Psych Analyst

2023 Edition

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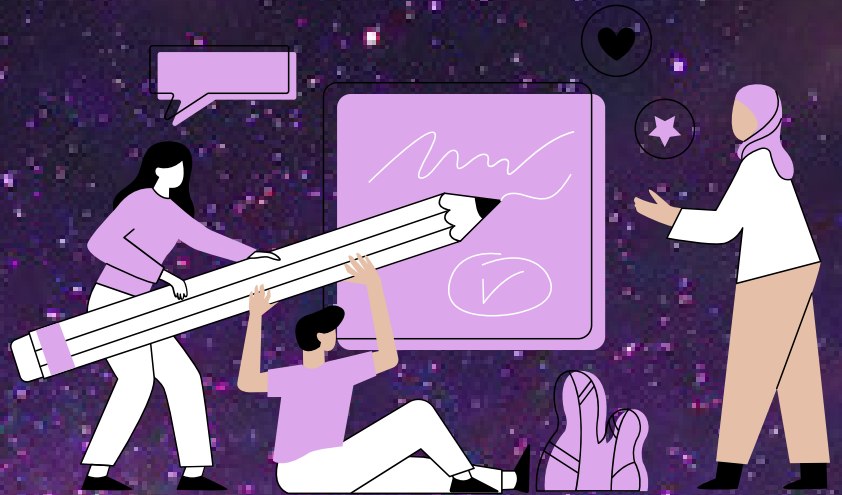
Faking Disorders for Internet Clouts: A Closer Look

It was the year of 2020. You got so bored of making sourdough, so you decided to lie on the couch and open Tik Tok to look for the "next big trend". What could it be? As an aspiring psychologist, you decided to look for mental disorder representations on TikTok to see how people cope with their conditions. You looked for the #mentaldisorder hashtags, not knowing what you'd gotten yourself into.

Upon the first reel, you saw a young girl claiming she had DID. The reel was about her showing her "system" with 50 different "alters", each with their own names and personalities. She showed herself switching with different "alters" on command, and each "alters" could vividly recall the memories of other "alters". Swiping for the next reel, you saw this woman claiming that she had Tourette Syndrome. While talking, she kept having these "tics", repeating "beans" or "potato". In one of her cooking videos, you could see her "motion tics" were extremely exaggerated and well-rehearsed, like throwing food on herself or against the wall. You decided that making sourdough wouldn't be too bad of an idea after all.

With the rising popularity of TikTok, a social media app where people share short videos ranging from 10-30 seconds, educational content about mental health has started to gain attraction (Giedinghagen, 2022).

However, while this platform can be helpful with providing certain entertainments and a fast way to access knowledge, numerous associated problems have risen; one of which is the trend of faking mental or cognitive disorders on Tik Tok.

The trend started during the pandemic in 2020, notably with people faking Tourette Syndrome and Dissociative Identity Disorder (or DID) (Giedinghagen, 2022). While these people have been called out by famous content creators to combat misinformation, the simple answer for this behavior is simply "for Internet clouts" (penguinz0, 2022). This article will focus on explaining why this behavior happens under a psychological perspective, what are the impacts of these behaviors are, and if there is a possible treatment.

Faking disorders is not a new behavior, as it's been observed throughout the history under the name of Factitious Disorder (FD), or commonly known as Munchausen Syndrome (Asher, 1951; Pulman & Taylor, 2012.). People with FD or Munchausen Syndrome spend a lot of time and resources to be perceived as ill, going as far as causing severe injuries on themselves to gain attention (Lawlor & Kirakowski, 2017). These conditions are not thoroughly studied, though the deceivers are commonly thought to have underlying issues, such as having past trauma or wanting to fulfill dependency needs due to neglect of close ones (Lawlor & Kirakowski, 2017).
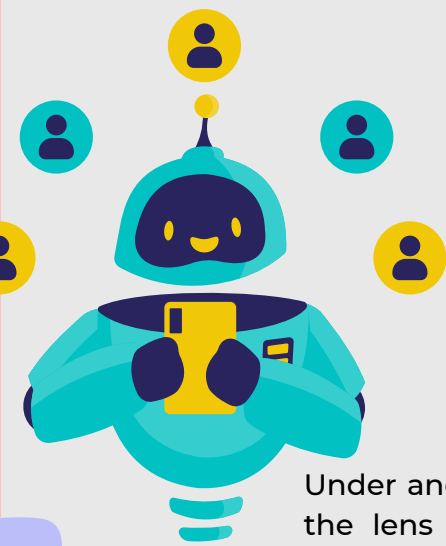
With the rising accessibility and how easy it is to stay anonymous on the Internet, people who possess the tendency to seek attention and compassion from other people can fabricate a persona to gain online interactions, without facing any direct consequences (Pulman & Taylor, 2012. Lawlor & Kirakowski, 2017). These behaviours are categorized as Munchausen by Internet (MbI), which in this case, is suitable to describe people who fake disorders on TikTok. Due to the lack of understanding and research, the DSM-V hasn't had a category for MbI just yet (Pulman & Taylor, 2012).

Under another perspective, faking disorders could be understood through the lens of hysteria. During the lockdown period of Covid 19, various psychologists observed an increased number of patients who claimed that they had DID or Tourette Syndrome, especially in the U.S. or in European countries (Giedinghagen, 2022).

These patients were typically adolescent females, who either didn't necessarily have , or exaggerated DID or Tourette symptoms. Social stress and isolation during the Covid lockdown could act like a stressor, giving identity confusion to these teenagers (especially female adolescents whowhere they are thought to be more emotional than their male counterparts) (Giedinghagen, 2022; Haltigan et al., 2023).

These adolescents would use DID models they see on TikTok as a way to explain and solve their internal conflicts, without truly understanding the conflicts they have (Giedinghagen, 2022). This model could explain the surge in popularity of DID and Tourette cases during the lockdown period, but not before.

Under any circumstances, these behaviours should be looked into closely, as they it could create a lot of negative impacts. First of all, based on the research, faking disorders is more like a symptom of having underlying issues, therefore, the mental health of people who fake their disorders should be carefully assessed.

Next, faking disorders could lead to a lot of relationship issues, since it can affect other people surrounding the deceiver (manipulation in the relationship), but also the deceivers themselves (lose trust by other people). Last but not least, these deceivers could face heavy consequences caused by other people on the Internet. As mentioned above, these behaviours get called out by a lot of popular influencers, and there is even a subreddit "r/fakedisordercringe" that records all TikTok accounts that fake disorders. Malicious people could use this information to cyber bully or dox the deceivers, leaving severe impacts.

By Ethan Pham

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"Ouch, That's Gotta' Hurt"

Neuropsychological Repercussions of High-Impact Contact Sport

The avid football supporter hears statements like "Ouch, that's gotta hurt" and "They'll be feeling that one tomorrow" throughout the madness of that is weekends in winter. But maybe we should stop and think for a moment about how much those hard bumps and rough tackles hurt both amateur and professional players. Whilst most people understand concussions are inherently bad, the dangers of non-concussive head injuries remain unknown to many. Even the National Rugby League (NRL) guidelines for head injuries neglect the effects of these non-concussive head injuries (Management of Concussion). This negligent stance on sub-concussive injuries may lead to players with head injuries being cleared to continue playing and training, just to receive more and more head injuries. This article aims to examine the long-term impacts of these sub-concussive injuries (and concussive injuries), and as such the flaw in the treatment of head injuries by sporting bodies.

So, what is a Concussion?

A concussion, also sometimes referred to as a mild traumatic brain injury (mTBI), is a physiological process affecting the brain after some form of biomechanical force (McCrory et al., 2013). Concussions are often associated with headaches, irritability, sleep disturbance, cognitive impairments, and amnesia (Tsushima et al., 2016). Often these symptoms are accompanied by some form of neural damage (Kraus et al., 2017). Essentially, this means that when someone gets concussed, it's not just a simple headache and some cognitive impairments; instead, actual physical damage occurs in the brain.

Long-Term Effects of Concussions

One study found that throughout the 2018 and 2019 seasons, over 55% of rugby league players, in a sample of 151 players ranging from first-grade to amateur players, had been diagnosed with a concussion (Longworth et al., 2021). The physiological impact of a single concussion appears to cause neuropsychological impairments, specifically to memory and global functioning, for around seven to ten days after the injury occurred (Belanger & Vanderploeg, 2005). However, brain imaging research seems to indicate that multiple concussions can have a cumulative effect and disrupt injury repair mechanisms (Lipton et al., 2013). Essentially, this means people who play contact sports and experience concussions on a regular basis could have damage that "may never repair itself, something that most cases of mTBI do (Povlishock & Katz, 2005). Such permanent damage caused by multiple concussions appears to be the lead cause of persistent post-concussive syndrome (PPCS; Bigler, 2008).

PPCS is generally considered to occur when symptoms of a concussion last longer than three months. Symptoms of PPCS include poor memory, sleep disturbance, fatigue, poor concentration, irritability, and feeling depressed (Lundin et al., 2006). Thus, whilst neuropsychological impairments caused by a single concussion appear to resolve within about a week, long-term effects, whether cognitive or affective, may occur after multiple concussions.

Some controversy exists about the true nature of single concussions and whether long-term neuropsychological deficits can also be found because of a single concussion. One study found that deficits in executive functions and attention could still be seen ten days post-injury (Kunker et al., 2020). One explanation of these contradictory findings relates to other non-concussive head injuries athletes may experience throughout their sporting careers (Kunker et al., 2020). As such, it is essential to understand the nature of other injuries which athletes may undergo and whether deficits in executive functions and attention can be caused by head injuries that do not elicit the symptoms of concussion.

Can these problems happen without a concussion?

Yes - these are called 'subconcussive injuries', and they too can cause neuropsychological impairments. One study found that players of high-impact sports (such as American Football) who had experienced no apparent concussions still had lower neuropsychological scores in verbal and visual memory than players of low-impact sports (such as basketball) (Tsushima et al., 2016). Moreover, a functional magnetic resonance imaging (fMRI) study found that four of the 11 high school football players in the study had abnormalities in their frontal lobe (an area of the brain associated with working memory and executive functions) whilst performing a working memory task (Talavage et al., 2014).

The same four players also demonstrated a cognitive deficit in working memory. The researchers theorised that repeated sub-concussive impacts had caused damage to the neural tissue but had not caused the immediate symptoms which a clinician would use to diagnose the player. These cases demonstrated the danger of sub-concussive injuries. When players display no immediate symptoms of an mTBI, they continue to play and experience repeated head collisions, which in turn may cause long-term neuropsychological repercussions (Talavage et al., 2014).

How are these Problems assessed?

The NRL, along with international sporting bodies for ice hockey, equestrian, soccer, rugby union and even the Olympics, use the SCAT5 (Echemendia et al., 2017a), as well as elements from the CRT5 (Echemendia et al., 2017b) to assess head injuries at all levels of the game. The NRL calls this mix of the SCAT5 and CRT5 the head injury assessment (HIA). It focuses primarily on cognitive symptoms, such as working and semantic memory, following a concussion. The NRL policy around head injuries requires players who experience a head injury to take the HIA, however when cleared of concussion players are allowed to return to play (National Rugby League, 2021).
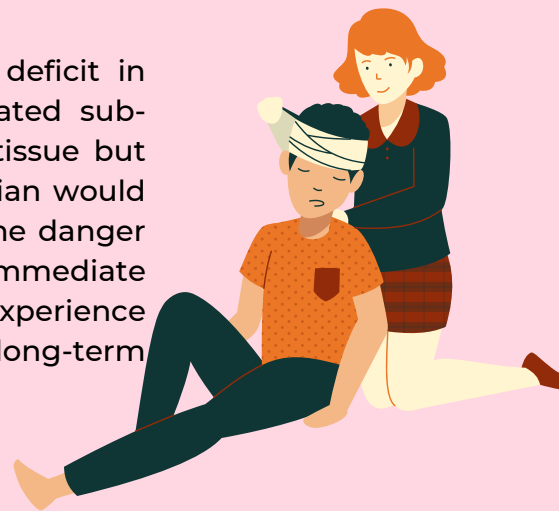
This creates an issue with seemingly elusive and un-assessable subconcussive injuries. If a player is cleared from concussion and allowed to play, then the player may very well experience more head injuries. Consistent head injuries, as mentioned above, lead to serious long-term cognitive deficits (Lipton et al., 2013; Talavage et al., 2014). This would appear to suggest the current NRL head injury guidelines may not effectively tackle the long-term effects of head injuries.

In summary, concussions caused by contact sports have been suggested to have short and long-term neuropsychological repercussions. More concerning than this is the evidence suggesting the prevalence of subconcussive injuries in young athletes. These subconcussive injuries have been suggested to cause neural tissue damage to frontal regions associated with executive functions and cognitive impairments to working memory (Talavage et al., 2014). Now more informed of these subconcussive injuries and their repercussions you, our readers, can make more informed choices about playing sport, and perhaps even bring a more cautious mentality to head injuries when playing, coaching, or spectating your favourite code of football.

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Evidence-based education
The Persistent Myth of learning styles

Arguably, educators are responsible for the lives of their students. As such, using evidence-based approaches to learning should be the cornerstone of teaching. However, popularity is often mistaken for evidence, a common theme of the bandwagon fallacy (Law, 2006) A popular approach to education through four core learning styles including visual, auditory, reading and writing, and kinesthetics (Gardner, 1983). For example: visual learners will learn best by sight, seeing what they are learning, through mediums such as graphical summaries and images; auditory learners learn by hearing, listening and presumably, 'store information' on the basis of how it sounds (Westby, 2019).

Learning strategies should involve accurate research and inhibit harm to students' educational development (Nancekivell et al., 2021). Namely, the widespread and agreed upon 'learning styles' opposes these values. Learning styles first emerged from Harold Gardner's (1983) idea of multiple intelligences, or the belief that individuals are "hard-wired" to learn in a specific way.

This belief has evolved into positing that all students fall under one of four categories of learning styles (visual, auditory, reading/writing, kinaesthetic), and that students learn best under their own 'learning style'. Educators often apply these ideas, manipulate classroom settings and 'match student's learning styles' as they believe this will lead to more effective learning. Indeed, information such as; linguistic, interpersonal, motor intelligences are computed in differing brain areas that which require differing intelligences (Westby, 2019). However, differing intelligences does not equate to learning styles. Gardner (1983) the founder of 7 learning styles, suggested no clear evidence that learning styles produce better outcomes. Unfortunately, misinformation is widespread. This article aims to debunk the persistent myth of learning styles and separate fact from fiction.

"Learning styles" are the most accepted "neuromyth" in the education industry (Westby, 2019). In fact, if you Google "learning styles" you will find many pages of discussions, articles, and websites on how to assess, teach and practise learning styles in classrooms and at home (Westby, 2019). However, Macdonald et al. (2017) found learning styles theory was endorsed by 93% of the public and 76% of educators. Contrastingly, numerous studies have reported no evidence that learning styles actually exist as effective learning strategies (Riener & Willingham, 2010; Dekker et al., 2012; Dunn et al., 2013; Husmann and O'Loughlin, 2019).

Recent evidence implies learning style is the preferential way in which a student learns information, not idiosyncrasies or individual differences within neural processing (Newton and Salvi 2020). However, the majority of memories are stored in terms of meaning, independent of any medium such as seeing a concept through graphs, hearing your teacher explain the concept or physically interacting with the concept.

This brings into question whether education should be developed on the basis of a preferential style of learning. We cannot ignore that preferences are not fixed and often change (Newton, 2015). Indeed, damage associated with labelling students within a dominant learning style such as: 'Reading/writing learners', may be reluctant to adopt a subject dominated by an auditory learning medium such as music (Newton, 2015). More importantly, using ineffective learning styles undervalues the use of effective, evidenced models (Newton, 2015).

But why does this myth continue to exist so prominently in education?

Riener and Willingham (2010) report confirmation bias is the pivotal reason why the learning style myth continues to exist. Confirmation bias is the tendency to interpret new evidence to confirm ones already established beliefs and theories. For example: if an educator notices a pattern of preferential learning in students and Gardner (1983) evidence supports their belief of multiple intelligences, the educator will adopt this belief whilst ignoring future evidence that contradicts current ideology.

Are there better alternatives?

Genuine differences amongst students may impact learning abilities. For example, Westby (2019) states that a student who is over six feet may have less difficulty in learning motor skills. However, these differences should not be equated to differences in learning styles. Essentially, when you learn something, your mind processes the information, not the experience or medium. Although some evidence suggests mixed media may promote more effective learning (Brame, 2016), Westby (2019) reports that the source of this effectiveness is due to greater engagement, not different learning styles.

By understanding that memory is stored through meaning, we recognise the flaws within learning styles and begin to seek alternative and more effective strategies for teaching. . One such strategy is Vygotsky's (1978) Zone of Proximal Development (ZPD). ZPD is the range between what a learner can do without assistance and what they can do with assistance. ZPD offers children just enough assistance, using skilled peers as teachers, encouraging private speech, real- world examples and using vertical groupings such as composite classes. Harland (2003) found integrating vygotsky's ZPD into learning environments promoted problem- solving in groups and greater creativity and overall knowledge of said subject. As such, ZPD is a superior and more empirically supported alternative to learning styles.

It is also important to understand the concept of metacognition within learning techniques. Metacognition is a person's knowledge of their own cognition which develops between the ages of 12-15 and contributes to working memory, self-regulation and revising strategies (Piza et al., 2019).

Evidence-based teaching (EBT) is also a much more advantageous strategy in classrooms (Dunn et al., 2013). This is because EBT uses empirically validated pedagogical mechanisms to improve student learning such as: retrieval practice: a strategy that 'retrieves' current information and enhances learning (Karpicke and Blunt 2011) and the read-recite-review technique by McDaniel et al. (2009). During learning, research has reported that many short study sessions causes greater memory retention when compared to long periods of consolidated study (Dunn et al., 2013). The culmination of this research clearly demonstrates the superior benefits of EBT to learning styles

Additionally, interteaching is a new empirical, multi-component method of teaching which has been influenced by B.F Skinner's behavioural theory. Interteaching has been coined as 'the alternative to traditional teaching' (Saville et al., 2011). Interteaching develops an environment thatwhich prioritises peer-to-peer interaction, instructor feedback and guided instruction. Classes include educators providing feedback, going from group-to-group and clarifying questions raised during interteach sessions (Dunn et al., 2013). As such, interteaching is a clearly superior alternative to learning styles.

References to learning styles are still widely accepted in classrooms, school curriculums and mainstream media despite the lack of empirical evidence for their efficacy. The lack of research in educational criteria as well as the ability for pseudoscientific claims to penetrate mainstream media, impairs not only the educational future of learners but is a statement about how much the education field values empirical knowledge (Sundaravadhanan et al., 2017). I encourage you to call a family member, tell a neighbour or text a friend, to expose these pseudoscientific claims and improve classroom teaching strategies in the future.

Written By: Chantal Milani   Edited by: Ian Pgam

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Maintaining the Balance

U niversity is a period of change and growth, academically, socially, or emotionally, which can prove to be stressful at times. As such, it is important to keep ourselves healthy as we complete our degrees. I have provided some tips below which have helped me throughout my studies at Macquarie University.

1 PLANNING

One great way to manage stress and commitments is by planning out the week. As students, we have to manage our academic priorities alongside non-academic ones like jobs, internships, volunteering, personal hobbies, and hanging out with friends/family. It can seem overwhelming to plan and have a balanced schedule, but it is 's easy and convenient once you start! Depending on your preference, you can opt for an online planner like Google Calendar or a physical planner/notebook.

2 STAYING ACTIVE

Exercising and staying active is another way to stay healthy and fit while we are completing our studies. As students, we have access to great facilities at the Macquarie University Sport and Aquatic Centre. Check out their website or pop in at 10 Gymnasium Rd for their different programs and membership plans.

3 SLEEP

Ensuring we get enough sleep can boost our academic performance, as well as our social, emotional, and physical wellbeing by letting our body rest and be refreshed.

4 MUSIC

Curate music playlists for yourself or others. I find that a great way to de-stress and disconnect from academic pressures is by curating music playlists according to my mood. I often get inspired by the weather, my friends, and books. So find some time for yourself and create playlists that capture the moments perfectly. Let your creativity thrive!

The Role of Genetics in Mental Health

Existing research on genetics and mental health reveals that some mental disorders tend to run throughout families, indicating that hey may be hereditary (Uher, 2009).

This article will discuss the role of genetics in mental health, specifically how genetics influence mental disorders such as bipolar disorder as well as the importance of genetic testing in understanding and diagnosing mental health issues.

Research indicates that a person's genetics play a significant role in their mental health. Heritable and genetic factors have been found to increase the susceptibility and vulnerability of an individual to harmful mental illnesses, including bipolar disorder, depression, schizophrenia, and anxiety disorders (Uher, 2009). However, researchers confirm that mental disorders may also arise from environmental factors, like stress, traumatic events, or substance abuse (Khoury et al., 2010).

Genetics can have an influence on the onset and development of various mental disorders. One such disorder that has a large genetic component is bipolar disorder. Studies indicate that bipolar disorder has a prevalence rate of approximately 1-2% amongst the adult population (Fears & Reus, 2015). The disorder can be characterised with extreme shifts in mood and behaviour that can affect a person's daily life activities. Bipolar disorder is also associated with high morbidity rates (Fears & Reus, 2015).

Researchers have found common genetic traits amongst relatives which can increase the risk and appearance of bipolar disorder amongst others like schizophrenia and depression (Lichtenstein et al., 2009). While it can be challenging to diagnose; genetic testing may significantly improve diagnosis and treatment outcomes.

Genetic testing can also provide invaluable insights into the diagnosis and treatment of mental illness. Genetic testing is increasingly becoming more popular to help identify the genes responsible for mental illness. While symptoms and onset of mental disorders may be clearer in adults or adolescents, there is a push for predictive testing in minors, so disorders can be managed and treated from an earlier age (Manzini & Vears, 2017). Genetic testing helps identify genetic mutations and other inherited factors contributing to specific disorders, which can lead to a personalised and more effective treatment plan for patients (Demkow & Wolańczyk, 2017).

In conclusion, genetics play an essential role in mental health. Although genetics may not be solely responsible for mental disorders, it can significantly predispose a person to certain disorders (Lichtenstein et al., 2009). By identifying the genetic markers of various mental disorders, genetics can aid in the early identification and treatment of those at risk for developing mental illness. Genetic testing can provide significant insights and personalised treatment to those suffering from mental illness (Demkow & Wolańczyk, 2017). Further research in genetics and mental health will play a vital role in improving our understanding and treatment of mental illness.

Written By: Dipasha Raj

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Psychological and Social Challenges Faced by
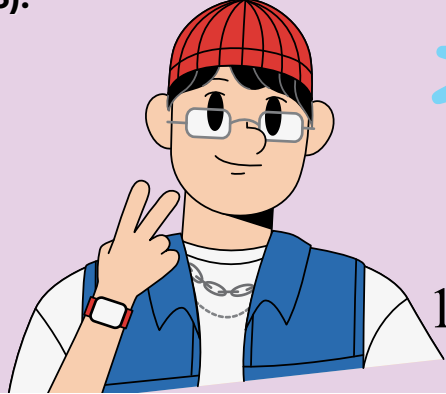# INTERNATIONAL STUDENTS

by Paul Nazarian

An international student defined by the OECD (Organization for Economic Co-Operation and Development) is a student that has left their home country in pursuit of education. There were 5.6 million international students studying outside their country in 2018 (Australian Government, 2020). Individuals who move to a different country to study are exposed to a new environment and face many challenges (Razgulin et al., 2023). Acculturation can be defined as the cultural and psychological change that might result from the clashing of two or more different cultural groups and their individuals; these clashes usually result in acculturation stressors (Smith & Khawaja, 2011). These stressors can be classified into social and psychological (Smith & Khawaja, 2011). In this article, we will be discussing in detail the social and psychological challenges international students face.

There are several social challenges faced by international students. The first social challenge that international students face is the language barrier. Students that are not proficient in the host country's language find difficulties in both social and educational interactions. Socially, students find difficulty carrying conversations, while in an educational environment, students find difficulty understanding lectures and asking questions (Beregovaya & Kudashov, 2019). Yeh and Inose (2003) showed that English language proficiency was a strong predictor of acculturation stress. English language proficiency was inversely proportional to acculturation stress. They believe that individuals that are fluent in the host country's language will have smoother social interactions that lead to greater feelings of adjustment. The second social challenge faced by international students is the ability to adapt to the host nation's cultural norms. International students usually come from various backgrounds and cultures. This results in cultural shock, which negatively impacts students' ability to adapt to the host country's culture (Presbitero, 2016). Surprisingly, a study conducted by Sherry et al. (2009) showed that 64.9% of the respondents had no problems in acclimating to the new culture while 17.6% had few problems and 16.7% had difficulties.
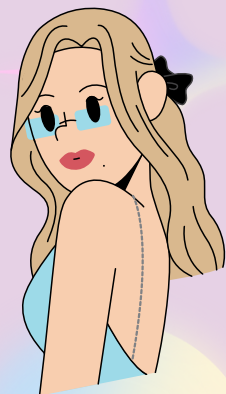
It is worth noting that individuals that responded with having few difficulties in adjusting tended to emphasise that the first stages of cultural acclimatisation were the most difficult. The third social challenge faced by international students is practical. International students have to bear the burden of paying tuition fees; as well as cost of living (Poyrazli & Grahame, 2007). With recent events, inflation rates have soared to 7% increasing the cost of living substantially (Australian Bureau of Statistics, 2023). Having restricted access to job opportunities makes life more difficult for international students (Calder et al., 2016). In addition to finances, one of the main concerns was finding affordable and adequate housing. 40% of international students reported having difficulties in finding accommodation and 13% reported finding accommodation far from campus which was causing them problems (Calder et al., 2016).

Some of the psychological challenges faced by international students are as follows. The first psychological problem faced by international students is loneliness. Moving to new countries results in the loss of the social support network (family and friends) for individuals. Since humans are social creatures, not having anyone to talk to leads to a feeling of loneliness. Another type of loneliness students face is cultural loneliness. This directly relates to the different culture they are surrounded by as well as the linguistic setting. However it is worth noting that some individuals did not feel this way; this was because of the attitude they have adopted, they were eager to explore the new country, or they were travellers and used to the situation they were put in (Sawir et al., 2007). Another psychological challenge faced by international students is depression. Depression can be defined as the loss of pleasure or interest in activities over a long period of time (World Health Organization, 2023). International students that are faced with many stressors and do not have anyone to fall back on, enter into a state of depression (Prasath et al., 2022). But this does not apply to all individuals. Entering into depression might vary between individuals and the situations that they face (Meghani & Harvey, 2016).

Anxiety is another challenge faced by international students. There are several types of anxiety they face. They might face learner's anxiety, exam anxiety and presentation anxiety (this could differ between majors) (Khoshlessan & Das, 2017). A study conducted by Sümer et al. (2008) found that students with lower levels of social support had higher anxiety levels and age was a factor that impacts anxiety. Anxiety was highest among older students. This was explained by the fact that older students could be more traditional while new students are more flexible and open minded.

In conclusion, international students face considerable social and psychological challenges as they try to acquire a good education (Smith & Khawaja, 2011). It is important that the academic institutions and the society in general create a friendly and accepting environment that will help ease the difficulties that international students face. By doing so, international students will be empowered to excel academically, adapt to the new environment with resilience and forge new connections that might last them for a lifetime.

Acculturation Stressors Which Consist of Social and Psychological Aspects

Social challenges:
- Language barriers
- Ability to adapt to host country
- Discrimination
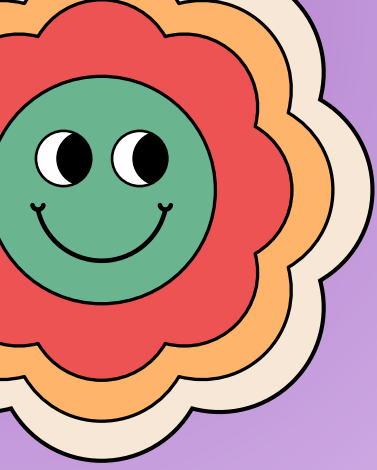- Practical stressors (cost of living, tuition fees, restricted working rules)

Psychological challenges
- Individual and cultural lonliness
- Alienantion
- Isolation
- Anxiety

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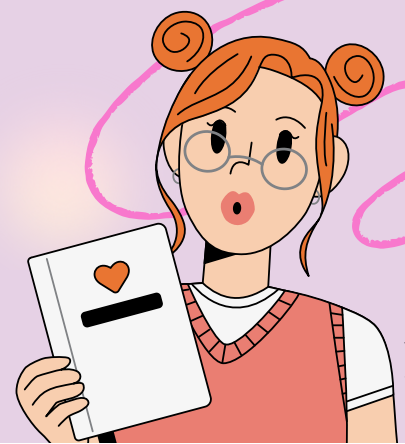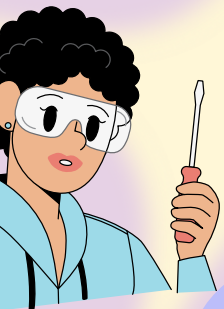
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