Research Paper

The Relationship between Perceived Stress and Self-Diagnosis among Psychology Students

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ABSTRACT

This current study aims to understand the relationship and impact of perceived stress and self-diagnosis, particularly among psychology students. The study utilized a quantitative approach with a correlational research design. Data was collected using a non-stratified purposive sampling technique via Google Forms. The research employed various tools to analyse the collected data, which includes Perceived Stress Questionnaire and Self-identification of mental illness Scale (SELFI). The participants comprise of 80 students, studying Psychology Bachelors in Kristu Jayanti College Autonomous, Kothanur, Bangalore District. According to the findings, there is a significant positive correlation between self-diagnosis and perceived stress. The study also employed linear regression analysis to determine that perceived stress was a significant predictor of self-diagnosis.

Keywords: Perceived Stress, Self-Diagnosis, Psychology Students

Psychology is a popular field of study among students for several reasons. One of the most frequently cited reasons is the discipline's ability to enhance one's understanding of others. This advantage stems from psychology's focus on human behavior and the ways in which it is shaped by environmental and cognitive factors. Nevertheless, as students delve deeper into the subject matter and gain knowledge of various psychological conditions, they may begin to question whether they themselves exhibit any symptoms or traits related to these conditions. This can be a natural outcome of attempting to self-diagnose or self-validate one's belief about a specific behavioral pattern that may not have an apparent explanation.

Perceived stress, defined as an individual's subjective appraisal of the stressfulness of their life experiences (Wang S. et. al., 2019), has been found to have a significant impact on overall well-being and mental health, which are common among college students (Wu et al., 2020). Accurate evaluation of stress levels is crucial for research and practise since college life may be stressful (Denovan et al., 2019). This is particularly relevant for students pursuing higher education, as they are often faced with a multitude of stressors, such as academic pressure, financial strain, and social demands. Psychology students, in particular,

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may experience additional stressors related to their field of study, such as the demands of coursework, clinical training, and research obligations (Myers, et. al., 2012).

The measurement of perceived stress is not solely based on the frequency of stressful events experienced by an individual. Rather, it encompasses their overall perception of the stressfulness in their life and their ability to cope with such stress. Stress is the body's innate reaction to distress and can be brought on by a variety of things, such as issues at work, in relationships, with money, or with one's health (APA, 2015). Stress is a subjective experience, and individuals may perceive and respond to stress differently. Additionally, stress can be difficult to measure, as it may manifest in different ways, such as physiological responses, behavioral changes, or psychological symptoms. Furthermore, stress is often studied in laboratory settings, which may not fully capture the complexities of real-life stress experiences (Epel, et. al., 2018).

Perceived stress on the other hand considers an individual's subjective perception of stress, rather than just focusing on external stressors. It is also thought to be a better predictor of health outcomes than objective measures of stress, as an individual's perception of stress may be more closely related to their overall well-being. Additionally, perceived stress can be measured through self-report measures, making it easier to study in large populations.

An average college student has a lot of stress in relation to their academics (Conley et al., 2013). The fact that the subject matter of their studies is making all the students stressed, in addition to their personal lives is a very concern (Barbayannis et al., 2022). This phenomenon can be more readily seen amongst the students of social and behavioural sciences, like Psychology (Myers,2012). Hence, this article would explore the idea of perceived stress in psychology students in general and especially study the complexities of self-diagnosis in psychology students.

Psychology students, at regular intervals, can easily be found being the victim of stress and the self-attributed diagnosis during their educational journey (Kumaraswamy, N. 2013). Such circumstances lead us to a series of challenges for the professional to truly help the student, and also brings the student in harm's way. Because of their stress, they could possibly wind up acquiring maladaptive behaviours and disorders (Jessica Burger, 2020). These students frequently experience moderate to severe bouts of perceived stress as a result of self-diagnosis (Ahmed & Stephen S, 2017). Self-diagnosis is the practise of determining a health condition or sickness from one's own evaluation of symptoms, without seeking the advice of a healthcare provider or acquiring a formal clinical diagnosis (Ahmed & Stephen S, 2017).

The reluctance of patients to seek diagnosis and treatment from medical professionals is not a recent phenomenon. In fact, Hippocrates acknowledged the importance of medical diagnosis, as well as the resistance of patients to medical treatment. Hippocrates stated, "Although they have no desire to die, they lack the courage to be patient." He further acknowledged the knowledge gap between laypersons and doctors, stating that "the symptoms that patients with internal diseases describe to their physicians are based on educated guesses about a possible cause rather than knowledge about it." (Hippocrates, 1983). Currently, laypersons are more knowledgeable about the causes of their illnesses. According to Nettleton, the locus of clinical decision-making has shifted, with the ordinary person seeking the advice of a healthcare professional now seen as an expert partner who

offers their medical conditions experience to the differentially specialized medical practitioner (Nettleton, 2004).

Research has been conducted on self-diagnosis and perceived stress separately in the context of psychopathology. However, the relationship between the two has received little attention in the psychology context. Ahmed and Stephen (2017) used qualitative techniques to investigate how and why psychology students self-diagnose. They found that past encounters and clinical knowledge influence self-diagnosis, and academic maturity serves as a barrier against negative effects. Roberts (2018) found that individuals with mental illnesses who self-diagnose are more likely to experience public or perceived stigma, which makes them less likely to seek care. Burger (2020) studied the consequences of psychopathological self-diagnosis on psychology students' well-being. The study found that students who lacked a strong sense of identity displayed symptoms of the condition being researched. Waterman and Weinman (2014) investigated the assumption that medical students may diagnose themselves using what they learn in lectures. They found that this phenomenon did exist, and it could have negative outcomes such as superficial assessments and the collapse of the doctor-patient rapport if not addressed. Raghubir (2005) suggested that self-diagnosis may be required in some areas, such as depression. Self-diagnosis inventories can promote introspection and encourage individuals to seek professional help. However, it is crucial to know when to seek professional assistance as self-diagnosis may trivialize actual disorders (Hochberg, 2022).

In conclusion, while there has been limited research on how self-diagnosis and perceived stress are related in psychology students, the existing studies suggest that self-diagnosis may be influenced by factors such as past encounters, clinical knowledge, and academic maturity, and can lead to public stigma and negative consequences on mental health. Self-diagnosis may be useful as a starting point for seeking professional help, but caution should be exercised to avoid trivializing actual disorders.

Need and Significance of the Study:
There is a natural tendency of students of medical studies to have a predisposition towards labelling themselves with the illnesses they learn about in class, especially those who are in their third year. Psychology students may also encounter this phenomenon known as "medical students' disorder" or "interns' syndrome." (Waterman & Weinman, 2014). As to the previous study, since Psychology is a relatively newly popularized discipline in India, the general influx of all the new knowledge may make them more prone to self-diagnosis (Ahmed & Stephen S, 2017).

Indian culture serves as the backdrop for the cultural background for this article. When it comes to this idea of stress and self-diagnosis, there have been very few to little or no empirical and qualitative investigations conducted among the Indian population.

The goal of this research is to objectively explore the numerous themes that underpin the students' perceptions of stress and their self-diagnosis procedures. An epistemic gap exists in determining what, how, and why a student, especially a psychology student, self-diagnose despite the fact that several research studies have been completed on measuring medical students' sickness. As a result, this study would significantly add to such existing literature.

METHODOLOGY

Objectives
- To study if there is a significant relationship between perceived stress and self-diagnosis among college students.
- To study the impact of perceived stress on self-diagnosis.

Hypotheses
H_{01}: There is no significant relationship between perceived stress and self-diagnosis among college students.
H_{02}: There is no significant impact of perceived stress on self-diagnosis.

Design of the Study and participants
This study utilizes a correlational research design with a quantitative approach. The sample consists of 80 students, including both male and female, who are currently pursuing their Bachelor's degree in psychology at Kristu Jayanti College (KJC) Autonomous, located in Kothanur, Bangalore District. Non-stratified purposive sampling was employed to select participants from a population of approximately 200 psychology students. Students with clinical diagnoses were excluded from the study, and informed consent was obtained from all participants after a detailed explanation of the research objectives and methods. After the exclusion criteria was exercised, 80 students agreed to participate and publish the results.

Inclusion Criteria
- Students who are not clinically diagnosed.
- Psychology students from KJC.
- Indian nationality.
- Currently enrolled in a bachelor's program as a psychology major.

Exclusion Criteria
- Students who are clinically Diagnosed
- Non- psychology students
- Students not studying in KJC
- Nationality other than Indian

Data collection Procedure
The survey was conducted using Online (Google Forms) self-report measure consisting of PPQ and SELFI after taking the inform consent from the participants. The participants were provided with detailed information about the study's objectives and procedures via an informed consent form. After receiving an explanation of the content and method of the study, the 80 participants consented to take part and publish the findings of the study. The data was scrutinized, coded, and exported to (SPSS) and the analysis was carried out using descriptive Statistics. In order to test the null hypothesis Pearson product moment corelation and simple linear regression was used in the present study.

Variables
- Independent Variable – Perceived Stress
- Dependent Variable – Self-Diagnosis

Tools and Techniques

Sl. No.	Variables	Tools	Author
1	Perceived Stress	Perceived Stress Questionnaire	S Levenstein, C Prantera et. al. (1993)
2	Self-Diagnosis	Self-identification of mental illness Scale (SELFI)	G Schomerus, H Muehlan, al. et. (2019)

Perceived Stress Questionnaire: The Perceived Stress Questionnaire (PSQ), developed by S Levenstein and colleagues (1993) is psychological tool for evaluating stressful circumstances and events of life that frequently trigger or worsen illness symptoms. According to the developers, PSQ, the results of the psychometric evaluation demonstrated satisfactory internal consistency, with values ranging from 0.90 to 0.92, and a test-retest reliability coefficient of 0.82. PSQ scores also has shown high correlation with Cohen's Perceived Stress Scale scores

Self-identification of mental illness Scale (SELFI): The SELF-I scale, which measures one's self-identification as having a mental illness, is a brief, valid, and reliable tool for study. During a period of three months, the SELF-I demonstrated strong internal consistency (Cronbach's alpha, 0.85-0.87) and re-test reliability (Intraclass correlation coefficient, 0.74). The participants were asked to respond truthfully and to the best of their ability to the measures administered online. The measures were selected based on their established reliability, validity, and social desirability, as well as their relevance to the research objectives.

RESULTS

The purpose of the study was to analyse the relationship between Perceived and Self Diagnosis in college students (Studying psychology major in KJC). The data was collected through Google Forms using The Perceived Stress Questionnaire (S Levenstein et. al., 1993), and Self-identification of mental illness Scale (G Schomerus et. al., 2019). Total sample size was 80 college students within the age group of 18-25 years, Studying in KJC, residing in India. The data was entered into Microsoft Excel and then exported into SPSS 20 for statistical analysis.

Table 1: Descriptive Statistics

Note: N=80	Perceived Stress	Self-Diagnosis
Mean	76.24	15.34
Median	74.50	15
Standard Deviation	14.16	4.568
Variance	200.66	21.695

Descriptive statistics for the two variables were computed based on a sample size of $N = 80$ participants. The variables included Perceived Stress ($M = 76.24$, $SD = 14.166$) and Self-Diagnosis ($M = 15.34$, $SD = 4.568$). The variance for Perceived Stress was 200.664, while the variance for Self-Diagnosis was 21.695. The sample size for both variables was 80. These descriptive statistics suggest that there is variability in both perceived stress and self-Diagnosis scores in this sample.

Table 2: Pearson Product Moment Correlation between Perceived Stress and Self-Diagnosis

N=80	Perceived Stress	Self-Diagnosis
Perceived Stress	-	.436**
Self-Diagnosis		-

*Note: p<0.01***

A Pearson correlation coefficient was computed to assess the relationship between Perceived Stress and Self-Diagnosis. The results indicated a significant positive correlation between the two variables ($r = .436$, p < .01, two-tailed), suggesting that moderate levels of Perceived Stress are associated with moderate levels of Self-Diagnosis. The sample size for this analysis was $N = 80$. Based on the findings presented in Table 2 it was concluded that Perceived Stress and Self-Diagnosis was significantly correlated in this sample. Therefore, the rejecting the null hypothesis H_{01}: There is no significant relationship between perceived stress and self-diagnosis.

Table 3: Linear Regression to Analyse the impact of Perceived stress on Self-Diagnosis

Predictor Variable	β	SE	t-value	R^2	F-Value
Perceived Stress	.436*	.034	4.27	.190	18.30

Note: N= 80, Dependant Variable - Self-Diagnosis, *$p < 0.05$

A linear regression analysis was conducted to examine the relationship between Perceived Stress and the dependent variable, Self-Diagnosis. Results showed that Perceived Stress was a significant predictor of Self-Diagnosis, ($\beta = .436$, $SE = .034$, $t (78) = 4.279$, $p < .05$), explaining 19% of the variance in Self-Diagnosis. The R^2 value was .190, indicating that 19% of the variance in Self-Diagnosis was accounted for by the model after controlling for the number of predictors. The F-value was 18.307, indicating that the model was statistically significant, ($F (1, 78) = 18.30$, $p < .05$). These findings suggest that Perceived Stress is positively has a significant with Self-Diagnosis in this sample. Therefore, rejecting the null hypothesis. H_{02}: There is a no significant impact of perceived stress on self-diagnosis.

DISCUSSION

The present study investigates the relationship and the impact of Perceived Stress and Self-Diagnosis among students in their psychology Bachelors. The results of the correlation and linear regression indicated a significant positive correlation between Perceived Stress and Self-Diagnosis. Based on the analysis conducted, it can be concluded that the null hypotheses 1 and 2 are rejected. This leads to the inference that a significant relationship exists between perceived stress and self-diagnosis, and that there is a significant impact of perceived stress on self-diagnosis. The finding indicates that individuals who perceive their lives as more stressful may be more likely to self-diagnose medical conditions. The linear regression analysis showed that Perceived Stress was a significant predictor of Self-Diagnosis, explaining 19% of the variance in Self-Diagnosis. Therefore, indicating that with every unit level change in perceived stress there is seen an increase of .436 level units of self-diagnosis. Even though there have been very few studies conducted particularly among psychology student population in relation to both perceived stress and self-diagnosis together.

Ahmed and Stephen (2017), examined the source of self-diagnosis, the impact on their life, and their academic maturity level for psychology students. The researchers discovered that some of the factors that were crucial in influencing their decision to diagnose themselves were past encounters and clinical knowledge. Academic maturity acted as a barrier against the effects of negatively self- diagnosing oneself. These findings are at par with the current study for the levels of stress amongst the sample population were found to be on the moderately higher end and further being students of psychology, it needs to be noted that the students at the time of data collection were still in their bachelors. Therefore, implicating a premature academic understanding of the subject and the clinical picture of the disorders. Waterman L and Weinman J (2014), noted that medical students may diagnose themselves using what they learn in lectures, these findings can be generalized to psychology graduates thus making them more susceptible to self- diagnoses. Self-diagnosing can trivialize actual disorders (Hochberg, 2022).

SUMMARY AND CONCLUSION

Clinical and abnormal psychologists have extensively researched stress and self-diagnosis within the context of psychopathology. However, there has been limited research conducted to explore the relationship between stress and self-diagnosis in a broader psychological context. Instead, this topic has been informally included within the broader context of medical students' conditions, which primarily focus on physical health conditions such as heart diseases, blood pressure, and mental health conditions like depression.

It is important to note that perceived stress is a significant factor in all of these conditions, whether as a precipitating, predisposing, or perpetuating factor. Therefore, it is crucial to investigate the connection between stress and self-diagnosis within a psychological context to better understand the role of perceived stress in these conditions.

While medical conditions are primarily seen as physical in nature, mental health conditions are equally crucial, and often manifest as stress. Thus, making this study of all the more clinically significant, for its implications not only lay within the purview of intervention at a treatment phase but also by working on this factor at an organizational level i.e., in colleges, offices, etc. significant improvement can be seen. Further, this study sheds light on how it may further impact the future generation of psychologists and make them more vulnerable to academic immaturity, prone to dropping the subject for the misperception of it negatively impacting their mental health.

It is suggested by the author that preventive interventions in the form of awareness module be taken up at an institutional level. It could be initiated at a class level wherein during psychopathology classes teachers can shed light on the topic of self-diagnosis and further elucidate on the importance of a clinical diagnoses and benefits for the same. They can also shed more information on misinformation spread through social media support platforms and necessity for checking sources of information and its validity.

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