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The Phenomenon of Self-Diagnosis Among Psychology Students Based on Academic Learning of Symptoms.

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ABSTRACT

Psychology students commonly face a loop of self-diagnosis, driven by their exposure to extensive information of mental health symptoms, which can lead to increased anxiety and other mental health difficulties. As they interact closely with psychological concepts, they may begin to misunderstand everyday experiences as indicators of mental illness. This situation, related to "medical student syndrome," is especially widespread among students of behavioural and social sciences, though less prominent in medical students. This study explores the incidence of self-diagnosis among psychology students and the factors related to this practice.

A sample of 100 psychology students was surveyed to study the connection between academic learning and self-diagnosis tendencies, with a focus on self-stigmatization. To assess self-stigma and its psychological repercussions, the study utilized three major instruments: the Social Stigma Questionnaire (SSQ), the Internalized Stigma of Mental Illness (ISMI) scale, and the Depression, Anxiety, and Stress Scales (DASS). This study gave a complete understanding of how self-stigmatization affects the mental well-being of psychology students, particularly in relation to their predisposition to self-diagnose.

Keywords: Self-diagnosis, psychology students, academic learning, mental health, symptoms.

INTRODUCTION

¹⁴ The World Health Organization (WHO) defines mental health as a state of well-being where individuals can recognize their abilities, manage life's challenges, work effectively, and contribute to their communities. Research, as described by Earl Robert Babbie, involves systematically exploring and understanding human experiences to explain, predict, and address patterns of behavior. Over the years, the global burden of mental illness has significantly increased, with ¹⁷ disability-adjusted life years (DALYs) rising from 80.8 million in 1990 to 125.3 million in 2019, highlighting the growing impact of mental health challenges worldwide.

²⁴ Mental health is more than just the absence of illness; it's deeply personal and varies for everyone. Difficult life experiences, especially during critical stages like childhood, can leave lasting effects. Factors such as poverty, violence, and neglect can heighten vulnerability to mental health issues. Supporting emotional well-being through compassionate policies and early interventions, especially for young people, is essential for fostering healthier communities.

As conversations around mental health grow, so do some unintended challenges. One such concern is the rise of self-diagnosis, particularly among medical and psychology students. When learning about various conditions, students often begin to relate their personal experiences to the symptoms they study. This phenomenon, commonly called "medical student syndrome" or "interns' syndrome," can lead to unnecessary anxiety as they identify with the illnesses they learn about. Psychology students, too, may start associating personality traits or mood shifts with psychiatric conditions they encounter in their coursework. While increased awareness is crucial, it's important to balance it with proper understanding to prevent misinterpretation and unnecessary distress.

CONTEXTUAL FRAMEWORK

1. **Illness Anxiety Disorder (IAD):** Previously known as Hypochondriasis, IAD involves a persistent fear of having a serious illness, often due to misinterpreting normal bodily sensations (APA, 2013).
2. **Cyberchondriasis:** The tendency to become overly anxious about health after searching for medical information online, often leading to unnecessary worry and self-diagnosis (White & Horvitz, 2009).

3. **Self-Diagnosis:** When individuals try to identify a health condition in themselves by matching personal symptoms with information they've read, often without medical guidance. This can lead to unnecessary distress when normal behaviors are mistaken for illness.
4. **Academic Maturity:** A stage where students gain enough knowledge and critical thinking skills to assess health information objectively, reducing the emotional impact of learning about disorders.
5. **Schema:** A mental framework our brains use to organize information and make sense of patterns, helping us understand how ideas and concepts relate to each other.
6. **Emotional Distress:** Intense feelings of stress or anxiety that can overwhelm daily life, often triggered by self-diagnosis or health worries (Moss-Morris & Petrie, 2001).
7. **Psychopathology:** The study of mental health conditions and abnormal behavior, which can sometimes lead students to relate too closely to the symptoms they learn about.

This present study aims to assess the ongoing stigma among psychology of assuming and diagnosing mental health conditions and looking after the impacts that are caused due to such wrong diagnosis.

LITREATURE REVIEW

The trend of self-diagnosis among psychology students has emerged as an increasing problem, especially as these individuals gain academic knowledge of mental health symptoms.

Research reveals that as many as 70% of psychology students acknowledge experiencing psychiatric symptoms throughout their studies, with 30-50% confessing to self-diagnosis based on academic resources instead of consulting professionals.

This literature review seeks to investigate the influence of academic learning of symptoms on the self-diagnosis trend among psychology students, analysing the psychological, educational, and ethical ramifications of this behaviour, along with its potential effects on mental health awareness, self-perception, and help-seeking behaviour within the student demographic.

TITLE	JOURNAL	TOOLS	RESULT
onset of mental disorders worldwide:	springer nature	¹⁶ PRISMA/MOOSE-compliant systematic review with meta-analysis of birth cohort/cross-sectional/cohort studies.	⁶ These studies were comprised of data from 708,561 individuals, all of whom were diagnosed with a mental disorder. Overall, 54 studies were set in U.S., 23 studies in multiple countries, 11 in Australia, ten in Finland, eight in Germany, six each in Canada and the Netherlands, five in China, Denmark, South Africa, Spain, United Kingdom, four in Israel, South Korea, Sweden, three in Ethiopia, Mexico, New Zealand, Nigeria, Switzerland, Taiwan, two in France, Iraq, Singapore, and one study each in additional countries. There were insufficient studies for inclusion on catatonia, dissociative disorders, elimination disorders, disorders of bodily experience, impulse-control disorders, disruptive behaviour or dissocial disorders, paraphilic disorders, factitious disorders, neurocognitive disorders, and disorders associated with pregnancy childbirth/puerperium.
²³ Self-Diagnosis in Psychology Students	The International Journal of Indian Psychology	Inductive thematic analysis: sample of 8 students, conducting interviews	¹⁵ It was revealed that both the distal factor of prior experience and the proximal factor of clinical knowledge cause the student to self-diagnose.
³⁴ journal of abnormal psychology	APA (American psychiatry association)	WMH-ICS surveys Item-level missing data	⁹ Preliminary analyses reported below showed that the majority of the 50 remaining students who identified either as transgender or “other” rather than as male or female endorsed a number of mental disorders and experienced considerable impairment, leading us to focus on them in a separate report. The analyses reported here

			are based on the remaining 13,984 respondents.
3 perceived stress in medical students	Indian Journal of Psychological Medicine	The perceived stress scale (PSS)	3 Internal consistency of PSS English ($\alpha=0.79$) and Bengali ($\alpha=0.80$) was satisfactory. Intra-rater reliability was adequate ($\kappa>0.5$) for most of the items, but showed an inadequate value (κ). This new version needs to be validated in a larger study population. Perceived stress score using PSS-10 was considerably high in our study population, although there was no significant difference between the subgroups (male/female, intern/student).
meta-analysis of depression, anxiety.	nature portfolio	4 Literature review of 32 articles	4 Among 16 studies reporting the prevalence of clinically significant symptoms of depression across 23,469 Ph.D. students, the pooled estimate of the proportion of students with depression was 0.24 (95% confidence interval [CI], 0.18–0.31; $I^2 = 98.75\%$). In a meta-analysis of the nine studies reporting the prevalence of clinically significant symptoms of anxiety across 15,626 students, the estimated proportion of students with anxiety was 0.17 (95% CI, 0.12–0.23; $I^2 = 98.05\%$). We conclude that depression and anxiety are highly prevalent among Ph.D. students. Data limitations precluded our ability to obtain a pooled estimate of suicidal ideation prevalence. Programs that systematically monitor and promote the mental health of Ph.D. students are 7 urgently needed.
College Students'	atlantis press	Barriers to Seeking Mental Health	7 The results indicated college students moderately experienced

<p>Barriers to Seeking Professional Help</p>		<p>Counselling Scale (BMHC),.</p>	<p>7 barriers to seeking mental health counselling in all six dimensions of BMHC. Another finding showed college students from nonhealth major of studies, never had counselling experience previously, and mental health counselling service was not available on campus have higher barriers in each dimension. By knowing the description of the barriers experienced by college students, it is expected for related stakeholders to provide proper mental health services by professionals that could be accessed by college students, which also need to consider several characteristics background of students who experienced certain barriers to seeking mental health counselling.</p>
<p>COLLEGE STUDENTS' MENTAL HEALTH HELP-SEEKING BEHAVIOR</p>	<p>ISSN</p>	<p>2 cross-sectional survey design, with self-administered questionnaires, during the 2019-2020 academic year.</p> <p>cluster-based convenience sampling strategy.</p>	<p>2 Findings confirm that help-seeking is a multifaceted process involving social and professional support. Participants indicated that they would seek assistance earlier than they had and also make personal changes in their lives to address well-being.</p>
<p>5 Placebos with a Psychological Treatment Rationale</p>	<p>scientific reports</p>	<p>5 randomized controlled experiments</p> <p>e green dot experiment</p>	<p>5 Post assessment changes in momentary mood, assessed with the Mehrdimensionale Befindlichkeitsfragebogens (MDBF25), which is explicitly designed to assess momentary changes with three subscales, i.e. 'good/bad', 'alert/fred', 'calm/agitated' mood. To control for possible sequence effects, parallel versions of the MDBF</p>

			<p>were randomly allocated in different sequence (A-B vs. B-A). The parallel version of the MDBF contains 12 adjectives of momentary mood (e.g. “good mood”, “relaxed”) with a 1 to 5 scoring</p> <p>The PSS assesses the degree of perceived stressful situations experienced during the preceding days and 14 items are designed to assess how predictable, uncontrollable, and overloaded participants evaluate their lives as being. To be able to assess medium-term effects, we changed the wording of the items to assess how participants perceived their stress in the two preceding days.</p>
<p>11 Broad concepts of mental disorder predict self-diagnosis</p>	ELSEVIER	<p>Social Distance Scale. (SDS) Mental Health Literacy Assessment for College Students</p>	<p>Reliabilities for all measures were strong. The concept breadth scales were substantially independent of distress, impairment, mental health literacy, and stigma (all r</p>
<p>self-diagnosis on social media</p>	APA 7th Ed	<p>Semi-structured interviews: Themes: mental health, digital mental health activism, experiences with digital mental health activism, experiences with self-diagnosing content, digital mental health activism and identity. Mental Health Continuum-Short Form (MHC-SF)</p>	<p>Self-diagnosing content on social media has been found to impact the mental health of young adults in various ways, both positively and negatively.</p> <p>the role of social media should not be neglected in the future and be a constant point of deliberation for psychological research.</p>
<p>Self-diagnose is associated with knowledge and attitude</p>	The Egyptian Journal of Neurology, Psychiatry	<p>cross-sectional study: Mental Health Knowledge Schedule questionnaire. Utilized</p>	<p>Results demonstrated that half of the students had good mental illness knowledge (50.7%), and slightly more than half had</p>

<p>10 towards mental illness of university students in Indonesia</p>	<p>and Neurosurgery</p>	<p>18 Community Attitude to Mental Illness Inventory questionnaire</p>	<p>10 favourable attitudes (53.0%). Self-diagnosis was significantly associated with poorer knowledge and negative attitudes (adjusted odds ratio [AOR]: 2.31, 95% confidence interval [CI]. A very weak negative correlation ($\rho = -0.173$; P</p>
<p>impact of self-diagnosis</p>	<p>International Journal for Multidisciplinary Research</p>	<p>structured questionnaire: quantitative data gathering</p>	<p>internet encourages students to seek answers and identify possible mental health concerns they may be facing. Self-diagnosis, on the other hand, lacks the knowledge and objectivity of licensed mental health specialists, which can result in inaccuracies and possibly worsen symptoms through incorrect diagnosis or treatment of conditions</p>
<p>factors influencing motivation</p>	<p>Propósitos y Representaciones</p>		<p>In the course of the investigation, it has been found that the influence of psychological factors is quite effective in the case of motivating students to study. Consequently, National Academies of Sciences, Engineering, and Medicine (the United States of America) conducted a study which has revealed that motives and thinking are two important psychological factors influencing on students' success in the context of studying at the tertiary educational institution. The basic essence of the motive centres around the importance of obtaining higher education, as this is a way to professional development in the future. At the same time, students increase their personal qualities and improve intelligence through thinking (Destin, 2018).</p>

<p>12 Study on the Impact of Self-Diagnosis of Mental Health Among College Going Students</p>	<p>International Journal for Multidisciplinary Research (IJFMR)</p>	<p>A structured questionnaire</p> <p>THEMES: (self-diagnosis behaviours, mental health symptoms, attitudes towards professional help, and academic performance.)</p>	<p>1 Self-diagnosis may result in self-care with over-the-counter medications or alternative remedies without professional supervision, increasing the risk of side effects or exacerbating symptoms. In conclusion, self-diagnosing mental health conditions among college students presents significant risks to their wellbeing even though it increases awareness and independence. In order to successfully deal with these issues, a holistic approach that includes guidance, professional support, and the development of skills in critical thinking is needed. This will allow students to take responsibility for their mental health.</p>
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This study notices a growing tendency among students to independently diagnose their own mental health problems, leveraging their understanding of psychological diseases. This phenomenon not only indicates an increasing recognition of mental health issues, but also gives rise to substantial apprehensions over the precision of these self-diagnoses and the possible ramifications, such as worry, misinterpretation of symptoms, and hesitancy to seek specialist assistance.

Although this topic is significant, the existing literature does not provide a deliberate analysis of the enduring consequences of self-diagnosis on the mental well-being, academic achievement, and professional growth of psychology students. The majority of current research concentrate on broad demographics, disregarding the distinct position that psychology students occupy between the general public and qualified experts. The purpose of this study is to address the existing knowledge gap by examining the effects of self-diagnosis on psychology students, understanding the reasons behind their susceptibility to it, and identifying preventive measures that may be used to encourage responsible mental health awareness in academic environments.

RESEARCH QUESTION

The research topic complies of distorted mental well-being among students who self-diagnose based upon their wrong diagnosis of disorders or forming certain assumptions that they read and study. In order to pursue this research, following research questions have been made:

1. How often do psychology students diagnose themselves based on the symptoms they learn about?
2. What variables contribute to the propensity of psychology students to self-diagnose?
3. What are the psychological and educational implications of self-diagnosis among psychology students?

HYPOTHESIS

Following hypotheses are framed in relation to the research topic as the academic learning of symptoms among psychology students contributes to the growing phenomenon of self-doubt:

H1: Psychology students are more likely to self-diagnose mental health conditions after studying related symptoms.

H2: The level of self-awareness in psychology students is positively correlated with the frequency of self-diagnosis.

H3: Self-diagnosis among psychology students has a significant impact on their mental well-being and academic performance.

METHODOLOGY

PARTICIPANTS:

A group of 100 psychology students, including both undergraduate and postgraduate participants, was selected for this study. They completed a questionnaire using well-established mental health screening tools: the Self-Stigma Questionnaire (SSQ), the Depression, Anxiety, and Stress Scale (DASS), and the Internalized Stigma of Mental Illness (ISMI) scale.

RESEARCH DESIGN:

This study followed a quantitative, cross-sectional design, using validated tools to explore self-diagnosis patterns among psychology students, with a focus on self-stigma. The SSQ, ISMI, and DASS scales measured perceived stigma, internalized stigma, and levels of stress and anxiety. These assessments aimed to understand how students process and relate mental health symptoms to their own experiences based on their academic learning, potentially

contributing to self-diagnosis.

SAMPLE AND SAMPLE SIZE:

A diverse group of 100 psychology students was selected to ensure a balanced representation of academic levels, gender, and age. This sample size was chosen for its ability to provide meaningful insights while keeping data collection manageable. Participants were invited to complete the survey voluntarily through Google Forms, with anonymity maintained to prevent response bias. This approach ensured enough variation to explore how academic exposure to mental health concepts influences self-stigma and self-diagnosis patterns.

DATA COLLECTION TOOLS:

The data collection instruments employed in this research include three validated questionnaires: the Social Stigma Questionnaire (SSQ), the Internalized Stigma of Mental Illness (ISMI) scale, and the Depression, Anxiety, and Stress Scales (DASS). Each of these questionnaires has a distinct goal in examining different elements of self-stigma, mental health, and emotional well-being among psychology students.

Social Stigma Questionnaire (SSQ): This test examines the sense of external stigma connected to mental health, examining how individuals believe others regard mental illness and how society beliefs effect their self-image.

Internalized Stigma of Mental Illness (ISMI): ISMI is aimed to measure how much individuals internalize negative stereotypes and stigmatizing attitudes regarding mental illness. This is key in understanding how psychology students assimilate the things they learn and apply them to their own lives.

Depression, Anxiety, and Stress Scales (DASS): DASS is a commonly used test that measures levels of depression, anxiety, and stress. In the context of this study, it is utilized to examine the emotional states of participants and their potential contribution to self-diagnosis behaviour. The data collection method was handled through Google Forms to guarantee ease of access and participant convenience. All questionnaires were incorporated into a single web form and disseminated electronically to the 100 psychology students. Participants were asked to complete the survey anonymously to reduce response bias and ensure honest self-reporting. Form comprised an introduction stating the research aims, followed by a consent form. Once consent was granted, participants proceeded to complete the SSQ, ISMI, and DASS questionnaires. Each section was clearly labelled, and instructions were supplied to guide

participants through the procedure. The responses were immediately saved in a protected Google Sheets database for later analysis, ensuring a seamless and fast data collection procedure. The use of online forms also allowed for quick dissemination and boosted participation rates.

STATISTICAL TOOLS:

²⁹ Descriptive statistics were used to provide a clear summary of the data's key characteristics. This included calculating the mean, standard deviation, and range for variables such as perceived social stigma (SSQ_T), and mental health measures like ³ depression, anxiety, and stress (DASS-21 subscales and total scores). These analyses offered insights into the overall trends and variability in the data, giving a snapshot of the mental health status and stigma perceptions among psychology students.

The Pearson correlation method was applied to explore the relationships between different continuous variables. This helped identify how closely perceived social stigma was ¹³ linked to mental health outcomes, including depression, anxiety, and stress. By uncovering these associations, the study shed ³¹ light on the potential impact of stigma on students' mental health and supported the hypothesis regarding self-diagnosis tendencies.

ANOVA was used to compare average scores across different groups of participants. For instance, it examined whether levels of depression, anxiety, or stress differed based on demographic or academic factors. This analysis provided a deeper understanding of how various subgroups experienced mental health challenges, adding context to the overall findings.

DISCUSSION:

Self-diagnosis among psychology students is becoming increasingly common, often influenced by their academic exposure to mental health symptoms. While learning about mental health conditions helps build professional expertise, it can also lead students to view their own experiences through a clinical lens. This may result in identifying with symptoms they study, even without a formal diagnosis. This study explores how academic exposure influences self-diagnosis, focusing on the emotional, cognitive, and social factors involved. While understanding mental health concepts often helps students better grasp disorders, it can sometimes blur the line between objective learning and personal reflection. This can lead to misinterpreting normal emotional shifts as signs of a mental health condition, raising concerns about the impact of such exposure on self-perception and the risks of self-

diagnosing without professional guidance.

To explore this further, data was collected through a Google Forms survey for its convenience and accessibility. The questionnaire included validated tools such as the Social Stigma Questionnaire (SSQ), the Internalized Stigma of Mental Illness (ISMI), and the Depression, Anxiety, and Stress Scales (DASS), along with custom questions designed to assess academic exposure and self-diagnosis patterns. Participants remained anonymous, and all responses were voluntary to ensure ethical standards were met.

A diverse sample of 100 psychology students, both undergraduate and postgraduate, was selected to explore how academic learning influences self-diagnostic behaviors. While a larger sample could offer even deeper insights, the chosen size provides a meaningful understanding of the issue and offers insights that can be applied in similar educational settings.

H1: Psychology students are more likely to self-diagnose mental health conditions after studying related symptoms.

The study highlights that students' exposure to mental health concepts and diagnostic criteria in their coursework increases their likelihood of self-diagnosis. The results show moderate levels of perceived stigma (Mean = 61.30, SD = 12.334) and noticeable signs of depression (Mean = 15.58, SD = 11.229), anxiety (Mean = 15.67, SD = 10.025), and stress (Mean = 16.24, SD = 9.770).

This suggests that the in-depth understanding students gain in their studies can make them hyper-aware of mental health conditions, causing them to see clinical patterns in their own emotions and behaviors. The challenge is compounded by the stigma around seeking professional help. Many students hesitate to approach therapists or counselors, relying instead on self-assessment, which can lead to incorrect conclusions and reinforce negative attitudes about mental health care.

H2: The level of self-awareness in psychology students is positively correlated with the frequency of self-diagnosis.

The results also show a strong link ($r = 0.450$, $p < 0.001$) between heightened self-awareness and self-diagnosis. While being self-aware is crucial for personal growth and professional competence, it can sometimes cause students to overanalyze their own thoughts, feelings, and behaviors.

The findings reveal that while self-awareness is a valuable skill, too much of it can lead to heightened anxiety, self-doubt, and even depressive symptoms. Tools like the ISMI (Internalized Stigma of Mental Illness) and DASS (Depression, Anxiety, and Stress Scales) highlight how students' introspection often blurs the line between understanding symptoms and mistakenly identifying with them.

H3: Self-diagnosis among psychology students significantly impacts their mental well-being and academic performance.

The study also confirms that self-diagnosis can negatively affect students' mental health. Regression analysis (Beta = 0.450, B = 0.700) shows that internalized stigma and self-diagnosis contribute to increased feelings of distress, which may further exacerbate symptoms of depression, anxiety, and stress.

Moreover, the ripple effects of this distress are seen in students' academic performance. Worry and self-doubt can create cycles of overthinking, making it difficult for students to concentrate on their studies. However, self-diagnosis is just one of many challenges. Academic pressure and societal stigma also play a role in affecting their mental health.

This study highlights the unintended consequences that studying psychology may have on students' mental health, particularly their tendency to self-diagnose. While the knowledge gained about mental health can enhance self-awareness, it can also lead to over-identification with symptoms, often resulting in misdiagnosis and emotional distress. The findings underscore the need for a balanced approach in psychology education, one that not only imparts academic knowledge but also provides students with the skills to distinguish between personal experiences and professional understanding.

To address this challenge, it is essential for educational institutions to provide support through initiatives that focus on mental health awareness, stigma reduction, and easy access to counseling services. By fostering an environment that encourages open discussions about mental health and offering resources tailored to the needs of psychology students, universities can help students maintain a healthy balance between their academic studies and personal well-being. This balanced approach will not only promote better mental health but also support the development of students as well-rounded professionals in the field of psychology.

RESULTS AND FINDINGS:

Self-diagnosis among psychology students has become a growing concern, often influenced by their exposure to mental health concepts during their studies. While learning about diagnostic criteria helps build professional understanding, it can sometimes lead students to view their own experiences through a clinical lens, causing them to associate personal thoughts or behaviors with mental health conditions without formal evaluation.

This study aims to explore how academic learning influences self-diagnosis and the development of self-stigma among psychology students. The following hypotheses were examined:

- **H1:** Psychology students are more likely to self-diagnose mental health conditions after studying related symptoms.
- **H2:** Increased self-awareness is linked to a higher tendency for self-diagnosis.
- **H3:** Self-diagnosis can affect students' mental health and academic performance

To better understand these patterns, descriptive statistics (mean, standard deviation, and median) were used to assess the relationship between self-diagnosis and academic exposure. Pearson's correlation measured the link between self-awareness and self-diagnosis frequency, while ANOVA tested whether self-diagnosis had a measurable impact on students' mental health and academic success.

H1: Psychology students are more likely to self-diagnose mental health conditions after studying related symptoms.

The results revealed that psychology students experience moderate levels of perceived social stigma, as indicated by the SSQ scores (Mean = 61.30, SD = 12.33). This suggests that students may feel hesitant to seek professional help due to fear of judgment, potentially leading them to rely on self-diagnosis instead.

Analysis of the DASS-21 results showed mild to moderate levels of depression (Mean = 15.58, SD = 11.23), anxiety (Mean = 15.67, SD = 10.03), and stress (Mean = 16.24, SD = 9.77). These findings suggest that academic exposure to mental health symptoms may heighten students' self-awareness, causing them to focus more on their emotional experiences. This increased focus could lead to over-identifying with the conditions they study.

The total DASS score (Mean = 47.48, SD = 28.25) reflected varying levels of mental health concerns among the students, with some reporting severe symptoms while others experienced

milder stress, anxiety, and depression. This variability highlights how increased awareness of psychological symptoms can influence personal identification with them.

The findings suggest that the combination of moderate stigma and heightened symptom awareness contributes to the tendency for self-diagnosis. The reluctance to seek professional help, coupled with the influence of academic exposure, supports the hypothesis that psychology students are more likely to self-diagnose after learning about mental health conditions.

	N	Minimum	Maximum	Mean	Std. Deviation
SSQ_T	66	27	86	61.30	12.334
D_Total	66	0	42	15.58	11.229
A_Total	66	0	40	15.67	10.025
S_Total	66	0	40	16.24	9.770
DASS_Total	66	0	108	47.48	28.252
ISMI_T	67	37	5027	150.06	605.110
Valid N (listwise)	66				

H2: The level of self-awareness in psychology students is positively correlated with the frequency of self-diagnosis.

To verify this hypothesis, the researcher used internalised stigma of mental illness (ISMI) and focused on Pearson's correlation between the level of self-awareness and frequency of self-diagnosis.

The positive Pearson correlation coefficient “ $r = 0.450$ ” indicates a moderate positive relationship between internalized stigma “ISMI_T” and overall mental distress (DASS_Total). The p-value (0.000) is well below the standard threshold (0.01), meaning the relationship is statistically significant and unlikely to have occurred by chance.

The Internalized Stigma of Mental Illness (ISMI_T) scale measures the degree to which individuals internalize negative societal attitudes about mental illness. Higher ISMI_T scores indicate greater self-stigma, often associated with increased self-awareness and self-diagnosis. This self-awareness can lead to heightened anxiety and depressive symptoms, as individuals may overanalyze their thoughts and behaviors, leading to a negative self-perception.

³ The Depression, Anxiety, and Stress Scale (DASS) assesses the severity of these symptoms, with higher DASS scores indicating more severe mental health difficulties. Thus, individuals with higher ISMI_T scores may be more likely to experience elevated DASS scores, suggesting ¹³ a potential causal link between internalized stigma and worsened mental health outcomes.

Papers' findings suggest that students who feel more ashamed or embarrassed about mental health conditions are ²⁰ more likely to experience higher levels of depression, anxiety, and stress. This may be because these students are more aware of ¹³ the symptoms of mental illness and may mistakenly identify with them, leading to increased worry and self-doubt. The findings confirm the hypothesis that a correlation exists between self-awareness (indirectly assessed using ISMI_T) and the impact of self-diagnosis on mental well-being. (refer to the table given below)

Correlations

		ISMI_T	DASS_Total
ISMI_T	Pearson Correlation	1	.450**
	Sig. (2-tailed)		.000
	N	67	66
DASS_Total	Pearson Correlation	.450**	1
	Sig. (2-tailed)	.000	
	N	66	66

** . Correlation is significant at the 0.01 level (2-tailed).

⁴ **H3: Self-diagnosis among psychology students has a significant impact on their mental well-being and academic performance.**

To verify the hypothesis, the researcher focuses on the correlation between the predictor (ISMI) and the dependent variable. Which resulted in a positive value indicating that increased scores on the predictor (internalized stigma) correlate with elevated values of the dependent variable (suggesting poorer mental well-being).

The modest association (R = 0.450) shows that internalized stigma (as a proxy for self-diagnosis) has a moderate link with the dependent variable (e.g., mental well-being). These results kind of support the premise that self-diagnosis has a major impact on mental well-being. (refer to the table given below)

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.450 ^a	.203	.190	25.419

a. Predictors: (Constant), ISMI_T

The F-static “16.296” and its associated P value (0.000) show that the regression model is statistically significant. Findings suggest that students who feel ashamed or embarrassed about mental health conditions are more likely to experience poorer mental health.

This is because they may be more aware of the symptoms of mental illness and may mistakenly identify with them, leading to increased worry and self-doubt. While self-diagnosis, which often stems from feeling ashamed or embarrassed about mental health, is a significant factor in worsening mental health, it's not the only one. Other factors, such as stress from studies, how well people cope with stress, and societal stigma, can also contribute to poorer mental health. (refer to the table given below)

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	10529.342	1	10529.342	16.296	.000 ^b
	Residual	41353.143	64	646.143		
	Total	51882.485	65			

a. Dependent Variable: DASS_Total

b. Predictors: (Constant), ISMI_T

The significant positive B value “0.700” indicates that the more someone feels ashamed or embarrassed about their mental health, the more likely they are to experience symptoms of sadness, worry, and tension. This supports the premise that self-diagnosing a mental health illness can negatively impair mental well-being.

The standardized Beta coefficient (0.450) and significant t-statistic (4.037) reinforce that the predictor “ISMI_T” is moderately and significantly related to mental well-being. Data imply that self-diagnosis, as evidenced by increased levels of internalized stigma (Beta = 0.450), can

severely influence mental health among psychology students. However, while this association is crucial, it's not the only component at play. Other elements, such stress from studies or personal life, can also contribute to mental health concerns. Therefore, it can be confirmed that this H3 stands true and self-diagnosis of psychology students impacts the mental well-being of students also.

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	-5.819	13.570		-.429	.670
	ISMI_T	.700	.173	.450	4.037	.000

a. Dependent Variable: DASS_Total

After analysing the statistical data, it can be confirmed that H1, H2 and H3 stand true on their grounds. With the help of descriptive statistics (mean, median and standard deviation) self-diagnosis after studying the symptoms happens across various domains wherein, it leads to mental distress and impacts the mental well-being of students. DASS confirms how students are facing depression and anxiety issues related to false or misleading self-diagnostic criterias which eventually creates a false narrative about mental health.

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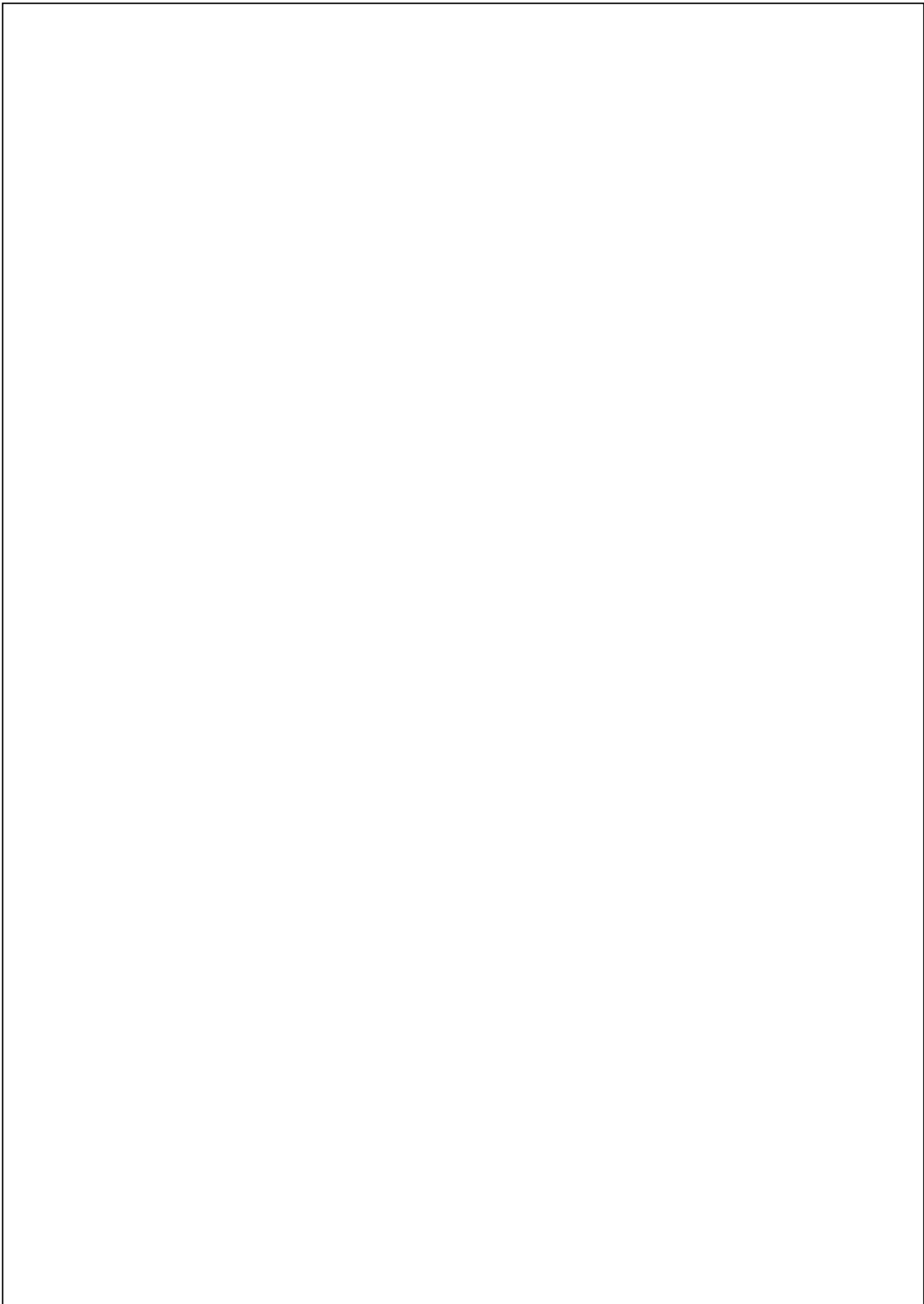
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