of

participants identified as straight or heterosexual ($n = 298$). Participants identified their race by checking all categories that applied to them. Most participants identified themselves solely as Hispanic (non-white) (39%, $n = 158$) or as multi-race, with two or more identities (21.5%, $n = 87$). See Tables 1a and 1b for additional demographic sample information.

Procedure

The study analyzed data from a non-experimental, correlational study. The study utilized a convenience sampling approach. Participant recruitment spanned a little over a month and was facilitated through online and in-person marketing efforts. The primary goal of the study involved assessing voting behavior. Prospective respondents were eligible to participate in this study if they reported being United States citizens, over the age of 18, and active students from one southern California Community College district. Respondents performed an initial screening to ensure they met the eligibility criteria before being enrolled as participants. A consent form, alongside the other materials and online-administered assessments, was facilitated through Google Forms. Lastly, Participants were provided with a debriefing statement of the survey upon its conclusion acknowledging the appreciation of their participation. Participants were not compensated monetarily for their participation. Institutional Review Board approval was obtained before data collection.

Materials

Informed Consent. Participants were provided with an Informed Consent statement before study initiation that provided them with insight into details of the study, what's expected of them, their benefits, risks, and their legally entitled rights, alongside whom they may be able to address any questions should any arise during or after participating in the study.

Patient Health Questionnaire (PHQ-9). Developed by Kroenke, Spitzer, & Williams (2001) this scale was intended to gauge the severity of depressive symptomatology of patients that's become a screening tool for clinicians regarding depression. The scale consists of 10 items, one of which is non-scored. An aggregate score is calculated to denote the severity of one's symptoms, which are based on the DSM-5's diagnostic criteria. Items guide the individual to reflect on the past two weeks and recall the frequency of experiencing events such as "Little interest or pleasure doing things", or "poor appetite or overeating". Responses were collected on a Likert-type scale and ranged from "Not at all" which is scored as zero to "Nearly every day" which is scored as three. In the current study, the scale proved to be very reliable with good internal consistency ($\alpha = .86$).

***Table 1a. Participant Descriptive Demographics
(Age, Political Affiliation, & Gender Identity)***

	<i>M</i>	<i>SD</i>	<i>n</i>	<i>%</i>
Age	23.04	7.84	393	
18 -20			237	60.3
21 - 29			96	24.4
30 - 39			34	8.7
40 - 49			21	5.3
≥ 50			5	1.3
Political Affiliation			405	
Republican			87	21.5
Democrat			154	38.0
Green Party			16	4.0
Independent			100	24.7
None/Unsure			28	6.9
Libertarian			4	1.0
Democrat Socialist/Socialism			5	1.2
Other (not categorized)			11	2.7
Gender Identity			380	
Cisgender Male			137	36.1
Cisgender Female			207	54.5
Transgender Male			5	1.3
Transgender Female			3	0.8
Non-binary			19	5.0
Other			9	2.4

Note: Valid percents reported for each participant demographic variable.

***Table 1b. Participant Descriptive Demographics
(Sexual Orientation & Race/Ethnicity)***

	<i>n</i>	<i>%</i>
Sexual Orientation	404	
Straight/Heterosexual	298	73.8
Bisexual	55	13.6
Gay/Lesbian/Homosexual	26	6.4
Pansexual	15	3.7
Other	10	2.5
Race/Ethnicity	405	
Asian	22	5.4
American Indian/Alaska Native	3	0.7
Black/African American	20	4.9
Hispanic	158	39.0
Middle Eastern	1	0.2
Native Hawaiian/Pacific Islander	1	0.2
Multiple (Identified with 2+ Identities)	87	21.5
White	113	27.9

Note: Valid percents reported for each participant demographic variable.

The 12-Item Social and Economic Conservatism Scale (SECS). The SECS is a multi-item scale that assesses the extent of one's Conservatism through two subscales of Social Conservatism and Economic Conservatism. Developed by Everett (2013), the scale requires respondents to rate the level to which they feel positive about issues such as "Welfare Benefits", "Social and Economic Security", and "Tax". Participants rated their feelings on a scale from 0 (*denoting greater negative feelings*) to 100 (*reflecting greater positive feelings*). Some items were reverse-coded. An aggregate score was calculated for

this scale. In the present study, the scale was reliable with acceptable internal consistency ($\alpha = .79$).

Demographics Questionnaire. Participants were presented with a variety of items to gauge their demographic statuses. Items inquired about their age, Political Party affiliation, sexual orientation, gender identity, and racial/ethnic identity. Response options were multiple choice or checkbox with the option to write in their own answers.

Design and Statistical Analysis

The study was conducted as a non-experimental correlational study. The summed scores of the PHQ-9 and the SECS items were aggregated to form variables of their respective total scales. The variables analyzed were the total score of the Social and Economic Conservatism Scale and the Patient Health Questionnaire for depressive symptoms. Data was analyzed with IBM SPSS V 28.0 for analysis using Spearman's Rho correlation coefficient analysis which considers the nonlinearity of the data. Significance was assessed based on an alpha level of 0.05.

RESULTS

The total scores of the PHQ-9 [$M = 8.64$, $SD = 5.98$] did not follow a normal distribution and skewed right ($W = .957$, $p < .001$). Similarly, the total scores of the SECS [$M = 690.84$, $SD = 198.88$] were also not normally distributed ($W = .978$, $p < .001$) with a slight skewness to the left. Given the large sample size the non-normality of the data should be of little concern. However, we used a nonparametric test to assess the hypothesis.

Utilizing Spearman's rank correlation coefficient analysis, the relationship between Social and Economic Conservatism and depressive symptoms was tested amongst Community College students. The computed assessment determined that there was a statistically significant negative, yet very weak, correlation between the two variables, $r(367) = -.129$, $p = .013$.

DISCUSSION

The results of this study align with general trends that individuals with higher levels of Conservatism tend to report overall lower levels of depression compared to those who are less conservative, namely liberals (Levine, 2023; al-Gharbi, 2023). Though the strength of the relationship was weaker than anticipated, the results still confirmed the hypothesis: social and economic conservatism was negatively associated with depressive symptoms. Interestingly, for this study, the reality of increased diversity and fostered inclusivity on college campuses did not change the presumed relationship between depressive symptoms

and conservatism, despite conservatives having greater negative feelings towards diverse racial, ethnic, sexual, and gender minorities (Hodson & Dhont, 2015). As Napier and Jost (2008) affirmed, conservative ideology safeguards depressive symptoms due to the ability to rationalize and justify issues such as economic inequality, in addition to the protection of self-esteem. Future research ought to also explore *how* specific mechanisms within Conservatism buffer depressive symptoms and what factors may play protective or exacerbating roles within that relationship.

The prevalence of depression among college students is a critical health issue with serious implications for academic success rates, dropout rates, suicide rates, and overall well-being (Eisenberg et al., 2009; Dupéré et al., 2018; Bove, 2023). The study's findings contribute to previously established works by addressing the potential effect of Conservatism, specifically Social and Economic Conservatism, on depressive symptoms in this demographic that have largely been neglected in the literature. Nonetheless, the conversation surrounding these political differences in mental health outcomes has recently gained momentum, especially in the context of the divisive political climate observed in recent years (Pew Research Center, 2014; Garner et al., 2021). The results of this study emphasize the importance of understanding psychosocial constructs, such as Conservatism, in the context of facilitating the process of addressing the unmet mental health needs of college students.

Limitations

It is essential to recognize the results of the present study in the context of its limitations. Given that non-U.S. citizens were excluded from participation, as the broader goals of this research project focused solely on the political behavior of US citizens, the gathered sample may not be fully representative of the entire CCC student population. Furthermore, focusing exclusively on a specific community college in California may limit the generalizability of the findings. Additionally, measures relying on self-report mechanisms introduce the potential for response bias. However, methodologically there were intentional efforts made to reduce the risk of response bias by ensuring confidentiality of participants with explicit asks to not report any identifying information in their survey responses. Therefore, future research could expand to broader community college populations. Lastly, participants' exposure to diversity was not quantitatively assessed so we would recommend future works to include measures that directly gauge this factor alongside others that may be at play (i.e. cultural values, religiosity, SES composite scores).

Conclusion

The study's focus on California Community College students adds nuance to existing literature, highlighting the importance of considering political ideology in understanding mental health. As higher education institutions grow larger in California, it is essential to recognize and address the mental health needs of all students, if not for its

human necessity, at least to alleviate the negative impact that depressive symptoms specifically have on the fiscal health and academic reputation of these institutions. Subsequently, the responsibility of college leaders is put into context for the betterment of the implementation and finetuning of programs and support systems that consider the diverse psychosocial determinants of students' well-being while addressing barriers to health and mental health on campus. Conducting regular assessments of the mental health landscape on campuses for both individual and clinical levels are viable options for addressing such barriers (Li, 2022). Though the current legislative and economic reality that surrounds the dwindling funding of California Community Colleges places doubt on how feasible those approaches are, it becomes all the clearer why an interdisciplinary approach within social science disciplines is critical for problem-solving such complex issues. From another angle, destigmatizing mental health discussions ought to be a priority to facilitate the success of active promotion of mental health resources such as counseling, mental health education programs, and other peer support networks. By acknowledging the role of Conservatism in mental health outcomes and creating an environment in reduces barriers that students face, college can become a healthy and supportive atmosphere for all students. Subsequent research may explore the mechanisms and specific role that Conservatism plays in safeguarding the presence or severity of psychopathology symptoms among California Community College students. From a global perspective, it would be interesting to examine how these relationships change due to differing sociopolitical structures and ideologies across countries and regions. Future researchers may also take an interdisciplinary approach and collaborate with Sociologists and Political Scientists to understand how Economic Conservatism alone interacts with socioeconomic status to influence mental health outcomes within students from varying backgrounds.

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