

Research Paper

A Correlative Study on Impostorism and Depressive Symptoms Among College Students

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ABSTRACT

This study explores the association between IP and depressive symptoms among college students aged 18-25 in Bengaluru and Kerala, India. Using the Clance Imposter Phenomenon Scale and Beck's Depression Inventory, it was found that there was a moderate positive correlation of $r=0.343$, $p=0.014$, which meant that more severe feelings are associated with higher scores of impostor phenomena. A sample of 100 participants revealed significant impostor feelings and varying levels of depressive symptoms. The findings emphasize the need for integrated mental health interventions targeting both impostor feelings and depression to enhance psychological well-being in high-pressure academic environments. Future research should expand sample diversity and explore causal relationships through intervention-based studies.

Keywords: *Imposter phenomenon, depressive symptoms, college students, mental health, correlational study*

The World Health Organization (2022) defines psychological wellbeing as the ability to achieve one's potential, cope with stress, work effectively, and contribute to their community. Relating this to college students and most importantly to those students pursuing a degree in a field as demanding as engineering, achieving psychological wellbeing seems unattainable. They generally result in stressful and anxious life patterns and mental health issues; one of the largest contributors to the psychological well-being of learners is, in fact, the Imposter Phenomenon (Chen et al., 2023).

Imposter Phenomenon, or Imposter Syndrome, is characterized by a behavior pattern where people deny their accomplishments and consider themselves impostors despite clear manifest evidence of their competence. This behaviour pattern is seen commonly in high-achieving students who attribute their success to "luck" rather than their skills (Pákozdy et al., 2023). This event of low self-esteem, anxiety, fear of failure, and depression leads to a cycle of over-preparation and procrastination (Sawant et al., 2023).

Research indicates that in universities, IP can significantly contribute to mental health concerns, especially in depression (Mavor & Brown, 2023; Gaur et al., 2022).

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Theoretical models, such as Social Interdependence Theory by Johnson & Johnson in 1989, would explain how competitive academic environments push people to be more vulnerable to the feelings of inadequacy and therefore spawn IP. The Imposter Cycle by Clance in 1985 stated that a self-reinforcing cycle entered by those experiencing IP in excessive preparation or procrastination multiplies their anxiety and self-doubt.

The association between these two is, thus well established for providing support in students mental well-being because of IP's strong presence and association with depression. This research study attempts to find out whether increased levels of imposter feelings are connected with increased symptoms of depression to inform targeted interventions in university mental health programs.

REVIEW OF LITERATURE

Below are the previous study that has been done on these variables, including; Imposter phenomenon depressive symptoms. Some interconnection has been indicated between these variables though they haven't been studied directly as the motive of this literature review is making a comprehensive analysis of the studies already carried out and also finding the gaps in these studies.

Imposter phenomenon is characterized by chronic self-doubt, a feeling of fraudulence, and an inclination to belittle past successes. This phenomenon typically plagues high achievers but universally arises at different stages throughout life (Clance & Imes, 1978).

A study on imposter syndrome and anxiety was conducted on the college-going students of India to analyse prevalence and gender differences. In this study, 150 participants were included. There were 75 male participants and 75 female participants. Out of all these participants, 54% claimed that they were suffering from the imposter phenomenon and 42% of those cases were females (Nighat & Thangbiakching, 2023).

The study was done to determine the prevalence of the imposter syndrome among surgical residents. The total number of respondents in the study was 156, 104 males, and 52 females. Results indicated high prevalence in the residents. It was much higher in females than it was in males (Zeb et al., 2023).

A study conducted to explore the relationship between imposter phenomenon and Myers-Briggs personality types among pharmacy students. The population under the study was 668, and perceptions, intuition, and introvert levels were reported to be higher in students who demonstrated imposter phenomenon compared to those who did not (Kodweis et al., 2023).

A study on 266 registered dietitians in United States was conducted to find out the prevalence of imposter phenomenon by conducting a survey. It was found that imposter phenomenon is quite common among the registered dietitians (Hernandez & Lopez, 2023).

An exploratory study was conducted to investigate the reasons behind the development of imposter phenomenon among engineering education researchers. The study involved 11 PhD scholars, the majority of whom were white. Chakraverty found that both the environment and gender contribute to the development of imposter phenomenon (Chakraverty, 2021)

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Whereas for a diagnosis of major depression, according to DSM-IV, there must be at least five depressive symptoms that appear within a two-week period. On the contrary, the criteria for a dysthymia, or what is addressed as persistent depressive disorder, are symptoms lasting for at least two years. Symptoms include depressed mood, loss of interest, alterations in weight, insomnia or hypersomnia, fatigue, feelings of worthlessness among others (APA, 1994). According to Gautam (2017), symptoms of depression are both emotional, cognitive, and physical patterns but relate to loss of interest, fatigue, and also changes in their sleeping patterns.

Among those, one study investigated how imposter phenomenon related to interpersonal guilt, involving 343 participants. The results indicated that the relationships between imposter phenomenon and self-hatred and guilt were statistically significant (Ramona et al 2021).

METHODOLOGY

Aim

The aim of this study is to investigate the relationship between imposter phenomenon and depressive symptoms among college students.

Objectives

- To explore the prevalence of Imposter phenomenon among college students
- To investigate the relationship between imposter phenomenon and depressive symptoms

Hypothesis

- H1.1: There is a high prevalence of imposter phenomenon among college students.
- H1.2: There is a significant relationship between Imposter Phenomenon and Depressive symptoms.

Research Design

Research design used in this study is a correlational analysis. This study makes use of non-probability sampling design which refers to the selection of a sample from a population where the principle of randomization is not followed. The study makes use of purposive or judgmental sample design. Purposive/Judgmental sample design This is a type of non-probability sample designs in which the researcher selects a group of individuals based on the specific characteristics that they have.

Sample and Sampling

The study was conducted on 100 college going students within the age range of 18-25, in and around Bengaluru and Kerala. The participants were approached and were informed about the studies and consent were asked. The participants comprise of both male and females. The questionnaire was shared to all students and information was collected.

Inclusion Criteria

- Age 18-25
- College going students
- Indian

Exclusion Criteria

- Age below 18 and above 25
- Working people
- Non-Indian

Tools Used

1. **Socio-demographic Sheets:** This involved asking specific personal questions to gather information such as name, age, gender, education.
2. **The Clance Imposter Scale CIPS (Clance, 1985):** Imposter Phenomenon is a behavioural phenomenon that involves self-doubt and feeling of fraudulence. Clance Imposter phenomenon scale (CIPS) is used to assess imposter tendencies. It is 20 item instrument measuring feelings such as fear of failure despite previous success, fear of evaluation as well as attributions to luck. The questionnaire uses a 5-point Likert Scale. It was developed by Clance in 1985. High score indicates high impostorism and low score indicates low impostorism
3. **Beck's Depression Inventory BDI (Beck, 1961):** Depressive Symptoms are characteristics that makes up clinical depression disorder, such as loss of interest, feeling of fatigue, weight gain or weight lot etc. Beck's Depression Inventory (BDI) is a clinically approved scale used to measure depressive symptoms developed by Aaron Beck 1961. It is a 21-item scale and uses 4-point Likert scale. High scores indicate severe depression while low score indicates minimal or low depressive symptoms.

Operational Definition

1. Imposter Phenomenon

Imposter phenomenon is operationally defined as the sum of scores obtained in Clance imposter phenomenon scale. Obtaining a high score in this scale indicate a high level of impostorism and low score indicates low level of impostorism. Imposter Phenomenon is also known as fraud syndrome or perceived fraudulence was first proposed in 1978 by Suzanne Imes et al. Imposter Phenomenon is an overwhelming feeling and belief that one does not deserve success.

2. Depressive symptoms

Depressive symptoms are operationally defined as the sum of scores obtained in the Beck's depression inventory. A high score in this scale indicates severe depressive symptoms which ranges from low mood and loss of interest to suicidal ideation while a low score indicates minimal or no depressive symptoms. Depressive symptoms are characteristics of unipolar disorders which involves persistent depressive disorder and major depressive disorder.

Procedure

The participants will be selected using the inclusion and exclusion criteria through a purposive sampling method. All participants will be informed about the nature, aims and objective of the study and assurance will be given that states that their responses to the study questions and socio-demographic details will remain confidential. All participants will be provided informed consent to participate in the study. The study will be on a voluntary basis and will not receive any financial rewards or class credit for participating in the study. For participants who find the study questions difficult as well as the instructions will be provided assistance by the researcher.

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Ethical Consideration

- Informed Consent: the participants will be given a brief introduction to the study and the purpose of which it is administered.
- Confidentiality of Responses: The data which involves both responses to the questionnaire and the socio-demographic details collected from the participants will be kept confidential and used only for academic and research purposes.
- Voluntary participation: No participant will be under pressure to take part in the study. Anonymous: The personal information of the participants will be kept anonymous.

Statistical Analysis

The data was coded using Microsoft excel and later transferred to Jamovi ver. 2.6.13 for analysis. The first step in coding the data was to ensure that all questions were answered and none were missing, and that the demographic details met the inclusion criteria set for the analysis.

RESULT AND DISCUSSION

The table shows the descriptive statistic of the data

	N	Mean	Standard Deviation
Imposter phenomenon	100	60.77	12.083
Depressive symptoms	100	15.18	11.252

This provides a descriptive summary of 100 participants who were explored in investigating the relationship between IP and depressive symptoms. The mean score for IP is 60.77, with a standard deviation of 12.083, meaning that participants expressed moderate to high levels of imposter syndrome, with strong individual differences in degree. In summary, the depressive symptoms mean score is 15.18, with a standard deviation of 11.252, suggesting that the average level of depressive symptoms in the sample is relatively low to moderate although individual participants may have higher levels, assuming the variation.

The higher mean score of the imposter phenomenon compared with depressive symptoms may indicate that although a large proportion of participants reported experiencing an imposter syndrome, it did not uniformly correlate with high levels of depressive symptomatology. The presence of high variability in the cases of both measures suggests that the distribution is wide in how people are being affected by these issues. Variability may represent variations in individual coping strategies, social support, or other mental health factors which would modulate the severity of depressive symptoms. Possible correlations among these variables should be assessed in future research, as well as demographic or psychological variables that may affect scores. This may, therefore, be useful for detection of those at risk for developing imposter syndrome and depression.

	Imposter Phenomenon
Depressive Symptoms	.317***

***correlation is significant at 0.01(2 tail)

The table above indicates the relationship between imposter phenomenon and depressive symptoms using Pearson correlation. $r = .317$ and a p -value of $<.001$, indicates a moderate positive relationship between imposter phenomenon and depressive symptoms, emphasizing that when imposter phenomenon increase, it leads to an increase in depressive symptoms.

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Thereby the hypothesis is accepted as there is a significant relationship between the two variables. Previous studies conducted by Vaibhav & Nirankar, 2022 on the prevalence of Imposter Phenomenon and Depression among MBBS students indicated a positive correlation between these two variables. A study conducted by Isabele et al., 2022 on medical students with the aim of finding the moderating effect of Imposter phenomenon on the relationship between Depression and Burnout showed that students with high level of impostorism had high risk for developing depression and perceived burnout more effectively than others.

Results from data gathered from 100 college students showed a mean score on IP at 60.77 with a standard deviation of 12.083 and manifests a moderate to high level of impostor feelings. For the mean score for depressive symptoms, it appears to be at 15.18; however, standard deviation stands at 11.252, producing a score that falls under the low to moderate ranges of depression for the participants. The Pearson correlation coefficient computed was $r = 0.317$, $p < 0.001$, which shows that it is positively correlated of moderate strength between the imposter phenomenon and depressive symptoms. Interpreting in this manner, as imposter feelings are on a rise, depressive symptoms would be likely to increase. A simple analysis of the data from 100 college students indicates that the overall mean score for the IP is 60.77 with a standard deviation of 12.083, representing moderate to high levels of impostor feelings among the students. The mean score for depressive symptoms is 15.18 with a standard deviation of 11.252 which also signifies low to moderate levels of depression among the participants. Pearson correlation coefficient was calculated to be $r = 0.317$, With p -value < 0.001 , $r = 0.317$, there was a moderate positive correlation between depressive symptoms and the imposter phenomenon; that is, the more a person feels like an impostor, the higher the levels of depressive symptoms tend to be.

The research study suggests a close relationship between imposter phenomenon and depressive symptoms in college students, as illustrated below with a moderate positive correlation ($r = 0.317$) showed that students who had higher levels of impostor feelings had a greater number of manifestations of increased depressive symptoms. These results are consistent with some previous studies that have established relationships between imposter syndrome and an increased susceptibility to anxiety, depression, and burnout. With moderate variability in both measures, individual differences such as coping mechanisms, support, and personality may affect the severity of the symptoms. The outcome therefore underscores the need for targeted interventions focusing on mental well-being in academic environments, addressing impostorism and depressive symptoms concurrently, which could otherwise minimize the effects of psychological burdens on students and enhance their general well-being.

CONCLUSION

In the study of imposter phenomenon and depressive symptoms of college students, a moderate positive correlation was observed between the two variables ($r = 0.317$, $p < 0.001$). This result shows that when the levels of impostorism are higher among the college students, then the depressive symptoms become higher in proportion. From the descriptive statistics, the mean score of imposter phenomenon was found to be 60.77. This result indicates moderate to high levels of impostor feelings. The reported mean score for depressive symptoms was 15.18, which is somewhat low to moderate depressive symptoms overall but higher in some participants.

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The results clearly indicate the importance of dealing with the imposter phenomenon because, by itself, it can become an important contributor to depressive symptoms.

This observed variation in data, therefore, implies that differences at the individual level, such as strategies of coping and social support, can account for the seriousness of these problems. Hence, directed intervention in mental health programs combining imposter feelings and depression might be useful, especially in academic setup where high achievers are most likely to encounter these psychological pressures. Further areas of research will include demarcating the causality between imposter phenomenon and depression; other differences like demographic, personality, and even academic pressure factors will also be explored. This area of research would go a long way in terms of prevention and intervention strategies to give better well-being support to students.

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Conflict of Interest

The author(s) declared no conflict of interest.

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