

THE CORRELATION BETWEEN SELF-ESTEEM AND SELF-DIAGNOSIS BEHAVIOR REGARDING MENTAL HEALTH AMONG ADOLESCENTS AT SENIOR HIGH SCHOOL X IN JAKARTA

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ABSTRACT

Research objective: Currently, adolescents tend to self-diagnose due to the influence of their environment and a lack of knowledge about mental health. A key driver factor for adolescents to engage in self-diagnosis is that they are still in the stage of understanding self-concept. The purpose of this study was to determine the relationship between self-esteem and self-diagnosis behaviour regarding mental health in adolescents. **Method:** The research method used was descriptive correlation. The inclusion criteria for this study were students in grades XI and XII at SMA X Jakarta. Data collection was conducted from October to December 2024. The research instruments used were the Rosenberg Self-Esteem Scale, which had a Cronbach's alpha ($\alpha=0.86$), and the Self-Identification of Having Mental Illness (SELF-I), which had a Cronbach's alpha ($\alpha=0.90$). Univariate analysis was conducted by processing central tendency data for self-esteem and self-diagnosis, while bivariate analysis was performed using Kendall's tau-b correlation test. **Results:** The bivariate test showed a significant relationship between self-esteem and self-diagnosis behaviour (p-value 0.001). **Discussion:** The study's results indicate the importance of adolescents having high self-esteem to reduce the risk of self-diagnosis behavior. Adolescents need to have good self-esteem to maintain mental health in the future. **Conclusion:** Respondents are advised to increase their mental health awareness, be more discerning when filtering information from unofficial sources to avoid misinformation and seek professional help immediately. Schools need to implement mental health literacy programs that cover the dangers of self-diagnosis and how to access professional help.

Keywords: adolescent, mental health, self-diagnosis, self-esteem

BACKGROUND

Data from the 2023 Indonesian Health Survey (IHS) shows that the national prevalence of depression in Indonesia is 1.4%. The group with the highest prevalence is adolescents and young adults (15-24 years), at 2%. The survey also found that only 10.4% of adolescents and young adults with depression sought treatment or professional help (Ministry of Health of the Republic of Indonesia, 2023). Additionally, the prevalence of self-diagnosis behaviour in Indonesia in 2023 was 12.9% (n=402) (Ismail et al., 2023). Adolescent engages in self-diagnosis as an effort to understand themselves;

however, without professional guidance, this can lead to deteriorating mental health and become a stressor, potentially causing anxiety disorders (Ahuja & Fichadia, 2024; Dewak, 2023). The high rates of mental health disorders among adolescents and the prevalence of self-diagnosis behaviour indicate the importance of addressing this issue.

A study in Indonesia found that the tendency of adolescents to engage in self-diagnosis stems from a lack of knowledge about mental health. Individuals with low or incomplete knowledge about mental health

are more likely to self-diagnose (Ismail et al., 2023). Symptoms of psychological disorders are often matched with information found online, leading adolescents to believe they have similar issues (Affandi, 2024). During the adolescent development stage, those still in self-discovery and self-actualisation often exhibit intense curiosity about themselves. One component of self-concept is self-esteem, which is an individual's evaluation of their worth based on how much their behaviour aligns with their ideal self (Stuart, 2023).

Adolescents with high self-esteem tend to have positive attitudes toward themselves and others, feel confident and competent, and have an optimistic outlook. Social comparison is more likely to be triggered by positive information in the online environment, which can result in feelings of inadequacy and perceptions of others being superior. This comparison can further trigger negative emotional experiences, such as jealousy, depression, low self-esteem, frustration, and problematic behavior (Liu et al., 2024). This can be misleading into maladaptive behavior, causing self-diagnosis. It can be concluded that self-esteem is one of the crucial factors influencing adolescents' mental health and well-being.

Adolescents have awareness of mental health, including recognition, knowledge, and understanding (Dev et al., 2017), and they often seek information through the internet as a supplementary resource (Farnood et al., 2020). This awareness leads adolescents to choose to seek information through platforms like TikTok and Instagram without professional consultation, which can result in negative consequences, including misdiagnosis, excessive anxiety, and delayed access to appropriate medical help (Ismed, 2024). Unfortunately, this situation leads to misinterpretation and improper handling (Moulder, 2024).

Research on self-diagnosis recommends

professional support (Nelson, 2023). On the other hand, this behaviour has the potential for positive outcomes, such as increased awareness and mental health literacy (Sukmawati et al., 2023). However, low mental health literacy is also correlated with the phenomenon of self-diagnosis due to a lack of knowledge about understanding information and appropriate mental health management (Mardliyyah & Asyanti, 2022). The data above prompted researchers to investigate how self-esteem in adolescents relates to self-diagnosis of mental health.

In line with the Indonesian Health Survey data above, currently, adolescents in high school tend to have mental health problems. This study aims to determine the mental health conditions of adolescents in high school associated with self-diagnosis and self-esteem behaviors.

METHODS

This study used a quantitative approach, correlational research, and a cross-sectional design to analyze the relationship between self-esteem and self-diagnosis behaviour about mental health in adolescents at SMA (X) Jakarta. This school has a mental health education programme regularly every three months, and the students have clear mental health literacy.

The population in this study consisted of 11th—and 12th-grade students at SMA X West Jakarta, totaling 112 individuals. The sampling technique in this study was total sampling. The inclusion criteria were students in grades 11 and 12 at SMA X who were willing to participate as respondents. The data collection was conducted from October to December 2024.

This study used the Rosenberg Self-Esteem Scale questionnaire to measure self-concept variables (Rosenberg, 1979) and the Self-Identification of having mental illness (SELF-I) questionnaire (Stolzenburg et al.,

Table 1. Distribution and frequency based on characteristics of respondents (n: 112)

Characteristics	n	%
Age		
15 years old	14	12.5
16 years old	51	45.5
17 years old	42	37.5
18 years old	5	4.5
Total	112	100
Gender		
Male	59	52.7
Female	53	47.3
Total	112	100

Table 2. Distribution and frequency of self-esteem and self-diagnosis behaviour (n: 112)

Variables		n	%
Self Esteem	Low	77	68.8
	High	35	31.3
Self-Diagnosis Behaviour	No self-diagnosis	64	57.1
	Doing Self-Diagnosis	48	42.9
Total		112	100

Table 3. Relationship between Self-Esteem and Self-Diagnosis Behaviour (n: 112)

Variables	Self-Diagnosis Behaviour				Total	p value
	No self-diagnosis		Doing Self-Diagnosis			
	n	%	n	%	n	%
Self-esteem						
Low	33	42.9	44	57.1	77	100
High	31	88.6	4	11.4	35	100
Total	64	57.1%	48	41.9	112	100

2017) to measure self-diagnosis behavioural variables about mental health. Since SMA X West Jakarta is an international school and English is the primary language, the researcher used the original version of the questionnaire.

The Rosenberg Self-Esteem Scale questionnaire consists of 10 questions. All

questions are on a Likert scale; the negative (unfavorable) questions are at nos. 2, 5, 6, 8, and 9; positive (favorable) questions consist of no. 1, 3, 4, 7, and 10. The score of each item is Strongly Disagree (0), Disagree (1), Agree (2), or Strongly Agree (3). High self-esteem is indicated by a score ≥ 16 or above, and low

self-esteem is indicated by a score below 16. The greater score interprets high self-esteem. The validity of the Rosenberg Self-Esteem Scale questionnaire were tested on university students with an aged 17-25, resulted with $r=0.89$, while the reliability test resulted in a Cronbach's alpha value of $\alpha=0.86$ ($n: 232$) (Akhter & Ferdous, 2019).

The SELF-I questionnaire consists of five questions. All questions are on a Likert scale; the unfavorable questions are nos. 2, 4, and 5; the favorable questions are nos. 1 and 3. The score of each item is Strongly Disagree (0), Disagree (1), Agree (2), or Strongly Agree (3). If the score is ≥ 8 , it means they have a self-diagnosis behavior, and vice versa. The greater score interprets the self-diagnosis behavior. The validity test of SELF-I questionnaire in a vast population of Americans with an average age of 45 years resulted in $r=0.87$, while the reliability test resulted with a Cronbach's alpha value of $\alpha = 0.90$ ($n:474$) (Tse & Haslam, 2024).

Data were collected by distributing questionnaire sheets directly to respondents. Every respondent completed the questionnaire sheet, and there was no dropout. Data was analysed using the SPSS 27.

Univariate analysis measures the frequency of age and sex, while tendency central for self-esteem and self-diagnosis behaviour. Bivariate analysis is conducted to investigate the relationship between the study's independent and dependent variables, using Kendall's tau-b correlation with CI 95% (p Value 0,05). This research has received ethical approval from Sint Carolus STIK Institution, Ethics No. 173/KEPPKSTIKSC/XI/2024.

RESULTS

Respondent characteristics include age and gender, as shown in Table 1. The results indicate that most respondents were 16 (45.5%) years old and male (52.7%). Table 2 shows

that most respondents in this study have low self-esteem (68.8%), and 57.1% of adolescents did not engage in self-diagnosis behaviour. The results of statistical tests using Kendall's tau-b obtained a p -value of 0.001 (<0.05). This indicates a significant relationship between self-esteem and self-diagnosis behavior in adolescents at SMA (X) Jakarta (Table 3).

DISCUSSION

The study found that self-esteem significantly correlates with self-diagnosis behaviour. Previous research explained that adolescents who do self-diagnosis are motivated by feelings of fear of the mental health symptoms they experience and are embarrassed to consult a doctor, causing them to choose to do self-diagnosis (Nurismawan et al., 2024). Adolescents also engage in self-diagnosis because they interpret this method as a way to understand themselves and feel that they cannot trust anyone else (Underhill & Foulkes, 2024).

Through self-diagnosis, adolescents' self-confidence and self-perception can change because they feel they have taken the proper steps to care for themselves, thereby increasing their self-confidence (Normansyah et al., 2024). Researchers find similarities between the traits of adolescents who engage in self-diagnosis and those of people with low self-esteem including feeling scared, nervous, and worried about the current situation (which is being experienced), lacking confidence, and withdrawing or being shy in social situations (Stuart, 2023).

Identity formation is the main emphasis of Erikson's psychosocial development tasks during adolescence (ages 12–18), which makes adolescents vulnerable to peer and environmental influence. These stages of development, which focus on industrial tasks, identity, and role creation, are currently completed through peer relationships on social

media (Rizwan & Weigle, 2024). Adolescents' use of social media accounts to control feelings of self-worth and self-image is consistent with their adolescent identities, and it may be connected to their anxiety, sadness, and loneliness levels. According to studies, social media can affect self-esteem in both positive and negative ways. Social feedback, such as accepting or rejecting contacts with peers online, might help adolescents develop their self-worth and self-image (Charmaraman et al., 2024).

Due to identity dynamics, social media exposure, and cognitive development, adolescent age is strongly associated with mental health self-diagnosis behaviour. On social media platforms such as TikTok and Instagram, younger adolescents (10–19 years old) constantly consume mental health content, which frequently simplifies symptoms (Moulder, 2024; Ahuja & Fichadia, 2024). Viral content on social media platforms reinforces this, making teenagers associate mental illnesses with typical feelings. Teenagers' immature prefrontal brain makes them cognitively prone to spontaneous decision-making (Ravindranath et al., 2024), which makes it simple to accept diagnostic classifications without expert confirmation. This study did not provide data regarding recent activity on social media platforms such as TikTok and Instagram, which should be considered in future research.

This study found that most respondents have low self-esteem. According to the Rosenberg Self-Esteem scale structure, the question items represent several components, namely self-worth, self-doubt, inferiority, and self-perception. In the self-worth item, most respondents said they felt they had nothing to be proud of. In the question items that describe self-doubt and inferiority, most respondents answered that they felt they were not good at anything and felt like a failure. On the self-perception question item, most respondents felt

they were useless and wished they had more self-respect.

The factor of power refers to adolescents' ability to control themselves and self-confidence in facing challenges. Adolescents with low power factors are at higher risk of experiencing mental health problems. Significance includes feelings of being loved, valued, and respected by others. During adolescence, feelings of worthlessness and uselessness are greatly influenced by adolescents' social relationships (Cui et al., 2024). A lack of family support and internalization of moral values in education influences low self-confidence in adolescents. A lack of family and school support hinders adolescents in honing their problem-solving and decision-making skills (Dai et al., 2024).

Based on gender characteristics, women are significantly more likely to self-diagnose mental health than men. Teenage girls spend more time on smartphones, social media, texting, general computer use, and online. In comparison, adolescent boys spend more time playing games and using electronic devices in general, and psychological well-being is lower among teenage girls than boys (Twenge & Martin, 2020). Women are more likely to seek non-professional help and less likely to receive professional help than men (Azdi et al., 2025). Based on this data, it can be concluded that gender factors also have the potential to influence a person's self-diagnosis. This study did not provide an analysis of self-diagnosis according to sex, which can be considered for further research.

Adolescents diagnose themselves because they do not know enough about mental health concerns and seek information for knowledge from articles, social media, and other sources. They then instantly relate the symptoms mentioned in those sources to their experiences. Then, because they have encountered the symptoms listed in that information, they tend to assume that they have

mental health issues (Annury et al., 2022). The conditions experienced by adolescents require the role of parents in helping to fulfill the tasks of adolescent growth and development and require professional handling (Underhill & Foulkes, 2024; (Nelson, 2023). Appropriate handling will help adolescents overcome the mental health problems they face so that they do not experience delays in professional treatment (Dewak, 2023). Adolescents who self-diagnose and delay seeking professional help are likely to worsen their suffering (Underhill & Foulkes, 2024). This study highlights the need for appropriate strategies for adolescents, professional treatment, parental involvement, and school teacher participation.

Due to the small number of items in the SELF-I questionnaire, which measures self-diagnosis, the factors that lead respondents to self-diagnose have not been thoroughly examined in this study. Furthermore, the relationship between the coping strategies used by the respondents and the barriers to self-diagnosis among those with low self-esteem has not been investigated in this study. Further regression analysis about the factors that may involve forming self-diagnose behavior is recommended.

CONCLUSION

There is a significant relationship between self-esteem and self-diagnosis behavior in adolescents. Adolescents' awareness of mental health should be followed by positive behavior, namely seeking reliable sources, such as health workers, and minimizing self-diagnosis behavior. The findings of this study are crucial for promoting awareness regarding the necessity of seeking professional assistance for mental health symptoms, circumventing dependence on untrustworthy information sources, and recognizing that mental health maintenance serves as a preventive strategy.

Adolescents should acknowledge the concept of self-diagnosis and comprehend that only a professional may render a diagnosis.

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