

Attitude Towards Mental Illness and Barriers in Seeking Psychological Help Among Psychology and Non-psychology Students

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Abstract University students' attitude towards mental health and barriers in seeking help can be affected by numerous factors. Those factors include students' knowledge of mental health and awareness of obstacles in seeking help. To explore the phenomenon, a study was conducted to examine a comparison between psychology and non-psychology students on their attitude towards mental health and barriers in seeking help. A total of 236 students in one of the local universities in Sabah took part in this study. A study showed that there was no difference between the two groups of students (psychology vs. non-psychology programs) in terms of their attitudes towards mental illness. However, in terms of care and barriers in seeking psychological help, the study showed that psychology students showed less barriers in seeking psychological help and each of its component (i.e., fear of being stigmatized, trust towards mental health professionals, difficulties in self-disclosure, perceived devaluation and lack of knowledge) in comparison with non-psychology students. Due to these circumstances, it is assumed that knowledge and awareness on mental illness may reduce barriers in seeking psychological help and increase participants' knowledge on care and treatment of mental illness. Therefore, mental health programs/campaigns should be implemented continuously as an effective way to tackle participants' barriers in seeking psychological help.

Keywords: Attitude, mental health, psychological help

Introduction

Mental health is one of the prominent issues in today's society, even before the pandemic COVID-19. Various mental health awareness programs and campaigns were implemented to create awareness among the global society on the significance of mental health. To emphasize the importance of mental health awareness, the World Health Organization (WHO) has announced 10 October as the World Mental Health Day. The aim is to increase awareness of mental health issues around the world and mobilize efforts in support of mental health (WHO, n.d.) During the month of mental health awareness, school, universities and organizations implement numerous activities focusing on to level up society's mental health knowledge. The concept of 'mental health literacy' was announced in 1997 and this concept refers to knowledge and beliefs about mental disorders. This includes how people manage, recognize types of disorders and ways to prevent mental disorders (Sampaio et al., 2022).

Mental health literacy (MHL) is a well-established, multifaceted concept encompassing mental health knowledge, help-seeking behaviors, and stigma reduction. Individuals with adequate MHL, including the ability to identify mental health disorders and a willingness to seek help, are better equipped to improve their mental health outcomes (Singh et al.'s, 2022). Singh et al.'s study (2022) found that the various components of MHL (i.e., knowledge, help-seeking and stigma) and the overall adequacy of MHL levels were associated with gender, age, smoking, alcohol consumption, and loneliness. Regarding

gender, female participants demonstrated a greater ability to identify mental health disorders and a higher intention to seek help compared to male participants. While in terms of age, older adolescents showed higher in MHL compared to younger youths.

In today's challenging world, society needs to understand mental health challenges and ways to deal and prevent from being affected with mental health problems. Each person from all walks of life has a possibility to be affected by mental health problems regardless of their religion, ethnicity, profession or gender. There are many factors contributing to one's mental health problems; internal (e.g., genetics, personality) and external factors (e.g., poverty, relationships, working environment) factors. Based on IYRES' (Institute for Youth Malaysia Research) study in collaboration with the United Nations Children's Fund (UNICEF) found that the Malaysian Youth Mental Index in 2023 showed 71.91, which showed a moderate risk of mental health. The Mental Health Index assesses the mental health of Malaysian youth on a scale from 0 (lowest) to 100 (highest), evaluating seven key areas: lifestyle, surrounding environment, personal characteristics, life experiences, social support, coping mechanisms, and mental well-being (Malaysian Youth Mental Health Index, n.d.).

Samsudin et al. (2024) found that among three types of mental health symptoms—depression, stress, and anxiety—17% of young people reported experiencing one symptom, 20% reported two symptoms, and another 20% reported all three

symptoms. The study involved 21,126 youths aged 15 to 30 years from all states in Malaysia. The findings showed that Malaysian youths experienced mental health symptoms and if they did not take any action, it may impact their overall well-being. However, due to less societal sensitivity to the symptoms compared to chronic physical diseases, it is more difficult to determine the prevalence of mental health problems.

In regard to university students, the mental health issue is increasing and according to Vidourek et al. (2014), mental health problems are a significant issue among university students. This is supported by previous studies highlighting that university students' mental health is a crucial issue that requires attention (e.g., Ah Gang, 2021; Ah Gang et al., 2024; Cosmas, 2020; Rao et al., 2023). Statistics have shown that there is an ongoing trend of increase on the mental health issues among this particular group (Ariffin et al., 2023). There are numerous factors contributing to the susceptibility of university students to develop mental health issues (Khairul Azhar et al., 2023; Maung et al., 2023). Studying at the university can be quite challenging for some students. It is actually the transition point for a young person's life. At this stage, university students must learn to become more independent, expand their social networks, adapt to new learning methods, and often navigate significant financial challenges. Students who are well-prepared and able to adjust to these transitions tend to experience better mental health (Campbell et al., 2022).

Referring to times of pandemic, past studies (e.g., Ah Gang, 2021; Kong et al., 2022) revealed that a majority of university students were struggling with mental health problems. This is due to the new online learning platform and social life norms. The recent global COVID-19 pandemic has significantly impacted mental health across society, with particular concern for younger individuals aged 18–25, who appear to be disproportionately affected (Campbell et al., 2022). Although the pandemic phase has already shifted to endemic phase, university students are still experiencing symptoms of mental health problems such as depression, anxiety and stress. For instance, Khairul et al.'s study (2023) revealed that more than a majority of students both male and female experienced moderately to extremely severe symptoms of depression, anxiety and stress. Their sources of stress are diverse and include adaptation challenges, family separation, relationship difficulties, financial struggles, health concerns, and more. Although, there are various channels were provided by using resources and facilities at the university, some students failed to manage their challenges. This may expose them to mental health problems which affect their academic performance. Life in university for some university students can cause pressure because they have to struggle with a various of challenges (Ariffin et al., 2023). Being senior university students will not provide a guarantee for them for not having mental health problem. Senior students also had a greater risk of having depression and stress than their junior (Kong et al., 2022).

Lack of capability to cope with academic challenges and adversity among students may lead to mental health problem. The WHO defines mental health as a state of well-being that enables individuals to cope with life's stresses, recognize their abilities, learn effectively, work productively, and contribute to their community. Mental health significantly influences daily living, relationships, and physical health. (Medial News Today, 2022). Therefore, it is essential for the university students and society to enhance their knowledge about mental health issues through mental health literacy.

Literature review

The mental health literacy among university students may help to develop more positive attitudes towards mental illness and reduce their barriers in seeking help. Past studies (e.g. Ah Gang et al., 2024; Munawar et al., 2021; Shim et al., 2022) found that mental health literacy through education may help to increase positive attitude towards mental health issues among students. A study by Shim et al. (2022) found that among 147 students who completed an Abnormal Psychology course, perceptions of mental health shifted positively, with students viewing it as more curable and less stigmatizing after receiving mental health education. The findings highlight the direct impact of educational experiences on students' attitudes toward mental health. Providing mental health education and training helped students better understand and engage with issues related to mental illness. This study highlighted the direct impact of educational experiences on students' attitudes toward mental health.

Munawar et al.'s (2021) reviewed forty-six studies published between 1995 to 2019 that are mostly used cross-sectional designs to investigate MHL. There has been a growing number of studies on Mental Health Literacy (MHL) in Malaysia. Some experimental studies have demonstrated positive effects, revealing that many Malaysians hold stigmatizing attitudes toward mental health issues. To address this, researchers, practitioners, and policymakers should prioritize the development of standardized measures and interventions that encompass all components of MHL. (Munawar et al., 2021). Lee et al. (2023) found that students' mental health awareness was influenced by their knowledge of mental health and their attitudes toward it. The study indicated that increased information on mental health topics enhanced students' awareness of mental health issues. Similarly, Siddique et al. (2022) reported that age was significantly associated with higher awareness, and good mental health was positively correlated with greater awareness of mental health issues. Another study by Vidourek et al.'s study (2014) found that female participants who perceived more benefits in receiving mental health services showed lower stigma on mental health compared than male participants.

Another study by Chiu et al. (2021) comparing 29 psychology and 29 non-psychology students' attitudes toward care seeking using the Implicit Association Test (IAT). The study found that psychology students responded more quickly when evaluating incongruent pairs, such as care-seeking behavior and positive personality traits, compared to non-psychology students. These findings suggest that exposure to psychology courses helps reduce biases toward mental health care.

Preceding past studies showed that students who are equipped with mental health knowledge tend to show less barriers in seeking help. In this study, we aim to examine the differences between psychology versus non-psychology students in terms of their attitude towards mental illness and barriers in seeking help. This includes five subscales in the barriers for seeking help (i.e., fear of being stigmatized, trust in mental health professionals, difficulties in self-disclosure, perceived devaluation and lack of knowledge).

Research Instruments

Participants were asked to complete three sets of questions designed to measure the study's targeted variables: a demographic questionnaire, the Attitudes Toward Mental Illness Scale, and the Barriers to Seeking Psychological Help Scale. A description for each of the instruments is provided in the following section.

Demographic scale

The demographic scale was used to assess participants' academic and personal backgrounds. It consisted of 11 items, including age, gender, ethnicity, faculty, campus accommodation, and educational level and strategies used to combat mental illness. Having such a synopsis of the participants' demographic profile may aid researchers in identifying pertinent social contexts and thereby contextualize the results of this study.

Attitudes towards mental health illness

The Attitudes Toward Mental Illness Scale was adapted from the scales developed by Weller and Grune (1988) and Topkaya et al. (2017). This 14-item scale assessed participants' attitudes toward mental health. The items consist of statements either framed positively or negatively. For instance, "People with mental health illnesses should have the same rights as anyone else" and "The mentally ill should not be allowed to make decisions, even those concerning routine events" are examples of positively and negatively framed statements, respectively. Responses to each statement ranged from 1 ("strongly disagree") to 5 ("strongly agree"). Eight negative items required reverse scoring before calculating reliability and conducting the analysis. Higher scores indicated more positive attitudes toward mental illness.

Barriers to seeking psychological help.

This scale, developed by Topkaya et al. (2017), consists of 17 items across five subscales. Examples of items include one from each subscale: "I worry about whether my friends would mock me if I seek psychological help" (fear of being stigmatized); "I worry about whether the professional would listen to me adequately" (trust in mental health professionals); "I refuse to give information about my private problems (violence, etc.), even to a professional" (difficulties in self-disclosure); "My self-confidence might decrease if I seek psychological help" (perceived devaluation); "I don't want to seek psychological help as places that provide such services are far away" (lack of knowledge); Responses ranged from 1 ("strongly disagree") to 5 ("strongly agree"). Higher scores indicated greater perceived barriers to seeking psychological help.

Results

There were 236 students in one of the local universities in Sabah who took part in this study. A majority of them are female, 167 (70.80%) and the remaining are male, 69 (29.20%). The mean age is 21.21 (SD=1.06). Other demographic information can be referred to Table 1.

Table 1

The Demographic Profile of Participants (N=236)

Variables	Number	Percentage
Program		
Psychology Program	105	44.50
Non-Psychology program	131	55.50
Staying		
On campus	114	48.30
Off campus	120	50.80
Missing value	2	.80
Educational level		
Year 1	49	20.80
Year 2	93	39.40
Year 3	87	36.90
Year 4	5	2.10

Year 5	2	0.80
Involvement in H.E.A.L Program		
(A mental health awareness program)	155	65.70
Yes	81	34.30
No		

Before the analysis was conducted, the reliability values for each scale were examined. This is to ensure that each scale measures the variables as intended to measure. In Table 2, it shows that the reliability values for each scale and subscale are accepted, and it is ranging from .66 to .92, except for the subscale that measured one component of barriers in seeking help, i.e., the difficulties in self-disclosure. Therefore, in the final analysis this component was not included.

Table 2

The Reliability Values of Each Scale and Subscales in The Study

Scale and Subscales	Number of items	Reliability values
Barries in seeking help.		
- Fear of being stigmatized	4	.81
- Trust in mental health	4	.80
- Difficulties in self-disclosure	3	.47
- Perceived devaluation	3	.69
- Lack of knowledge	3	.76
Care and treatment		
	9	.66
Attitude		
	14	.81

A study revealed that there was no difference between the two groups of students (psychology vs. non-psychology programs) in terms of their attitudes towards mental illness. However, in terms and barriers in seeking psychological help, the study showed that psychology students showed less barriers in seeking psychological help (e.g., showed less fear of being stigmatized or more trust towards mental health professionals) in comparison with non-psychology students.

Table 3

The Comparison Between Psychology and Non-psychology Students in Terms of Attitude Towards Mental Illness and Barriers in Seeking Help

Group	N	Mean	SD	t value	Sig value
Attitudes towards mental illness					
Psychology students	105	43.20	10.48	1.33	.09
Non-Psychology students	131	41.53	8.84		
Barriers in seeking help.					
Psychology students	105	47.83	14.60	-4.03	<.001
Non-Psychology students	131	55.37	13.95		

Higher scores in barriers to seeking help indicate higher obstacles in the related subscales. In regard to each subscale in barriers to seeking help, the study showed that psychology students showed less barriers in seeking help compared to non-psychology students (see Table 4).

Table 4 shows that non-psychology students scored higher barriers in seeking help for each scale. In this study, a higher score indicates higher obstacles in the related subscales. For instance, in terms of fear of being stigmatized, non-psychology students scored higher. Similar results were also found for trust in mental health, perceived devaluation and lack of knowledge.

Table 4
The Comparison Between Psychology and Non-psychology Students for Each Subscale in Barriers in Seeking Help

Group	N	Mean	SD	t values	Sig value
Fear of being stigmatized.					
Psychology students	105	10.92	4.24	-3.94	<.001
Non-Psychology students	131	12.97	3.72		
Trust in mental health					
Psychology students	105	11.27	4.04	-3.27	<.001
Non-Psychology students	131	12.97	3.93		
Perceived devaluation					
Psychology students	105	8.38	3.03	-3.22	<.001
Non-Psychology students	131	9.66	3.04		
Lack of knowledge					
Psychology students	105	8.32	3.32	-3.30	<.001
Non-Psychology students	131	9.73	3.18		

Discussions

The study showed that psychology students showed less barriers in seeking help compared to non-psychology students. In this study, psychology students come from different psychology programs such as Counseling, Industrial and Organizational Psychology, Youth and Community Development and Child and Family. While non-psychology students came from different faculties such as Faculty of Engineering, Faculty of Business, Economics and Accountancy, Institute of Marine Borneo, and Economy, Faculty of Computing and Informatics, Faculty of Sustainable Agriculture and Faculty of Social Science and Humanities. Psychology students who came from different psychology programs, learnt psychology core courses such as introduction to psychology, developmental psychology, abnormal psychology, social psychology, personality and other psychology courses.

The knowledge they gain may help them to understand and familiar with mental illness, symptoms, treatment and challenges. This may create awareness and decrease barriers for them to seek psychological help whenever they need it. This was revealed in a study conducted by Shim et al. (2022) that found that 147 students who took the Abnormal Psychology course were aware that mental health is more curable and less embarrassing after taking mental health education. By completing this course, students can level up their understanding about mental health illness and this may help to change their attitude to be more positive toward mental health.

According to Sokolova and Williamson (2020), psychology is a well-known subject at the university level of education in most countries. However, for a large number of students learning psychology at the pre-university and psychology courses are available for students aged 15 to 20. Psychology courses are also taught in both general and vocational secondary education and the introduction of psychology is also added in the higher education training (Dutke et al., 2019). Sokolova (2024) stated that secondary students with a higher level of mental health literacy reported a lower level of self-stigmatization related to seeking professional mental health help. The preceding statements revealed that introducing psychology courses in schools and universities may help to increase students' mental health literacy and this may help to reduce barriers in seeking help due to self-stigma among students.

Referring to Malaysian context, a study by found that most Malaysians have stigmatizing attitudes towards mental health problem (Munawar et al., 2021). In 2019 study conducted by the Malaysian Psychiatric Association (MPA) reported that among the youth, 65 percent will likely use a smartphone app to seek information on mental health. In addition, 50.7 percent of youths preferred to talk to their friends about their mental health issues, while internet search is the second ranked choice. Students' hesitation to see the mental professional mental health might also be caused by their lack of mental health literacy and stigmatized. According to the World Economic Forum (2024), youth happiness is in decline worldwide due to a combination of social, economic and ecological pressures. The 2024 World Happiness Report reminds us of our collective responsibility to nurture the well-being of future generations.

With consideration to this finding, it is suggested that adding a course on mental health as an elective course may be helpful for those who are interested (Jack-ide, 2016). Chiu et al. (2021) also suggested that universities should encourage students to enroll in psychology courses. This is because it may help to raise mental health awareness and can decrease stigmatization. In Chiu et al.'s study, it was revealed that psychology students tend to show less negative attitude on mental health compared to non-psychology students.

By integrating mental health education into the curriculum, students would have the opportunity to learn about various mental health disorders, available support services, and strategies for promoting mental well-being. In addition, continuous mental health programs and campaigns beyond specific events like Mental Health Awareness Month or during a pandemic are also crucial. Sustained efforts to raise awareness, provide accurate information, and promote positive attitudes towards mental health can help normalize discussions around mental health and reduce stigma (Walsh & Foster, 2021).

Appropriate interventions, such as counseling, campus-based mental health education, and psychosocial support, should be implemented to promote students' mental well-being (Maung et al., 2023). Enhanced understanding of factors associated with poor mental health, as well as those that promote mental well-being, can serve as a foundation for

designing targeted strategies and interventions to prevent mental health challenges and provide support for students at higher risk (Campbell et al., 2022). According to Campbell et al. (2022), factors contributing to poor mental health include a lack of engagement in learning and leisure activities and low mental health literacy. Therefore, more mental health literacy programs and courses need to be conducted as a way to promote more awareness on the mental health issues and services.

Conclusions

In sum, based on the study's findings, it is recommended that each university should be equipped with mental health knowledge, and other related components such as help-seeking and stigma faced by today's society in regard to mental illness. Although the mental health knowledge can be derived from other sources such as books, website and articles, it is also suggested that students from other non-psychology programs/faculties should be provided with the psychology courses, e.g., the introduction to psychology or abnormal psychology. This may provide preparedness to students in dealing with mental health challenges in the university and after they have graduated. Younger adolescents should be equipped with adequate literacy mental health. In addition, this may help them to continuously maintain and sustain their healthy state of mental wellbeing (Singh et al., 2022). To enhance mental health literacy and improve access to mental health knowledge and resources, the Malaysian Psychiatric Association (MPA), Malaysian Mental Health Association (MMHA), and Pfizer Malaysia have collaborated to launch a new Mental Health Handbook. This 48-page practical guide aims to help Malaysians recognize mental health symptoms and seek professional help. Designed for easy reading and enriched with visuals, the handbook features concise sections on four mental disorders: depression, anxiety, bipolar disorder, and schizophrenia (Amirul Ihsan, 2020). Other information such as how to reach out to someone with mental health issues, steps to manage one's mental wellbeing and a directory of mental health services in Malaysia. The handbook will be distributed to universities, patients and communities in digital format (Amirul Ihsan, 2020). Efforts and contributions shown by various parties in reaching out society and share the mental health information may create more awareness among public on the important of mental health issues and way to prevent it.

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