

SELF-DIAGNOSIS, SELF-STIGMA, PERCEIVED CREDIBILITY, AND ATTITUDES TOWARD SEEKING PROFESSIONAL PSYCHOLOGICAL HELP AMONG YOUNG ADULTS

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ABSTRACT

Social media has become a major source of mental health information for young adults, influencing how they understand psychological symptoms and seek help. This study aims to examine the relationship between self-diagnosis, self-stigma, perceived credibility of mental health information, and attitudes toward seeking professional mental health support among young adults. A quantitative cross-sectional design was used, and data were collected from 200 young adults aged 18–35 years through online questionnaires. Correlation and regression analyses were conducted to explore relationships among the variables and identify predictors of help-seeking attitudes. It is expected that higher exposure to psychological content on social media will increase self-diagnosis behavior, while self-stigma and perceived credibility will significantly influence attitudes toward seeking professional help. The findings contribute to improving mental health awareness, reducing stigma, and promoting positive help-seeking behaviors among young adults.

I. INTRODUCTION

The mental health concerns of young people are growing at a rapid rate because of their emotional, educational and social developmental needs. The young adult phase is considered to be a time of transition and vulnerability in human development due to the many transitions that occur during this stage in life. Young people have many responsibilities during this period such as school, work, family and social life, this is stressful and sometimes overwhelming (Arnett et al., 2000). Furthermore, financial issues and the uncertainty of their future looms over many young adults, increasing the stress and intensifying the strain on their mental health. Consequently, many young adults have symptoms of anxiety, depression, emotional fatigue, loss of interest and lack of motivation, which have an impact on their mental health and function in daily living (Auerbach et al., 2018). Self-diagnosis has become a prevalent phenomenon among young adults due to the easy availability of information on mental health on social media and the Internet. One of the most important psychological barriers that negatively impact mental health-related attitudes and behaviors of young adults is self-stigma. Self-stigma is when people internalize negative beliefs, stereotypes and misconceptions about mental health issues and make them their own. Self-stigma can cause a young person to think that they are weak, failed or simply unable to handle life when they are having psychological issues. Perceived credibility is considered as an essential concept to understand young adults' behavior toward information on the topic from different sources. This theory refers to information reception, meaning that the data is viewed as desirable, trustworthy, reliable, and valuable. At the same time, social media tends to acquire growing popularity for distributing mental health-related content created by various actors,

including psychologists, medical workers, influencers, and ordinary users. For this reason, the popularity, personal relevance, and intuitive recognition outweigh factual credibility in determining the information's credibility (Pretorius et al., 2022). An individual's attitude towards seeking professional psychological help is a combination of his or her cognitive, affective, and behavioral reactions to seeking mental health professionals. Such an attitude can be either positive or negative and largely determines people's intentions to use professional services when confronted with psychological problems. The purpose of this study is to examine the effects of self-diagnosis, self-stigma, trustworthiness, and attitude towards seeking professional mental health help in young adults. The goal is to help young adults get the health services they need and improve their mental wellbeing and mental health services. The objectives of the study are given below:

1. To examine the relationship between self-diagnosis, self-stigma, perceived credibility, and attitudes toward seeking mental health help among young adults.
2. To examine the predictive relationship between self-diagnosis, self-stigma, perceived credibility, and attitudes toward seeking mental health help among young adults.

II. METHOD

Participants

A correlational research design was used for the present study. A total of 200 young adults aged 18–25 years were recruited from universities using convenience sampling. Participants were young adults who actively used social media platforms, including TikTok, Instagram, and YouTube, and had exposure to online mental health-related content. The sample included both male and female participants and individuals from different educational, marital, occupational, family-system, and socioeconomic backgrounds. The final sample consisted of 200 participants ($N = 200$). Descriptive statistics for the study variables indicated mean scores of 14.97 ($SD = 5.21$) for attitudes toward seeking professional psychological help, 54.67 ($SD = 12.56$) for self-stigma, 16.10 ($SD = 3.37$) for perceived credibility, and 26.00 ($SD = 4.38$) for self-diagnosis.

Measures

A structured self-report questionnaire comprising a demographic information sheet and four standardized measures was administered to assess self-diagnosis, self-stigma, perceived credibility of online mental health information, and attitudes toward seeking professional psychological help. **[I]** Self-diagnosis was assessed using the Self-Diagnosis Scale (SDS). The scale consists of 10 items designed to assess the tendency of individuals to recognize or label their own psychological symptoms based on information obtained from non-professional sources, particularly the Internet and social media. Each item is rated on a 5-point Likert scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). Higher scores indicate a greater tendency toward self-diagnosis. In the present study, the SDS demonstrated good internal consistency, with a Cronbach's alpha of .91. Self-stigma was measured using the Self-Stigma Questionnaire (SSQ), which consists of 10 items assessing self-applied stigma associated with seeking mental health treatment. Items are rated on a 5-point Likert scale ranging from Strongly Disagree to Strongly Agree. Higher scores indicate higher levels of self-stigma. The SSQ demonstrated good reliability in the present study, with a Cronbach's alpha of .91. **[II]** Perceived credibility of online mental health information was assessed using the Perceived Credibility Scale (PCS). The scale consists of 6 items rated on a 5-point Likert scale ranging from Strongly Disagree to Strongly Agree. The items assess the extent to which participants perceive mental health information obtained from social media and online sources as credible, valid, and reliable. Higher scores indicate greater perceived credibility of online mental health information. The PCS demonstrated acceptable internal consistency in the present study, with a Cronbach's alpha of .89. **[III]** Attitudes toward seeking professional psychological help were assessed using the Attitudes Toward Seeking Professional Psychological Help Scale–Short Form (ATSPPH-SF), developed by Fischer and Farina (1995). The scale comprises 10 items rated on a 4-point Likert response format ranging from Disagree to Agree and assesses willingness to seek professional psychological help for emotional or psychological difficulties. Total scores range from 0 to 30, with higher scores indicating more positive attitudes toward seeking professional psychological help. The scale demonstrated excellent internal consistency in the present study, with a Cronbach's alpha of .94.

Procedure

Data were collected after obtaining the required approval from the concerned academic authorities. Participants were informed that their participation was voluntary, that they had the right to refuse participation or withdraw at any stage, and that their responses would remain confidential and would be used only for research purposes. After obtaining informed consent, participants were provided with a self-administered questionnaire in printed form comprising demographic information and standardized measures of self-diagnosis, self-stigma, perceived credibility, and attitudes toward seeking professional psychological help. The questionnaire required approximately 10–15 minutes to complete. After completion, the questionnaires were collected by the researcher and checked for completeness and consistency. Incomplete or inconsistent responses were excluded from the final dataset. The data were subsequently coded and entered into SPSS Version 26 for analysis. Descriptive statistics, Pearson product-moment correlation, independent-samples t-tests, one-way analysis of variance (ANOVA), and regression analysis were conducted to examine the study variables and their relationships.

III. RESULTS

The Statistical Package for the Social Sciences (SPSS) was used for data analysis. Before analysis, the data were checked for missing values, outliers, normality, and other statistical assumptions. Cronbach's alpha coefficients were calculated to assess the reliability of the instruments. Descriptive statistics were calculated for the study variables, followed by Pearson Product Moment Correlation, Multiple Linear Regression, and SEM.

Table I: Psychometric Properties of the Scales Used in the Study (N= 200)

Scales	<i>M</i>	<i>SD</i>	Range	α
Attitudes Toward Seeking Professional Psychological Help Scale	14.97	5.21	0-30	.94
self-stigma Questionnaire	54.67	12.56	14-98	.91
Perceived Credibility Scale	16.10	3.37	5-25	.89
Self-Diagnosis Scale	26.00	4.38	7-35	.91

Note. α = Alpha coefficient, *M*= Mean, *SD*= Standard Deviation

Table 1 presents the psychometric properties of the scales used to evaluate the variables of the study, as well as young adults' views on self-diagnosis, self-stigma perceived credibility and attitudes toward seeking help for mental health issues. First, the Attitudes Toward Seeking Professional Psychological Help Scale was used, which demonstrated high reliability with a Cronbach's coefficient alpha of .94. The mean score of this scale was 14.97, with a standard deviation (*SD*) of 4.99, with participants scoring mostly between 0 and 30. Second, the Self-Stigma Questionnaire also showed high Cronbach's coefficient alpha of .91. The mean score of this questionnaire was 54.67, with an *SD* of 16.21, with participants scoring between 14 and 98. Third, the Perceived Credibility Scale was used, which showed a Cronbach's coefficient alpha of .89, indicating good reliability. The mean score of this scale was 16.10, with an *SD* of 5.05, with participants scoring mostly between 5 and 25. Fourth, the Self-Diagnosis Scale was used, which showed high Cronbach's coefficient alpha of .91, indicating good reliability. The mean score of this scale was 26.00, with an *SD* of 9.45, with participants scoring between 7 and 35. All scales used for the study demonstrated good to high reliability, as indicated by Cronbach's alpha, which ranged from .89 to .94. The above results indicate that the scales used for the study have good validity for measuring the variables of the study. The Attitudes Toward Seeking Professional Psychological Help Scale, the Self-Stigma Questionnaire the Perceived Credibility Scale and the Self-Diagnosis Scale seemed fit for the study purposes.

Table II: Correlation among the Study Variables (N=200)

Variables	<i>M</i>	<i>SD</i>	1	2	3	4
1. Self-Diagnosis (SDS)	19.50	4.38	—			
2. Self-Stigma (SSQ)	54.67	12.56	.52**	—		
3. Perceived Credibility (PCS)	16.10	3.37	.79**	.77**	—	
4. Attitudes Toward Seeking Professional Psychological Help (ATSPPH)	14.97	5.21	-.31*	.44**	.50*	—

Note. *M*= Mean, *SD*= Standard Deviation

Table 2 presents the correlation analysis results between ATSPPH, SSQ, PCS, and SDS. The results demonstrated that mental health-seeking attitude (ATSPPH total) was negatively correlated with youth self-stigma (SSQ Total), $r = -.441$, $p < .01$, and positively correlated with perceived credibility (PCS total), $r = .504$, $p < .05$. Mental health-seeking attitude was also negatively correlated with self-diagnosis (SDS total), $r = -.316$, $p < .05$. Additionally, youth self-stigma was positively correlated with perceived credibility (PCS total) ($r = .771$, $p < .05$) and self-diagnosis (SDS total), $r = .528$, $p < .05$. Perceived credibility was positively related to self-diagnosis, $r = .792$, $p < .05$. All the hypotheses were supported by the results. Specifically, the analysis revealed that self-diagnosis and self-stigma were negatively correlated with mental health-seeking attitude, and perceived credibility was positively correlated with seeking professional help attitude among young adults.

Table III: Regression coefficient of Self-Diagnosis, Self-Stigma and Perceived Credibility Predicting Mental Health-Seeking Attitude

Predictors	B	SE	t	p	95% CI
(Constant)	4.96	1.912	2.58	0.11	[1.17, 8.74]
Self-Diagnosis (SDS)	0.40	0.06	7.12	< .001	[0.29, 0.51]
Self-Stigma (SSQ)	-0.19	0.02	-9.67	< .001	[-0.23, -0.15]
Perceived Credibility (PCS)	0.78	0.07	10.69	< .001	[0.64, 0.93]

Note. β = Unstandardized Coefficient, SE= Standard Error, t= t-value, P= Significance level, CI= Confidence Interval

Table 3 presents regression coefficients for self-stigma (SSQ), perceived credibility (PCS), and self-diagnosis (SDS) as predictors of mental health-seeking attitude (ATSPPH). The results of the analysis revealed that self-stigma negatively predicted mental health-seeking attitude ($B = -.190$, $SE = .02$, $t = -9.67$, $p < .001$, 95% CI [-.23, -.15]). The results further revealed that perceived credibility significantly predicted mental health-seeking attitude ($B = .780$, $SE = .07$, $t = 10.69$, $p < .001$, 95% CI [.64, .93]). In other words, higher levels of perceived credibility were related to more positive attitudes towards seeking professional psychological help. In addition, the analysis revealed that self-diagnosis significantly and negatively predicted mental health-seeking attitude ($B = .40$, $SE = .06$, $t = -7.12$, $p < .001$, 95% CI [-.51, -.29]). Specifically, the higher the levels of self-diagnosis were, the more negative attitudes towards seeking professional psychological help participants had. Thus, it was concluded that self-stigma and self-diagnosis negatively predicted mental health-seeking attitude, whereas perceived credibility positively predicted mental health-seeking attitudes among young adults.

IV. DISCUSSION

The present study examined the relationships among self-diagnosis, self-stigma, perceived credibility of online mental health information, and attitudes toward seeking professional psychological help among young adults. The findings showed significant relationships among the major study variables. Self-stigma was significantly and negatively associated with attitudes toward seeking professional psychological help, indicating that higher self-stigma was related to less positive help-seeking attitudes. In contrast, perceived credibility was significantly positively associated with help-seeking attitudes. Self-diagnosis was also significantly negatively associated with attitudes toward professional psychological help. Furthermore, self-stigma was positively related to both self-diagnosis and perceived credibility, while perceived credibility was positively associated with self-diagnosis. These findings suggest that psychological factors related to how young adults understand and evaluate mental health information may be more closely associated with their help-seeking attitudes than demographic characteristics.

The regression findings further showed that self-diagnosis, self-stigma, and perceived credibility significantly predicted attitudes toward seeking professional psychological help. Self-diagnosis and perceived credibility positively predicted help-seeking attitudes, whereas self-stigma negatively predicted them. These findings are broadly consistent with previous research indicating that stigma and beliefs about mental health services are associated with professional help-seeking attitudes (Chen et al., 2020; Clement et al., 2024). The findings also extend previous research by considering self-diagnosis and perceived credibility of online mental health information alongside self-stigma. The significant positive relationship between self-diagnosis and perceived credibility further highlights the relevance of online mental health information in young adults’ understanding of

psychological difficulties. In contrast, no significant differences were found in self-diagnosis, self-stigma, perceived credibility, or attitudes toward professional psychological help across marital status, education, occupation, or socioeconomic status. Thus, the findings suggest that, within the present sample, psychological variables were more strongly associated with help-seeking attitudes than the demographic factors examined. Overall, the results highlight the importance of addressing self-stigma, improving the quality and credibility of mental health information, and increasing awareness of appropriate professional psychological support among young adults. These findings may be particularly relevant in the Pakistani context, where cultural and social factors can influence attitudes toward mental health care.

V. CONCLUSION

This study aimed to determine the influence of the selected variables, ATTSPH, SSQ, PCS, and SDTS on the population. This study tried to establish the demographic differences in the variables using the socio-demographic inventory, including questions on marital status, educational status, occupation, and socioeconomic status. The results of the study indicate that there are no significant demographic differences in the attitudes and behaviors of the participants. This study concludes by stating that the psychological variables have more significant influence on the professional help-seeking behaviors of adults than the demographic variables. Furthermore, the study concludes that negative perceptions of mental illnesses lead to low PTSPPH among the studied populations. The results of the study found that high credibility of services leads to positive PTSPPH.

Limitations of the Study

This study has several limitations that should be noted when reviewing and evaluating the results of the study.

1. This study was based on psychological measurements with predefined scales with participants providing responses that reflect their thoughts, feelings, and attitudes towards mental illnesses. As such, the results of the study are subject to response bias, including social desirability bias.
2. The study adopted a cross-sectional study design, which limits the ability to establish causal relationships between the variables.
3. The study was conducted among a specific population, and as such, the generalizability of the results is limited.
4. The study focused on four key psychological variables and ignored other variables that may have an impact, including emotional stability, personality type, social background, and past experience with mental illness.
5. Stigma and cultural beliefs in the local context may affect the accuracy of the results.

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