ATTITUDE TOWARDS MENTAL ILLNESS AND ITS EFFECT ON SEEKING PSYCHOLOGICAL TREATMENT AMONG UNIVERSITY STUDENTS

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Abstract

Mental illness among university students is an ever-growing concern. The many challenges arising from both academic and social life are factors that likely contribute to mental illness in this population. Indeed, the often-hectic university lifestyle can lead to stress, depression, and anxiety for some students. This might accumulate with other stressors (e.g., interpersonal conflict, family relationships, and socio-environmental factors) thereby affecting a student's capability to cope when experiencing difficulties. Without adequate psychological support, certain students may develop mental illnesses. Although most universities offer various means to access psychological assistance or counselling, many students nonetheless feel hesitant to seek help. A major barrier in help-seeking is the perceived negative attitude towards mental health issues, including feeling ashamed for being diagnosed with a mental illness and worrying about the potential consequences of such a diagnosis. Thus, negative attitudes can impede students from seeking psychological support. To investigate this phenomenon, a study involving 236 university students was conducted. It found that negative attitudes towards mental illness play a significant role in students not seeking psychological help. Students exhibiting positive attitudes towards mental illness demonstrated fewer barriers to obtaining psychological help (i.e., less fear of stigmatization, less difficulty in self-disclosure, and less perceived devaluation). Positive attitudes towards mental illness might derive from greater knowledge and awareness about mental health. Therefore, it is imperative for universities and similar institutions to implement mental health advocacy programs to promote positive attitudes towards mental illness. This may decrease certain barriers among university students considering obtaining psychological help.

Keywords: Attitude, mental illness, psychological help, barriers.

1. Introduction

Since the COVID-19 pandemic, mental health has increasingly become a topic of conversation within Malaysia (Bahari, 2022). It is commonly noted that mental illness is the second leading health concern impacting Malaysians, with the majority of those affected being within the 16 to 19 age group and coming from low-income families (Yusry, 2022). During the recent pandemic, mental health issues in Malaysia have become more prominent due to several unexpected social challenges. For instance, the Malaysian Mental Health Association report (dated October 2020) showed that the incidence of mental illness increased by two-fold amid the COVID-19 lockdowns (Yusry, 2022). During the COVID-19 pandemic, the number of calls that the Mental Health and Psychosocial Support (MHPSS) hotline received significantly increased. The Malaysian government received a barrage of calls, many of which were related to mental health. Of the 145,173 calls to the Malaysian government from 25 March 2020 until 20 May 2021, 85.5% were in regard to mental health issues that need emotional support and counselling precipitated by the loss of jobs, no income, family conflict, problem in interpersonal relationship, and lack of access to help services (Roslan, 2021). Among those affected by mental health issues and illnesses were many university students. Students do not only struggle with their academic and social challenges but also with the adversities resulting from local and global events. During the pandemic, these anxieties included the fear of the spreading COVID-19 virus, the loss of loved ones, the restrictions on certain freedoms, and the inability to experience in-person campus life. Indeed, mental health issues among university students are a major concern and it has become increasingly prominent since the pandemic because of the harmful effects of quarantine upon such students as compared to the general population (Kumaran et al., 2022). Kumaran et al.'s (2022) study found that many Malaysian university students were – and some still are – facing mental health issues as a result of high levels of stress, anxiety, and depression, much of which relates to the drastic changes to teaching delivery and learning methods (i.e., fully online classes). Furthermore, research by the Institute for Youth Research Malaysia (2023) showed that the main sources of stress, anxiety, and depression among youths include worry about their future (82%), feeling guilty after breaking promises (73%), feeling inadequate of themselves (71%), economic problems (61%), and academic load (52%).

A study conducted by Maung et al. (2023) found that the prevalence of depression, anxiety, and stress among university students at one private university in Northern Malaysia to be 34.8%, 42.2%, and 33.5%, respectively. Maung et al.'s (2023) study also showed that older-aged students have a greater risk of developing depression and stress than their younger-aged counterparts. This finding supports Lee et al.'s (2023) statement that, although older students have a better understanding of mental illness than younger students, older students tend to hold a greater number of negative attitudes toward the mentally ill than younger students. Although COVID-19 is no longer considered a global health emergency, university students are still struggling with mental health issues arising from the pandemic. Ho et al. (2022) observe that the Malaysian government has encouraged COVID-19 to become endemic and this can gradually allow students to return once again to campus and back to the previous learning and teaching style. Following the recent reopening of most universities in Malaysia, undergraduate students have expressed a high amount of concern regarding academic stress and anxiety with the sudden transition from two years of online learning to a physical environment (Ho et al., 2022).

For this reason, most universities have provided various social support systems, such as counselling centers, peer support groups, academic social support, and psychological services. Yet, despite the many offerings of support, not all students, including those potentially requiring help, have taken the opportunity to obtain psychosocial assistance. Past researchers have identified several barriers to seeking treatment, namely a lack of understanding about mental health problems, fear of social stigma or embarrassment (Abolfotouh et al., 2019; Shi et al., 2020), negative attitudes towards mental illness (Sangeeta et al., 2020; Shi et al., 2020), and a lack of social support or difficulty in accessing professional services (Shi et al., 2020). Many students exhibit a lack of interest in seeking psychological support. This lack of interest might be influenced by negative attitudes towards mental illness held by students. Moreover, a sense of shame and fear arising from being isolated due to lockdowns has, arguably, led them to similarly feel shame and fear should their peers find out about their mental illness. In addition, students do not only hold negative attitudes towards mental illness itself but also towards people with mental illness (e.g., avoiding contact with individuals with diagnosed - or perceived - mental illness). Consequently, the negative attitudes towards mental illness and people with mental illness may decrease motivation among students to seek psychological assistance from relevant social support available at their universities or via other support organizations. Duncan (2022) observed that one's attitudes towards mental health are an important aspect of help-seeking behaviors. Attitudes towards mental illness can be influenced by stigmatization from society, such as feeling afraid to have contact with people with mental illness or feeling ashamed of having family members diagnosed with mental illness. Additional barriers to seeking phycological help include a lack of trust in the effectiveness of social support systems, difficulties in disclosing personal matters, and a lack of knowledge regarding the effectiveness of psychological treatment in alleviating mental health issues. Such negative views towards mental illness may further decrease motivation among students to seek psychological assistance from mental health professionals. Some students may (erroneously) believe that it is better to keep their mental health problems secret instead of sharing their concerns with loved ones or seeking psychological support.

2. Objectives

The main objective of this study was to examine the effects of attitudes towards mental illness on barriers to seeking psychological help such as fear of stigmatization, lack of trust in the mental health services and professionals, difficulties in self-disclosure, perceived devaluation, and lack of knowledge regarding psychological treatments. Previous research has noted that studies about attitudes towards mental disorders among university students are lacking in Malaysia (Al-Naggar, 2013; Sangeetha et al., 2022) and other non-Western countries. A review of studies on public perceptions and attitudes towards mental illness revealed that of 61 studies, only nine were conducted in non-Western countries (Angermeyer & Dietrich, 2016).

3. Methods

The study presented in this paper involved 236 students from various faculties at one public university in Sabah, Malaysia. In order to obtain the participants, students were randomly approached

during a mental health program organized by a group of psychology students. For example, potential participants were approached by volunteers of the mental health program outside the university library, faculty buildings, lecture halls, and other areas within the university grounds where students congregate. The mental health program had the theme of 'H.E.L.P' which stood for 'Help, Empathy, Laugh, and Embrace'. Students who were interested in taking part in this study were provided with a Google survey link. Before proceeding into the study questions, the survey required all participants to provide their consent by ticking 'Yes' in the consent section thereby indicating their agreement to take part in this study voluntarily. Each participant was asked to answer the following three sets of questions that measured targeted variables in the study: a demographic scale, attitudes towards mental illness scale, and barriers to seeking psychological help scale.

The demographic scale measured the participants' academic and personal backgrounds, including the participant's age, gender, ethnicity, university, faculty, campus accommodation and educational level. The attitudes towards mental illness scale consisted of 14 items that measured the participants' attitudes towards mental health. This scale was adapted from the attitudes towards mental illness scale created by Weller and Grune scale (1988) and a similar scale developed by Topkaya et al. (2017). Responses to each statement were scales from 1 'strongly disagree' to 5 'strongly agree'. There were eight negative items, and these need to be reversed score before running the reliability values and analysis. The higher the score obtained, the greater the number of positive attitudes towards mental health illness indicated by the participant. The barriers to seeking psychological help scale was developed by Topkaya et al. (2017) and it consists of 17 items within five subscales. The following are examples of items used "I worry about whether my friends would mock me if I seek psychological help (fear of being stigmatized); "I worry about whether the professional would listen to me adequately" (trust in mental health professionals); and "I refuse to give information about my private problems (violence, etc.), even to a professional" (difficulties in self-disclosure). The responses were scaled from 1 'strongly disagree' to 5 'strongly agree'. The higher the score obtained, the greater the barriers to seeking psychological help displayed by the participant.

4. Results

The reliability of each of the scales used in this study were acceptable and the values ranged from .67 to .92. Of a total of 236 participants, a majority were female, 171 (72.5%), while 65 (27.5%) were male. The participants' mean age was 21.21 (SD=1.06). Table 1 shows that there was a negative significant effect of attitudes towards mental health on barriers to seeking psychological help.

 Table 1. Simple Regression Value of the Effect of Attitudes towards Mental Illness on Barriers to Seeking

 Psychological Help.

Barriers to seeking help	R square	Beta	t	Significant value
Attitudes towards mental illness	.034	185	-2.88	0.04
Note: $k < .05$				

The attitudes towards mental health contributed 3.4% to the barriers to seeking psychological help. This indicates that participants who showed a greater amount of positive attitudes towards mental illness tended to demonstrate fewer barriers to seeking psychological help (B=-.185 ($_{1,233}$), t = -2.88). In terms of the five barriers to seeking psychological help, the biggest or most significant barrier was the fear of being stigmatized (mean=12.06; SD=4.08). On the other hand, the smallest or least significant barrier to seeking help was perceived devaluation (Mean=9.09; SD=3.09). Table 2 shows the mean and standard deviation for each of the five barriers.

Table 2. The Mean and Standard Deviation for each subscale of Barriers to Seeking PsychologicalAssistance (N=236).

Barriers to seeking psychological help	Mean	SD
Fear of being stigmatized	12.06	4.08
Trust in the mental health professionals	12.21	4.06
Difficulties in self-disclosure	9.54	2.65
Lack of knowledge	9.10	3.30
Perceived devaluation	9.09	3.09

5. Discussion

The results of this study indicate that participants who showed a greater amount of positive attitudes towards mental illness exhibited fewer obstacles in seeking psychological help. Such positive attitudes refer to the participants' view that people who are diagnosed with mental health illnesses should be given a chance to make decisions and have similar rights as others. Holding positive attitudes towards mental health could reduce certain barriers to seeking help for mental health problems. People with positive help-seeking attitudes tend to be more active in trying to find a solution to their problems (Buanasari et al., 2023). In this study, barriers to seeking psychological help were measured based on five factors; fear of being stigmatized, trust towards mental health professionals (or services), difficulties in self-disclosure, perceived devaluation, and lack of knowledge. The findings of this study support the conclusions of past studies that show that positive attitudes towards mental illness can predict people's intention to seek professional help when needed (e.g., Abolfotouh et al., 2019; Sangeetha et al., 2022). The positive attitudes towards mental health shown by the participants might be derived from external factors such as their knowledge or awareness about mental illness. Such knowledge can be gained through mental health awareness campaigns as well as one's direct experience of mental illness or via that of friends or family. Additionally, a person's own experience dealing with their academic and social challenges, particularly during the recent COVID-19 pandemic, might also inform their attitudes towards mental health. Indeed, previous studies (Ah Gang & Torres, 2022; Cosmas et al., 2022), have revealed that during the pandemic's turbulence, many students searched within themselves to find their inner strengths so as to manage and cope with their mental issues, such as stress, depression, and anxiety. Pasts studies have shown that the incidence of mental illness among university students had had already been increasing at an alarming rate each year (Zivin et al., 2009). Indeed, according to Hamdan-Mansour et al. (2009), students studying at higher learning institutions are at more risk of developing mental health problems as compared to peers of similar age. Al-Naggar (2013) observed that globally there is growing evidence of stigmatization of people with mental illnesses. Stigmatization is a major barrier for people to seek and obtain psychological support. If a person has positive attitudes towards mental illness, this may help to reduce the concern of being stigmatized. To combat the stigmatization of people with mental illness, the Malaysian government, under the fifth strategy of the Malaysian National Strategic Plan for Mental Health 2020–2025, is focusing on forming intra- and inter-sectoral collaboration. One proposed program is to incorporate the topic of mental health topics into the school curriculum and co-curricular activities. Successful intervention programs should be replicated across all schools. Teachers and other school staff should also receive continuous education regarding mental health (Lee et al., 2023). Moreover, as was suggested by students participating in Oláh et al.'s (2022) study, universities should provide programs that may foster a reduction in barriers to seeking psychological assistance, such as psychoeducation and stigma reduction campaigns in addition to offering online counselling as well as standard in-person counselling.

6. Conclusions

In sum, the study presented in this paper showed that one's attitudes towards mental illness can significantly impact one's intention to obtain psychosocial support from the professional when required. Indeed, it was found that students with positive attitudes towards mental illness showed less hesitancy in asking for psychological support. Positive attitudes towards mental illness can be enhanced through mental health literacy. This can be achieved by conducting mental health awareness campaigns that foster positive attitudes towards mental illness. To be sure, such campaigns should not be reduced to an 'awareness month' but ought to be part of a continuous effort to improve mental health among students and their attitudes towards mental illness.

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