



Breaking the Silence: Exploring the Mental Health Stigma and Attitudes Towards Seeking Professional Psychological Help among College Students

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ABSTRACT

In recent years, the stigma surrounding mental health has gained significant attention, yet stigma remains a formidable barrier to seeking professional psychological help, particularly among college students. The primary aim of the study was to evaluate the role of mental health stigma in influencing attitudes towards seeking professional psychological help among college students. The research utilized a cross-sectional design with a retrospective approach, involving 100 college students aged between 18 to 25 years, encompassing both genders, selected through convenience sampling. The instruments employed in the study included a socio-demographic sheet, the Revised - Attitudes Toward Seeking Professional Psychological Help Scale-Short Form (ATSPPH-SF), Perceived Public Stigma, and Personal Stigma Scale. Descriptive analysis, Pearson Correlation Coefficient, and Stepwise Regression Analysis was used for the analysis. The findings of the study revealed that male students exhibited higher scores on Perceived Stigma and Personal Stigma compared to female students, while female students demonstrated greater scores on Attitude towards Seeking Professional Psychological Help in contrast to male students. Moreover, both Perceived Stigma and Personal Stigma were significantly negatively correlated with Attitude towards Seeking Professional Psychological

Help. Furthermore, Perceived Stigma and Personal Stigma were significantly positively associated with each other. Additionally, Personal Stigma, rather than Perceived Stigma, significantly negatively predicted Attitudes towards Seeking Professional Psychological Help, with personal stigma accounting for 26% of the variance in attitudes among college students. Mental health stigma emerged as a substantial barrier to seeking psychological help. The findings underscore the critical need for targeted interventions aimed at destigmatizing mental health issues and promoting help-seeking behaviours among college students.

Keywords: *Perceived Stigma, Personal Stigma, Attitudes Toward Seeking Professional Psychological Help, College Students.*

INTRODUCTION

According to a 2020-2021 study, it was found that over 60% of university students fulfil the criteria for at least one mental health issue (Lipson et al., 2022). In the year 2023, a significant 76% of college students encountered moderate to severe degree of psychological distress, with anxiety diagnosed in 36% of them and depression in 28%. Additionally, college students are also affected by other mental health conditions such as trauma, bipolar disorders, eating disorders, substance use disorders and obsessive-compulsive disorders (American College Health Association, 2023).

According to the College Student Mental Health Report (2022), it was revealed that approximately 40% of students believe that their educational institution is not adequately addressing the issue of student mental health. In addition, of the 40% of students who reported their mental health as fair or poor, only 20% sought help within the school premises. It is crucial to prioritize the management of mental health issues among college students, as research indicates that before the age of 24 nearly 75% of mental disorders manifests (Kessler et al., 2005). Additionally, early mental health issues have been linked to negative consequences in academic performance, career prospects, physical health, and social interactions (Ettner et al., 1997; Breslau et al., 2008; Kessler et al., 1998; Eisenberg et al., 2009).

Despite the higher prevalence of mental health issues among college students and significant negative repercussions, a considerable percentage of students are seeking professional help. Hence, it's crucial to explore the factors influencing their “Attitudes Toward Seeking Professional Psychological Help” (hereafter, referred to as ATSPPH). Upon reviewing the literature, mental health stigma emerged as a significant influencer on students' willingness to seek professional help. While, mental illness stigma is a commonly used term, it manifests

in various specific forms (Eisenberg et al., 2009). Perceived stigma pertains to the degree to which individuals perceive that society as a whole maintains stigmatising attitudes towards mental illness, while Personal stigma pertains to the degree to which individuals personally maintain stigmatising attitudes towards mental illness (Evans et al., 2023).

Stigma and discrimination have the potential to exacerbate symptoms, decrease the chances of seeking treatment, diminish optimism, lower self-worth, intensify psychiatric manifestations, impede social interactions, decrease treatment adherence, and create challenges in the workplace (Singhal, 2024). Therefore, the present study aimed to assess the association between Perceived Public Stigma, Personal Stigma and ATSPPH among college students.

METHODOLOGY

Research Objectives

1. To examine gender differences in Perceived Stigma, Personal Stigma, and ATSPPH among college students.
2. To explore the relationship between Perceived Stigma, Personal Stigma, and ATSPPH among college students.
3. To determine whether Perceived Stigma and Personal Stigma significantly predict ATSPPH among college students.

Hypotheses

H1: There is a significant difference in Perceived Stigma and personal Stigma scores between male and female college students.

H2: There is a significant association between Perceived Stigma, Personal Stigma and ATSPPH among college students.

H3: Perceived Stigma and Personal Stigma significantly predict ATSPPH among college students.

METHODS AND PARTICIPANTS

The study adhered to the principles outlined in the Declaration of Helsinki. It utilized a cross-sectional design with a retrospective approach and was conducted in Jaipur between March and April 2024. Initially, a brief introduction about the study and its rationale was circulated to college students through WhatsApp groups and Facebook. Upon receiving consent from the students to participate, a Google Form containing a standardized self-report

questionnaire was shared. The data were collected using a Google Form due to the widespread access to the internet and higher levels of computer literacy among college students (Couper, 2000). To mitigate response bias, students were assured of the confidentiality of their data and informed that it would be used solely for research purposes. The study included a sample of 100 college students who met the following inclusion and exclusion criteria: individuals of both sexes aged 18 to 25, proficient in reading and understanding the English language. Exclusion criteria comprised students with a history of severe psychiatric illness and medical conditions. Simple random sampling was employed to recruit participants for the study.

Materials

Socio-Demographic Sheet: It consists of students' age, sex, family type, marital status, education and residence.

Revised - Attitudes Toward Seeking Professional Psychological Help Scale-Short Form (ATSPPH-SF): The measurement of general attitudes toward seeking professional help for mental health problems was conducted using the 10-item revised ATSPPH-SF. Participants rated each item on a 4-point Likert-type scale, with a score of 3 indicating agreement and a score of 0 indicating disagreement. Items 2, 4, 8, 9, and 10 were scored in reverse. To obtain a total score, the individual item scores were summed together. Greater scores on the scale indicate a positive outlook on seeking professional assistance. The relationship between the 10-item version and the full 29-item scale was determined to be 0.87 (Picco et al., 2016; Fischer & Farina, 1995).

Perceived Public Stigma (PPS): The PPS is an adapted version of the Perceived-Devaluation-Discrimination Scale which was initially developed by Link and colleagues in 1989. However, in the present study, we utilized the adapted version of the PDD scale, as proposed by Eisenberg et al. in 2009, to measure perceived stigma among college students. This adapted scale comprises 12 items, with each statement rated on a 6-point Likert scale, ranging from "strongly agree" (0) to "strongly disagree" (5). The adapted scale demonstrated high internal reliability, with a Cronbach's alpha coefficient of .89, indicating the consistency of responses across the items (Eisenberg et al., 2009).

Personal Stigma: The Personal Stigma scale was created by modifying three items from the perceived stigma scale, replacing the phrase "Most people" with "I." These three items addressed negative attitudes, accepting behaviours, and accepting attitudes. An index of personal stigma was established by averaging the scores of the three items on a scale of 0 to 5, where higher scores indicate higher levels of stigma, similar to the approach used for perceived

stigma. The internal consistency of this scale was found to be relatively high (Cronbach's $\alpha = .78$) (Eisenberg et al., 2009).

Statistical Analysis

The study utilized IBM-SPSS version 22.0 for Windows, developed by IBM Corp. (Armonk, NY) and released in 2013, for data analysis. Descriptive analysis was initially conducted to examine the frequency, mean, and standard deviation (SD) of the study variables. Subsequently, the Pearson Correlation Coefficient was employed to investigate the significant relationships among Perceived Stigma, Personal Stigma, and ATSPPH in college students. Finally, Stepwise regression analysis was employed to determine whether Perceived Stigma and Personal Stigma significantly predicted ATSPPH in college students. The significance level for all analyses was set at $p < 0.05$.

RESULTS

Socio-Demographic Characteristics

The study sample consisted of 100 college students, with a mean age of 21.57 years ($SD = 2.22$). The sample comprised 62% male students and 38% female students. Regarding academic pursuits, 59% of students were pursuing PG courses, while 41% were pursuing UG courses. In terms of family structure, 45% of students belonged to joint families, while 55% belonged to nuclear families. The majority of students resided in urban areas (85%), with 15% residing in rural areas. Additionally, all students were unmarried (100%).

Comparative Analysis

The study conducted Independent t-tests to examine significant differences based on gender among the study variables. Results presented in Table 1 revealed that male students exhibited higher Perceived Stigma scores ($M = 44.23$, $SD = 7.71$) compared to female students ($M = 38.29$, $SD = 2.40$), a difference that was statistically significant ($t = 5.628$, $p < 0.01$), with a Cohen's d effect size of 1.11. Similarly, male students demonstrated higher Personal Stigma scores ($M = 12.79$, $SD = 1.01$) compared to female students ($M = 10.60$, $SD = 1.70$), a difference that was statistically significant ($t = 7.180$, $p < 0.01$), with a Cohen's d effect size of 1.56. In contrast, female students exhibited higher scores on ATSPPH ($M = 11.76$, $SD = 3.75$) compared to male students ($M = 9.14$, $SD = 1.42$), a difference that was statistically significant ($t = -4.116$, $p < 0.01$), with a Cohen's d effect size of 0.92.

Table 1*Comparison of Study Variables between Male and Female College Students*

Variables	Groups	Mean	SD	T	P	Cohen's d
Perceived Stigma	Male	44.23	7.71	5.628	.000	1.11
	Female	38.29	2.40			
Personal Stigma	Male	12.79	1.01	7.180	.000	1.56
	Female	10.60	1.70			
ATSPPH	Male	9.14	1.42	-4.116	.000	0.92
	Female	11.76	3.75			

Note: *ATSPPH*= Attitude Towards Seeking Professional Psychological Help

Pearson Correlation Analysis

The study conducted Pearson Correlation analysis to assess the relationships between the study variables. The results, presented in Table 2, indicate that Perceived stigma and Personal stigma exhibited a significant positive relationship with each other ($r = .279$, $p < 0.01$). Furthermore, ATSPPH demonstrated a significant inverse correlation with Perceived stigma ($r = -.270$, $p < 0.01$) and Personal stigma ($r = -.512$, $p < 0.01$).

Table 2*Correlation analysis of the Perceived stigma, Personal stigma and ATSPPH*

	Perceived Stigma	Personal Stigma	ATSPPH H	Mea n	SD
Perceived Stigma	-			41.97	6.873
Personal Stigma	.279**	-		11.96	1.68
ATSPPH	-.270**	-.512**	-	10.14	2.85

Note: **Significance at 0.01 level; ATSPPH= Attitude Towards Seeking Professional Psychological Help

Stepwise Regression Analysis

The study employed Stepwise Regression Analysis to examine whether Personal and Perceived stigma could predict ATSPPH in college students. Results presented in Table 3 revealed that Personal stigma significantly and negatively predicted ATSPPH ($\beta = -.867$, $p <$

0.01) among college students. The R-squared value ($R^2 = 0.26$) indicated that 26% of the variance in ATSPPH can be explained by Personal stigma. Conversely, Perceived stigma did not significantly predict ATSPPH among college students.

Table 3
Stepwise Regression Analysis Predicting ATSPPH

Predictors	β	95% CI		T	P
		LLCI	ULCI		
(Constant)	20.513	16.992	24.034	11.562	.000**
Personal Stigma	-.867	-1.159	-.576	-5.904	.000**

Durbin - Watson = 1.775; $R^2 = 0.26$; ** $P < 0.01$



Figure 1: *Attitude Towards Seeking Professional Psychological Help*

DISCUSSION

This study aimed to explore the role of mental health stigma in influencing ATSPPH in college students. The findings of the study are discussed following prior hypotheses and the existing body of literature.

The primary findings of the study were that there were significant sex differences in Perceived stigma, Personal Stigma and ATSPPH in college students. In particular, male students showed a higher level of Personal stigma compared to female students which is consistent with previous studies (Pompeo-Fargnoli, 2022; Eisenberg et al., 2009). Studies have indicated that gender is a significant factor that significantly predicts Personal stigma.

A study conducted on medical students, which used Depression Stigma Scale (DSS) to measure personal stigma indicated that males had a mean score of 14.85 on DSS, compared to 12.99 for females. Males were also more likely to agree with statements like "I would not vote for a class cadre if I knew they had been depressed" and "I would not make friends with him if I knew he had been depressed compared to females (Qiu et al., 2022). Some studies suggest

that each gender may express self-stigma differently. For instance, within the demographic of young adults suffering from mental illness, the self-stigma experienced by men is associated with their diagnosis of mental illness, whereas women's self-stigma is linked to their perception of being scrutinized by others due to their mental illness diagnosis (Elkington et al., 2012). In addition, Men who have been diagnosed with schizophrenia have raised concerns regarding the stigma surrounding mental illness in the workplace. In contrast, women have expressed concerns about both the stigma associated with mental illness and its effects on their relationships with significant others i.e. family members (Loganathan & Murthy, 2011).

Similarly, the study also found that male students had higher levels of perceived stigma than female students. The findings are in contrast to the previous findings where a study has reported that the mean score for overall perceived stigma did not show any statistically significant difference between males and females (Ataro et al., 2020). In contrast, a recent study involving 60 patients seeking psychiatric assistance at a clinic in Bangalore, revealed that women expressed a higher level of perceived stigma related to mental illness in comparison to men. The authors of this particular study propose that women might possess a heightened sensitivity towards various types of stigmas, including mental health stigma, due to their regular exposure to discriminatory practices associated with their gender status in India (Kulesza et al., 2014).

Based on these findings, it can be assumed that the gender difference concerning perceived stigma is not clearly defined. Further research is warranted to assess whether males or females hold higher levels of perceived stigma related to mental health conditions. Addressing these mental health stigmas is crucial as gender-based stigma has the potential to significantly influence a student's educational achievements. When educators propagate the belief that certain genders are inherently inferior in subjects like math or science, students may absorb these messages, resulting in decreased motivation and reluctance to engage with challenging coursework in these areas. Consequently, these stereotypes can have long-lasting repercussions on students' future professional opportunities. Additionally, transgender individuals frequently encounter bias and mistreatment from both classmates and teachers, contributing to emotions of embarrassment, inequity, and self-blame that can impede their academic success (Varthana, 2013).

The present study also revealed that ATSPPH was more prevalent among female students in comparison to male students, a trend that has been supported by previous research. Existing studies have shown that females are more inclined to seek professional psychological assistance than men (Nam et al., 2010). Some studies proposed that the variance in attitudes

towards seeking psychological aid may be a reflection of gender role distinctions (Judd et al., 2008). For instance, men's social status, higher degree of authority, and problem-solving or decision-making capabilities may impact their acceptance of a mental disorder diagnosis. Their challenges in expressing emotions and feelings could also affect their willingness to seek help for psychological issues, traditional male stereotypes and the depiction of men as powerful by the media (Shawcroft & Coyne, 2022; Amit et al., 2009; Chan & Hayashi, 2010; Judd et al., 2008), as well as the limited emotional expression among male students (Nam et al., 2010), lack of motivation, stigma associated with emotional disclosure, and fear of intimacy (Silverberg, 1986). Additionally, it has been noted that female students exhibit a propensity for adopting more moderate perspectives when it comes to seeking assistance, primarily owing to their inclination towards embracing novel concepts (Nam et al., 2010).

The current study explored the association between Perceived stigma, Personal stigma, and ATSPPH. Results revealed a significant negative correlation between Perceived stigma, Personal stigma, and ATSPPH. Upon further examination of the impact of Personal stigma and Perceived stigma on ATSPPH, it was observed that Personal stigma, rather than Perceived stigma, significantly predicted ATSPPH in college students. Previous research has consistently highlighted mental health stigma as a major obstacle to seeking psychological assistance (Eisenberg et al., 2009). In a research study, it was noted that Attitudes towards help-seeking were significantly predicted by personal stigma. In the same study, it was observed that there existed a negative correlation between individuals' attitudes towards seeking help and their personal stigma. This implies that individuals who held more positive attitudes towards seeking help tended to have lower levels of personal stigma. Furthermore, it has been found that there exists a weak association between elevated levels of positive ATSPPH and the presence of public stigma (Evans et al., 2023). There are two main levels at which mental illness stigma is typically understood: Perceived stigma and Personal stigma. Perceived stigma refers to the extent to which individuals believe that society as a whole holds stigmatising attitudes towards mental illness, whereas Personal stigma refers to the extent to which individuals personally hold stigmatising attitudes towards mental illness (Evans et al., 2023).

Stigma and discrimination have the potential to exacerbate symptoms, decrease the chances of seeking treatment, diminish optimism, lower self-worth, intensify psychiatric manifestations, impede social interactions, decrease treatment adherence, and create challenges in the workplace (Singhal, 2024). According to the Basic models of help-seeking for health problems, an individual's inclination to recognize the necessity for help and their evaluation of the advantages and drawbacks of receiving treatment is likely to be influenced by their beliefs

and attitudes towards mental illness and its treatment. Consequently, these factors play a crucial role in determining whether the individual will actively seek treatment or not (Eisenberg et al., 2009).

Following previous studies the present study suggests that as individuals perceive stigma more strongly, they also tend to internalize it more, leading to increased personal stigma (Pompeo-Fargnoli, 2022). Eisenberg and colleagues' study suggests a strong association between personal stigma and perceived stigma among students. Their findings indicate that students who experience high levels of personal stigma also tend to perceive stigma intensely. This implies that there's a close relationship between how individuals perceive stigma from society and how they internalize it personally. In essence, the study suggests that high personal stigma typically accompanies high perceived stigma, reinforcing the notion that one's perception of societal attitudes influences their own attitudes and beliefs about stigmatized issues (Eisenberg et al., 2009; Link, 1987). Another explanation is that, individuals with high personal stigma may experience cognitive dissonance if they were to acknowledge that their views are not widely shared by others or are socially unacceptable. To alleviate this discomfort, they may engage in a process of assumption, assuming that others hold similar stigmatizing views (Eisenberg et al., 2009). This assumption allows them to maintain consistency between their personal beliefs and their perception of societal attitudes, reducing cognitive dissonance.

Limitation

The study has several limitations. Firstly, its cross-sectional design limits the ability to establish causality, highlighting the need for more robust longitudinal studies to better understand the relationships observed. Secondly, the sample was drawn exclusively from a single institute located in Jaipur, potentially compromising the generalizability of the findings to other settings or populations.

Conclusion

The study results revealed that male students exhibited a greater degree of Perceived stigma and Personal stigma in comparison to their female counterparts. Conversely, female students demonstrated a higher score on ATSPPH when compared to male students. Moreover, it was observed that both Perceived stigma and Personal stigma displayed a significant negative correlation with ATSPPH. Additionally, a significant positive relationship was found between perceived stigma and personal stigma. Upon conducting a thorough examination, it was observed that Personal stigma significantly predicted ATSPPH among college students.

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