Unraveling the dangers of mental health self-diagnosis: a study on the phenomenon of adolescent self-diagnosis in junior high schools

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Abstract: Recently, self-diagnosis or diagnosing personal conditions without expert judgment (psychologists and psychiatrists) by matching one's condition with information obtained from the internet (YouTube, TikTok, and websites) tended to be inaccurate and harmed adolescents with symptoms, especially among college students. However, it did not rule out the possibility of self-diagnosis related to mental health also being carried out by teenage students who were attending school. Using a qualitative phenomenological approach, this study focused 1) describes in detail the phenomenon of self-diagnosis in junior high school adolescents, 2) describe the causal factors and adverse impacts on junior high school adolescents when carrying out self-diagnosis and 3) explaining the implications and strategies for handling adolescent self-diagnosis for related parties (parents, homeroom teachers, counselors, and schools). This research also confirmed the researcher's initial suspicion that self-diagnosis could also occur among early adolescents and even 5th-grade elementary school students, not only among college students as in previous research in Indonesia. So that the phenomenon of adolescent self-diagnosis should not be underestimated, furthermore this finding needs to be followed up by related parties through synergy activities, mental health outreach with psychologists, and organizing parenting with parents.
Keywords: Adolescent Mental Health; Junior High School; Self-Diagnosis Phenomenon.

Introduction

Awareness of mental health issues has recently grown rapidly, especially among teenagers who are active as internet users, as can be seen from the many uploads of teenagers on social media that use clinical terms related to mental health problems, for example insecure, overthinking, healing, anxiety, burnout and others in expressing feelings and experiences (Oktaviana, 2022; Putri, 2021). With easy access to knowledge sharing nowadays, it is not surprising that teenagers use the term a lot in everyday conversation, be it in person or online via social media (Normansyah, 2021). In line with survey data from the Ministry of Health of the Republic of Indonesia in 2018, around 48.2% of respondents in Indonesia claimed to seek health information via the Internet (Kemenkes, 2018).

However, the awareness of adolescents to seek and access excessive information about mental health problems without adequate assistance also raises new problems that can pose a risk to adolescent health, one of which is the emergence of the phenomenon of self-diagnosis, namely an individual's behavior that tries to diagnose himself by identifying the symptoms he is experiencing and comparing them with information found through the internet or similar sources (Goyder et al., 2009; Lanseng & Andreassen, 2007; White & Horvitz, 2009). This has the potential to cause misdiagnosis and inappropriate treatment for individuals (Ahmed & Samuel, 2017; Robertson et al., 2014). This behavior is characterized by the activity of seeking help secretly and surreptitiously on online mental health media pages without directly consulting a professional psychologist/psychiatrist, withdrawing from social interactions, seeking validation and support from peers regarding their condition based on information obtained from the internet, and share emotional experiences through social media. Furthermore, research conducted by (Ryan & Wilson, 2008; Vismara et al., 2020) concluded

that the practice of self-diagnosis has adverse effects such as misdiagnosis, inaccurate excessive anxiety, and inappropriate treatment, especially in mental health problems.

Based on this description, researchers argue that adolescents need to avoid the practice of self-diagnosis when they encounter a problem so as not to have a more serious impact. Unfortunately, in several recent studies (Annury et al., 2022; Maskanah, 2022; Normansyah, 2021; Pradhana, 2022; Sadida, 2021), the phenomenon of self-diagnosis is still very little studied in Indonesia, especially in adolescents who are attending school. Even though this phenomenon is very likely to occur, as the results of a brief questionnaire that the researchers distributed to 115 seventh, eighth, and ninth graders at SMP Muhammadiyah 12 GKB Gresik showed that dozens of students had conducted self-diagnosis after searching for health information on the internet.

From filling out the survey it can be understood that most of the online questionnaire respondents were female (70 female students) followed by male respondents (45 students) with an average age of 14 years, 15 years, and 16 years, this indicates that the respondents belong to the early adolescent category. Meanwhile, from the survey analysis, it is known that teenage students have done and seen self-diagnosis around them with a frequency dominated by sometimes, followed by often, and very often, which means that teenage students tend to self-diagnose when they find problems with themselves. The results of this assessment at least strengthen the researcher's argument that self-diagnosis is not only carried out by late adolescents (college students) but also early and middle adolescents who actively surf the internet.

Thus, serious efforts are needed to prevent and treat students at junior haigh school (SMP Muhammadiyah 12 GKB Gresik) so that they can avoid the practice of self-diagnosis. Hence, this study focuses on 1) Describing in detail the phenomenon of mental health self-diagnosis in adolescents at SMP Muhammadiyah 12 GKB Gresik, 2) Describing the factors that cause adverse effects on adolescents at SMP Muhammadiyah 12 GKB Gresik when carrying out health self-diagnosis mental health, and 3) Explain the implications and strategies for dealing with mental health self-diagnosis for adolescents for related parties (parents, homeroom teachers, counselors, and schools).

Method

To obtain appropriate and representative data from the research subject, the researcher used data sources from semi-structured interviews with research subjects consisting of four students at Junior Haigh School Muhammadiyah 12 GKB Gresik as primary data and journal article review as secondary data. This refers to several types of similar research (Sheehy & Budiyanto, 2015; Wan & Chiou, 2006) that use this data collection method for the selection of four student subjects based on the results of the self-diagnosis tendency questionnaire analysis that the author has distributed online to more than one hundred students, where students who have a frequency of self-diagnosis are selected as research subjects by still asking for availability in advance through the research willingness form as research code of ethics (Lubis et al., 2019; Pandu, 2013; Resosudarmo, 2022).

Furthermore, this type of research is classified as qualitative phenomenological research, namely a research model that looks more closely at how individuals interpret their own experiences (Emzir, 2012; Farid & Sos, 2018; Wijanarko & Syafiq, 2013). Meanwhile, for data analysis, this study used Interpretative Phenomenological Analysis (IPA), an analytical technique that explores participants meanings of their personal and social lives (Alase, 2017; Biggerstaff & Thompson, 2008; Smith, 2017). Then the validity of the data, the data as a whole will be tested for credibility through expert audits (third parties who are experts in psychology

or counseling) to check the accuracy and correctness of the data (Biggerstaff & Thompson, 2008; Nurriyana & Sayira, 2021).

Results and Discussion
Description of the Phenomenon of Self-Diagnosis in Junior High School Students
1. Profile of Research Subjects

Table 1. Characteristics of Research Subjects

Subject	Age	Gender
AAM	15 years	Female
ASAN	15 years	Female
IZF	15 years	Female
ZIA	14 years	Female

It can be seen in Table 1, that the subjects in this study consisted of 4 junior high school female students with an age range of 14-15 years. The four subjects were selected as research samples by considering the results of filling out the online questionnaire that the researchers had distributed and their willingness to become research subjects through an informed consent form. This was strengthened by the results of the initial interview which stated that they had carried out self-diagnosing behavior several times through searching for information on the internet and believed in it.

2. Description of Student Self-Diagnosis Phenomena

In general, from the analysis of self-diagnosis surveys and semi-structured interviews with subjects, the act of self-diagnosis is carried out accidentally/trial and error when encountering pressures and life problems. The action can be in the form of viewing explanatory videos on social media (YouTube, Website, TikTok) and matching the conditions without further consulting an expert. The content on YouTube, Websites, and TikTok includes short videos on signs of mental health disorders, and short articles about symptoms of depression, stress, anxiety, and ADHD. Meanwhile, from the data obtained, the four subjects understood that what they were doing was an act of self-diagnosis. To facilitate the description of student self-diagnosis, the following researchers present the data as follows:

Table 2. Student Self-Diagnosis Experience

Subject	Diagnosed Disorders	Diagnostic Reference
AAM	Stress	TikTok, Website
ASAN	Excessive anxiety	YouTube, Tiktok
IZF	Overthinking, anxious, and easy to get paranoid	YouTube, Website
ZIA	Considers himself ADHD	Instagram, YouTube

In addition, they admitted that they started doing self-diagnosis for the first time when they were in grades 5 and 6 of elementary school during the COVID-19 pandemic and some only did it when they entered junior high school, while the frequency was quite frequent, often and rarely according to the subject statement. In line with this, several subjects also admitted that the last time they did self-diagnosis was last week and 1 month ago. The full details of the researcher are presented in Table 3, below:

Table 3. Frequency of Self-Diagnosis

Subject	Frequency	First Time Experience	Last Time Experience
AAM	Sometimes	Enroll as a junior high school student	A week ago (2/5/2023)
ASAN	Infrequently	Enroll as a junior high school student	A month ago (14/4/2023)
IZF	Often	Elementary school students	A week ago (5/5/2023)
ZIA	Many times	Elementary school students	A week ago (3/5/2023)

Factors causing and adverse effects for adolescents at SMP Muhammadiyah 12 GKB Gresik when carrying out Self-Diagnosis

Based on the data obtained, it is known that various factors cause adolescent students to self-diagnose. The following researchers describe the following points:

1. Just for fun

    Several subjects admitted that viewing short videos on TikTok and Reels Instagram encouraged them to relate their condition to the information displayed in these short videos. Not infrequently, because they feel fun with the existing content, they see related videos that are presented on social media. This is illustrated by the following subject statements, IZF: "*When I was not feeling well. For example, for nausea, I usually looked for what I had on the internet. Then I matched my symptoms with the results found on the internet*". The subject of AAM: "*At that time, I felt stressed and started looking for what problems I felt on Google right away*".

2. Feeling Curious

    In line with what was conveyed by the IZF and AMM subjects, the ASAN subject said that she was curious about the condition of the problem they were experiencing, so she tried to find information on the internet that could explain her condition. In the end, the information was far from accurate, and sometimes it was exaggerated. The following is a statement, on the subject of ASAN: "*I accidentally saw content that told about psychology, then I started to be curious and explored about the psychology that I experienced.*"

3. Feeling Shame and Fear

    The emergence of embarrassment and fear of consulting experts (psychologists and school counselors) makes ASAN subjects choose to surf the internet, be it websites or Instagram and YouTube to find answers regarding their problems. It can be seen from her statement as follows, ASAN: "*In myself, if I had a problem, I would keep it bottled up and solve the problem well without overthinking about the long term, because I would immediately find a solution and improve myself without involving other people. The way I told them was because I knew that telling other people problems was not a solution but a new problem*".

    Meanwhile, for the impact of self-diagnosis, the four subjects admitted that after they searched for information and self-diagnosed, it led to adverse effects such as:

a. Excessive Anxiety

    As the researchers alluded to in the study of theory, the act of self-diagnosis causes individuals to receive inaccurate diagnoses that make them feel excessively anxious and worried about themselves. Then, based on the statements of the subjects, ZIA and IZF also admitted that they often felt excessive anxiety and paranoia after carrying out a self-diagnosis on themselves.

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b. Overthinking

Besides feeling excessively anxious, another effect that arises from carrying out a self-diagnosis is excessive negative thinking often called overthinking, this is based on the recognition of the IZF subject during the interview process.

c. Misdiagnosis

Tend to exaggerate the condition of the problem and be inaccurate in assessing the condition of the problem are symptoms experienced by AAM subjects when diagnosing themselves, in AAM's statement: *"I came to understand my mental condition even though the diagnosis was not necessarily correct"*.

d. Socialization Difficulties and Lack of Confidence

According to the IZF subject, after carrying out the self-diagnosis she found it difficult to interact with her classmates because she thought she was having problems and was worried that it would affect her classmates. Thus, she chooses to be silent and tends to be passive while in class. IZF: *"I was affected psychologically, such as experiencing anxiety, being easily unwell, and becoming easily paranoid. I also found it difficult to communicate at school for fear that my disease would spread."*

In line with this, the ZIA subject also felt that way, she felt anxious and paranoid, and insecure when she was going to hang out with her friends because she thought more about the negative side of himself than the positive side. ZIA: "*I felt the negative side more than the positive side. I felt relieved when the results I sought online were not severe. However, I very often felt anxious, afraid, and paranoid about my suggestions, which made me feel inferior and difficult to get along with*."

Implications and strategies for handling adolescent self-diagnosis for related parties (parents, homeroom teachers, counselors, and schools)

1. Implications

The findings of this study imply that all related parties, be they parents, homeroom teachers, counselors, and schools need to be more aware and sensitive to the problems experienced by students in the adolescent phase, especially concerning mental health problems where nowadays teenagers are very vulnerable to being affected by environmental conditions (social media and friendships). Even though it looks trivial, if this problem is not paid attention to, it will make teenagers fall into acts of self-diagnosis which results in mental health problems that are more severe than before.

2. Handling Strategy

a. Parents

Parents need to be more open and sensitive to the condition of their teenage students and not easily judge or compare their conditions with other people, because this will only create new problems rather than solutions to students' mental states. Besides that, parents also need to encourage their teenage students to see experts (psychologists, psychiatrists) when they find out that their child's condition is having mental problems.

b. Homeroom teacher

For homeroom teachers who interact with students every day at school, homeroom teachers must be open by venting and willing to dig up information when they see students who have mental problems, as well as directing the student concerned to receive counseling services from the school counselor so as not to self-diagnose.

c. School counselor

Meanwhile, counseling teachers or counselors, in this case, can collaborate with homeroom teachers and parents by opening a complaint service or distributing student problem questionnaires to students and parents to map mental health problems and prevent the phenomenon of self-diagnosis from spreading among teenage students.

d. School

   From these findings, it is hoped that the school will begin to insert mental health prevention and treatment programs such as self-diagnosis through outreach and parenting activities for student guardians in stages once every semester.

Some people who are unfamiliar with mental health will certainly consider the act of self-diagnosis as a normal action and does not have any negative impact on teenage students. However, for those who are aware and understand, the phenomenon of self-diagnosis, especially in teenagers, is not trivial and needs to be addressed immediately because it poses a bad risk for teenage students, as research findings from (Annury et al., 2022; Maskanah, 2022; Normansyah, 2021) about the impact of self-diagnosis which includes receiving wrong/inappropriate treatment, exaggerating the conditions and feelings she is experiencing, and tending to ignore advice from professional health experts. Additionally, in the context of students in Indonesia, the practice of self-diagnosis has an impact on the emergence of feelings of depression, stress, and excessive anxiety. From the data analysis conducted by researchers, the results of this study complement and enrich previous research (Ahmed & Samuel, 2017; Normansyah, 2021; Nugroho et al., 2022; Pratama, 2021; Robertson et al., 2014; Sadida, 2021) where researchers confirm that the phenomenon of self-diagnosis can very well occur among early adolescents (junior high school students), especially in the Indonesian context. Even children who are in elementary school can also experience it due to easy access to information on the internet without assistance from teachers and parents. More than that, the researchers also found that the impact of self-diagnosis did not only make students feel inferior, overthinking, and stressed but also considered themselves to have Attention Deficit Hyperactivity Disorder (ADHD), as conveyed by one of the subjects of this study.

Finally, the researcher realized that there were several limitations in this study, including the number of subjects only 4, and all of them were female because some male students who met the research criteria did not wish to be research subjects. Therefore, the researchers hope that these findings can be followed up further by adding more research subjects and male gender so that these findings are more comprehensive in providing an overview and solution to the phenomenon of adolescent self-diagnosis.

Conclusions and Suggestions

The phenomenon of self-diagnosis can be experienced by elementary school children, early adolescents, and middle adolescents, not only by early adults (college students), apart from that the impact is also very bad for the development of teenage students because it causes students to feel anxious, overthinking, inferior to hanging out with their friends, and consider themselves suffering from Attention Deficit Hyperactivity Disorder (ADHD), especially in the current era of openness and easy access to information, adolescents are very vulnerable to trying to diagnose themselves. Therefore, self-diagnosis cannot be taken lightly and requires immediate treatment, especially from parents, homeroom teachers, counselors, and schools so that it does not get worse.

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