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Living with Psoriasis: Exploring Experiences, Challenges, and Coping Mechanisms of FEU Manila Students

Magno, Leeam Marti F.; Pascual, John Carlo O.; Kristine Cerenado
Far Eastern University, Manila

Abstract—*Psoriasis is an autoimmune disease caused by the body's own immune system and results in both physical, emotional and social effects. A qualitative descriptive case study approach is used to this study to present three Far Eastern University (FEU) Manila students who have psoriasis. The analysis of themes revealed three main patterns which consisted of social self-consciousness and the challenge of obtaining proper medical treatment as well as the importance of family and peer support. The research findings provide valuable knowledge about psoriasis-related personal and social impacts, which can assist people in understanding psoriasis better and creating suitable support approaches.*

Keywords— *Psoriasis, social stigma, mental health, coping mechanisms.*

I. INTRODUCTION

1.1 Background of the Study

The autoimmune disease psoriasis accelerates skin cell production through immune system dysfunction, which results in visible skin plaques and inflammation, together with discomfort for the patient. 2.4% of Filipinos have psoriasis, while worldwide, millions live with this disease (Greb et al., 2016). The condition produces continuous itching along with an uncomfortable skin appearance and visible plaques, which create difficult daily circumstances for patients. Psoriasis flare-ups usually persist from weeks to months, while specific triggers such as pressure and climate change, together with infections, may start these episodes.

Psoriasis lacks a treatment solution, but healthcare options focus on managing the condition together with slowing skin cell development. The Psoriasis - Diagnosis and Treatment (n.d.) document lists topical treatments and light therapy together with oral and injected drugs as treatment possibilities. The management of psoriasis leads to high expenses, which increases the challenges faced by people who have this skin condition.

A person with psoriasis may develop any of these five different psoriasis types: plaque, guttate, pustular, inverse, and erythrodermic, according to Psoriasis (2025). Various studies demonstrate that genetics contributes to the development of psoriasis because most patients have relatives who also have this condition. The disease onset of psoriasis is believed to be influenced by particular genes, according to Psoriasis (2025), while environmental triggers determine the intensity of flare-ups. The physical symptoms of psoriasis extend into major psychological and social influences that affect people living with this condition.

The report Life with Psoriasis (2015) describes the common discrimination that patients face because people believe psoriasis is a transmissible disease. Psoriasis is not transmitted from one person to another, which is why it remains neither infectious nor contagious. Social isolation becomes common for psoriasis sufferers because their misunderstandings about the condition make them uneasy about social activities and being questioned. Self-esteem may decline when people need to avoid specific clothing due to revealing their psoriatic skin. The operating research has value since it addresses unclear psoriasis flares and short-term treatment durations. It targets volunteers with psoriasis for qualitative data collection to develop immediate behavioral remedies. Psoriasis creates substantial medical problems, psychological issues, and public health challenges, which result in lowered self-esteem, anxiety, and social withdrawal for patients.

1.2 Statement of the Problem

The study's general problem is: What are the experiences, challenges, and coping mechanisms of Far Eastern University Manila students living with psoriasis

The study seeks to answer the following question:

1. What experiences do individuals with psoriasis face in college in terms of social and mental well-being?
2. What challenges do they face regarding treatment, medication, and overall access to medical interventions regarding psoriasis?
3. What coping strategies do they use to manage the psoriasis, and are any of them effective?

1.3 Scope and Delimitations

This study focuses on the experiences, challenges, and coping mechanisms of students from Far Eastern University (FEU) Manila who have psoriasis. It aims to understand how this autoimmune disease impacts their daily lives, especially how factors like stress, weather changes, and infections affect them. The research will include students from all academic levels at FEU Manila who have psoriasis, ensuring a diverse range of perspectives. Through data collection, the study will explore their experiences, with special attention to identifying triggers that influence psoriasis flare-ups. This study will be conducted over a period of five months (January to May) by the researchers.

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1.4 *Significance of the Study*

This study will benefit the following group:

Individuals with Psoriasis. This study will help individuals with psoriasis to gain a deeper understanding of their condition and how to manage it.

Healthcare Professionals. General Healthcare practitioners, especially Dermatologists and Mental Health Professionals, can benefit from this study by gaining insight into the social and mental well-being of psoriasis patients.

Family. This study may help families gain a better understanding of the condition, its impact on daily life, and the challenges their loved ones face.

Community. The findings of this study can promote awareness and acceptance of psoriasis within local communities. Understanding the struggle faced by individuals with the condition, the community can provide social support.

Future researchers. This study can be used as a guide or basis for future researchers as they conduct research related to the topic of the current study. They can gather ideas or concepts from the study to formulate a research title or use the data gathered as additional information or related literature for their research paper.

II. REVIEW OF RELATED LITERATURE AND STUDIES

For further understanding of the study, this chapter presents a review of related literature and studies that the researchers found relevant to the present study. The researchers utilized various literary works, such as books, journal articles, and other research studies, less than ten years after publication, to acquire information for the development of the study’s synthesis. The information acquired by the researchers generally focuses on different coping strategies in response to living with psoriasis and specific factors that influence an individual to apply these strategies. The researchers aim to gain new insight regarding different methods the related studies have implemented and what the common themes are in their conclusions.

1) *Social and Mental Well-being*

Psoriasis is a physical condition — but one with far-reaching psychological and social consequences that hit home particularly hard for emerging young adults on college campuses. According to Chou et al. (2023), people with psoriasis often become more self-conscious about having visible lesions, which can make them socially withdrawn, be embarrassing, and fear judgment. In more academic-based environments, where the perception of peers can significantly affect self-esteem, psoriasis patients often cite anxiety over group work, public speaking, or even something as simple as having to share a seat in class.

This is consistent with results by Hsieh et al. (2024), who stressed that stigma and internalized shame are common in patients with psoriasis and affect the patients’ emotional well-being. Feelings of unattractiveness, social isolation and reduced confidence are common. As observed by Raju and Kumar (2023), such psychosocial burdens can become influential to depression, substance abuse and insomnia—the latter three of which are of prime concern in colleges because academic stress makes emotional vulnerability increasing.

In addition, peer unawareness regarding psoriasis can amplify feelings of isolation. Researchers show exposure to misinformation, such as that psoriasis is contagious or caused by poor personal hygiene, that can lead to social isolation, and in severe cases, bullying (Wan & Garg, 2023). Such psychosocial stresses call for specialized institutional mental health services for students suffering from chronic diseases like psoriasis.

2) *Coping Strategies and Their Effectiveness*

Psoriasis patients use a wide array of coping methods, from psychological approaches to practical changes to everyday life. Common strategies include emotion-focused ones, such as acceptance, reinterpreting negative thoughts, and pursuing social support. Bartosińska et al. research concluded that patients demonstrating proactive coping (e.g., cognitive restructuring, planning, support-seeking) experienced greater illness acceptance and overall life satisfaction (2022).

Certain patients may also use concealment strategies, using long sleeves, for example, avoid social functions or by adapting their routines in order to limit the visibility of their symptoms (Chou et al., 2023). While these activities may reduce acute anxiety, they, in turn, encourage social avoidance and inhibit emotional development. Conversely, support groups; in-person and online, have been shown to offer emotional relief and community (Gulati & Singh, 2023) But, the usefulness of those coping strategies only depend on access to supportive communities and mental healthcare.

3) *Challenges in Treatment, Medication, and Access to Medical Care*

Individuals with psoriasis often face an ongoing struggle to obtain appropriate and consistent medical care. The challenge is all the greater for students who may face financial burdens or logistical barriers with access. Bartosińska et al., (2022) described the treatment for psoriasis can consist of topical steroids, phototherapy or systemic drugs, which can present patients with costly, time-intensive treatments that require consistent medical assessment. For college students, fulfilling medical appointments, prescriptions, and complicated skincare acts can be interrupted by class schedules and economic constraints.

For students in the Philippines where healthcare accessibility varies and often relates to socioeconomic status, the burden is exacerbated further. The invisible action of students from lower-income families to prioritize treatment would rely heavily on their fiscal needs. The students may not seek treatment due to the price of treatment and have flare-ups, which may be experienced underreported or chronic. Additionally, societal awareness of psoriasis treatments still remain at a low level within the community, and it is likely advantage is taken by primary care physicians with limits of experience/education with dermatology, and/or the turn-around time for referral to the dermatologist sometimes delays treatment all together (Gulati & Singh, 2023).

Patients and the stigma with skin disease begins with clinical spaces. Patients have reported ways in which they feel neglected or unacknowledged in clinical settings because their skin disease is treated with singular biomedical holders and invisibly lack the psychosocial context of referral to care (Chou et al., 2023). Therefore, clinician gaps of care identify structural and cultural gaps associated with treatment aversion.

III. METHODOLOGY

3.1 Research Design

Research utilized a qualitative descriptive case study methodology to deeply analyze the lived experiences of three FEU Manila students with psoriasis through participatory observations and interviews. Qualitative case study methodology fits our research needs because it lets investigators study complex phenomena in realistic environments combined with several viewpoint assessments (Baxter & Jack, 2008). Research on qualitative case studies shows it works best to examine why people experience a specific condition, since it suits the study of psoriasis-specific psychological and social elements, according to Baxter and Jack (2008). The research method allowed researchers to collect personal stories along with common themes and exclusive individual observations that reconstructed complete participant perceptions.

3.2 Sampling and Participants

The respondents of the researcher's study will include students at all levels of FEU. In the researchers' study, purposive and snowball sampling were used to select individuals who already have psoriasis. Two of the researchers have psoriasis, and through this connection, other students who fit the criteria needed in the study were also discovered. Researchers chose them for their firsthand experience and valuable insights, which contribute to a deeper understanding of psoriasis's challenges, experiences, and coping mechanisms. Their perspectives are essential in identifying practical, immediately modifiable lifestyle strategies that can help individuals manage the condition more effectively. The information acquired will be utilized to assist the study's research topic and findings. Each identity of the participants will be held with most confidentiality and anonymity.

3.3 Data Gathering Instruments

In this study, researchers have concluded that semi-structured interviews are the most optimal route for efficiency and effectiveness. Semi-structured interview are used to gather information for its no restriction of any kind but the human mind itself, the knowledge, and feelings of the respondent. Respondents are not obliged to answer every question for privacy reason. The set of questions were designed to gather information about students regarding their everyday life with psoriasis.

The following are some examples of question asked in the questionnaire:

- In what ways has psoriasis influenced your personal relationships and social interactions?
- What strategies do you use to cope with psoriasis?
- What advice would you give to other students who are struggling with psoriasis?

3.4 Data Gathering Procedure

In determining the importance of exploring experiences, challenges, and coping mechanisms with psoriasis among students in FEU Manila, the researchers utilized qualitative research to understand the impacts of the said methods in handling everyday life.

The researchers recruited participants through purposive and snowball sampling from the FEU Manila. Each participant were given an information sheet detailing the study's objectives, procedures, benefits and their rights (including withdrawal without penalty). These were all given through social media because of the schedule between the researcher and the participant. The researchers specifically interviewed students with psoriasis who had a general understanding of the community observed. Information acquired in the interview will surely be of great help in expecting the general outcome of the participant's responses. A letter of consent was given to the interviewee before conducting the said interview.

3.5 Ethical Considerations

Ethical considerations ensure the protection, dignity, and overall well-being of participants. Since this study involves personal interactions, it is essential to adhere to ethical principles such as beneficence, nonmaleficence, autonomy, and justice. This study follows ethical guidelines to protect participants' rights, maintain research integrity, and ensure the reliability of findings.

Before participation, all participants will receive a detailed explanation of the study's procedures, potential risks and benefits, and how their data will be used. Participation will be entirely voluntary, and participants will be informed of their right to withdraw at any time without consequence. Additionally, they may skip any questions that make them uncomfortable.

To protect privacy, all personal identifiers will be removed, and data will be securely stored with access limited to the research team. Measures will be in place to ensure that participants do not experience emotional distress, with reminders that they can pause or withdraw from the study at any time.

Finally, to maintain objectivity, researchers will ensure that data interpretation reflects participants' perspectives and experiences rather than personal biases. By adhering to these ethical principles, this study upholds the highest standards of research integrity and participant protection.

IV. DATA PRESENTATION ANALYSIS AND INTERPRETATION

1) Living with Psoriasis

The themes are listed as a result of the theme analysis lifted from their answers to the interview conducted. It encompasses the respondents' experiences, struggles, and coping mechanisms with respect to their having psoriasis.

2) *College students with Psoriasis experience social stigma due to misinformation*

This theme tackles the negative perception of other people towards the respondents in a social manner and the cause for such behaviour. The avoidance of people towards people with psoriasis tends to be rooted in misinformation, as is the case with respondent 2, who stated, “People tend to avoid skin contact, thinking that it's contagious without even realizing it.” (Q1 b) Alquam R. (2023). Bolsters this public misconception which leads to negative outcomes for people with psoriasis a key thing to not is that it is not out of malicious intent that people avoid interactions it is simply the lack of knowledge and even curiosity like what respondent 1 said *“curious sila and sometimes misinformation na nakakahawa.”*(*They are curious and sometimes misinformed that it is contagious*)(Q1 a).

3) *College Students have difficulty accessing effective treatment*

This theme discusses the treatments used by the respondents, their effectiveness, availability, as well as their willingness to continue with the said treatments. *“There's no cure talaga like puro pahid ganto ganyan and wala nangyayari to the point hinahayaan nalang kasi ano pa sense.” (There's really no cure, applying ointments like that, but nothing happens, to the point where I just leave it alone because what's the point?)*(Q3a) was voiced out by he respondent 1 in their frustration about how treatments are only ever temporary. The current science tends to agree with the idea of the permanence of psoriasis, however, there is progress in the field with injection treatments showing promise of a longer or even perhaps total cure, as discussed in the earlier portions of this paper. That being said, the alleviation of flare-ups is not the only issue, as psoriasis treatment is rather costly (McKenna, J. 2023). With respondent 2 even citing it as one of the main struggles with the condition, among other things, *“Other than the treatment's high cost, I experience side effects like fatigue.”* Suffice to say that the treatment management for psoriasis causes frustration and the high cost of it does not help either, the insight of respondent 3 is a key observation of the problems with treatment as a whole where they state ”*f*lare-ups come back again, and it self-feeds into the stress that causes it in the first place.”

4) *Coping Strategies focus more on mental management*

Under this theme is how the respondents deal with all the challenges they face with their psoriasis diagnosis. Be it mentally, medically, or physically. All three respondents cite stress as a factor to the activity of their psoriasis. *“Usually, stress nagpapaboost for psoriasis.”* (*Usually, stress boosts psoriasis*).(Q6a) *“Stress management, sleeping early, and being confident with yourself”*(Q5c) were stated by respondents 1 and 3, respectively. The sleeping early strategy by respondent 3 pertains to how stress is increased by the lack of sleep, Respondent 2 copes through the use of an easily accessible alternative to treat their psoriasis whenever necessary “I always have petroleum jelly on hand to moisturize dry spots.”(Q5 b) such strategies are common among people with psoriasis and stress management is paramount if one wishes to avoid flare ups (Griffin M. 2023). The participants have also found themselves to be comfortable with their condition which is why their insight for the next theme is valuable.

5) *Advice: Psoriasis must be tackled wholistically*

The respondents are by no means experts; however, their experiences and counsel in the field of psoriasis, which is still not completely figured out and not at the forefront of medical issues and research, would be helpful in providing insight to doctors and advice to other people with psoriasis. Respondent 3 wishes for *“A little community of psoriasis people to help each other.”* (Q8c), with the first theme looking at the social stigma the respondents have faced, a community that can help each other would be of great help. Respondent 1’s advice is “Don’t think about it too much and you are you no matter what.”(Q7 a) which is important to ensure that they do not feel alone and that there is something severely wrong with them, after all psoriasis is just that and nothing more, so let us not allow it to harm our lives further.

TABLE 1. Thematic analysis

THEMES	R1’S CATEGORY	QUOTES	R2’S CATEGORY	QUOTES	R3’S CATEGORY	QUOTES
College students with psoriasis experience social stigma due to misinformation	Lack of awareness	“curious sila and sometimes misinformation na nakakahawa.”(Q2 a)	Subconscious avoidance	“People tend to avoid skin contact, thinking that it's contagious without even realizing it.”(Q1 b)	First impressions, building new relations	“It definitely affects first impressions negatively”(Q1 c) “people would stay away because they think I have a contagious disease.”(Q1 c)
College students have difficulty accessing effective treatment	Frustration, infectivity of treatment	“There's no cure talaga like puro pahid ganto ganyan and wala nangyayari to the point hinahayaan nalang kasi ano pa sense.”(Q 3 a)	Expensive treatment, side effects	“Other than the treatment's high cost, I experience side effects like fatigue.”(Q3 b)	Permanence of disease, constant effort to alleviate flare ups	“I have to constantly monitor it because, in just a few days, flare-ups come back again”(Q3 c)

Coping Strategies focus more on mental management	Mental calmness, physical activity	“exercise and relaxation lang talaga and don’t overthink things too much.”(Q 5 a)	Easily accessible alternative treatment	“I always have petroleum jelly on hand to moisturize dry spots.”(Q 5 b)	Importance of rest and self perception	“Stress management, sleeping early, and being confident with yourself.”(Q5 c)
Advice: Psoriasis must be tackled wholistically	Educating, self empowerment	“Awareness on myths and facts to let others know what psoriasis really is.” (Q8 a) “Don’t think about it too much andyou are you no matter what.” (Q7 a)	Lifestyle choices, educating	“I guess just keep a healthy diet and make sure to always hydrate the skin.” (Q7 b) “Making most people informed will be most helpful,” (Q8 b)	Social support, acceptance of condition	“A little community of psoriasis people to help each other.” (Q8 c) “Do not let it dictate your life and interactions.” (Q7 c)

V. Summary, Conclusion, And Recommendations

This chapter presents a comprehensive interpretation of the qualitative data gathered through interviews with three FEU Manila students diagnosed with psoriasis.

5.1 Social and Mental Well-being: Navigating Misinformation and Stigma

An important theme developed from the interviews was the social stigma and misinformation associated with psoriasis. Respondents spoke of being avoided, stared at, and questioned, and each emphasized the misconceptions that psoriasis is contagious as being the basis for the avoidance. Respondent 1 described the motivations for people's behavior as “curiosity” or “misinformed.” Respondent 2 talked about the avoidance being rooted in fear of contagion.

These lived experiences parallel those described by Chou et al. (2023), who suggested that when something is visible, like psoriasis, you may be more self-conscious, resulting in social avoidance. Coincidentally, Wan & Garg (2023) reminded us that misinformation can escalate to bullying or exclusion, especially in a college environment where personal interactions are more typical. The psychosocial toll we have discovered ranged from embarrassment to anxiety, which aligns with what Hsieh et al. (2024) described as stigma resulting in internalized shame, loss of confidence, and social isolation.

Nevertheless, respondents were able to show resilience, as well as acceptance in some cases. Respondent 3’s anecdotal advice for others with psoriasis—“You are you no matter what”—also highlights the importance of affirming one’s identity as part of the illness acceptance process(Tindle et al., 2021).

5.2 Medical and Logistical Challenges: Barriers in Treatment and Access

Participants exhibited frustration with an ineffective treatment with side effects are costly. Respondent 1 stated, "There's no cure talaga," while describing the feeling of helplessness when topical treatments result in a very minor improvement. Respondent 2 cited both the side effects and costs of treatments, while Respondent 3 remarked that the stress induced by flare-ups created a cycle that worsened symptoms.

These experiences are commonly cited in literature. Bartosińska et al. (2022) acknowledged that treatment plans consist of numerous expensive elements—topical, systemic, or phototherapy—that people commit to over many months. McKenna (2023) asserted that cost and maintainability are barriers for students. In the context of the Philippines, where there is a significant burden of socioeconomic variation in dermatological access (Gulati & Singh, 2023), these barriers are compounded.

An important theme in students' experience indicated dissatisfaction with encounters in healthcare settings. This dissatisfaction aligns with Chou et al. (2023) in which patients described feelings of being dismissed, or even, a lack of psychological support in clinical settings. These feelings highlight the necessity of more integrative care models that consider the physical body and negative emotional burden.

5.3 Coping Strategies and Effectiveness: Practical Tools and Psychological Growth

Participants exhibited various coping strategies indicative of both psychological adaptation and industriousness. Many had ways to manage their stress: Respondent 1 said that "stress boosts psoriasis", Respondent 3 mentioned using sleep hygiene and self-confidence as

buffers, and Respondent 2 simply used petroleum jelly for skin hydration, a very basic, self-care practice.

This aligns with Bartosińska et al. (2022), stating that active coping strategies such as social support, planning, and cognitive restructuring had better psychological adjustment, and that Gulati & Singh (2023) also referenced both online and in-person support groups, which Respondent 3 wishes he could have a "little community of psoriasis people;"

While there were no mention of concealment strategies (e.g., wearing long sleeves), it is likely that they could be tacit components of the coping regimen, as indicated in previous studies (Chou et al., 2023), or the absence may suggest their place has been adapted and accepted, since the participants all provided their advice to others, and the interviews themselves involved open conversations.

5.4 Conclusion

It influences mental health, social inclusion, and access to care. The study identified three core dimensions of concern: ongoing social stigma based on misinformation, high and limited medical treatment options, and the stress of living with a chronic illness.

Participants, despite the concerns indicated, showed remarkable resilience and personal agency in constructing their own strategies of coping, including stress management and lifestyle change. Their willingness to speak honestly and openly about their strategies also indicates a desire to help build a more compassionate and supportive environment for others in the same situation.

Ultimately, the findings suggest that psoriasis is multidimensional: it is not merely a skin disease, but is also about mental health, social identity, and health equity. The need exists for integrative approaches to support students in these situations**.**

5.5 Recommendation

It was evident that the effects were not simply dermatologic but rather psychosocial, medical, and institutional. From critical consideration of the findings, I offer the following recommendations, aimed at minimizing the barriers expressed by these students in a sustainable and student-driven manner.

There must be a targeted awareness campaign at the university level. Repeated anecdotes of stigma and social exclusion based on the erroneous assumption that psoriasis is contagious show the harmful consequences of misinformation. It is therefore important that FEU and other such institutions undertake awareness campaigns to create a better understanding of psoriasis-related issues; for example, health education seminars, posters on campus, student-led student health education webinars, etc. Normalizing conversations about skin conditions will begin to foster a culture of acceptance on campus. Furthermore, quantitative studies could be used to helped illustrate the impact of education-based interventions.

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APPENDICES

APPENDIX A: Interview Transcription Interviewer: Leeam Marti F. Magno
Interviewee: Respondent 1

Magno: In what ways has psoriasis influenced your personal relationships and social interactions?(Q1a)
Respondent 1: Nung bata, it had an impact talaga kapag nakikipaglaro sa labas pero nung tumagal at nung tumanda not that much.
Magno: Have you ever experienced social stigma or discrimination due to your psoriasis? (Q2 a)
Respondent 1: Yes, but lucky for me, it was not that deteriorating for me like tinitinnan lang ako and curious sila and sometimes misinformation na nakakahawa.
Magno: What challenges have you faced in accessing psoriasis treatment?(Q3a)
Respondent 1: There's no cure talaga like puro pahid ganto ganyan and wala nangyayari to the point hinahayaan nalang kasi ano pa sense.
Magno: What treatments have you used for psoriasis?(Q4 a)
Respondent 1: Ointment like after maligo pinapahid siya sa affected area.
Magno: What strategies do you use to cope with psoriasis?(Q5a)
Respondent 1: Probably wag masyadong magpa-stress sa mga ginagawa although easier said than done kasi sometimes hindi mo na namamalayan. Exercise and relaxation lang talaga and don't overthink things too much.
Magno: How effective do you find your coping mechanisms?(Q6 a)
Respondent 1: It's effective for me, but I don't know sa iba. Usually, stress nagpapaboost for psoriasis.
Magno: What advice would give to other students who are struggling with psoriasis?(Q7a)
Respondent Don't think about it too much and you are you no matter what.
1:

Magno: What kind of support do you think would help students with psoriasis manage their condition better?(Q8 a)
Respondent 1: Awareness on myths and facts to let others know what psoriasis really is.

Interviewer: John Carlo O Pascual
Interviewee: Respondent 2

Pascual: In what ways has psoriasis influenced your personal relationships and social interactions? (Q1 b)
Respondent 2: People tend to avoid skin contact, thinking that it's contagious without even realizing it.
Pascual: Have you ever experienced social stigma or discrimination due to your psoriasis? (Q2 b)
Respondent 2: Yes.
Pascual: What challenges have you faced in accessing psoriasis treatment?(Q3 b)
Respondent 2: Other than the treatment's high cost, I experience side effects like fatigue.
Pascual: What treatments have you used for psoriasis?(Q4 b)
Respondent 2: Topical creams and oral medications.
Pascual: What strategies do you use to cope with psoriasis?(Q5 b)
Respondent 2: I always have petroleum jelly on hand to moisturize dry spots.
Pascual: How effective do you find your coping mechanisms?(Q6 b)
Respondent 2: It's pretty okay so far, it's been really helpful with moisturizing my skin.

Pascual: What advice would you give to other students who are struggling with psoriasis?(Q7 b)
Respondent 2: I guess just keep a healthy diet and make sure to always hydrate the skin.
Pascual: What kind of support do you think would help students with psoriasis manage their condition better?(Q8 b)
Respondent 2: Making most people informed will be most helpful, to prevent stigma against students with psoriasis.

Interviewer: Leeam Marti F. Magno

Interviewee: Respondent 3

Magno: In what ways has psoriasis influenced your personal relationships and social interactions?(Q1 c)
Respondent 3: It definitely affects first impressions negatively, and it used to bother me a lot that people would stay away because they think I have a contagious disease.
Magno: Have you ever experienced social stigma or discrimination due to your psoriasis? (Q2 c)
Respondent 3: Yes, especially when I was young, it made me want to wear long sleeves all the time.
Magno: What challenges have you faced in accessing psoriasis treatment?(Q3 c)
Respondent 3: That I have to constantly monitor it because, in just a few days, flare-ups come back again, and it self-feeds into the stress that causes it in the first place.
Magno: What treatments have you used for psoriasis?(Q4 c)
Respondent 3: Back then, I tried just about anything: creams, snake oil, oral medication. The oral medication works most effectively, but it has major side effects.
Magno: What strategies do you use to cope with psoriasis?(Q5 c)
Respondent Stress management, sleeping early, and being confident with yourself

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Magno: How effective do you find your coping mechanisms?(Q6 c)
Respondent 3: Decently effective enough.
Magno: What advice would you give to other students who are struggling with psoriasis?(Q7 c)
Respondent 3: Do not let it dictate your life and interactions.
Magno: What kind of support do you think would help students with psoriasis manage their condition better?(Q8 c)
Respondent 3: A little community of psoriasis people to help each other.