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ASSESSMENT OF IMPOSTER SYNDROME AMONG ALIGARH COLLEGE OF NURSING STUDENTS, A DESCRIPTIVE CROSS-SECTIONAL STUDY

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parriaarzoo17@gmail.com**Abstract****ABSTRACT**

Background: Imposter Syndrome is a psychological phenomenon that is typified by a constant feeling of doubt, intellectual fraudulence, and fear of being a fraud even if it is proven that her abilities and achievements exist. It is common among high-achievers and when it comes to challenging academic or professional areas. These symptoms may also be chronic anxiety, perfectionism, overworking and failure to internalize success. The pressure on students in the high stakes nursing education is immense in terms of the size of clinical knowledge and practical skills required.

Objective is to determine the degree of Imposter Syndrome among students of the Aligarh College of nursing.

Methodology: The study was descriptive, cross-sectional. It used convenient sampling to collect sample. The statistical analysis of the results was performed with the SPSS version 26.

Results: The findings indicated that only 9.2% participants showed few IS. The remaining sample showed Moderate (41.8%), Frequent (37.9%), and Intense (11.1%) feelings of Imposter Syndrome.

Conclusion: Imposter Syndrome is a systemic problem in the field of nursing education, and not merely a personal issue. This phenomenon should be dealt with through a multi-layered institutional response that comprises of psychological support, educating the faculty, curriculum-based awareness programs, and a more general cultural shift in nursing education towards recognizing the professional value and intellectual legitimacy of nursing students.

INTRODUCTION

The journey to nursing is an ever shifting and challenging one. It is characterized by extremely high academic workload and rigorous practical clinical experiences ([Mutenga et al., 2023](#)). Nursing students are forced to study a vast amount

of scientific knowledge. Simultaneously, they also have to work on the skills and caring attitude required to take care of the patients ([Hamadeh Kerbage et al., 2021](#)). Being under pressure to perform well in the classroom and in the hospital can be overwhelming to many young students ([Aller & Almrwani, 2024](#)). This is a very significant yet frequently neglected aspect of what most students of nursing experience and is called the Imposter Syndrome ([El-Ashry et al., 2024](#)).

Imposter Syndrome is not a health condition, but a highly real psychological condition. It was named by psychologists Clance and Imes in the year 1978. The experience haunts people subjects with unending self-doubt, a sense that they are fraudsters, and some deep-seated fear that they will be discovered ([Jacobs and Sasser, 2021](#)). The essence of the issue is that they are not able to take credit of their own success. Even if they perform well in a test, they will put it down to mere luck or the test is easy and therefore they will never experience the feeling of achievement that they get when they perform well in a test. Ultimately, this self-doubt process may result in poor grades, dropping subjects, and even take more time to complete their degree. This does not only hurt the student but also means that the world will miss a good caring nurse just because she never dreamt of herself ([Qasem et al., 2025](#)).

The nursing education structure is arranged in such a way that it may inadvertently aggravate these sentiments. The surroundings are usually very competitive. Regardless of whether it is formally or informally, students constantly compare their grades and clinical performance with those of their counterparts ([Khalil et al., 2024](#)). The transition to the clinical environment out of the classroom is one of

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the most significant shocks. During the classroom, there is orderly and abstract knowledge. In an actual hospital, however, the process of patient care is uncertain and complicated. This change may be shocking and hectic ([Carless-Kane and Nowell, 2023](#)).

In such a case, a simple slip-up of a beginner is likely to be the final confirmation of the student that he is incompetent. This strengthens the vicious circle of the Imposter Syndrome ([Pienaar et al., 2022](#)).

In case the Imposter Syndrome remains unrecognized and unaddressed, it may have some severe and far-reaching consequences. In the case of the individual student, it is strongly associated with the increased anxiety, burnout, and emotional fatigue ([El-Ashry et al., 2024](#)).

In the academic sense, the resulting self-doubt can cause certain behaviors that in fact have a negative effect on their performance, such as excessive over-studying to the point of fatigue or shirking ([Alrefi et al., 2024](#)). Burnout and compassion fatigue are the most threatening effects ([Alrefi et al., 2024](#)).

Although the study of Imposter Syndrome has increased in such areas as medicine, the prevalence and effects of this phenomenon in the undergraduate nursing population is critical, as it is the key time when professional identity is developed, and the patterns of coping are formed ([Carless-Kane and Nowell, 2023](#)). It is upon this basis

period that we are unable to establish effective systems of support. This is a descriptive cross-sectional research study, therefore, intends to measure systematically the prevalence of the Imposter Syndrome, and describes in details the experience of undergraduate nursing students studying at the Aligarh College of Nursing and Allied Health Sciences Lahore, Punjab, Pakistan.

1.1 PROBLEM STATEMENT

Despite the critical role of nursing students as the future healthcare workforce, there is a growing concern that a significant proportion may be experiencing Imposter Syndrome. It can lead to

increased symptoms of depression, anxiety, and stress. These negative outcomes can, in turn, compromise students' academic performance, clinical competence, and overall quality of life. Moreover, the demands of nursing education, clinical environment and the pressure to provide high-quality patient care exacerbate the feelings of inadequacy and self-doubt among nursing students. This problem remains largely unaddressed and hidden within academic institutions, leading to a critical gap in understanding its true prevalence and impact. The demanding nature of nursing education, characterized by rigorous academic workloads, high-stakes clinical evaluations, and the pressure to assume life-or-death responsibilities, creates an environment where these feelings can thrive.

SIGNIFICANCE OF THE STUDY

Imposter syndrome is a significant issue among undergraduate nursing students, affecting their academic performance and overall well-being. Many students feel like impostors, doubting their abilities and fearing being exposed as not truly competent. This feeling can lead to increased stress, anxiety, and decreased confidence, which can negatively impact their learning experience. Imposter syndrome can also affect students' motivation and engagement in clinical settings, potentially compromising patient care. Furthermore, it may influence students' career choices and decisions to pursue advanced education or specialized roles in nursing. Understanding the prevalence and impact of imposter syndrome among nursing students is crucial for educators and healthcare professionals. By acknowledging this issue, institutions can develop targeted support strategies to help students build confidence and overcome feelings of inadequacy. If left unaddressed, imposter syndrome can have long-term consequences on students' mental health and professional development. Early identification and intervention can help mitigate these effects and promote a healthier learning environment. Recognizing the significance of imposter syndrome can ultimately contribute to the development of more confident and competent nursing professionals.

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DOI: <http://doi.org/10.5281/zenodo.21217349>**OBJECTIVES****General Objective:**

To determine the prevalence of Imposter Syndrome among Aligarh College of Nursing Students.

Specific Objectives:

- 1) To determine the proportion of undergraduate nursing students experiencing clinically significant levels of Imposter Phenomenon.
- 2) To categorize the frequency of students across different severity levels of Imposter Phenomenon (e.g., mild, moderate, severe).

METHODOLOGY**STUDY DESIGN:**

Descriptive, cross sectional study design was employed in the present study. This design was appropriate for the study's objectives of assessing levels of imposter syndrome among undergraduate nursing students of Aligarh College of Nursing and Allied Health Sciences Lahore.

SETTING:

The study was conducted in Aligarh College of Nursing and Allied Health Sciences Lahore. The research work was sustained and supervised for proper direction and guidance at Aligarh College of Nursing and Allied Health Sciences Lahore.

STUDY POPULATION:

The study population was the nursing students studying at Aligarh College of Nursing and Allied Health Sciences Lahore.

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DURATION:

Study was completed in 9 months from May 2025 to Jan 2026.

SAMPLE SIZE:

The sample is calculated at 5 percent level of significance. Sample size is calculated using Slovin’s formula:

N= Total population = 250 n = Sample size

e² =Margin of error = 5%

$$n = \frac{N}{1 + Ne^2}$$

$$n = \frac{250}{1 + 250 (0.05)^2}$$

$$n = 153$$

SAMPLING TECHNIQUE:

Convenient sample technique was used to obtain sample.

SAMPLE SELECTION:

Inclusion Criteria:

- All undergraduate nursing students

Exclusion Criteria:

- Students who were on clinical

RESULTS

This chapter presents the findings related to demographic variables, and level of imposter syndrome among undergraduate nursing students. The findings are presented in graphs, tables, and figures along with their interpretation.

1.1 DEMOGRAPHIC DATA:

1) AGE:

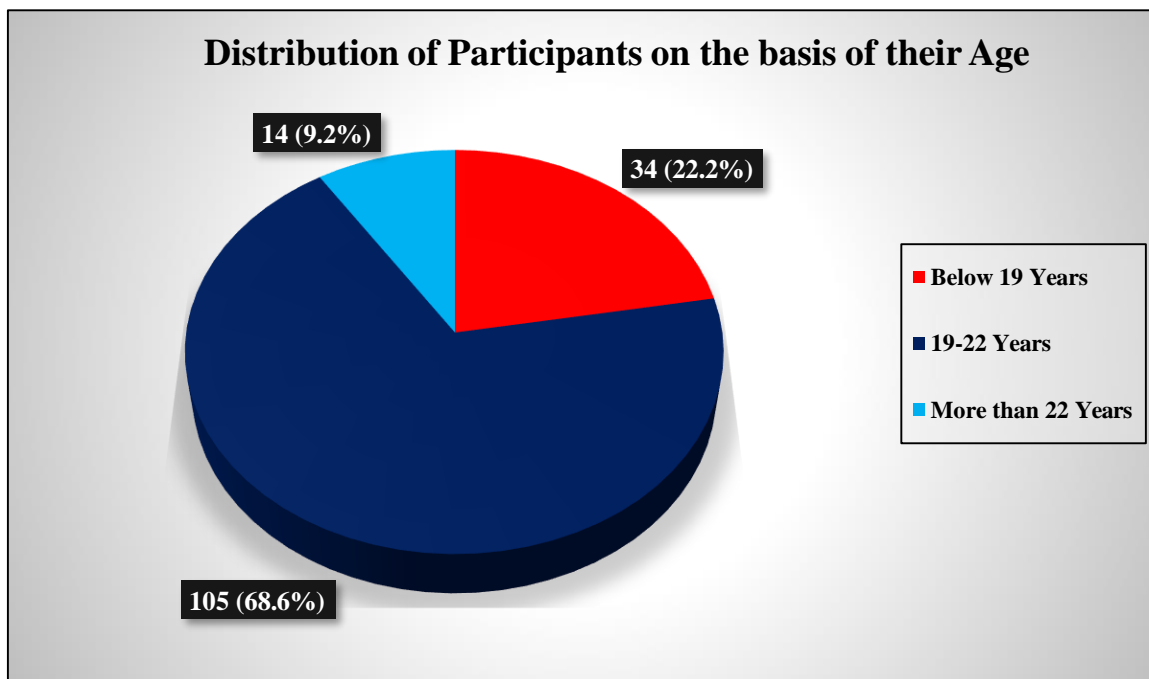


Fig 4.1 Distribution of Participants on the basis of their Age

The fig 4.1 shows that the study sample predominantly comprised undergraduate nursing students in their early twenties, with the majority falling within the 19-22 years' age group (68.6%). A

smaller proportion was below 19 years (22.2%), and only (9.2%) were older than 22 years.

2) GENDER:

Table 4.1 Distribution of Participants according to their Gender:

Gender	Frequency	Percentage
Male	60	39.2%
Female	93	60.8%

The table 4.1 showed that most of the study participants (60.2%) were female nursing students while 39.2% were male nursing students.

3) STUDY SEMESTER:

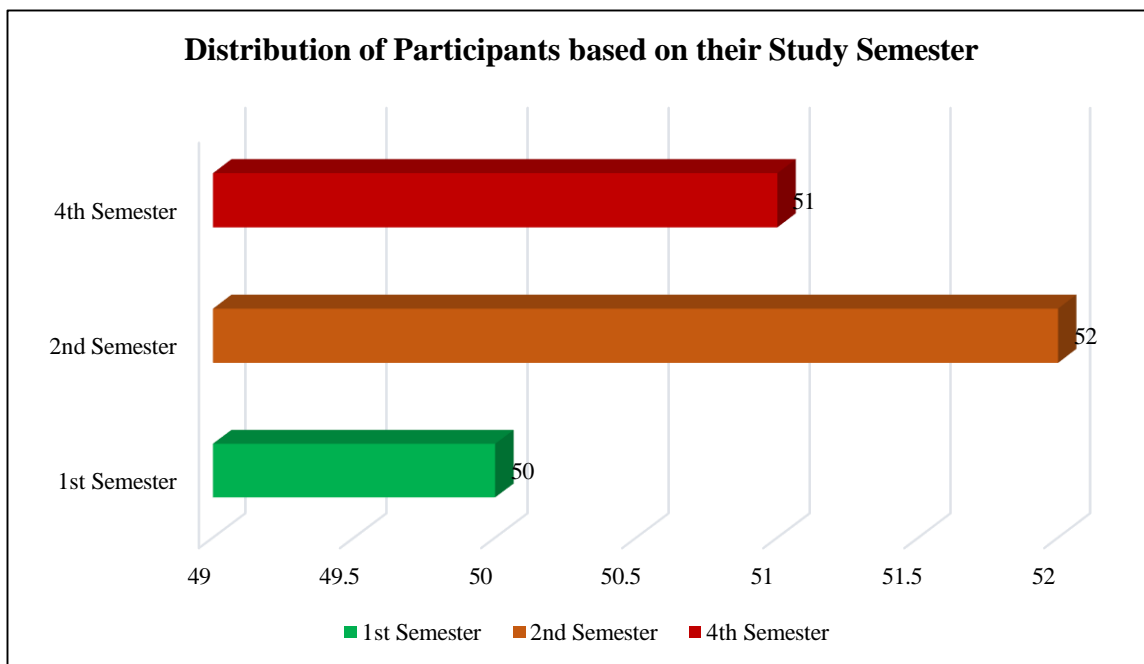


Fig 4.2 Distribution of Participants based on their Study Semester

The fig 4.2 shows that the highest population of students was in the 2nd semester (34%), followed by the 4th semester (33.3%), and 1st semester (32.7%).

4) MONTHLY FAMILY INCOME:

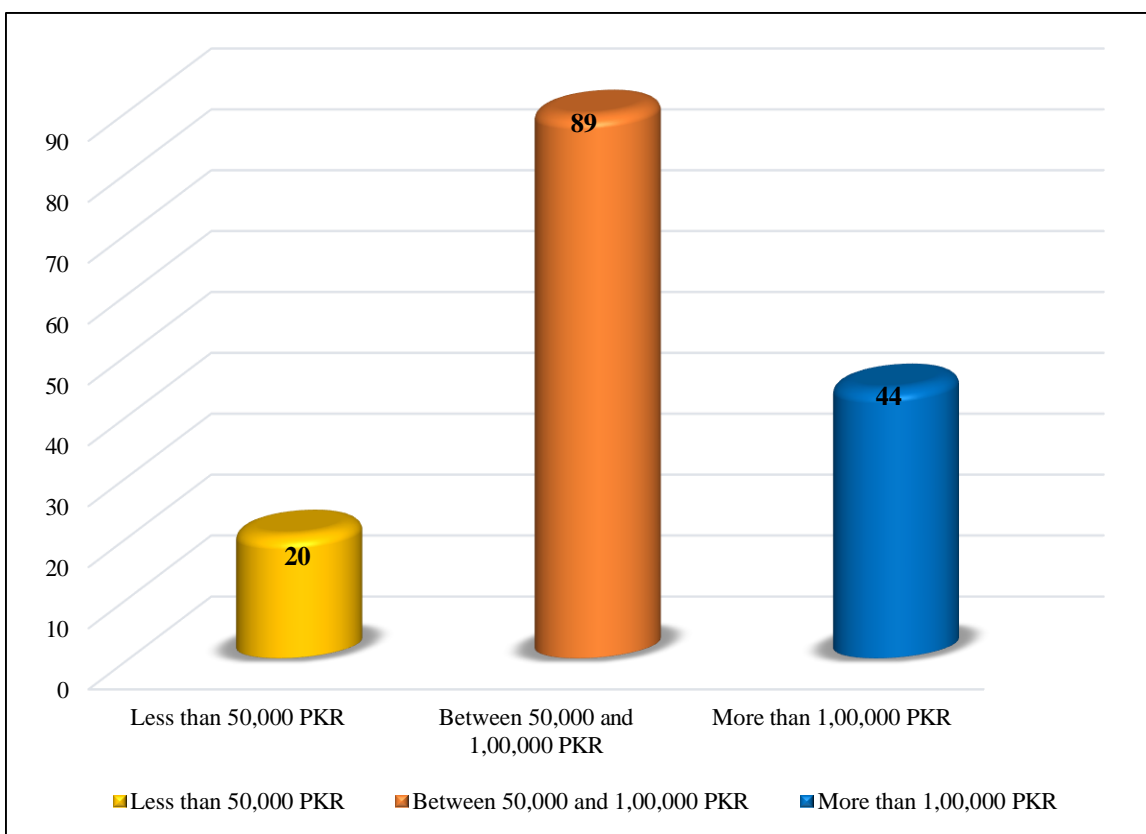


Fig 4.3 Distribution of Participants based on their Monthly Income

The fig 4.3 shows that the sample largely represented middle-income families, with (58.2%) reporting a monthly family income between 50,000 and 100,000 PKR. A smaller group came from households earning more than 100,000 PKR (28.8%), and the least represented group had a monthly income below 50,000 PKR (13.1%).

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1.2 LEVEL OF IMPOSTER SYNDROME (INDIVIDUAL DISTRIBUTION):

Table 4.2: Distribution of Participants according to their Responses

Not at all true=1, Rarely=2, Sometimes=3, Often=4, Very true=5

Sr. No.	Item Summary	1	2	3	4	5
1	Succeeded despite fear	15 (9.8%)	31 (20.3%)	54 (35.3%)	38 (24.8%)	15 (9.8%)
2	Give impression of being more competent	8 (5.2%)	23 (15.0%)	46 (30.1%)	46 (30.1%)	30 (19.6%)
3	Avoid/dread evaluations	11 (7.2%)	27 (17.6%)	46 (30.1%)	38 (24.8%)	31 (20.3%)
4	Afraid won't live up to praise	8 (5.2%)	15 (9.8%)	38 (24.8%)	54 (35.3%)	38 (24.8%)
5	Success = right place/right people	8 (5.2%)	15 (9.8%)	31 (20.3%)	53 (34.6%)	46 (30.1%)
6	Afraid others find out I'm not capable	11 (7.2%)	19 (12.4%)	31 (20.3%)	46 (30.1%)	46 (30.1%)
7	Remember failures more than successes	8 (5.2%)	15 (9.8%)	31 (20.3%)	53 (34.6%)	46 (30.1%)
8	Rarely do task as well as I'd like	15 (9.8%)	31 (20.3%)	46 (30.1%)	38 (24.8%)	23 (15.0%)
9	Success = some kind of error	15 (9.8%)	31 (20.3%)	46 (30.1%)	38 (24.8%)	23 (15.0%)
10	Hard to accept compliments	11 (7.2%)	23 (15.0%)	38 (24.8%)	46 (30.1%)	35 (22.9%)

11	Success = luck	8 (5.2%)	15 (9.8%)	31 (20.3%)	53 (34.6%)	46 (30.1%)
12	Disappointed, should have accomplished more	11 (7.2%)	23 (15.0%)	35 (22.9%)	46 (30.1%)	38 (24.8%)
13	Afraid others discover I lack ability	8 (5.2%)	15 (9.8%)	31 (20.3%)	46 (30.1%)	53 (34.6%)
14	Afraid to fail new task despite past success	8 (5.2%)	15 (9.8%)	31 (20.3%)	46 (30.1%)	53 (34.6%)
15	Doubt I can repeat success	11 (7.2%)	23 (15.0%)	35 (22.9%)	46 (30.1%)	38 (24.8%)
16	Discount praise/recognition	11 (7.2%)	27 (17.6%)	38 (24.8%)	46 (30.1%)	31 (20.3%)
17	Compareability, think others more intelligent	8 (5.2%)	15 (9.8%)	31 (20.3%)	46 (30.1%)	53 (34.6%)
18	Worry about failing despite others' confidence	8 (5.2%)	15 (9.8%)	31 (20.3%)	46 (30.1%)	53 (34.6%)
19	Hesitate to tell others about recognition	15 (9.8%)	31 (20.3%)	46 (30.1%)	38 (24.8%)	23 (15.0%)
20	Feel bad if not "the best" or "special"	11 (7.2%)	23 (15.0%)	35 (22.9%)	46 (30.1%)	38 (24.8%)

Table 4.2 shows the way in which people perceive self-doubt in the journey of their success. In most items, modal responses are focused on level 4 (Often True) and 5 (Always True), which implies that the participants often feel self-doubt, experience fraudulence, and internal attribution failure. Questions like I am afraid that others will find out that I lack the ability (Item 13), I am afraid to do new things even though I have been successful in the past (Item 14), I compare myself with others and think that they are smarter (Item 17), I worry about failing despite others thinking that I am good (Item 18) all have around 65-70% of the respondents choosing the highest two frequency levels showing a consistent high-severity pattern of impostor ideation.

The second salient dimension that is evident in the data is the external attributions of success. Questions 5, 7, 9 and 11 that test the views that achievement is due to luck, timing, situational factors, or error exhibit much the same distribution with only about 65% of the respondents agreeing to these questions at the levels 4 or 5.

A third important theme that the scale has identified is performance anxiety and fear of evaluation. Question 3 ("I avoid or fear evaluations) indicates that more than 75% of the respondents support the levels 3-5 where 20.3% of the respondents indicate a response of always true. It can be seen that the items 4 (I am afraid I will not live up to praise), 6 (I am afraid other people will see that I am not competent), and 2 (I give the impression of being more competent than I feel) show similar high levels of endorsement, with 55-60% in the two highest response categories.

The fourth group of items deals with a problem with internalizing success and receiving recognition. Completely unsurprisingly, the distribution items 10 (It is difficult for me to accept compliments), 12 (I am disappointed when I fail to achieve more), 15 (I doubt I can replicate success), 16 (I discount praise and recognition), and 20 (I feel bad if I am not the best or special) demonstrate strong clustering, i.e. at level 4 and 5. An example is that over 50% of the respondents support the discounting of praise (Item 16) at the greatest 2 levels, and the level 4 and 5 combined endorsement of Item 12 have 55%.

Lastly, Item 1 (I succeeded despite fear) is out of the general trend, having a relatively balanced distribution between all five of the response levels with the highest percentage (35.3% level 3) and a relatively small tail (34.6% level 4 and level 5). When combined, the statistics present the conclusive

evidence on the high rate of impostor phenomenon symptoms, with specific salience in fears of exposure, external attribution of success, perfectionistic pressures, and resistance to internalizing accomplishment, which makes it necessary to incorporate organization-focused and education-focused measures to engage in changing the cognition frame, normalized failures, and strong internal validation systems.

1.3 LEVEL OF IMPOSTER SYNDROME:

Table 4.3: Distribution of Participants according to their Level of Imposter Syndrome

CIPS Score Range	Level of Impostor Phenomenon	Frequency (n)	Percentage (%)
≤40	Few	14	9.2%
41–60	Moderate	64	41.8%
61–80	Frequent	58	37.9%
>80	Intense	17	11.1%
Total		200	100%

The results in table 4.3 show a very strong degree of consistency in the distribution that can be considered as an empirical manifestation of impostor syndrome. A group of the respondents of only 9.2%, with a score of 40 and lower. The biggest group, which consists of 64 respondents (41.8%), scores in the range of 41-60 and is considered to belong to the category of Moderate, meaning that a significant part of the sample regularly faces self-doubt, unwillingness to proclaim success, and fear of being viewed as an incompetent person. The next group of respondents (37.9%), is in the 61-80 range of Frequent feelings, where the feeling of impostor endures long enough to affect the interpretation of the achievements.

The sum of the three categories the Moderate and the Frequent ones makes 79.7% of the total sample. This distribution is an indicator of profound and widely held disdain toward individual competence in the face of apparent performance that should be taken seriously on the institutional and psychological levels. On the far right, 17 respondents (11.1%) scored over 80 and

thus would fall in the Intense category in which the impostor phenomenon is ongoing, extensive, and prone to major well-being, motivation, and professional impairment of functioning.

CHAPTER 5 DISCUSSION

The chapter is a full-scale argument of the research findings of the study entitled Assessment of Imposter Syndrome among Aligarh College of Nursing Students: A Descriptive Cross-Sectional Study. The discussion is be structured into two parts dealing with demographic variables and the degree of Imposter Syndrome in the participants of the study.

5.1 DEMOGRAPHIC VARIABLES

The demographic profile of the 153 participants in the study indicates that there is a young, majorly female, and mostly middle-income population of students. Most of the sample (68.6%) were between the ages of 19-22 years, but few were below 19 years (22.2%) and a few above 22 years (9.2%). In a cross-sectional study carried out by on the population of undergraduate nursing and medical students, younger students in the first semesters of their studies had a higher likelihood of displaying the characteristics of IS, especially the areas of performance anxiety and fear of peer evaluation. The 19-22 age group has high-risk transitional stage as indicated by the number of participants. It is important to learn about this susceptibility of age in order to create timely psychological assistance and resilience-building initiatives in nursing facilities (Carless-Kane & Nowell, 2023).

In terms of gender, most of the participants were females 60.8%, whereas male students took up 39.2%. This gender pattern is in line with the reality in the global nursing as a female dominated profession. The fact that male students are represented in the sample in a considerable percentage is of particular interest, however, since in one of the earlier studies (Bravo, 2023) the difference is considerably reduced. In a study by (Khalil et al., 2024), the results directly analyzed IS in undergraduate nursing and medical students and determined that gender is a powerful source of self-doubt equally. Equally, El-Ashry et al. (2024) conducted a multicenter study in Egypt in which both men and women indicated that IS was high, and the gender difference in the total

CIPS scores did not differ significantly.

The notable similarity in the distribution of the participants was in the semesters: 2nd semester 34%, 4th semester 33.3%, and 1st semester 32.7%. Such a balanced distribution is a study methodology strength that makes both newly-enrolled and those players who had undergone clinical training represented. This clinically applies since IS may have varying manifestations with various training levels. reported that the classroom to clinical practice was a new start of a significant trigger of IS in nursing students during their transition, as new uncertainties appeared due to the shift of the theoretical, controlled knowledge to the actual patient care (Pienaar et al., 2022).

Most of the participants 58.2% had a monthly family income ranging between 50,000 and 100,000 PKR, which shows that the sample was majorly middle-income. The low income households represented the least represented group 13.1% and those with higher incomes were represented by the smaller group 28.8%. Another study of Pakistan by (Yahya et al., 2025) was able to confirm that IS was not on the one hand significantly mediated by the income level.

5.2 Undergraduate Nursing Students Level of Imposter Syndrome.

The findings indicated that the number of respondents who had a score of 40 or less was only 9.2%, which categorized them as a few in terms of IS. The other 90.8 percent of the sample has a score of above 40, which is divided into Moderate (41.8%), Frequent (37.9%), and Intense (11.1%). This result is highly in line with the available research El-Ashry et al. (2024) on IS among healthcare students. A multicenter cross-sectional study by of nursing students in Egypt showed that 46.3% of the students had experienced moderate IS and 33 percent of students experienced frequent IS, which is very much comparable to the 79.7% (combined Moderate and Frequent) prevalence in the current study.

In the same manner, a research conducted by (Qasem et al., 2025) showed that 47.5% of students indicated moderate IS and 34.7% frequent, which again confirms the trend that is present in the current data. These similar results in Egypt, Jordan, and Pakistan would lead to a belief that IS in the nursing and healthcare students is a phenomenon that is regionally stable, and is likely to

happen due to universal needs of professional healthcare education and not the effect that one institution or cultural context may have had.

The current study data shows that the Intense IS prevalence (CIPS score over 80) is a minor but highly vulnerable subgroup (11.1%). In a group of Brazilian medical students, Campos et al. (2022) discovered that students who had the highest CIPS scores demonstrated the greatest correlation with clinical depression and burnout, and the use of antidepressants was a strong correlate. Although the present study does not evaluate mental health comorbidities, the fact that 17 students were identified with Intense IS at the Aligarh College provides an easy-to-understand and practical foundation of outreach and referral to clinical psychological support within the institution.

Lastly, the one exception to the overall trend of high endorsement is found in the one item in the CIPS comprising of the question, I have often succeeded on a test or task even when I was afraid I would not pass (Item 1 of the CIPS), with an overall balanced distribution across the five response levels, with the modal response of (Sometimes True) (35.3%), and the combined response of (4) and (5) in the range of (34.6%). This result is significant as it implies that the majority of students actually succeed despite their fear - they show some behavioral resilience even in the conditions of intense levels of IS feelings. This is not indicative of the harmlessness of IS but is instead indicative of the fact that students are operating, in a state of unjustified psychological stress, and succeeding despite their internal questioning as opposed to succeeding with confidence.

CONCLUSION

To sum up, this research gives strong arguments to support the fact that Imposter Syndrome is a widespread and in-depth psychological phenomenon among undergraduate nursing students in Aligarh College of Nursing and Allied Health Sciences, Lahore. Since 90.8% of the respondents stated that they experience IS above the minimum threshold and more than 11% had an Intense level of it, the data indicate clearly that IS is not a marginal issue but a prevailing aspect of the psychological environment of the undergraduate nursing education in the given setting.

These results support an emerging literature on this topic within national and international settings that IS is an inherent aspect of healthcare education in which the high academic pressures,

clinical responsibility, competitive in-group conditions, and patient safety pressure all combine to provide an environment conducive to fostering self-doubt. Finally, this study confirms that it takes much more than school education and patient care to make graduate nurses competent, resilient and mentally healthy. It asks institutions to be active, deliberate in supporting the psychological wellbeing of students, putting names and making names of their emerging professional identities, and creating learning environments in which self-doubt is called for, made common, and discussed so that the nursing students of tomorrow can enter the profession not with a sense of being caught out, but with the knowledge they put into themselves and their capability.

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