



**Understanding Mental Help-Seeking Attitude, Intentions, and Self-Stigma among
Psychology and Non-Psychology College Students**

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Abstract

University students today face a lot of mental health issues due to academic pressure, social adjustment, and financial burdens. These stressors lead to stress, anxiety, and depression in

students but often go unnoticed or dismissed by students. They instead turn to unhealthy coping mechanisms like alcohol, drugs, smoking, etc. to relieve stress instead of seeking help from professionals, as the stigma and taboos surrounding mental health and the fear of judgment in people prevent them from seeking help. The current study aims to understand the help-seeking attitude, intention, and self-stigma among psychology and non-psychology students. A sample of 60 (30 psychology and 30 non-psychology) university students aged 18-23 was taken from Mohali, Punjab. The standardized scale used was, The Mental Help Seeking Attitudes Scale (MHSAS) (Hammer et al., 2018) to assess the attitudes of individuals toward seeking help, The Mental Help-Seeking Intention Scale (MHSIS) (Hammer et al., 2013) was designed to evaluate an individual's intention to seek help, The Self-Stigma Of Seeking Help Scale (SSOSH) (Vogel et al., 2006) was devised to understand the self-stigma individuals' experience when seeking help, and The Attitudes Toward Seeking Professional Psychological Help (ATSPPH) (Fischer et al., 1995) to measure the attitude towards seeking professional psychological help. The results revealed a significantly positive correlation between attitude and intention towards seeking help while a negative correlation exists between self-stigma and seeking professional help. The results also highlight no significant statistical difference in the likelihood of psychology and non-psychology students seeking help. This suggests that a student's field of study had little influence on an individual's possibility of seeking help. It may be helpful; to investigate factors like a support system, cultural background, and exposure to mental health issues.

Keywords: *Mental Health, Help Seeking Attitude, Help Seeking Intentions, Self-Stigma, Professional Help, University Students*

Introduction

University students in this day and age struggle with various mental health problems including academic, social and personal factors that cause stress, anxiety and depression. This occurs due to pressure from increased workload, exam stress, and need for achievement caused by societal and cultural factors. Heavy workloads, high expectations from professors and family, and fear of failure can lead to chronic stress, burnout, and anxiety. Rather than dealing with these problems through seeking help from professionals, students turn to unhealthy coping mechanisms, like substance abuse and dependency (smoking, drinking, drugs, etc.).

The desire to fit in with peers can lead students to make decisions they're uncomfortable with, such as indulging in unhealthy habits and neglecting their personal boundaries or overcommitting socially. Under the weight of this prevailing stress among college going students, their bodies bear the brunt of it. Students undergo physiological effects of stress and develop health conditions like high-blood pressure, migraines, abdominal pain, etc. Overload of work among college students often leads to a reduction in sleep which further causes a reduction in attention span as well as psychological distress with an attachment of sedentary behavior. The transition from school to college, and the fear of not fitting in, loneliness, causes psychological distress. Exposed to relationships, romantic and platonic, and the displacements occurring daily in this age can be a huge adjustment. Financial disparities due to tuition fee, accommodation, transport, is also a struggle and cause for distress.

A lot of students experience shame to seek professional help for these issues. This sort of stigma revolving around seeking help for mental issues points towards bottled-up emotions and feelings of loneliness. Taking mental health support is often equated with being weak or being incapable of dealing with personal problems single-handedly, hence dismaying them from

reaching out for professional help. Many individuals often worry about being judged by their peers and several cultures consider mental health issues to be a taboo. Many times, financial constraints and limited access to good quality services makes it even harder for people to seek support. Gaslighting themselves into believing that their struggles aren't serious enough to justify the cost or effort further deepens the stigma, leaving their needs unmet.

The stats of recognition of the symptoms of mental health challenges, such as anxiety, depression, or burnout has always been low, wherein students dismiss their struggles as normal stress or just a "phase". This specific kind of lack of awareness often fuels the stigma surrounding mental health. Many students might quietly struggle, fearing that reaching out for help could make them seem weak. This fear of being judged or misunderstood by peers can feel overwhelming, leaving them biting their tongue and bottling up their feelings. Not knowing what to expect from therapy can also make the idea of seeking help feel intimidating. Students might find themselves wondering, *"What will the therapist ask me? Will they judge me? What if I say the wrong thing?"* These uncertain questions dwelling in a student's mind can leave them feeling like they're walking into uncharted waters.

The word *"therapy"* often echoes in the mind of people, never as a solution, but as a shameful confession. Numerous students carry an invisible weight of slipping grades, sleepless nights, and a thunderstorm of thoughts, in the corridors of their college campus. The fear of being seen as incapable or too fragile to thrive in college keeps the same students silent. It's a cruel irony that society builds fables and myths around strength, equating it with silence in real life, as though this endurance is a badge of valor. These stereotypes are like invisible walls that keep students locked inside a classroom of their own suffering, too afraid to knock on the door of help. Yet, the truth is: that seeking therapy isn't a weakness; it's an act of gallantry.

Mental Help Seeking Attitude

According to Hammer et al. (2018), mental help seeking attitude measures a respondent's overall evaluation of their seeking help from a mental health professional if they found themselves to be dealing with a mental health concern. According to Mackenzie et al. (2004), there are three distinct help-seeking attitude components: Psychological Openness, which reflects openness to acknowledging psychological problems and the possibility of seeking professional help for them; Help-seeking Propensity, which reflects willingness and ability to seek help; and Indifference to Stigma, which reflects concern about how important people in one's life would react to help-seeking.

Mental Help Seeking Intention

According to Hammer and Spiker (2018), mental help seeking intention measures respondents' intention to seek help from a mental health professional if they had a mental health concern. According to Vogel et al. (2006), people with greater self-stigma associated with seeking psychological help have less intentions to seek treatment for psychological and interpersonal concerns, as measured by the ISCI.

Self-Stigma of Seeking Mental Help

According to Link (1987), self-stigma has often been equated with perceived stigma, a person's recognition that the public holds prejudice and will discriminate against them because of their mental illness label. Corrigan (1998, 2004) and Holmes and River (1998) define self-stigma as the reduction of an individual's self-esteem or self-worth caused by the individual self-labelling herself or himself as someone who is socially unacceptable. In the case of seeking psychological help for a personal problem, the largely negative images in western culture of mental illness and

psychological services could lower an individual's internalized self-concept, self-esteem, and self-efficacy if they were to seek treatment.

Attitude Towards Seeking Professional Help

According to Fischer and Turner (1970), the attitude toward seeking professional help is the level of openness towards help seeking, the value given to professional help and the preference to cope on one's own. Babu and Sinha (2023) define attitudes toward seeking professional help as the interest or the ability of individuals to seek help from professionals for example counselors, psychologists and psychiatrists when they feel they are in an emotional distress or in a difficult situation.

Review of Literature

According to Nam et al. (2013), a study was conducted to examine the attitudes of college students toward seeking psychological help, this was performed with the help of the Attitude Towards Seeking Professional Psychological Help Scale with relevant psychological variables. The study field was narrowed to 19 by the authors, which included a total of 7,397 participants, and the MIX (Meta-analysis with Interactive explanations) program was used for this study. These variables included: anticipated benefits, anticipated risks, depression, distress, self-concealment, self-disclosure, social support, and self-stigma. The results of this study showed a considerable correlation with most variables, but the highest correlation was found for self-stigma, anticipated benefits, and self-disclosure.

In a study conducted by Günaydin (2024), the relationship between attitude towards seeking psychological help (ASPH) and certain variables on a sample of 557 participants between the ages of 18 and 60 (399 females, 158 males). The variables included: mental health literacy

(MHL), the self-stigma for seeking help, the social stigma of receiving psychological help, masculinity, and emotional expression. The analysis of the survey indicated a variation in ASPH of 37.1% due to self-stigma of seeking help. The findings showed that Knowledge-oriented MHL shows 2.8% of variance, while self-stigma emerged as the most significant contributor to variance in ASPH. The results reinforce the importance of MHL and self-stigma in determining ASPH.

Research by Thomas, Caputi, and Wilson (2014) involving 289 psychology students explored attitudes and intentions regarding treatment for stress, anxiety, or depression. The findings revealed that less than 25% of participants would consider seeking help for psychological distress. They identified factors affecting help-seeking intentions, including the recognition of symptoms, awareness of the benefits of professional help, and openness to treatment for emotional issues. They suggested that targeted educational interventions at the undergraduate level could enhance these attitudes and improve students' willingness to seek help. Such interventions could promote better mental health outcomes among students.

Dearing, Maddux, and Tangney (2005) conducted a survey on 262 (clinical and counseling) psychology students, where they identified several key predictors, including confidentiality concerns, general attitudes towards therapy, and perceptions of the importance of personal therapy for professional development. The study highlighted the role of faculty, supervisors, and mentors in shaping students' decisions to pursue therapy. They concluded that creating an environment where therapy is normalized and supported by faculty could encourage greater help-seeking behaviors among graduate students, aiding their personal and professional development.

Research conducted by Smith and Shochet (2011) examines the connection between mental health literacy and the likelihood of seeking help among university students. The study involved 150 psychology students aged 17 to 26, and it used an online questionnaire to assess mental health literacy. The result indicated that higher levels of mental health literacy were associated with greater intentions to seek help from professionals. Components of mental health literacy were found to make a unique contribution to predicting help-seeking intentions. The result suggested that enhancing mental health literacy could be a promising strategy for encouraging help-seeking behaviors, especially among young adults.

Eisenberg et al. (2009) conducted research that examined how stigma affects mental health help-seeking among college students. They used a sample of 5,555 students from 13 universities. The study found that perceived public stigma is higher than personal stigma, with personal stigma being more prevalent among males, younger students, Asians, international students, those who are more religious, and individuals from poorer backgrounds. Personal stigma is negatively linked to help-seeking behaviors, such as using therapy or medications, while perceived stigma does not show the same effect. These findings suggest that reducing personal stigma could encourage more students to seek mental health support.

In a study by Helgin et al. (1987), the effects of depression, history of seeking help, and gender on college students' attitudes toward professional psychological support were explored. The study surveyed 429 students, using the Beck Depression Inventory and an attitude scale based on the theory of reasoned action. Among those, 126 students from extreme ends of the depression spectrum were further analyzed. The findings suggested that past help-seeking experiences positively affects students' attitudes toward seeking help, and that experiencing depression, regardless of previous help-seeking, is also linked to more favorable attitudes and intentions.

However, no sex differences were found. The study highlights the importance of addressing attitudes through educational interventions to encourage help-seeking behavior.

Purpose

The purpose is to study mental help-seeking attitudes, intentions, and self-stigma among university students.

Hypothesis

H1: There will be significant relationship between mental help seeking attitudes, intentions and self-stigma among college students.

H2: College students studying psychology will have more positive attitudes towards seeking mental health support, higher intentions to seek help, and lower levels of self-stigma compared to students from non-psychology disciplines.

Method

Sample

A sample of 60 (30 psychology and 30 non-psychology) university students in the age range 18-23 years was taken from Punjab.

Measures

The Mental Help Seeking Attitudes Scale (MHSAS): MHSAS was developed by Hammer (2018). It is designed to measure attitudes toward seeking professional mental health services. The scale comprises 9 items and evaluates a single dimension of attitudes toward seeking mental help. It uses a 7-point semantic differential response scale, with bipolar adjectives (e.g., "harmful–beneficial," "useless–useful") to understand attitudes.

The Mental Help-Seeking Intention Scale (MHSIS): MHSIS was developed by Hammer and Vogel (2013). It is designed to assess an individual's intention to seek professional mental health services. The scale consists of 3 items and focuses on a single dimension of intention towards seeking mental help. It uses a 7-point Likert Scale, with responses ranging from 1 ("strongly disagree") to 7 ("strongly agree").

The Self-Stigma of Seeking Help Scale (SSOSH): SSOSH was developed by Vogel (2006). It is designed to measure the self-stigma that individuals experience when seeking help. The scale consists of 10 items and focuses on a single dimension of self-stigma. It uses a 5-point Likert Scale, ranging from 1 ("strongly disagree") to 5 ("strongly agree").

The Attitudes Toward Seeking Professional Psychological Help (ATSPPH): ATSPPH was developed by Fischer and Farina (1995). It is designed to measure attitude towards seeking professional psychological help. The scale consists of 10 items and focuses on a single dimension of help-seeking attitude. It uses a 4-point Likert Scale, ranging from 0 ("disagree") to 3 ("agree").

Procedures

The participants were informed about the purpose of the research and the questionnaires were filled through offline data collection; each participant was thanked for their cooperation. It was ensured that all psychological tests that were administered to participants were standardized.

Analysis of Data

Results

Table 1: Descriptives of N, Mean and Std. Deviation

	MHSAS	MHSIS	Self-Stigma	Prof. Help
N	60	60	60	60
Mean	5.80	5.15	22.9	17.6
Standard Deviation	1.11	1.35	5.06	4.91

Note: MHSAS - Mental Help Seeking Attitude Scale; MHSIS; Mental Help Seeking Intentions Scale, Prof. Help; Attitude towards seeking professional help.

Table 2: Correlation Matrix of Both Psychology and Non-psychology students

	MHSAS	MHSIS	Self-Stigma	Prof. Help
MHSAS	-			
MHSIS	0.511***	-		
Self-Stigma	- 0.522***	- 0.401**	-	
Prof. Help	0.389**	0.325*	-0.440***	-

Note. * $p < .05$, ** $p < .01$, *** $p < .001$

Note: MHSAS- Mental Help Seeking Attitude Scale; MHSIS - Mental Help Seeking Intentions Scale; Prof. Help- Attitude towards seeking professional help.

Table 3: *Independent Sample T-Test*

	Statistic	df	p
MHSAS	-0.439	58.0	0.663
MHSIS	1.136	58.0	0.261
Self-Stigma	1.738	58.0	0.088
Prof. Help	-0.104	58.0	0.917

Note. $H_a \mu_{\text{non-psychology}} \neq \mu_{\text{Psychology}}$

Discussion of Results

The current study aimed to investigate the relationship of the attitudes, intentions and self-stigma towards seeking help between psychology and non-psychology university students. MHSAS and MHSIS were shown to be significantly positively correlated ($r = 0.511$, $p < .001$). This implies that students were more likely to have good intentions to seek help if they reported higher levels of stigma around mental health.

Self-stigma and seeking professional aid were found to be negatively correlated ($r = -0.440$, $p < .001$), suggesting that a higher level of self-stigma is linked to a decreased likelihood of seeking professional treatment. This result is consistent with earlier studies that found self-stigma to be a major deterrent to getting help.

MHSIS and self-stigma were shown to be somewhat negatively correlated ($r = -0.401$, $p < .01$), suggesting that students who are more motivated to seek mental health care also report feeling less stigmatized. This finding supports the notion that a student's comfort level with mental health concerns, which may also be connected to their self-perception in relation to such concerns, influences their intentions to seek help.

In the T-test results, there is no significant difference in mental health stigma between psychology and non-psychology students, as well as in help seeking intentions. Although there was a trend toward a difference, it was not statistically significant. This shows that while there may be some variations in self-stigma between psychology and non-psychology students, these differences are not large enough to achieve statistical significance. There was no significant difference in the likelihood of seeking professional help between psychology and non-psychology students.

Using a full information meta-analytic structural equation modeling approach, Yu et al. (2023) investigated the relationship between help seeking self-stigma and help seeking public stigma as well as the moderating role of age, gender, collectivism, and social group in the internalization process. Findings from 115 separate samples with data from 54,793 people demonstrated a high and positive correlation between self-stigma of help seeking, and public stigma of help seeking, with no significant moderation by gender, age, collectivism or social group. Campaigns to promote help seeking should be designed to address both forms of stigma in order to encourage a positive attitude and intention towards getting help.

Cheng et al. (2018) looked at mental health literacy and self-shame associated with obtaining psychological treatment as predictors of 1,535 college students' attitudes toward getting help, paying particular emphasis to psychological and demographic variables. The finding showed that in addition to self-stigma mental health literacy affected attitudes towards getting help. The implications of mental health literacy and self-stigma in relation to demographic and psychological variations in help seeking were discussed.

Conclusion

The findings indicated that although there were noteworthy associations among several psychological aspects (such as mental health, self-stigma, and seeking professional assistance), there were no notable distinctions between students studying psychology and those who did not. This suggested that students' field of study had little influence on variables like self-stigma and help-seeking behavior. On the other hand, it might have indicated that a greater sample size was required to identify minute variations between the groups. Clearer insights into whether these trends held true across various populations would have been obtained by additional research using a larger and more varied sample.

Based on the results, it may be helpful to investigate additional factors like social support, academic stress, or previous exposure to mental health education that may affect students' perceptions of mental health and their actions when seeking help. Future research should look at more general elements that might contribute to these results across many academic disciplines, as no significant differences were discovered between psychology and non-psychology students. Furthermore, looking into potential mediators—like coping strategies or attitudes toward mental health—could shed further light on why students may display similar patterns in self-stigma and mental health regardless of their field of study. Tracking changes on these characteristics over time and identifying any discrepancies that may arise as students advance through their academic careers may also be made easier with the use of a longitudinal study.

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