AN EXPLORATORY STUDY OF THE SUITABILITY OF HELP-SEEKING, CULTURE AND STIGMA MEASUREMENT AMONG UNIVERSITY STUDENTS

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Abstract: There is a rise in the incidence and prevalence of mental distress among university students. However, the rate of mental health service utilisation is low. As psychological help-seeking attitude is a strong predictor for seeking psychological treatment, it is important to validate feasible and psychometrically sound instruments in the Malaysian context. This pilot study aimed to investigate the reliability and validity of six scales measuring the moderating role of culture on the effect of stigma in psychological help-seeking attitudes among university students. An online questionnaire, consisting of 83 items and 6 scales namely, the Portrait Value Questionnaire (PVQ-21), Loss of Face Scale (LOF), Individualism versus Collectivism Scale (INDCOL), Perceptions of Stigmatisation by Others for Seeking Psychological Help Scale (PSOSH), Self-Stigma of Seeking Help (SSOSH), and The Attitudes Toward Seeking Professional Psychological Scale (ATSPPHS-SF) is distributed to a convenience sample of 61 samples from International Islamic University Malaysia. The results of this pilot study indicated that the overall reliability of the questionnaire was Cronbach’s Alpha 0.90. The Cronbach Alpha value for the total of all measures was found to be highly reliable. A factor analysis was run to test the validity of the unidimensional scales, and the results ranged from KMO value 0.63 to 0.84 with Bartlett’s p-value for all scales being significant (p <0.00). Validity of multidimensional scales were tested with convergent validity analysis. Both the INDCOL and PVQ-21 showed a good convergent validity and is a valid tool. The instruments used in this pilot study can be used for the main research study in studying the moderating role of culture on the effect of stigma in psychological help-seeking attitudes among university students as the instruments are multiculturally competent. Therefore, in a multicultural population like Malaysia, instruments as such are found to be helpful in studying the effects of culture, stigma, and personal values on psychological help-seeking attitudes.
INTRODUCTION
In Malaysia, the prevalence of mental health issues has risen dramatically over the last decade (Kumaran et al., 2022). Experts declared that anxiety and depression are the top causes of mental health disorders among Malaysian students (Kotera et al., 2020). That study also found that Malaysian university students exhibited greater levels of depression, anxiety, and stress than students in the United Kingdom. Students mostly faced a variety of difficulties, including a sense of isolation, lack of motivation, boredom, and loneliness (Sim et al., 2021).

Malaysian students’ have higher levels of mental health issues such as depression, anxiety and stress when compared with United Kingdom students (Kotera et al., 2020). Even so, counselling services are still widely taken for granted and less given importance by students. People tend to avoid seeking help when they have mental health issues even when help is readily available (Atkinson, 2007). Students’ low help-seeking was considered to undermine their poor mental health even further (Ministry of Health, 2016): 10 - 35% of people in Malaysia who could benefit from mental health support, were not receiving support (Crabtree & Chong, 2000; Chong et al. 2013). To effectively direct people to receive mental health care services, the barriers inhibiting them from seeking help need to be determined. A local study by Mohan et al., (2012) found that a sense of discomfort is felt by Malaysians when referred to seek psychological help as they are afraid of public stigma in the way they will be viewed and believed that only those with mental illness will need to seek a counsellor.

The use of counselling services in Malaysia is limited even though it was comprehended as an important service to the school community (Chai, 2000). A sum of 16.6% of Malaysia’s secondary students utilized the counselling services for their mental and emotional problems (Kok, Low, Lee, & Cheah, 2012). In the United Kingdom, the demand for counselling services on campuses has dramatically risen by 33% since 2008 (Froio, 2013) while Malaysia still faces a low percentage in utilizing counselling services (Yin- Fah et al., 2016). Additionally, student’s low help-seeking attitudes were considered to undermine their poor mental health even further (Ministry of Health, 2006). Malaysian students' mental health is determined by their attitudes towards mental health problems. As such,
negative mental health attitudes instil beliefs that mental health sufferers are weak, incompetent, and unable to take care of themselves (Kotera & Maughan, 2020).

Help-seeking attitudes are learnt to be different among students from different backgrounds. As such, factors like culture, nationality, and religion do seem to be predictors of their attitude towards seeking help. Mojaverian et al., (2012) stated that professional help seeking, including recognition of problems, the decision making process of help seeking and the evaluation of coping strategies is determined by culture. According to Chian and Louis (as cited in Salim, 2010), there is a negative correlation between Asian cultural values and help-seeking attitudes. This shows that Malaysian values are associated with low help-seeking attitudes and there is a negative correlation between Asian cultural values and help-seeking attitudes. As hypothesized, European American values and perceived social support were found to be positively correlated with help-seeking attitudes while attitudes toward seeking help significantly influenced help-seeking behaviours. In order to gain a better understanding regarding the correlation between psychological help-seeking attitudes and culture, an exploratory study was conducted to understand the preceding phenomenon.

Among the most closely associated factors with help-seeking attitudes, stigma is still one of the main factors. Two types of stigmas that usually are associated with help-seeking attitudes, according to Flansburg (2012), there are two stigmas which are public stigma and self-stigma. In a past study, Eui et al., (2019) found that public stigma was able to predict attitudes towards mental health help seeking although it was not a significant predictor to help-seeking attitudes while self-stigma was found to be a significant predictor to attitudes towards help-seeking and it negatively predicted help-seeking attitudes.

However, despite studies has been conducted on identifying the barriers to help seeking behaviour in young people, there is a lack of local studies to understand the reasons for not seeking professional help among Malaysian university students (Norhayati et al., 2019). This may be due, in part, to the lack of a feasible and validated instrument to measure psychological help-seeking attitudes, culture and stigma in Malaysian context. Over the past 40 years, researchers have extensively studied help-seeking attitudes
and behavior through a number of instruments, such as the widely used Attitudes towards Seeking Professional Psychological Help scale (ATSPPH) (Norhayati et al., 2019). Furthermore, barriers such as cultural norms, negative ATSPPH for psychiatric disorders, unfamiliarity with counseling process, concerns about cost and time, accessibility, and knowledge deficit regarding available services may adversely influence ATSPPH and reduce utilization of available resources (Fisher & Farina, 1995; Leong & Lau, 2001; Rayan & Jaradat, 2016). However, despite investigating factors associated with seeking professional psychological help in various populations, a few past studies (e.g., Germani et al., 2020; Schwartz et al., 2021) have been able to draw conclusions about these attitudes based on representative samples in multicultural populations.

Research Objectives
In order to advance research in Psychological Help Seeking Attitudes in Malaysia, the present study aims to investigate the reliability and validity of six scales measuring the moderating role of culture on the effect of stigma in psychological help-seeking attitudes among university students. Psychological help-seeking attitudes is measured using the Attitudes towards Professional Psychological Help scale Short Form (ATSPPH-SF), while the effect of stigma on psychological help-seeking attitudes is measured using the Perceptions of Stigmatisation by Others for Seeking Psychological Help Scale (PSOSH), Self-Stigma of Seeking Help (SSOSH), and the effect of cultural components such as individualism versus collectivism, loss of face and personal value is measured using the Portrait Value Questionnaire (PVQ-21), Loss of Face Scale (LOF), Individualism versus Collectivism Scale (INDCOL) respectively. This study intends to examine the suitability and feasibility of these scales in measuring psychological help-seeking attitudes, stigma, and culture in Malaysian context.

METHODOLOGY

Study Design and Participants
A convenient sample 54 participants were randomly selected from one of local universities in Malaysia. Participants included 25 male (46.3 %) and 25 female students (53.7 %). Around 64.8% of the participants aged from 18 to 22 years old, while 31.5% of them ranged from 23 to 27 years old. Only 3.7 % of the participants aged from 28 to 32 years old. The
participants represented 13 academic courses, in which 20.4% of them are pursuing a degree in Islamic Studies, while 1.9% of them represented Biotechnology, Applied Arts and Design, Marketing, and Law respectively. Based on the inclusion criteria for this study, only undergraduate students were randomly selected. As such, the majority participants in this study were year two undergraduate students which is 40.7% and the lowest was year four undergraduate students with the percentage 18.5%. Another inclusion criteria in this study were for the participants to hold a Malaysian or International citizenship. This criterion is vital in studying the effect of stigma on different cultures in psychological help-seeking attitudes. In a total of 54 participants, 28 Malaysian students and 26 International students took part in this study. Malaysian students represented the Malay ethnicity with 51.9%, while the international students represented 11 different ethnicities from different countries with a total of 48.1%. The most international participants represented the Arabian race, with 16.7%, while the rest of the participants represented races such as African (9.3%), Indian (3.7%), Chinese (3.7%), Sri Lankan (3.7%), Asian (1.9%), Kashmiri (1.9%), Barbarian (1.9%), Black (1.9%), Javanese (1.9%), and Bengali (1.9%).

Instruments
A questionnaire consisting of seven scales was used to measure all intended research variables, including demographic scale to measure participants’ demographic profiles such as gender, academic level and ethnicity.

Portrait Values Questionnaire
The Portrait Value Questionnaire (PVQ-21) derived from Schwartz (2001)’s theory of values that explained ten fundamental individual values that influence human actions. The values are self-directional values, stimulative values, hedonistic values, achievement values, power values, security values, conformity values, traditional values, benevolent values, and universal values. These values are categorised under four domains, namely openness to change, self-transcendence, conservation, and self-enhancement. The questionnaire assesses how people feel about themselves and others. The short-form version or PVQ-21 consists of 21 items derived from portrait values from which individuals choose the ones that influence them the most. The scale is scored on a 6-point Likert scale, ranging from 1 (not at all like me) to 6 (totally like me). Each item
describes a person’s goals, aspirations, or desires. One sample item measuring conservation domain is item 19, “I try to follow my traditional values and customs that my family and society have endowed on me.” The PVQ-21 has been used in a relatively limited number of studies. Schwartz et al. (2001) ran tests containing means, standard deviations, and Cronbach’s alpha reliabilities of each value, indexed with the PVQ. It was found that the alpha measures of internal consistency range from .37 (tradition) to .79 (hedonism) for the PVQ (median, .55).

Despite their relatively low reliabilities, these PVQ-21 indexes were adequate to yield good convergent, discriminant validity and good construct validity. The PVQ-21 is recognised due to its independent nature and universal acceptability. This scale demonstrates adequate psychometric properties for a short scale intended to measure multiple constructs. There is sound evidence of its predictive validity, evidence based on studies in many different countries. PVQ-21 provides a strong base for self-evaluation, which is why it is suitable for use with children, young adults, and older individuals across different demographic settings (Davidov et al., 2008). The PVQ-21 underwent several cross-cultural examinations to evaluate its validity across different populations. Jacques et al., (2015) found that results of a study conducted on 20 different European countries indicated that the multi-group structure of the test is valid for participants belonging to different age, gender, and culture. Exploratory and confirmatory factor analysis also yielded the same factor as proposed by Schwartz theory and these same factors have also been consistent among 63 different populations adding to the validity of scale. Hence PVQ-21 provides a statistical basis for Schwartz theory as results of factor analysis arrange 10 values along 4 dimensions. In sum, studies that measure values with the PVQ-21 have confirmed many predicted associations between value priorities and background, personality, attitude, and behaviour variables in samples from diverse countries.

**Loss of Face Scale**

The Loss of Face (LOF) scale was developed by Nolan Zane in 2000. Using a rational development approach, a 21-item, 7-point Likert scale measuring loss of face was conducted, based on a list of 45 face-related behaviours and life-threatening situations. The purpose of this scale is to measure the extent to which one avoids situations and behaviours that are related to loss of face. There are 21 items, for example, ‘I am more affected
when someone criticises me in public than when someone criticises me in private’. Each statement was scored on a 7-point Likert scale, from 1 (Strongly Disagree) to 7 (Strongly Agree). All items were scored in the direction of face of loss concern. The LOF measure was internally consistent with an alpha .83. In a study on the psychometric evaluation of the Loss of Face Scale, Leong et al., (2018) posited that using 4 samples of European Americans and Asian Americans with a total of 2057 participants, Loss of Face Scale was found to have high internal reliability across all samples. Similar results were found when Asians and Whites were analysed separately. It was found through this study that the LOF was internally consistent with an alpha of .83 without being compromised by differential reliability among the measures. It shows a concurrent and discriminant validity. These results suggested that the measure is unidimensional. Results also show that this scale was an important ethnic discriminator. The results supported the reliability, construct validity, and incremental validity of the LOF and suggested that the measure was sensitive to cultural differences. This means that the measure is sensitive to ethnic or cultural differences involving Asians and whites and is reliable in studying cultural differences (Nolan Zane & May Yeh, 2002).

The next study examined the loss of face scale as a possible explanatory construct for unassertiveness among Asians. Cultural values in explaining ethnic differences in behaviour were also explored (Zane et al., 1991). The results explained that values reflecting concerns about loss of face can explain much of the differences in assertiveness between Asians and Whites. Based on the findings, it can be concluded that the Loss of Face scale is a valid and reliable instrument on studying cultural influences in psychological help-seeking attitudes. According to Zane (2002), this instrument works as an important discriminator in measuring cultural factors that influence one’s decision and attitude in seeking help. Therefore, this instrument can be utilised in future studies to study cultural factors in help seeking especially among multicultural samples where there are various cultures and beliefs that are one of the factors of psychological help-seeking attitudes. Although little studies have been found in utilising this instrument, the validity and reliability of past existing studies showed that it has a good fit.

**Individualism versus Collectivism (IND-COL)**
Triandis and Gelfland (1998) developed the individualism and collectivism scale to measure four dimensions of collectivism and individualism namely vertical collectivism, vertical individualism, horizontal collectivism, and horizontal individualism. This scale consists of 16 items measuring collectivism and individualism. All items are answered on a 9-point scale, ranging from 1 = never or no and 9 = always or yes. IND-COL addresses the equality and inequality among members in a cultural group. Individuals scoring high on the vertical dimension tend to accept the existence of inequality and emphasise achievement, status, hierarchy, comparison with others, and competition across levels in a group. Individuals scoring high on the horizontal dimension support notions of equality, value the freedom to be themselves without comparison to others, and do not encourage efforts to be better than others (Triandis & Gelfand, 1998). While the two dimensions are combined, they yield four constructs, namely, horizontal individualism (HI), vertical individualism (VI), horizontal collectivism (HC) and vertical collectivism (VC). The IND-COL scale was used by Harry Hui in 1984 in paper and pencil tests. As an instrument, he found that the IND-COL scale was shown to be sufficiently reliable and cross-culturally appropriate. Seven studies were done to establish the validity of the scale. It was found that the IND-COL scale has content validity. The diversity of the respondents’ cultural background is a strength of the validation study, suggesting the IND-COL scale to be acceptable to researchers from different cultures as the items did not seem biased. The questionnaire was improved by Triandis et al., (2018) on 543 participants in total (Study 1, n = 326; Study 2, n = 127; Study 3, n = 90). They selected 27 items with the highest factor loadings and reported higher reliability coefficients (HI $\alpha = 0.81$, VI $\alpha = 0.82$, HC $\alpha = 0.80$, VC $\alpha = 0.73$).

These findings support the utility of the individualism and collectivism measurement scale in cross cultural research. This scale has demonstrated a good fit in studying individualism and collectivism among cultures. To study cultural influence in psychological help seeking attitudes in a multicultural sample, this instrument has demonstrated good validity and reliability based on previous findings (Chirkov et al., 2005; Wasti, 2003). Limited studies utilising these instruments were found, especially in Asian settings. However, based on existing evidence, the third hypothesis in the present study is supported in which the IND-COL scale (Singelis, 1995)
does have high reliability and validity in measuring cultural factors in their influence in a multicultural population.

**Perceptions of Stigmatisation by Others for Seeking Psychological Help (PSOSH)**

The PSOSH scale was developed by Vogel and Wade (2009). There are five items in this scale, to reflect on how the stigma associated with seeking treatment influences the social reaction of others. Types of items reflect on behavioural, cognitive and emotions. The sample item for behavioural are ‘Say something negative about you to others’, emotional items, ‘be angry with you’ and cognitive items, ‘think you posed a risk to others’. Items are scored on 5- Likert point scale ranging from 1(not at all) to 5(a great deal) and higher scores indicated greater perceived stigma from those the individual interacts with. Vogel et al., (2009) found that all items are useful in measuring other’s stigma in seeking psychological help, but believed that long measures are difficult to incorporate into survey research. They deemed PSOSH as an adequate measure in terms of reliability, factors structure, and concurrent validity. Ponterotto and Ruckdeschel (2007) also deemed that the scale was an excellent measure. In another study, Vogel et al., (2017) found that the PSOSH was normed using samples from the United States and, until the cross-cultural validity of this measure is established, it cannot reliably be used within other countries (Miller & Sheu, 2008). They examined the cross-cultural measurement invariance of the PSOSH using the sequential constraint imposition approach across 11 countries/regions namely Australia, Brazil, Canada, Hong Kong, Portugal, Romania, Taiwan, Turkey, the United Arab Emirates (UAE), the United Kingdom (U.K.), and the United States (U.S.). Overall, findings indicate that the PSOSH measures a meaningful construct (i.e., configural and metric invariance) across the 11 countries/regions and that future cross-cultural research could use the PSOSH to examine relationships between social network stigma and other variables. Scalar invariance results also supported the examination of mean differences in Australia, Brazil, Canada, Portugal, Turkey, the U.K., and the U.S., but not in Hong Kong, Romania, Taiwan, and UAE.

Choi and Miller (2014) in their study of Willingness to see a counsellor among Asian, Asian American, and Pacific Islanders students attending university in America found that culture could also be measured through the PSOSH scale. Findings are significant and show that culture does
impact willingness to seek help from a therapist. Surapaneni (2019) studied the role of parental stigma on self-stigma and help seeking intentions among Asian American, and Caucasian Americans and found that the PSOSH scale was reliable and valid in studying parental stigma in help-seeking. Findings show that the PSOSH is a valid and reliable scale in studying others' stigma towards psychological help-seeking. Although Miller and Sheu (2008) advised that unless cross-cultural validity is established, the scale cannot be used in countries other than the United States. Many researchers have later utilised the scale in other countries to prove its reliability and validity. One such was conducted amongst 11 countries and the scale was deemed reliable, valid and an excellent measure to be used in cross-cultural studies.

**Self-Stigma of Seeking Help (SSOSH)**
SSOSH was developed by Vogel (2006). The 10-item scale assesses threats to one’s self-evaluation for seeking psychological help. Items are rated from 1 (strongly disagree) to 5 (strongly agree), with five reversed scored items. A sample item is ‘I would feel inadequate if I went to a therapist for psychological help’. This scale predicts attitudes and willingness to seek counselling. The internal consistencies range from .86 to .90 in college samples (Vogel et al., 2006). In U.S. college samples, estimates of the internal consistency ranged from .86 to .90 (Vogel et al., 2006). SSOSH has also been previously used in Australia and translated versions of the SSOSH have been used in Brazil, Taiwan, and Turkey. In these international samples, the translated SSOSH scores have reported internal 70 consistency estimates between .73 and .88 (Baptista & Zanon, 2016; Griffiths, Mond, Murray, & Touyz, 2015; Topkaya, 2011a; Vogel, Armstrong, et al., 2013). The cross-cultural invariance of the psychometrics of the SSOSH scale has also been examined in six separate studies from six different countries, namely England, Greece, Israel, Taiwan, Turkey, and the United States. This scale has shown a unidimensional factor structure and adequate reliability among samples drawn around U.S. Internal consistency has been reported in previous research for general samples of college students (.79 - .92). The reliability values for Middle Eastern American sample (.79; Soheilian & Inman, 2009), samples of African American (.84), Asian American (.85), Latino American (.89; Vogel et al., 2011). Test-retest reliabilities among college students were reported to be .72 (Vogel et al., 2006). SSOSH is therefore reliable for predicting attitudes toward (r= -.65) and intention to seek (r= - \[\text{equation}\]
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.37; Vogel et al., 2006) psychological help. The reliability values for six countries samples, it was found that the internal consistencies across country samples (.77 - .89) were consistent with previous findings on college students (.79 - .92; Vogel et al., 2006) and non-majority samples (.79 - .89; Soheilian & Inman, 2009; Vogel et al., 2011). This is evidence that the SSOSH possesses a construct that can be used to measure cross-cultural groups.

Choi and Miller (2014) administered the Willingness to See a Counsellor in Asian, Asian American, and Pacific islanders samples. Findings showed that culture impacts willingness to see a counsellor. Asians who adhered to their cultural values showed less interest in help-seeking. The cultural values were both influenced by public stigma and self-stigma. European-American students portrayed higher levels of willingness, but stigma still impacted their willingness. The usage of the SSOSH scale in this study indicated that the scale is reliable in studying cultural factors and stigma in help seeking. Vogel et al., (2013) reported that this scale underrepresented collectivism as it was developed in a Western country. Although such, many studies have found that this scale possesses good internal reliability and is unidimensional which makes it a good measure to study cross-cultural effects on stigma. Studies using Asian samples (Choi and Miller (2014)) have also utilised this scale and found that it measured cultural factors influence on stigma in psychological help-seeking. Therefore, the hypothesis stating that the scale has moderate reliability and validity is not supported as the scale has good reliability and validity in determining the influence of stigma psychological help-seeking attitude.

Attitudes Toward Seeking Professional Psychological Help Scale Short Form (ATSPPH-SF)
The Attitudes Toward Seeking Professional Psychological Scale Short Form (ATSPPH-SF) was developed by Fisher and Turner in 1970 to measure attitudes towards seeking professional psychological help. This scale consists of 10 items such as, ‘Although there are clinics for people with mental troubles, I would not have much faith in them (item 1), and emotional difficulties, like many things, tend to work out by themselves (item 9). Participants will need to rate how much they agree with certain statements regarding seeking help from a psychiatric or mental health professional on a 4-point Likert scale (0 = disagreement, 1 = probable disagreement, 2 = probable agreement and 3 = 72 agreement). After the
reverse scoring for all the 10 items, the total score indicates participants’ help-seeking attitude. A high score indicates positive attitudes towards seeking professional help in mental health services. The internal reliability was .83 (Fischer & Turner, 1970). This scale also demonstrated strong validity when known-group validity tests were run (Fischer and Turner, 1970).

Test-retest reliability among Malaysian samples showed strong correlation of r=.741 (Chian & Louis, 2009). A local study on Psychological help-Seeking Attitudes among Malaysian university and college students conducted by Salim (2010) found that this scale showed good and moderately strong consistencies, r=.86 (n=26), and r=.89 (n=47) throughout test-retest reliabilities. Four subscales were studied through this scale namely recognition of need for psychological help, stigma tolerance, interpersonal openness and confidence in helpers. In a study on stigma of mental illness and attitudes toward psychological help-seeking in Jordanian University Students, Ahmad Rayan and Amani Jaradat (2016) found that this scale had Cronbach’s α= 0.82. This scale measured variables such as gender, past experiences, specialty, and stigma. A study by Palmer (2009) on the reliability and validity of the Attitudes Toward Seeking Professional Psychological Help Scale among Jamaican Americans showed that the estimate of Cronbach’s alpha reliability coefficient for the overall ATSPPHS-SF with the Jamaican American 73 sample was α = .87. This result represents strong reliability for the overall scores of the scale and shared similar findings with Fischer and Turner’s (1970) original standardised population. Validity of the ATSPPHS-SF was not established with the Jamaican American sample. Concerning the reliability and validity of the ATSPPHS-SF, the research investigating Asian-Americans only referred to the original test-retest reliability estimates of .83 (Fischer & Turner, 1970; Atkinson & Gim, 1989). However, no evaluation of the ATSPPHS-SF was made to demonstrate validation with use among the sampled group of Chinese American, Japanese American, and Korean American students.

Zhang and Dixon (2003) examined acculturation and attitudes toward seeking psychological help among Asian international students. The hypotheses stated that the four factors of the ATSPPHS-SF representing recognition for need, stigma tolerance, interpersonal openness, and confidence in practitioners (Fischer & Turner, 1970), would all have a
relationship with acculturation among Asian international students (Zhang & Dixon, 2003). The study surveyed 170 Asian international graduate and undergraduate students with the majority representing the nations of China, Korea, Japan, India, Thailand, Taiwan, Malaysia, Indonesia, and a small percentage participating from Singapore, the Philippines, and Nepal (Zhang & Dixon, 2003).

Regarding the reliability and validity of the ATSPPHS-SF Zhang and Gim (2003) mirrored Atkinson and Gim’s (1989) study by only discussing the reliability generated from Fischer and Turner’s (1970) findings resulting from the instrument’s standardisation. The literature has shown that various ethnic groups differ widely in relation to help-seeking patterns, utilisation, and attitudes toward mental health services (Bayer and Peay, 1997; Van OS et al., 1997) and therefore it was not surprising to find ethnic differences in relation to ATSPPH-SF in studies. Picco et al., (2016) stated that Malays were significantly less likely to be opened to seeking psychological help, whilst both Malays and Indians were less likely to value seeking psychological help. These findings can be explained by various influencing factors measured by this scale. This scale is widely used to study psychological help-seeking attitudes. As such, local studies like Salim (2010) and Picco et al., (2016) discovered that this scale is a reliable and valid instrument in studying psychological help-seeking attitudes among college or university students. It not only showed good reliability coefficients in most studies, but also proved as a good measure in studying psychological help-seeking attitudes among cross-cultural samples such as international students (Zhang & Dixon, 2003).

RESULTS

Normality of test was run to examine the normality of the research data data. A normality test was run in order to ensure that the data set is normally distributed. The significance value of Kolmogorov-Smirnov must be $p>0.05$ (Teegavarapu, 2019). As such, all constructs are normally distributed with p value ranging from 0.07 to 0.20 (see Table 1).

Normality Test

Table 1: Normality Test Results for Constructs

<table>
<thead>
<tr>
<th>Construct</th>
<th>Kolmogorov-Smirnov</th>
<th>Number of Responses (N)</th>
</tr>
</thead>
</table>

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Reliability Analysis

Reliability test refers to how dependably or consistently a test measures a characteristic (Livingston, 2018). To certify that the item was reliable and valid, a reliability test was conducted. Cronbach’s alpha was used to find out the strength of reliability and consistency. Cronbach’s alpha reliability score of 0.70 or higher was considered good reliability, 0.80 or higher is better, and 0.90 or higher is best (Cortina, 1993).

<table>
<thead>
<tr>
<th>Table 2: Cronbach’s Alpha Reliability Test Results</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Factors</strong></td>
</tr>
<tr>
<td>-----------------------------</td>
</tr>
<tr>
<td>Attitudes Toward Seeking Professional Psychological Help Scale-Short Form (ATSPPH-SF)</td>
</tr>
<tr>
<td>Individualism And Collectivism Scale (IND-COL)</td>
</tr>
<tr>
<td>Loss of Face Scale (LOF)</td>
</tr>
<tr>
<td>Portrait Values Questionnaire (PVQ-21)</td>
</tr>
<tr>
<td>Perceptions of Stigmatization by Others for Seeking Help Scale (PSOSH)</td>
</tr>
<tr>
<td>Self-Stigma of Seeking Psychology Help Scale (SSOSH)</td>
</tr>
<tr>
<td>Overall</td>
</tr>
</tbody>
</table>

Table 2 indicates the Cronbach’s Alpha reliability test result on the research’s questionnaires. The highest factor with the Cronbach’s Alpha value is PSOSH with 0.90 which is excellent while the lowest factor of Cronbach’s Alpha is SSOSH and ATSPPH-SF with 0.61 which is acceptable. The ATSPPH-SF has adequate psychometric properties with a one-factor structure and Cronbach’s alpha of 0.84 (Li et al., 2016). Given the goodness-of-fit of the 10-item ATSPPH-SF, this model has good reliability with 0.96 Cronbach’s Alpha value with Arabian students (Rayan et al., 2020).
In this study, the LOF scale has a good reliability with Cronbach’s Alpha value 0.85. The LOF measure was internally consistent with an alpha of 0.83 (Zane et al., 2002). Like the findings of this study, the PVQ-21 Cronbach’s internal reliability coefficients were greater than 0.80 (Schwartz et al., 2021). The PSOSH scale in this study has an excellent reliability with 0.90 Cronbach’s Alpha value, like a previous study (Vogel et al., 2009). Similarly, the reliability of SSOSH was lesser but still acceptable to that obtained in the previous studies (Vogel et al., 2006). The overall questionnaire had a very excellent and high Cronbach’s Alpha value which is 0.90, consisting of a total of 83 items. This shows that the questionnaires are reliable as the overall Cronbach’s Alpha value is above 0.70.

Reliability tests were also conducted for questionnaires with sub-constructs. As such, the INDCOL scale has two subconstructs, namely Individualism (IND) and Collectivism (COL).

Table 3: Cronbach’s Alpha Reliability by INDCOL Constructs.

<table>
<thead>
<tr>
<th>Factors</th>
<th>Cronbach’s Alpha</th>
<th>Description</th>
<th>No. of Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individualism</td>
<td>0.71</td>
<td>Acceptable</td>
<td>8</td>
</tr>
<tr>
<td>Collectivism</td>
<td>0.71</td>
<td>Acceptable</td>
<td>8</td>
</tr>
<tr>
<td>INDCOL</td>
<td>0.73</td>
<td>Acceptable</td>
<td>16</td>
</tr>
</tbody>
</table>

Table 3 shows the Cronbach’s Alpha value of each construct measured in the INDCOL scale. Both the Individualism and Collectivism subconstructs yielded an acceptable Cronbach’s Alpha value which is 0.71 and as overall, this scale has an acceptable Cronbach’s Alpha value which is 0.73. Khan (2020) found that the INDCOL Scale yielded good reliability with a 0.70 Cronbach’s Alpha value. The Horizontal and Vertical Individualism and Collectivism Scale (INDCOL) is a brief, easy-to-use and good tool to measure individualism and collectivism at individual level (Germani et al., 2020).

Table 4: Cronbach’s Alpha Reliability by Portrait Values Questionnaire (PVQ-21) Constructs

<table>
<thead>
<tr>
<th>Factors</th>
<th>Cronbach’s Alpha</th>
<th>Description</th>
<th>No. of Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Openness to Change (OTC)</td>
<td>0.61</td>
<td>Acceptable</td>
<td>4</td>
</tr>
<tr>
<td>Self-Enhancement (SE)</td>
<td>0.73</td>
<td>Acceptable</td>
<td>6</td>
</tr>
<tr>
<td>Self-Transcendence (ST)</td>
<td>0.79</td>
<td>Acceptable</td>
<td>5</td>
</tr>
<tr>
<td>Conservation (CO)</td>
<td>0.69</td>
<td>Acceptable</td>
<td>6</td>
</tr>
</tbody>
</table>
PVQ-21 0.89 Acceptable 21

Table 4 shows the reliability analysis results for the subconstructs of the Portrait Value Questionnaire (PVQ -21) scale. There is a total of four subconstructs in this scale, namely Openness to Change (OTC), Self-Enhancement (SE), Self-Transcendence (ST) and Conservation (CO). The highest Cronbach’s value shown in Table 11 is for the ST subconstruct with 0.79 and the lowest Cronbach’s Alpha value is for the OTC subconstruct with 0.61. However, all the subconstructs yielded an acceptable Cronbach’s Alpha value. This shows that the PVQ-21 scale is a reliable measure in studying values pertaining to culture. Similarly, Schwartz et al., (2021) studied the psychometrics of PVQ-21 in 49 cultural groups and found that the Cronbach’s internal reliability coefficients were greater than 0.80. The scale measured all four higher order values reliably in every cultural group. Therefore, PVQ 21 was deemed to be an acceptable model fit indices in most cultural groups (Schwartz et al., 2021).

Validity
In this study, validity was measured for each scale. The validity of unidimensional scales like the Attitudes towards Seeking Professional Psychological Help Scale- Short Form (ATSPPH-SF), Loss of Face (LOF), Perceptions of Stigmatisation by Others for Seeking Help Scale (PSOSH), AND Self-Stigma of Seeking Psychological Help (SSOSH) were measured using the factor analysis method.

<table>
<thead>
<tr>
<th>Scales</th>
<th>KMO</th>
<th>Bartlett’s Test Significance (p)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attitudes Toward Seeking Professional Psychological Help Scale-Short Form</td>
<td>0.63</td>
<td>107.018 &lt; 0.00</td>
</tr>
<tr>
<td>Loss of Face</td>
<td>0.63</td>
<td>486.406 &lt; 0.00</td>
</tr>
<tr>
<td>Perceptions of Stigmatisation by Others for Seeking Help Scale</td>
<td>0.84</td>
<td>167.947 &lt; 0.00</td>
</tr>
<tr>
<td>Self-Stigma of Seeking Psychology Help</td>
<td>0.67</td>
<td>161.133 &lt; 0.00</td>
</tr>
</tbody>
</table>

Table 5 shows the Kaiser-Meyler-Olkin (KMO) and Bartlett’s Test results for four questionnaires. The KMO ranges from 0 to 1, but the general acceptance index is over 0.6 (Hoque and Awang, 2016). Additionally, the significance value of Bartlett’s Test of Sphericity must be less than 0.05.
for the factor analysis to be acceptable. The scale with the highest KMO value is the PSOSH scale with 0.84, and the lowest KMO value is for the ATSPPH and the LOF scale with 0.63. The Bartlett’s p-value for all the scales is <0.00 which is significant, therefore it is suggested that the data is adequate and appropriate to proceed further.

**Convergent Validity**

Convergent validity analysis was conducted to indicate how closely a scale is related to other variables and other measures of the same construct (Streiner *et al.*, 2015). Pearson’s *r* was used to determine whether correlations existed between constructs based on existing correlation standards such as *r* = 0 means no correlation, 0.00 to 0.19 means very weak, 0.20 to 0.39 means weak, 0.40 to 0.59 means moderate, 0.60 to 0.79 means strong, 0.80 to 1 means very strong (Laerd Statistics, 2018). The alpha level of significance was set at 0.05, therefore a *p* value of 0.05 or lower was considered significant (Laerd Statistics, 2018).

Table 6: Convergent Validity Analysis for INDCOL

<table>
<thead>
<tr>
<th>Construct</th>
<th>IND-COL</th>
<th><em>r</em> values</th>
<th><em>p</em> values</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individualism</td>
<td>IND-COL</td>
<td>0.81</td>
<td>&lt; 0.00</td>
</tr>
<tr>
<td>Collectivism</td>
<td>IND-COL</td>
<td>0.73</td>
<td>&lt; 0.00</td>
</tr>
</tbody>
</table>

*Note. r = Pearson correlation values, p = significance.*

Table 6 shows the *r* value and *p* value of each construct in the INDCOL scale. The Individualism (IND) scale showed 0.81 correlation while the Collectivism (COL) scale showed 0.73 with a <0.00 Cronbach’s Alpha significance level. The difference between the two correlation coefficients was statistically significant. The INDCOL Scale was significant and moderately to strongly correlated with the dimensions of individualism and collectivism (Khan, 2020). This model showed good convergent validity and is a reliable and valid instrument to assess individuals’ individualism and collectivism (Germani *et al.*, 2019).
Table 7: Convergent Validity Analysis for Portrait Values Questionnaire

<table>
<thead>
<tr>
<th></th>
<th>Openness to Change</th>
<th>PVQ-21</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>r values</strong></td>
<td>0.82</td>
<td>1</td>
</tr>
<tr>
<td><strong>p values</strong></td>
<td>&lt; 0.00</td>
<td></td>
</tr>
<tr>
<td><strong>Self-Enhancement PVQ-21</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>r values</strong></td>
<td>0.85</td>
<td>1</td>
</tr>
<tr>
<td><strong>p values</strong></td>
<td>&lt; 0.00</td>
<td></td>
</tr>
<tr>
<td><strong>Self-Transcendence PVQ-21</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>r values</strong></td>
<td>0.88</td>
<td>1</td>
</tr>
<tr>
<td><strong>p values</strong></td>
<td>&lt; 0.00</td>
<td></td>
</tr>
<tr>
<td><strong>Conservation PVQ-21</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>r values</strong></td>
<td>0.90</td>
<td>1</td>
</tr>
<tr>
<td><strong>p values</strong></td>
<td>&lt; 0.00</td>
<td></td>
</tr>
</tbody>
</table>

Note. \( r \) = Pearson correlation values, \( p \) = significance.

Table 7 shows the Pearson Correlation values for the four subconstructs measured by the PVQ-21 scale. The subconstruct with the highest Pearson Correlation value is Conservation (CO) while the Openness to Change (OTC) subconstruct has the lowest \( r \) value, 0.82, with all sub-con structs showing a significant Cronbach Alpha value, \( p = <0.00 \). All the scores of Pearson’s Correlation value for the four subconstructs yielded an excellent and acceptable value (Sandy et al., 2016).

DISCUSSION

The questionnaire consisting of six instruments has good reliability and validity with Malaysian students. Literature suggests that Malaysian cultural factors and stigma limited trust in the mental health professionals and the mental health services among the Malaysian students (Alavi et al., 2014; Salim, 2010; Mohan et al., 2012). However, there is a need to find a specific research instrument that measures ATSPPH, culture and stigma. The instrument would be helpful to correlate ATSPPH with various cultural and stigma barriers about mental health services and develop effective interventions that may help alter these attitudes. Malaysian students tend to face their psychological problems by themselves or seek help from their friends, kin, or community members rather than from a professional (Maki & Kitano, 2002). This finding is in line with that of Khan (2009) which revealed that students perceive that their family and friends can reduce their depression through care and attention. Students believe that social support and confrontation or talking to friends are better...
than professional psychological help-seeking (Rayan and Fawaz, 2018; Rayan and Jaradat, 2016).

Given the goodness-of-fit of the 10-item ATSPPH-SF, this instrument can be used in a multicultural population. The good reliability coefficients of the ATSPPH-SF could indicate that these 10 items had a high percent of equivalence for the concept of help-seeking. Similarly, the IND-COL, LOF and PVQ-21 scales which will be used to examine cultural factors showed good reliability coefficients. Multiscales like INDCOL and PVQ-21 were tested for their reliability by constructs. Results revealed that the reliability was acceptable and is a good tool to measure individualism and collectivism at individual level as well as to be an acceptable model fit in most cultural groups (Germani et al., 2020; Schwartz et al., 2021). Despite having reliable and valid instruments to examine cultural factors and their effects towards psychological help-seeking attitudes, there is still a mismatch shown between the increase in the prevalences of mental health cases and the lack of utilisation of mental health services (Norhayati et al., 2019). These aspects might be associated with relatively low scores on ATSPPH-SF and high scores on INDCOL, LOF and PVQ-21.

University students often avoid seeking help due to the fear of being stigmatised especially in collectivistic culture (Norhayati et al., 2019). Given the goodness-of-fit of the PSOSH and SSOSH scale, these scales show a good reliability and are suitable to be used to examine self-stigma and public stigma among a multicultural population (Vogel et al., 2009; Vogel et al., 2006). Another study found that SSOSH has a similar univariate structure across countries and is sufficiently invariant across countries to be used to explore cultural differences in the way that self-stigma relates to help-seeking behaviour (Vogel et al., 2013). The PSOSH was also found to be related to, but distinct from, other measures of stigma and help-seeking attitudes and to provide unique information for our understanding of self-stigma (Vogel et al., 2009). As stigma may be a barrier to professional psychological help seeking, efforts to reduce stigma in this population need to be intensified.

CONCLUSION
The current study adds knowledge to the body of psychological help-seeking attitudes in a multicultural population. The ATSPPH-SF can be an instrument of choice in measuring help-seeking attitudes among
university students in Malaysia as it demonstrates good reliability and validity. The cultural factors that play a role in determining help-seeking attitudes can be measured with PVQ-21, LOF, and INDCOL scales as they show good fit in a diverse population. Scales examining levels of self-stigma and public stigma, SSOSH and PSOSH showed good reliability and validity and therefore can be utilised to study the effects of stigma in help-seeking attitudes.

**Conflict of Interest**
The authors have no conflicts of interest to declare and there is no financial interest to report. I certify that the submission is original work and is not under review at any other publication.

**Ethics Statement**
This material is the authors' own original work, which has not been previously published elsewhere. The paper is not currently being considered for publication elsewhere. The paper reflects the authors' own research and analysis in a truthful and complete manner.

**Author Contributions**
The authors confirm contribution to the paper as follows: study conception and design: A. Kesantini; data collection: A. Kesantini; analysis and interpretation of results: A. Kesantini, C.Getrude; draft article preparation: A.Kesantini, C.Getrude. All authors reviewed the results and approved the final version of the manuscript.

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**Data Availability Statement**
The author confirms that the data supporting the findings of this study are available within the article and the references column.

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