



A Systematic Review of Mental Health Stigma and Help Seeking among College Students.

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Abstract

Mental health issues are prevalent among college students in India. College students face the highest risk as per studies. The current chapter aimed to analyze the causes of stigma, factors affecting help seeking and possible interventions to combat stigma and induce seeking care. A comprehensive literature search was carried out. Data was gathered from Google Scholar, PubMed, PsycINFO and Scopus. The studies (45 sources) consisted of qualitative, quantitative, cross-sectional, systematic reviews, experimental, empirical papers, grey literature and interviews from professionals. Gender and prior exposure influence stigma and help seeking. Steps to reduce stigma among students include facilitating contact between the neurodivergent and neurotypical, phrases used with regards to mental health and contact based interventions. Stigma leads to reduced help seeking. Other factors that influence help seeking were fear of labels, victims blamed for their predicament, self-efficacy, distrust of Mental Health Professionals (MHPs), lack of mental health literacy, lack of accessibility, economic burden and denial. Introduction of mental health screening kiosks and Mental health first aid was found to be positive step. There is a gap in the policies regarding mental health and their implementation. Proper allocation of funds for mental health initiatives in college campuses and conception of projects targeting students to promote mental health literacy and equip students to combat suicide have been elaborated upon.

Keywords: *mental health, mental health stigma, help seeking for mental health, college students, barriers for help seeking*

Introduction

Mental health issues are prevalent in approximately 10% of the total world population, with neuropsychiatric (10.9%) and depression (5%) being the most debilitating conditions. College students make up huge chunk of people suffering from depression, anxiety and substance abuse. A data of 2018 revealed that almost 10,000 students per year succumb to suicide. Mental health concerns among college students have increased compared to a decade ago. Many students have pre-existing mental health concerns. The most reported distress was related to interpersonal relationships, which took a shift post 1994. A significant increase in relationship issues, stress, personality disorders, suicidal thoughts and anxiety could be observed from 1988 till 1999. These issues were relatively stable post 1996 till 2001. Depression, grief and academic related problems saw a substantial rise from 1988 to 2001 (APA, 2003) Students display active willingness to seek counselling. Increasing number of college students have sought counselling in the past to address their mental health concern. Williamson observed a need for help required by college students in terms of their academics and career. Counselling centers were conceptualized in 1940s when students were helped by teachers regarding their academic related problems. (Mental Health Issues in College on the Rise, 2013).

Methodology

A rigorous systematic search was done to ascertain the prevalence of mental health and stigmasurrounding it among college students in India and across the world. Additionally, help seeking and barriers faced by students on campus and off campus was also looked at. To understand knowledge, perceptions and attitudes held by college students towards people suffering from mental health issues, relevant publications were navigated. Databases that were used to navigate through were PubMed, Google Scholar, PsycINFO and Scopus. To narrow downon relevant studies, appropriate keywords (*mental health stigma, stigma among college students, barriers to mental health help seeking, policies and procedures to increase help seeking for Mental health*) were used. Relevant research papers found in the reference list of the originalpaper were considered for match with the inclusion criteria. Research papers published between the time of 1998 till 2023 were included for review. Initially 143 papers, articlesand other literature sources were analyzed regarding the required information. Studies related to mental health in general, stigma faced by patients in psychiatric institutions, mental illness among population above the age of 25 were excluded and only those papers were included which presented information on mental health stigma faced by college students and the barriersfaced by them in help seeking for their mental health problems. Additionally, studies

displaying research about perceived stigma faced by students and stigmatized attitudes possessed by students towards their peers suffering from a mental illness were included. Research papers involve cross-sectional studies, quantitative research, qualitative papers, systematic reviews, experimental research and empirical research paper. Furthermore, interviews with professionals and grey literature articles were also incorporated.

Results

Knowledge and Awareness

Female students had high mental health literacy (Siddique et al., 2022) when compared to males who exhibited less knowledge and high stigma. Additionally, students who had good mental health had low mental health literacy. However, male students were more open to communication and the idea of marrying someone with a MH issue (Agarwal, Singh & Kataria, 2016). Many misconceptions surround mental health problems among young population. Support for social isolation, severe punishments and beating as a form of cure was found. Additionally, many students perceived attention seeking to be a driving factor for mental health issues (Nayak & Issac, 2014). Students also attributed infections and food choices as causation for mental illness. Students' attitude towards treatment effectiveness was low (Gaiha et al., 2020). Few students believed that mental illness can only be cured by drugs and hospitalization. On the contrary others opined medications can cause addiction therefore were against prescription of medications (Zolezzi et al., 2017)

Stigma

Mental illness is attributed to dangerous behavior (Zolezzi et al., 2017), violence (Seeman et al., 2016), irresponsible, lack of hygiene, little job-related skills, lack of willpower (Nebhinani et al., 2013) and lack of credibility in India. The sufferer is blamed for their predicament along-with attaching phrases such as difficult to talk to and unpredictable (Bell et al., 2009). Majority of student population regard suicide to be impulsive, deliberate and an act of cowardice (Etzersdorfer et al., 1998). Opening up about suicide was considered to perpetuate suicide (Ram et al., 2017) This leads to resistance in talking about suicidal thoughts. Attitudes were not favorable towards substance use victims and people suffering from acute mental illness (Gaiha et al., 2020) In research conducted on nursing students, many agreed to mental illness as a factor for divorce (Vijayalakshmi et al., 2013). Other studies indicated support towards exclusion of patients from decision making regarding their treatment options (Poreddi et al., 2013) A study indicated that students were ashamed of family history

of mental illness and opined that the mentally ill can't hold regular jobs (Zolezzi et al., 2017).

Help Seeking: Barriers and Facilitators

Factors that act as major barriers are Stigma (perceived, personal), high costs, lack of proper access to facilities, low mental health literacy and shortage of essential resources required for effective treatment (Thornicroft et al., 2023) Cultural factors, preference to self-diagnose and inclination towards informal consultation also play a key role. Students have a fear of being labelled if they openly seek treatment (Ebert et al., 2019) Distrust towards on campus counsellors was also a contributing aspect (Ning et al., 2022). Social, peer support, high literacy, females have been found to encourage helps seeking. (Dong et al., 2022).

A hypothetical situation was presented where a teenager was having symptoms of moderate depression and suicidal ideation. Majority of the respondents felt professional treatment was not required, suggested informal consultations. (Sameed et al., 2016). Studies suggested that college students with suicide ideation in the previous year displayed low intentions to seek help in the future (Arria et al., 2011).

Paediatric residents displayed high perceived stigma. They believed that they won't be hired if the hiring panel got information about them seeking treatment for any mental health issue (Weiss et al., 2021). It is noteworthy that public stigma leads to personal stigma which acts as a huge barrier to seeking treatment for their mental illness (Hilliard et al., 2022). However, contact and education interventions resulted in decreased personal stigma and increase in help seeking (Kosyluk et al., 2016).

Discussion

Arthur Evans, faculty at university of Pennsylvania was interviewed in 2015 to dive deep into mental health stigma and steps taken to enable help seeking. The interview followed mental health stigma among inhabitants of Philadelphia and procedures incorporated to deal with stigma. In order to facilitate help seeking, mental health screening kiosks have been installed in retail pharmacies. This encourages individuals to get feedback on symptoms of mental illness. Mental health professionals engaged in community screenings and education were perceived as more approachable. The Obama administration introduced the affordable care act which makes mental health care easily accessible. Suicide hotlines operate to aid during an emergency psychiatric crisis. Additionally, websites (healthymindsPhilly, Philadelphia) are formulated that contain informative content on mental health first aid and accessibility to services (Arthur & Evans, 2015).

Cardigan (2022), discussed mental health stigma and steps to fight it. Lack of mental health literacy gives rise to speculations but merely educating on mental health has been proven to be ineffective. However, contact based interventions are more effective. In Canada, individuals who have experienced mental health issues are hired to talk to community leaders on stigma which aids in sensitizing them and eliminating stigma to some extent. To encourage people to open on their mental health, anti-stigma project; honest, open, proud has been initiated by Dr Patrick Corrigan and his team. This initiative assists people to take control of the who, where and how they want to open on their mental health. The project can be accessed on HOPProject.org and has been adapted across 12 different cultures and countries (Mills & Corrigan, 2022). Faculty training for Mental health recognition, prevention and intervention must be incorporated in schools and colleges. Mental health holiday can prove beneficial for students (Mental Health Issues in College on the Rise, 2013).

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