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Self-Diagnosis Of Psychological Symptoms and Coping Mechanisms among Students studying Psychopathology

[1]**Esha Mardolkar**, *Student, Department of Psychology, Kristu Jayanti College*

eshamardolkar@gmail.com

https://orcid.org/0009-0001-8859-3829

[2]**Sharmili** Chatterjee, *Assistant Professor, Department of Psychology, Kristu Jayanti College*

sharmili@kristujayanti.com

https://orcid.org/0000-0003-4223-5214

Abstract: Studying psychology can be eye-opening, but for many students, it also brings an unexpected challenge in their educational journey which is self-diagnosis. This phenomenon, often referred to as Psychology Student Syndrome, raises concerns about the intersection between academic learning and self-perception. As they learn about various mental health conditions, some begin to see symptoms in themselves, blurring the line between academic knowledge and personal experience. The current study explored how exposure to psychopathology influences self-diagnosis among psychology students, the emotional and academic struggles that come with it. Through in-depth interviews with students who have studied psychopathology for at least four to five months, the study found that many experience anxiety, uncertainty, and difficulty distinguishing between normal emotions and clinical disorders. While some students adopt healthy coping mechanisms such as mindfulness and therapy, others turn to avoidance or social withdrawal. Our findings highlight the need for

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universities to step in, not just by teaching about mental health, but by guiding students in processing this knowledge without misinterpreting their own experiences. Workshops, open discussions, and stronger mental health support systems can help students develop critical thinking and self-awareness, allowing them to engage with their studies without unnecessary distress. By fostering a supportive learning environment, educational institutions can help future psychologists navigate their own well-being while preparing them to support others.

Keywords: *Educational psychology, self-diagnosis, Psychology Student Syndrome, mental health literacy, academic exposure, coping strategies.*

Introduction

Self-diagnosis of psychological symptoms has become an increasingly common phenomenon, particularly among psychology students studying psychopathology. They tend to misinterpret normal emotions and behaviours as symptoms of mental illness due to exposure to extensive mental health literature. The condition is often described as Psychology Student Syndrome or Medical Student Syndrome and has implications such as increased anxiety, unnecessary self-labelling, and academic difficulties. While the study of psychopathology requires in-depth knowledge of mental health issues, the line between academic knowledge and personal mental health becomes blurred, often resulting in misdiagnosis (Balakrishnan & Akshaya, 2023).

This phenomenon of self-diagnosis among psychology students has been widely studied and reveals its psychological and educational implications. Students, once they learn about mental health disorders, tend to start identifying with the symptoms described in textbooks and begin self-diagnosing (Deo & Lymburner, 2011). This can lead to some serious consequences, such as increased anxiety, social withdrawal, and a distorted self-concept. Self-diagnosis, without proper clinical training, gives birth to false identities, which contributes to tampering with personal and academic life (Balakrishnan & Akshaya, 2023). The nature of neurotic personality

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exacerbates the tendency of internalizing and personalizing psychological conditions, hence making students become more vulnerable towards the negative impacts of self-diagnosis (Deo & Lymburner, 2011).

In addition, the ease with which mental health resources are available, especially online symptom checkers and AI tools, has fuelled self-diagnosis. Devi and Sudarmathy (2024) suggest that students in all disciplines increasingly seek self-diagnosis through digital platforms without involving professionals. With general information provided from such resources, most students find the lack of professional assessment lacks the depth; this makes it misleading in regard to students who would reach faulty conclusions regarding their mental health status. Information increase along with school pressures has tended to mislead the student by considering normal stresses or fluctuations as indicative of more severe mental conditions (Alex & Babu, 2023).

The issue of self-diagnosis in the presence of stress has also been explored. Alex and Babu (2023) observe that high stress levels are likely to lead to an increased tendency to self-diagnose, thereby suggesting that academic pressure plays a significant role in this behaviour. Stress, when misunderstood, might also be misread as symptoms of mental disorders, especially when students lack the expertise to differentiate normal from pathological conditions. As stress heightens, the students may begin to engage in unhealthy coping mechanisms, which worsen their issues and may perpetuate the incorrect self-diagnosis (Devi & Sudarmathy, 2024).

Ahmed and Stephen (2017) further argue that although self-reflection is a crucial part of personal growth, it causes distorted self-concepts when the students start to diagnose themselves without professional supervision. This distorted self-view, together with increased anxiety, creates avoidance behaviours and self-stigmatization. According to Hardy and Calhoun (1997), self-focused attention and anxiety are amplified by abnormal psychology

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courses in those students who do not receive appropriate guidance to work through the material they are presented with. Thus, educational programs must provide their students with information about mental health and practical resources to avoid interpretation and reduce the level of anxiety that may build up (Ngo-Thi et al., 2021).

In recent years, the role of technology has become more and more recognized in self-diagnosis. Shahsavar and Choudhury (2023) claim that even though AI tools are informative, they can intensify the propensities of self-diagnosis, especially for students in psychological studies. Such tools provide very useful information, but most often they give very general responses that result in the spreading of false information. This therefore calls for integrating critical thinking and digital literacy in educational programs, ensuring students can navigate the limits of digital health tools (Shahsavar & Choudhury, 2023).

Self-diagnosis, coupled with the associated psychological distress, requires addressing coping strategies. Seattle Anxiety Specialists (2024) reported that effective coping mechanisms included mindfulness, exercise, and social support to alleviate anxiety and promote mental health. Maladaptive strategies, such as avoidance and substance use, worsen psychological strain and may even reinforce self-diagnosis. The promotion of adaptive coping strategies plays a significant role in reducing adverse effects from self-diagnosis as well as to prevent the triggering of Psychology Student Syndrome (Seattle Anxiety Specialists, 2024).

Educational guidance is crucial in addressing self-diagnosis. Gazzillo et al. (2021) propose that personalized approaches in therapy may be helpful for students who have tendencies toward self-diagnosis. They stress the need for individualized support to help students deal with the stress of studying psychology without internalizing the disorders they learn about. Deasy et al. (2014) also express the argument that educational institutions should foster an environment of comfort for seeking assistance and support so that stigma associated with mental illness is considerably reduced and help-seeking behaviour encouraged.

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Despite growing numbers of research, the unique experiences of psychology students diagnosed with themselves are still not well addressed. Most research on this idea have mainly targeted medical students or the general population, which leaves a gap in students studying psychopathology who probably take more exposure to mental health information. There is little study on the role of coping mechanisms in self-diagnosis. This research aims to address this gap by exploring not only the prevalence of self-diagnosis but also coping strategies adopted by students in handling its consequences (Deasy et al., 2014).

In summary, even though self-diagnosis among psychology students is an increasingly common issue, understanding what factors contribute to the emergence of such behaviour and finding effective coping strategies is essential in reducing its negative impact. Psychology Student Syndrome calls for educational interventions in both academic and emotional challenges that affect psychology students so that they can handle the situations responsibly and healthily.

Methodology

The qualitative research design of this study employed semi-structured interviews to find out the experience of psychopathology students on self-diagnosis. The paper intended to identify how students internalize the disorders they are learning, determine what leads to self-diagnosis, examine its effects, and analyse the coping mechanism. Purposive sampling was conducted to include psychopathology students from different backgrounds, where students were included after ensuring they had adequate knowledge about mental health. Therefore, the sample consisted of students aged 18 years and above who had passed at least four to five months studying psychopathology and who also had a history of observed symptoms of self-diagnosis. Students that had preexisting diagnosed psychiatric conditions were excluded from the study to ascertain independent effects of academic exposure to self-diagnosis. The sample size was established by data saturation as no new themes occurred from follow-up interviews.

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Recruitment was done by screening through a Google form. Participants were selected based on whether they were eligible and willing to participate. Participants who were selected were interviewed using in-depth, semi-structured interviews. This interview focused on the reasons behind self-diagnosis, the effect on mental and physical health, and how participants coped. The interviews offered rich, detailed data that was used to have an in-depth understanding of the phenomenon. Thematic analysis is used to reveal patterns and common themes in responses by participants regarding their experiences in self-diagnosis.

Ethical considerations have been upheld from the research stage. All the participants were required to give consent, and full information was sought regarding the reason for the study and their willing participation. Data and participant identity were kept strictly confidential and anonymous. Objectivity in data collection and interpretation further reduced biasing. These efforts helped maintain the integrity of the study while being sensitive to participants' well-being.

Results

Table 1. Challenges *in Self-Diagnosis (Theme 1)*

THEME	**DESCRIPTION**	
Challenges in Self-Diagnosis	Challenges encountered by most people in Self Diagnosis	
Subcategories	*Descriptions*	*Significant Statement Examples*
Contradicting insights	Struggle between identifying symptoms and lacking a formal diagnostic process.	"One of the most important challenges was, you know, not concluding. Since I am not a professional to diagnose myself with that disorder, I was thinking too much whether I have or might not have." (P5)

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External validity	Concerns about misinterpreting or over-assigning symptoms without professional input.	"Okay one thing was that I can't just read it and be sure about it, I need to really check it." (P6)
Anxiety	Fear of having a disorder or doubting the self-diagnosis.	"A little anxious because you start thinking, okay what if this is true, what if this is a criterion which I may think, what if I actually have that disorder." (P10)
Fear of Judgement	Wanted to talk to someone but scared of the judgment	"What else people will think about me if I, if I have that disorder and I also feel ashamed of talking about this disorder to a person." (P14)
Unencountered Challenges.	No challenges were encountered by the participants.	"I'm not sure about that because I don't, I don't think I came across any challenges." (P8)

Theme 1: Challenges in Self-Diagnosis

Self-diagnosis in psychology students leads to several challenges that affect them academically, emotionally, and socially. One of the major problems is uncertainty and self-doubt. It is very difficult for students to decide whether their thoughts and behaviours are indeed indicative of a disorder or if they are just overanalysing normal emotional fluctuations. The lack of professional validation leaves one in an uncertain position, which further escalates anxiety and excessive rumination. Such questioning of one's mental state causes students to be fixated on symptoms, thus worsening their distress rather than bringing clarity.

Another issue is the fear of being judged by peers and professionals. Most students are reluctant to approach faculty, counsellors, or mental health professionals for assistance due to fear of being perceived as overreacting or misinterpreting psychological concepts. This creates a situation where they are afraid to talk openly about their concerns, resulting in social withdrawal and self-isolation. In addition, some students might be ashamed of their self-diagnosis, thinking that they should know better as psychology students.

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It further is challenging the task of fogginess in determining between academic readings and real experiences. With further engagement into such literature regarding mental health, sometimes students can blur the distinction of objective learning acquired through the textbooks and the subjectively experienced feeling that has caused the trouble of distress.

Table 2. *Influence of Academic Learning on Self-Diagnosis (Theme 2)*

THEME	**DESCRIPTION**	
Influence of Curriculum	The role of Education in Self Diagnosis	
Subcategories	***Descriptions***	***Significant Statement Examples***
Curriculum Structure	Certain course elements like DSM criteria or assignments that connected theory with personal experiences led students to reflect deeply on their mental health.	"The DSM criteria is more specific. It is more specific about pinpointing the symptoms a person might have." (P1)
Influence of Experiential Learning	Assignments that encouraged students to connect their experiences to theoretical concepts sometimes intensified the urge to self-diagnose.	"Doing the assignments, practically like getting an assignment and connecting the theory with your life and that aspect of studying was much more informational, practical learning rather than just learning the theories." (P9)
Impact on academic performance	Anxiety or other symptoms impacting focus, study habits, and exam performance.	"Yeah, when it comes to academic performance, it really did. Because, as I told you, I stopped giving importance to the psychological disorder paper." (P15)
Career Reconsideration	Reflecting on the suitability of a career in psychology or academia due to personal struggles with mental health	"Not really, it hasn't affected my studies as such, but personally I feel career-wise, I kind of do think of it from time to time, I don't think, oh, what if I work with people who have this disorder, and I myself might be

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		struggling through it, how do I cope up with it, I have to work on myself before I work with others, especially if I become a counsellor." (P12)
Positive Impact	Positive impact of curriculum seen on the participant	"It gives you a holistic view about your own self and then you know what the pros and cons about your own self are and when I know that okay there are things which are like this for me, I try to change it for myself and others accordingly." (P7)
No Impact Seen	There was no impact seen on the participants.	"No not really no because I said before only I already knew, and it was like I think I have already shaped my personality as it was." (P11)

Theme 2: Influence of Curriculum on Self-Diagnosis

The academic curriculum played a significant role in shaping students' self-diagnosis behaviours. Many participants believed that exposure to diagnostic criteria, especially using structured frameworks like the DSM, raised awareness about mental health symptoms. Several students described how reading through symptom lists made them reflect on their own behaviours, often leading them to believe they met the criteria for certain disorders. Further, self-reflective assignments increased self-diagnosis tendencies.

Some students were found to have engaged in self-identification with disorders because their course work required analysing an individual or applying psychological theories to personal life experiences. However, the course's influence was different. Some students said it was torturous, whereas, others felt, it granted awareness and better knowledge of self. Thus, few mentioned thoughts of changing careers because their understanding of self-diagnosis worried them about future work as counsellors or therapists, notwithstanding their talents. Some,

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however, did not record significant effects, as they indicated they were already aware of their mental health tendencies before going through any coursework.

Table 3. *Factors and causes of self-Diagnosis (Theme 3)*

THEME	**DESCRIPTION**	
Factors Influencing and Causes of Self-Diagnosis	Some of the factors and causes of Self Diagnosis	
Subcategories	*Descriptions*	*Significant Statement Examples*
Exposure to Psychology	Studying psychology and being exposed to disorders.	"I read about it and I learned about it in depth. Like Since I was a psychology student I was being exposed to such disorders." (P11)
Better Understanding of the concepts	Natural desire for self-understanding leads students to explore symptoms that may match their experiences.	"We many times try to place the diagnosis and like to substitute it to a person. So, we remember it much easier." (P9)
Curiosity	Natural curiosity to know more about what they were feeling.	"So, I feel due to curiosity we tend to research more and then self-diagnose." (P7)
Past Personal Experiences	Personal or childhood experiences, such as past trauma or longstanding academic struggles, motivate students to seek explanations for recurring patterns.	"I think these, my childhood, the struggle, no matter what I do, I'm not able to handle it, manage it well. So, these are the factors that pushed me towards it." (P3)

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Theme 3: Factors Influencing and Causes of Self Diagnosis

The several key factors influencing the development of self-diagnosis tendencies among psychology students include aspects that affect the perception of mental health and their personal experiences. The first and most overriding reason for overidentification is academic exposure to psychological disorders.

As students read through descriptive accounts of mental health conditions, they themselves become highly sensitized to symptoms and diagnostic criteria. This awareness often leads to overidentification where students begin relating textbook symptoms to their personal behaviours, in spite of them not meeting full clinical criteria for the disorder. This phenomenon is similar to Medical Student Syndrome. This is when medical students believe they themselves have illnesses they have studied.

Personal experiences also play a significant role in self-diagnosis. Pupils who experienced trauma, stress, or emotional distress use the information to find meaning through academic material. Some may be validated in this sense; they are now able to make sense of the past in terms of problems they have faced. Others continue to feed on it as it may rebuild distress, at times leading them down an inaccurate self-diagnosis path that worsens their emotional state.

With increasing accessibility to digital platforms for mental health information, self-diagnosis is on the rise. Many students turn to online sources like symptom checkers, self-assessment tools, and even AI-based diagnostic tools to assess their mental status. Although these resources are valuable in many ways, they usually fail to be clinically accurate and often lack professional advice, leading to the potential of misinformation and distress.

Table 4. *Coping Mechanisms (Theme 4)*

THEME	DESCRIPTION	
Coping Strategies	Some of the coping mechanisms used by the participants	

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Subcategories	*Descriptions*	*Significant Statement Examples*
Positive Coping	Some of the healthy coping mechanisms used by the participants	"I started coming out of my comfort zone and I started eating properly because I understood the consequences of not eating properly and then I started you know taking simple self-care steps like you know lighting candle because I started feeling like you know seeing this candle give some sort of brightness in me and in my life and then definitely journaling." (P1)
Negative Coping	Some of the negative coping used by the participants	"I stopped studying for abnormal Psychology paper." (P5)
Therapy	Participants seek therapy to cope.	"I was not able to identify my triggers. But once I started therapy, once I started indulging more in the sessions, I was able to identify my triggers, and I could navigate through my feelings." (P14)
No measures taken	The participants did not use any of the coping styles.	"There was not much see because physical or mental impact I didn't really have a thing to like say cope specifically." (P8)

Theme 4: Coping Mechanisms

Students use different coping mechanisms to deal with the effects of self-diagnosis. The strategies can be broadly classified into adaptive or healthy coping mechanisms and maladaptive or harmful coping mechanisms.

Conversely, maladaptive coping mechanisms may serve to reinforce distress and exacerbate the negative effects of self-diagnosis. For example, some students avoid coursework or discussions on mental health topics to reduce anxiety, thereby limiting their academic engagement and understanding. Others resort to social withdrawal and isolation, fearing that discussing their concerns will lead to further judgment or self-doubt. A growing issue is overreliance on AI-based self-assessment tools and symptom checkers, leading to misinformation, unnecessary panic, and increased stress. In extreme cases, the students may

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begin self-medicating or use substances to address the distress created by self-diagnosis, resulting in long-term negative impacts on their mental health.

With these patterns, higher educational institutions can play a significant role in directing psychology students toward effective coping mechanisms. Universities must encourage psychology students to realize the distinction between self-awareness and professional diagnosis by organizing structured discussions and workshops on self-reflection, critical thinking, and mental health awareness. Promoting help-seeking behaviours, peer support programs, and other counselling services will help ensure that the students' relationship with psychological knowledge is healthier and their emotional well-being remains intact.

Discussion

The main aim of this study is to determine whether students in psychology tend towards self-diagnosis, and their academic exposure to mental health topics generally influences their identification with various psychological disorders. This research examines the variables responsible for self-diagnosis, the consequences of the action on the mental and physical well-being of students, their academic performance, personal relationships, and ways to cope with the impact of the consequences. By investigating these areas, the study aims to shed light on the complex interplay between education, self-perception, and mental health within psychology programs.

Analysing the received responses from the participants of age group between 18 to 23, it can be stated that the use of self-diagnosis behaviours in psychology students is an ingrained issue that takes a certain dimension, as most of the participants expressed the possibility of evaluating their experiences of feelings or behaviours along the lines of psychological disorders. The participants self-diagnosis intensity score of 3 – 4 over 5 scale indicates self-diagnosis behaviours of the respondents as moderate or high of which is probably due to their syllabus and knowledge of clinical terms. This phenomenon is consistent with the literature on

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"Psychology Student Syndrome," in that students do tend to over-identify symptoms because of exposure to mental health concepts. Furthermore, Intensity of self-diagnosis about course psyche subjects, such as 'Child and Adolescent Psychopathology', 'Neuropsychology', etc., varies which indicates the subjects taught play a role in self-diagnosis and reflection. This, therefore, raises concerns on how students can be assisted in ensuring that academic training does not interfere with their personal assessment of mental health to prevent tension and distortion likely to arise.

The results indicate that self-diagnosis among psychology students is associated with considerable uncertainty and self-doubt. Many students experience conflicting interpretations of their symptoms due to the lack of professional validation. This is in line with the findings of Balakrishnan and Akshaya (2023), which underscore the risks of misdiagnosis due to incomplete clinical knowledge. Moreover, students feel anxious and distressed when they identify with multiple disorders, often resulting in excessive rumination and heightened emotional responses.

A key factor contributing to self-diagnosis is the intense academic pressure psychology students face. The overwhelming volume of information on mental disorders, coupled with personal stressors, often prompts students to look inward and analyse their own mental state. Instead of recognizing stress as a natural part of their academic journey, they may attribute their struggles to a mental health condition. This self-labelling can heighten feelings of distress, leading to emotional exhaustion, self-doubt, and fear of not being mentally fit for the profession they aspire to enter (Alex & Babu, 2023).

Additionally, digital tools and online resources have made self-diagnosis more accessible than ever. While these platforms provide valuable information, they lack the nuance and expertise required to differentiate between normal emotional fluctuations and clinical disorders. Many students rely on symptom checkers and AI-driven assessments that offer generalized feedback,

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increasing their likelihood of misdiagnosing themselves (Shahsavar & Choudhury, 2023). This reliance can lead to unnecessary anxiety and, in some cases, prevent students from seeking professional guidance when needed.

Beyond the academic and technological influences, social stigma also plays a role in self-diagnosis. Some students fear being judged if they express concerns about their mental health, leading them to self-diagnose rather than seek professional help. This fear may be exacerbated by the expectation that psychology students should inherently understand and manage their own emotions, creating a barrier to open discussion and support (Deasy et al., 2014). As a result, students may withdraw socially, avoiding interactions that could help them gain a more balanced perspective on their experiences.

However, self-diagnosis does not always result in negative outcomes. Some students use it as a tool for self-awareness, helping them recognize their stressors and implement positive coping strategies such as mindfulness, therapy, and exercise. Those who take a proactive approach in managing their well-being often experience a better sense of control over their academic and personal lives. On the other hand, students who fall into maladaptive coping patterns—such as avoidance, social withdrawal, or substance use—risk exacerbating their mental distress (Deasy et al., 2014). The contrast in coping mechanisms highlights the need for structured mental health education that teaches students how to critically evaluate psychological information without internalizing it as personal pathology.

Given these findings, universities must step in to create a supportive environment that addresses the psychological impact of studying mental health. Integrating discussions on the risks of self-diagnosis into psychology programs, promoting help-seeking behaviors, and encouraging professional mental health consultations can help mitigate the issue. Providing safe spaces for students to talk about their concerns without fear of judgment is also crucial in preventing them from turning to self-diagnosis as their only option.

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Conclusion

Self-diagnosis among psychology students is a complex issue deeply intertwined with academic exposure, stress, and the rapid availability of mental health information. While learning about psychological disorders can foster self-awareness, it also increases the likelihood of misinterpreting normal emotions as symptoms of clinical conditions. This misinterpretation can contribute to heightened anxiety, self-stigmatization, and a reluctance to seek professional help. However, the issue is not solely negative—self-diagnosis can also encourage students to reflect on their mental health and seek appropriate support when guided correctly.

Educational institutions must take responsibility for addressing this challenge by embedding mental health literacy into psychology curricula. Teaching students how to differentiate between self-awareness and clinical diagnosis, integrating discussions about the risks of self-diagnosis, and providing access to professional mental health support can create a healthier academic environment. Universities should also foster open conversations about mental well-being, reducing stigma and promoting responsible engagement with psychological knowledge. Future research should explore the long-term psychological and academic impacts of self-diagnosis and evaluate the effectiveness of intervention programs within educational settings. A proactive approach that balances rigorous psychological education with emotional well-being will not only improve student mental health but also prepare future psychologists to navigate mental health issues with greater clarity and responsibility. By cultivating a culture of critical thinking, open dialogue, and professional support, psychology programs can help students develop a healthier and more informed relationship with the mental health knowledge they acquire.

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References

Ahmed A, Stephen S (2017), Self-Diagnosis in Psychology Students, *International Journal of Indian Psychology*, Volume 4, Issue 2, No. 86, ISSN:2348-5396 (e), ISSN:2349-3429 (p), DIP:18.01.035/20170402, ISBN:978-1-365-68609-2

Alex, L. & Babu, K. (2023). The Relationship between Perceived Stress and Self-Diagnosis among Psychology Students. *International Journal of Indian Psychology, 11*(2), 1168-1176. DIP:18.01.125.20231102, DOI:10.25215/1102.125

Buizza, C., Cela, H., Costa, A., & Ghilardi, A. (2022). Coping strategies and mental health in a sample of students accessing a university counselling service. *Canadian Psychology/Psychologie canadienne, 63*(2), 151–162. https://doi.org/10.1002/capr.12519

Balakrishnan, A., & Akshaya, I. (2023). Self-labeling as having mental health illness among psychology students. *The International Journal of Indian Psychology, 11*(3), 1-10.

Devi, R. S., & Sudarmathy, S. (2024). A study on the impact of self-diagnosis of mental health among college going students. *International Journal for Multidisciplinary Research, 6*(3), 1-10.

Deasy, C., Coughlan, B., Pironom, J., Jourdan, D., & Mannix-McNamara, P. (2014). Psychological distress and coping amongst higher education students: a mixed method enquiry. PloS one, 9(12), e115193. https://doi.org/10.1371/journal.pone.0115193

Gazzillo, F., Dazzi, N., Kealy, D., & Cuomo, R. (2021). Personalizing psychotherapy for personality disorders: Perspectives from control-mastery theory. *Psychoanalytic Psychology, 38(*4), 266–278. https://doi.org/10.1037/pap0000295

Hardy, M. S., & Calhoun, L. G. (1997). Psychological distress and the "Medical Student Syndrome" in abnormal psychology students. *Teaching of Psychology, 24*(3), 192–193. https://doi.org/10.1207/s15328023top2403_10

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Ngo-Thi TT, Tran-Thien GP, Dang-Thi NT, Tran-Chi VL. "Medical Student Syndrome" in Vietnamese psychology students. *Medical Science, 2021, 25*(111), 1061-1070

Shahsavar, & Choudhury, A. (2023). User intentions to use ChatGPT for self-diagnosis and health-related purposes: Cross-sectional survey study. JMIR Human Factors, 10, e47564. https://doi.org/10.2196/47564Smith, R., & Moss, B. (2017). Emotional exhaustion in psychology students. *Journal of Mental Health, 26*(5), 456-462.

Sultana, Razia & Nazeer, Mohammed. (2014). ISSN 2347-954X (Print) Stress and it's Coping Strategies in Medical Students. 2. 3111-3117.

Seattle Anxiety Specialists. (n.d.). Coping mechanisms. Seattle Anxiety Specialists. https://seattleanxiety.com/coping-mechanism

Williams, S., & Davis, K. (2020). Balancing curriculum in psychology education. *Journal of Positive Psychology, 15(*2), 214-225.