

TITLE: UNDERSTANDING PUBLIC STIGMA AND SELF-STIGMA ON UNIVERSITY STUDENTS' PSYCHOLOGICAL DISTRESS IN INFLUENCING HELP SEEKING BEHAVIOURS

SOH YUN LING

A RESEARCH PROJECT

SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR

THE BACHELOR OF SOCIAL SCIENCE (HONS) GUIDANCE AND COUNSELLING

FACULTY OF ARTS AND SOCIAL SCIENCE

UNIVERSITI TUNKU ABDUL RAHMAN

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Understanding public stigma and self-stigma on university students' psychological distress in
influencing help seeking behaviours
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This research project is submitted in partial fulfilment of the requirements for the Bachelor of
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UNIVERSITI TUNKU ABDUL RAHMAN FACULTY OF ARTS AND SOCIAL SCIENCE DEPARTMENT OF PSYCHOLOGY AND COUNSELLING

UAPC3093 Project Paper II

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	POSTER PRESENTATION PREPARATION						
Organisation		Title/author of paper clearly displayed. Concise presentation of introduction, review of literature, methodology, findings and conclusions.	Shows title/author. Adequately presents introduction, review of literature, methodology, findings and conclusions.	Shows title/author. Presents main ideas of introduction, review of literature, methodology, findings and conclusions.	Title/author are missing. Insufficient coverage of main points of introduction, review of literature, methodology, findings and conclusions.		
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Visual Presentation		Visually appealing poster with appropriate colours, organization, and font sizes enhance readability. Strategically positioned graphics and text.	Overall visually appealing. Organisation of content enhances readability. Appropriate font size enhances readability. Content arrangement easily understood. Graphics enhances text.	Visual appeal is adequate. Colours and layout somewhat cluttered. Font size affects readability. Confusing content arrangement. Graphics help to highlight some content.	Visuals lack appeal. Colours and layout cluttered. Hinders readability. Inconsistent font sizes and content arrangement Mismatch of graphics and text.		
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Department of Psychology and Counseling Faculty of Arts and Social Science UTAR Perak Campus

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To each and every individual who has extended a helping hand, offered words of encouragement, or supported me in any capacity throughout this journey, I am deeply grateful for your contributions and efforts. Your unwavering support has been truly appreciated and acknowledged.

SOH YUN LING

APPROVAL FORM

The research paper attached herewith, entitled "Understanding public stigma and self-stigma on university students' psychological distress in influencing help seeking behaviours" written and submitted by Soh Yun Ling in partial fulfilment of the requirements for the Bachelor of Social Science (Hons) Guidance and Counselling is hereby accepted.



(Ms. Nur Shakila Binti Ibharim)

ABSTRACT

This research is aimed to understanding public stigma and self-stigma on university students' psychological distress in influencing help seeking behaviours. This research has adopted a qualitative case study research approach, and data were collected through interviews. A total of 6 interviewees were gathered through purposive sampling method, which involved undergraduate students in whose age where between 18 to 24 years old who have experience or consulting counsellors in UTAR (students who have looked for professional services). Majority of the interviewee were female (n = 5) followed by male (n = 1). The location of this research and data collection was primarily conducted physically at UTAR Community Counselling Centre (UCCC). Besides the informed consent and demographic information, 31 semi-structured interview questions will be designed based on the Social Cognitive Theory (SCT) framework. Data will be extracted after the interview sessions, and thematic analysis will be conducted to analyse data. Prior to analysis, the available qualitative data will be transcribed, condensed into tables, and examined thoroughly, determining shared core ideas and key concepts by interpreting the evidence from the interview sessions. This study investigates the multifaceted dynamics of help-seeking behaviours among university students in Malaysia, drawing on insights from both literature review and interviews. Key findings emphasize the importance of addressing stigma, promoting awareness, and fostering support systems to empower students to prioritize their well-being. While the study provides valuable theoretical implications and practical recommendations for educators, limitations such as potential bias and sample homogeneity should be considered. Overall, this research contributes to a deeper understanding of the factors influencing help-seeking behaviours and highlights the importance of creating supportive environments within educational institutions. Keywords: Public stigma, Self-stigma, Help-seeking behaviours, Psychological distress,

Social Cognitive Theory (SCT)

DECLARATION

I declare that the materials and contents in this paper are the end results of my own work, and that due acknowledgement has been given in the bibliography and references to ALL sources, be they printed, electronic, or personal.

Name: Soh Yun Ling

Student ID: 21AAB07226

Signature: <u>YL</u>

Date: 18th April 2024

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Chapter 1: Introduction

Background of the study

The shift from childhood to adulthood is difficult throughout the university years, and attending university itself may be quite stressful for individuals (Rith-Najarian et al., 2019). Students deal with several stresses on a daily basis that add to their overall stress levels (Terrell et al., 2022). These stressors include financial strains, shifts in social support, adjusting to a new schedule, making new friends, and the demands of academic toughness (Thompson et al., 2021). Indeed, mental health problems are not uncommon, and the majority of students report significant levels of psychological distress (Bruffærts et al., 2019). Nonetheless, studies show that students are hesitant to seek professional assistance for mental health issues or while encountering psychological distress, because they feel like they can handle it by themselves (Osborn et al., 2022) and that males are less likely than women to see or getting treatment (Haavik et al., 2019) Adults who did not exhibit help-seeking behaviour were more possible to experience severe psychological distress, according to the results of a recent study, this pattern seemed to be significantly stronger among young adults between the ages of 20 and 39 (Yamauchi et al., 2020). These findings are supported by research conducted in college settings, which indicates that even in situations when mental health resources are offered, students may be reluctant to seek assistance (Grøtan et al., 2019).

Many studies examining the reasons for not seeking treatment, help or delaying seeking help among university students that is influenced by many factors, including sociodemographic factors such as gender, age, education, geographic location, and social support while some studies show that men are consistently less proactive than women in seeking help (Sagar-Ouriaghli et al., 2019). Other studies showed that education act as an important factor in how people seek help, higher education was positively associated with

help-seeking behaviours, with respondents with higher education being more likely to seek help to manage stress symptoms or burn out than those without higher education (Karumbaiah et al., 2021). For many students, the transition to university life can be a challenging time such as academic stress, social adjustment, and mental health issues are common stressors faced by university students, however, research shows that a large proportion of students do not seek help or support when experiencing these challenges, in order to understanding and knowing what is the impact or factors that influence university student's help-seeking behaviours is critical to promoting their well-being and academic success (Grøtan et al., 2019).

The stigma associated with mental illness, which includes prejudice, discrimination, and stereotyping, has been viewed as a significant obstacle or barriers to improving the standard of living for individuals who suffer from mental disorders, one of the main barriers to college students seeking counselling services is the stigma especially connected to asking for help, because when stigmatised, individuals who suffer from mental health disorders may choose not to seek help, which exacerbates the treatment gap worldwide and leads to poorer outcomes in both the mental and physical domains (Ran et al., 2021). A number of empirical research show that stigma around mental illness is pervasive among individuals who experience it worldwide and contributes to plenty of unfavourable circumstances (Ran et al., 2018). Stigma includes the unfavourable public view of receiving professional mental health care as well as the internalisation of one's own worth for pursuing such services and it can be further divided into two components: the public and the self, moreover, it has been discovered that there is a connection between the two stigmas when it comes to college students asking for aid (Shannon et al., 2022).

Students in university and college face significant psychological suffering and would probably benefit from having access to mental health services, however, the stigma around

getting assistance when encountering mental illness, in general, makes people less likely to seek help and has additional detrimental effects including lowering self-esteem and missing out on opportunities. Even though it is commonly known that mental disease occurs in young adults—50% of all lifelong mental health related disorders begin by the age of 14 and 75% by the age of 24 (*Millennials and Mental Health*, 2019), those who are struggling with mental health difficulties may face significant obstacles when trying to get treatment. People with mental illnesses are all too frequently stigmatised by misconceptions, prejudice, and unfavourable attitudes that are supported by the broader population (*Stigma and Discrimination*, 2021). Those who suffer from mental illness may be prevented from receiving mental health care simply because of their fear of being stigmatised in public and the potential discrimination and prejudice that this may bring about (Kemp et al., 2022).

A great deal of stressors, including financial strains, shifts in social support, adjusting into a new habit, making new friends, and academic rigour, are encountered by students on a daily basis and add to the stress they feel (Terrell et al., 2022). The transition to independent learning in university and staying alone in the hostel or with new friends act as a stressor that is commonly encountered in recent years (Thompson et al., 2021). The majority of students indeed report significant levels of psychological discomfort, and mental health problems are often seen (Bruffærts et al., 2019). Nonetheless, studies show that students are unwilling to seek out expert assistance for mental health related difficulties (Osborn et al., 2022), with males being less likely than women to see getting treatment favourably for certain reasons (Haavik et al., 2019). Adults who did not exhibit help-seeking behaviour were more prone to have serious psychological discomfort, according to a recent survey by Yamauchi et al. (2020). This tendency seemed to be somewhat more powerful in younger adults between the ages of 20 and 39. These findings are supported by research conducted in college settings,

which indicates that even in situations when mental health resources are offered, students may be reluctant to seek assistance (Grøtan et al., 2019).

Problem Statement

Research also discovered that stigma, mainly male, and mistrust of the current mental health services were all strongly correlated with the hesitation to seek treatment, these findings are quite comparable to those of worldwide online surveys conducted as part of the World Mental Health worldwide College Student Initiative, as reported by Ebert and colleagues found out that just one in four of the almost 14,000 students who participated in the study which encompassed many schools and institutions in eight different countries would only go to treatment if they eventually encountered an emotional issue (Ebert et al., 2019). Despite the availability of support services on university campuses, a large number of students do not seek help when experiencing learning difficulties, psychological distress or mental illness This underutilization of support services can result from factors such as stigma, lack of knowledge and personal beliefs. To better address this issue, it is important to identify these factors and examine how they explain university students' decisions to seek help (Liu et al., 2020). Responses to psychological symptoms can have a profound effect on outcomes, for example, harsh or hostile reactions from family members, stigmatizing reactions from society or delayed treatment seeking, all without negative consequences for psychosis (Shoesmith et al., 2017). Currently, many of the researchers conduct research and study of help-seeking behaviour toward mental health issues, there is a statistic review and its data show the results of a study conducted until June 2019 among participants who sought mental health services in Malaysia, by a population of 1,027 adults that fifty percent of men who experienced mental illness in the survey said they asked for assistance, as opposed to 40% of women surveyed (Statista, 2022).

People are discouraged from seeking assistance by the pervasive stigma associated with getting treatment and care, which is still insufficient, costly, or unavailable, there is an estimated 1 in 4 persons worldwide are thought to be suffering from a mental health issue, and in certain nations, the treatment gap might reach 90%, there is even worse scenario that stigma and misinformation keep individuals from recognising mental health issues in others and themselves and from getting the assistance they need while health services are not an exception to the widespread abuses of human rights that occur in communities and organisations worldwide (United Nations, 2022). There are over 280 million youth who experience mental health conditions in the whole world and only 57.2 million of them, roughly about 20% of the population seek help and receive the treatment they need (Mental Health Myths and Facts, 2023). In all civilizations, mental problems comprise a significant component of the burden among youth and many mental illnesses start in young people (12– 24 years old), adolescence and the early stages of adulthood are marked by significant physical and social change, and this is the time when the mood and psychotic illnesses often manifest, however, they are frequently discovered later in life, adverse numerous health and developmental problems in young people are strongly correlated with mental health and lead to serious consequences, such as substance misuse, aggression, reduced academic performance and low sexual health and reproductive (Hickie et al., 2019).

Changes in current traditional health services such as physical counselling and consultation services to the digitization of services in between the usage of technology that everything goes online and lack of availability demonstrated better accessibility when introducing online platforms that decrease the physical appointments but there is still concern on the restrictions and security measures through online platform, privacy and confidentiality is the prior concern for everyone (Feijt et al., 2020). During the pandemic of COVID-19, lockdowns had a significant psychological impact on all populations, including healthcare

personnel, the elderly, working people, young adults, and adolescents (Pedrosa et al., 2020). Young people, defined as those between the ages of 18 and 24, are particularly sensitive groups because they must deal with a lot of pressures that can cause depression and anxiety in addition to having to adjust to considerable changes in their physical, social, and cognitive development as university students are particularly vulnerable as seen through research (Caffo et al., 2020). In China, university students had higher rates of trauma (PTSD), anxiety, and depression; at the climax of the COVID-19 outbreak (Wang et al., 2022), statistics show that there are 14.4% of them had post-traumatic stress disorders (Chen et al., 2020). Concurrently, over 50% of undergraduate university students in Malaysia experienced psychological discomfort and arousal with ineffective coping mechanisms, and the rate of youth suicide rate rose from 3-6% in 2021, the peak of the pandemic (Kalok et al., 2020) (Mardhiah, A., 2022).

According to a comprehensive research, teenagers who attend universities are more likely to have help-seeking behaviours toward mental health issues of college attendees in prosperous countries like the United States, Germany, China, Australia and others is lacking and has decreased after the COVID-19 pandemic (Yonemoto & Kawashima, 2023). There are factors analysed by the researcher such as having a high level of mental health illness history, past psychological history, high stress from parents and friends, high level of academic stress due to lower time management skills and many others that have shown in university students is affecting their help-seeking behaviours (Junus et al., 2023). Add on to these factors, health services are disrupted due to several restrictions and poor access to services around them is an important issue toward coping with all the factors therefore, appropriate mental health services or counselling services should be immediately available, convenient, not expensive and widely available in order for them to reach out easily to seek help and enhance the attitudes of clients seeking psychological help (Spagnolo et al., 2022). While help-seeking

behaviours among university students have been studied in the literature up to this point, a more thorough study that takes into account the intricate interactions between many factors is required, besides, a void exists in the research that combines numerous elements, takes identity and cultural influences into account, and investigates the function of narrative identity in influencing help-seeking behaviour, despite the fact that some studies have focused on individual components in isolation (Hammer et al., 2018).

Significance of study

This research is significant for several reasons from studying different point of view among the aspects that influencing the habits of seeking assistance such as from the perspective of student's well-being affected by academic achievement from the source of stress toward help-seeking behaviour and provide insight into the factors that contributes toward help-seeking behaviours (Crook et al., 2021), resource allocation, stigma, discrimination in academic high achiever (Goodwin et al., 2021) and many others. This research aims to study and understand variables that affect university students' attitude when they seek help in Malaysia, because there is a shortage of studies on Malaysian university students who struggle with issues such as high academic stress, procrastination, sleeping issues, or any other issue aside from mental health illness to go through and develop new coping mechanism as well as increase awareness to face challenges and difficulties in the future (Zhou et al., 2020). Furthermore, this study will enable counsellors to be better equipped when facing clients with issues related to these matters and the understanding gained from this study will allow counsellors to assist their clients more effectively and contribute to the development of more healthy well-being, especially in Malaysian settings because this has become increasingly important due to the several factors, which has caused higher levels of stress in parents, and this stress may in turn lead to child abuse or at the very least a decline in the mental well-being of both the children and parents in the future (Brown et al., 2020; Miller, Cooley, & Mihalec-Adkins, 2020).

Systematic reviews have shown that while young people's mental health issues are not well understood or acknowledged, stigmatization, unfavourable attitudes and perceptions, breaches of privacy and confidentiality, and knowledge gaps, all make it more difficult to get the care that young people need, attachment and well-being (Guo et al., 2020). Furthermore, research indicates that formal help-seeking is not prioritized, the stigma around obtaining assistance is strong among youth, and individuals don't know enough about how to get it (Renwick et al., 2022). Another research has shown that, there are only a small percentage of youth seek assistance for mental health issues, even though the prevalence of these issues among the youth is significant and it is evident that the focus of these studies has been on the barriers to help-seeking, the result can be seen through these investigations, attitude, intention, and behaviours related to help-seeking are understood collectively rather than independently that this provides an understanding of young people's help-seeking processes to be more challenging (Barrow & Thomas, 2022). In addition, this is important because most of the research that is conducted regarding this similar topic exists only in countries other than Malaysia, where there are significant cultural differences that may be influenced by the values, personality, and interests of an individual in the journey of help-seeking and to enhance the knowledge that there is support from institutions and other parties in increasing students well-being and awareness (Legros & Boyraz, 2023).

The theory chosen as the reference for this research is Social Cognitive Theory (SCT) by Albert Bandura. The health sciences are the foundation of SCT, according to this "human agency model," individuals are able to "self-organize, self-regulate, and self-reflect" in real life setting, thus, estimating the capacity of an individual to participate in a desired behaviour, depending on internal and external factors and how they interact" (Bandura, 1989). Triadic

reciprocity, or the co-interrelation of an ecological, attitudinal, and individual elements, is the central idea of this theory, it functions as a director or controller and influences a person's mindset (Bandura, 1986). Consequently, SCT presents an explanation whereby personal factors, such as moral conduct, moral thought and environmental elements, as well as emotional self-reactions, work together as interdependent determinants that influence one another's decision-making outcomes such as help-seeking behaviours and it also examines moral problems from an interactionist perspective. (Thomas & Gupta, 2021).

One of the main issues facing by the health research system is closing the discrepancy between the usage of research and output, while the funding bodies, in addition to a growing number of scholars are encouraging stakeholders' involvement as an essential method of achieving the desired outcome and further engagement in different aspect or categories (Boaz et al., 2018). As for stakeholders in our research, the UTAR Community Counselling Center, or UCCC for short, can potentially be a party that benefits from the fruits of our research. Our research sheds light on the understanding of factors that influence help-seeking behaviours among university students, as such, it can potentially lead to new directions in the counselling sessions of students who are undergoing issues related to stress, sleeping issues or other current issues besides then mental health issue, this can give counsellors in the UCCC new leads to focus on in terms of the level of understanding the barriers and have more knowledge on help-seeking in a counselling setting (Mitchell et al., 2020).

Research objectives

The main objective of this study is to understand and identify the factors influencing help-seeking behaviours among university students in Malaysia setting. To that end three specific objectives have been established, and the three specific objectives of our study are:

- To identify the factors that are influencing help-seeking behaviours among university students in Malaysia.
- 2. To explore the perceptions of public stigma that affect students' willingness to seek help for academic or other issues.
- 3. To explore the role of self-stigma in shaping students' decisions in help-seeking.
- 4. To identify the strategies, step done to improve help-seeking behaviour among students.

To accomplish these objectives, a research study that utilized purposive sampling method to recruit the participants by taking note of the inclusion and exclusion criteria before conducting interview by using semi-structure question with participants until the data saturation is meet.

Research questions

Based on the objective given of this study, this research will address the following questions:

- 1. What are the key factors that influence help-seeking behaviours among university students?
- 2. How do perceptions of public stigma affect students' willingness to seek help for academic or other issues?
- 3. How do self-stigma, shape students' decisions to seek help?
- 4. What are the strategies, steps done to improve help-seeking behaviour among students?

Conceptual definitions and Operational definition

Help-seeking behaviours

The term "help-seeking behaviour" refers to the act of looking for or asking for assistance from others through official or informal channels, such mental health services (Goodfellow et al., 2022).

The overall help-seeking behaviour on mental health concerns was identified through the basic dimension of framework base on the Social Cognitive Theory (SCT), it being categories through behavioural factors. Interview questions have been created based on three factors that are skills, practice, and self-efficacy (Lahcen et al., 2020).

Skills are abilities or competency that are developed via practise and instruction.

Social, communication, and fundamental abilities are all needed for other taught activities

(Abdullah et al., 2020).

Practice is repetition of a task, behaviour, or set of tasks, frequently to enhance output or learn a skill. The capacity to carry out a complicated movement or sequential behaviour fast, smoothly, and accurately (Eun, 2018).

According to Albert Bandura, self-efficacy is a person's subjective assessment of their capacity to perform in a certain context or to achieve desired outcomes is a key factor in determining emotional and motivational states as well as behavioural change (Bandura, 2019).

Stigma

Stigma is the unfavourable social awareness linked to a characteristic of the individual that might be seen as a mental, physical, or social shortcoming and is an indication of social disapproval that can unjustly result in an individual being excluded and subjected to discrimination. (Pant et al., 2023).

Public stigma

The term "public stigma" refers to prejudice or unfavourable attitudes that individuals have about mental illness (Borenstein, 2020).

The public stigma on mental health concerns was identified through the basic dimension of framework base on the Social Cognitive Theory (SCT), it being categories through environment factors. Interview questions have been created based on three factors that are social norms, access in community, and influence on others (Lahcen et al., 2020).

Any of the mutually agreed-upon, socially established criteria that specify what actions are normal in a particular setting (descriptive norms) and what actions are appropriate (injunctive norms) are referred to as social norms (Legros & Cislaghi, 2019).

Access in community is when people think they can perform in a way that is acceptable along with the performance and outcome are related, they will try to adopt behaviours suited for that scenario, these people value the outcome of the event. (Cappelli & Mobley, 2008)

Influence on others is the impact of one's own experiences, other people's actions, and environmental circumstances on one's own health-related behaviours and highlights the key role that cognition plays in encoding and carrying out behaviour, that people will learn, develop and hold onto specific behaviours (Zhai et al., 2023).

Self-stigma

The term "self-stigma" explains the unfavourable perceptions that people with mental diseases have of their own condition, especially internalized shame. (Borenstein, 2020).

The Self-Stigma on mental health concerns was identified through the basic dimension of framework base on the Social Cognitive Theory (SCT), it being categories

through personal cognitive factors. Interview questions have been created based on three factors that are knowledge, expectations and attitudes (Lahcen et al., 2020).

Knowledge is defined as the familiarity that act as the condition of knowing something or experience to the extent of one's comprehension or understanding (Alkhudiry, 2022).

Expectations is a tense, emotional sense of anticipation (Ronnie & Brickman, 2021).

Attitudes is a long-term, broad assessment of something, someone, a group, a problem, or an idea on a scale from negative to positive and offer concise assessments of the objects of interest and are frequently presumed to originate from certain convictions, feelings, and previous actions related to those items (Rustamova, 2020).

Psychological distress

Psychological distress is a group of unpleasant physical and mental symptoms that are connected to most people's typical mood swings, go through intense psychological reactions that show up as emotional discomfort and mental health impairment (Canetti, 2017).

Psychological distress, however, can sometimes be a sign of the onset of anxiety disorder, major depressive disorder, schizophrenia, somatization disorder, or any other mental health disorder, it is believed to be what is evaluated by several reliable self-report test (Shandler et al., 2022).

University students or young people (Youth)

The United Nation Secretariat interchangeably refers to youth and young people that refer to the age cohort range of 15 to 24 with knowledge that many entities, including member states, employ distinct definitions and defines "youth" as those individuals in the age range for statistical purposes, in light of different definitions provided by Member States,

nonetheless,, the Secretary-General also recognized that, aside According to that statistical definition, the term "youth" has diverse connotations in different global communities (United Nations, 2022).

Chapter 2: Literature review

Stigma

In the literature on mental health, stigma has been defined as the discrimination of those who are mentally ill; this phenomenon is also known as mental health or mental illness stigma, this includes unfavourable attitudes and ideas such as those who suffer from mental illnesses are hazardous, unreliable, unpredictable, or ultimately responsible for their problems (Hantzi et al., 2019). Besides that, stigma related to mental illness encompasses a variety of social attitudes, including public stigma directed towards mentally ill individuals, and self-stigma directed towards the mentally ill individual, these two interrelated forms of stigma: self-stigma (also known as internalized/felt stigma) results from an individual absorbing the stigma approved by the social groups surrounding him/her while public stigma (also known as social/enacted/external/perceived stigma) occurs in vast social groupings, including healthcare professionals (Nguyen & Li, 2020).

At the psychological levels of belief refers to stereotypes that are unfavourable beliefs about oneself (self-stigma) or about a group of people (public stigma), emotion refers to prejudice as the feelings that are triggered by agreement with unfavourable beliefs about a group or about oneself, and behaviours refers to discrimination that discriminatory activities can be taken by stigmatized and public groups alike, for instance, the general populace may have the dread and attempt to avoid those who have mental health issues due to the misconception that they are dangerous (Boyle et al., 2022). However, after experiencing stigma from the public, individuals with mental health concerns tended to accept the notion that they were no longer completely capable of participating in social activities and were useless or hopeless, because of this public and self-stigmatization, they experienced

emotional distress, low self-esteem, and social disengagement (GBD 2019 Mental Disorders Collaborators, 2019).

The stigma is connected with attaining treatment for mental health issues is also referred as help-seeking stigma, that is another separate but linked to the construct of the stigma of mental illness, the idea of dealing with mental health issues is seen as undesirable or unsatisfactory and acts as a fundamental element of the stigma that associated with seeking help, thus, (it has captured loads of attention in the literature on) the connection between these two distinctive stigmas and help-seeking intentions, but the potential impact of emotion self-stigma—that is, stigmatizing beliefs about one's basic emotional states on seeking support for emotional distress has received less attention (Ali et al., 2020). People internalize display rules, feelings, and social norms, which lead them to adopt views about the basic manifestation of emotional states with ease, for example, the over-promotion of joyfulness is often seen as in search of accumulating "positive" spirits at the cost of "negative" sentiments like sadness, uneasiness, or anger, is a prevalent preoccupation in many Western countries and it's a prevalent misconception that "negative" emotions come from a lack of self-control (Nearchou et al., 2018).

When taken as a whole, these broader attitudes are likely to further shape people's perceptions of experiencing negative emotional states, leading them to believe that the person is flawed in some way and that their incapacity to effectively manage their emotions may make them more likely to place onerous demands on other people in social situations, as a result, people who are feeling such widely accepted "negative" feelings might think that it is improper or undesirable for them to feel and express these emotions (Niegocki & Ægisdóttir, 2019). Due to these beliefs, people tend to be discouraged from asking for help on psychiatric issues, consequently, coping mechanisms like rumination or emotion suppression at the expense of other coping mechanisms might be overused, which those have been proven to

worsen symptoms and possibly to have perpetuated stigmatizing views concerning emotions (Harvey & White, 2023).

It is uncertain how stigmatized mental health is among youngsters in India. Research on stigma in countries like US, Greece, and Japan reveals prejudiced attitudes and social distancing associated with mental health issues, a systematic review also discovered the stigma of mental illnesses linked to violence, instability, and disability in the Caribbean and Latin America (Unfpa, 2014). Among 365 million youth in the globe, India has the biggest number of unmarried individuals, add to this the high rate of untreated mental health issues, and it's likely that young people in India will have difficulty realizing their social and economic potential, data on this type of stigma associated with mental health were scarce, as the 2015–16 Indian National Mental Health Survey made clear (Gaiha et al., 2020).

There are two distinct types of stigmas connected to health: self-stigma and public stigma and are described as unfavourable opinions and prejudices held by the majority of people about a certain group in society (Finn et al., 2023). The idea that the impacted group is seen as distinct from the majority is a fundamental component of stigma, it is believed that several stigmatized illnesses share this notion of differentness, furthermore, stigma is seen to entail a sense of differentness that breeds contempt rather than merely being a neutral declaration of difference (Corrigan & Nieweglowski, 2019). A process known as self-stigma can occur when a person with a medical condition internalizes this stigma from the public, however, only public stigma that is, views held by the general public is included when stigma is considered in the current text (Finn et al., 2023).

The phenomenon of stigma has several dimensions, the theoretical distinction between expected self-stigma and experienced public stigma was highlighted (Serafini et al., 2020). Anticipated self-stigma is applying preconceptions to oneself, that is resulting in

internalizing devaluation and disempowerment while perceived public stigma is the awareness of prejudices held by the wider public regarding service users, still, it is possible to be conscious of stereotypes without agreeing with them (Serafini et al., 2020). For this reason, we treat expected self-stigma and perceived public stigma as two distinct stigma dimensions, people with mental illness have a significant degree of unmet needs, when someone needs psychiatric therapy but chooses not to seek it, this is referred to as an unmet need (Olsson et al., 2021). Entering psychiatric therapy is typically the primary method by which an individual is labelled as mentally ill because mental disease is not always obvious, this classification is linked to a variety of socialization-transmitted preconceptions or culturally accepted ideas, therefore, the fear of stigmatization and the prospect of being linked to such stereotypes are excuses for not getting care (Lee et al., 2020).

Public stigma

The term "public stigma" describes how people react to someone who they believe to be different from them such as those who have mental disabilities, for example, stereotypes that are related to the cognitive component, perspectives that are related to the emotional component, and prejudice that refer to a behavioural component are all considered forms of public stigma, also when it comes to prejudice, the unfavourable assessment of people mainly with disabilities poses a significant barrier to their participation (Aubé et al., 2020). More specifically, there has been a connection shown between higher rates of anxiety and depressive symptoms from public stigma, which is the idea that most people have unfavourable opinions about those who are dealing with mental health issues (Oexle et al., 2019). Since the second most common cause of death is suicide for both 10 to 34 years old and college students in the United States, not much research has attempted to investigate whether perceived public stigma is linked to other negative mental health outcomes, such as suicidal thoughts and attempts (Hinrichs, 2022).

There is scholar citing from Link's labelling theory as support, contend that prevailing views and ideas about mental illness influence societal/public stigma, which then materializes as prejudiced attitudes, discriminating behaviours, and stereotypes, because of this, stigma associated with mental illness in the public eye has permeated American society and customs, even though it may have detrimental impacts on psychological distress and mental health (Goodwill & Zhou, 2020). While the focus is mostly on the stigma associated with mental illness, it is conceivable that stigma associated with obtaining mental health treatment may also have a negative impact on an individual's wellbeing; since prior research indicates that perceived stigma is strongly correlated with higher rates of depression, loneliness, anxiety, self-harm, and suicidal thoughts but not with the use of mental health services, some researchers have already started looking at these issues among college students (Zhou et al., 2020).

To confirm if there is a link between suicide outcomes such as thought, planning, attempt, etc. and perceived public stigma across racial groups, more research is necessary, therefore, a critical examination of the role that perceived public stigma plays in the context of seeking mental health care is an essential first step towards providing much-needed insight into the experiences from mental health of college students and pinpoint key areas of emphasis for improving mental health equality among young adults enrolled in postsecondary education (Lipson et al., 2022). There are serious, detrimental effects of public stigma on people who suffer from psychological anguish and mental illnesses. However, there are several dimensions to both symptoms and public stigma; people who appear with various symptoms may experience different aspects of stigma (Ponzini & Steinman, 2022).

Public stigma is defined as the unfavourable response that society has for individuals who suffer from mental illness and has a significant impact on those with mental illnesses, and they encounter it more frequently than those with physical impairments (Kowalski &

Peipert, 2019). The wide-ranging effects of the high incidence of stigma around mental disease include diminished mental health, decreased utilization of mental health services, and dehumanization of those who suffer from mental illness (Schomerus et al., 2019). Three components are said to be included in public stigma, according to the social-cognitive model: discrimination, prejudice, and stereotypes, firstly, stereotypes are common assumptions about groups that ignore individual distinctions and generalize the traits of their members, people with mental illnesses are often stereotyped as violent and less competent, also, prejudices are unfavourable emotional assessments (Boysen et al., 2023).

Phobias against someone suffering from mental illness include anxiety, anger, and sympathy, withholding assistance, refusing to hire someone, turning down a prospective partner, and social distance are examples of discrimination as negative group-based behaviours towards those with mental illness (Boysen et al., 2019). Components of the public stigma are interconnected because preconceptions and stereotypes are linked to discriminatory behaviours, the degree and valence of preconceptions and biases influence the discrimination against individuals with mental illness by using the framework of the Stereotype Content Model, it was possible to determine, for instance, that certain emotional and behavioural tendencies and mental disease stereotypes were associated, and the present study employed the Stereotype Content paradigm, a global paradigm for group perception, to analyze the self-stigma of individuals with mental health difficulties (Gärtner et al., 2022).

In terms of the prevention and treatment of mental health illnesses, the age of 10–24 is a vital time for young people, especially adolescents and young adults, an estimated one in five youth worldwide suffer from a mental illness, and seventy-five percent of individuals who suffer from mental disorders say that they first experienced one at this time (Sumnall et al., 2023). While sanity struggles (i.e., signs that are insufficient to diagnose with a mental health disorder) and mental health disorders themselves are universally prevented from

seeking counselling and treatment by public stigma, the degree and forms of this stigma vary among cultures, for example, problems of knowledge (ignorance), problems of behaviours (discrimination), and problems of attitudes (prejudice) are the linked components that make up public stigma (Koschorke et al., 2017).

The underreported incidence of mental diseases in India is mostly due to public stigma, as evidenced by the fact that only 7.3% of young people in the country admit to having a mental illness, and even fewer receive treatment (Gaiha et al., 2020). India's national mental health strategy includes a goal of reducing public stigma, the country also established a law in April 2017 that guarantees the equality and nondiscrimination of those with mental illness (Gupta & Sagar, 2021). This study uses a systematic review and statistical analysis to determine regular issues in knowledge, attitude, and behaviours regarding to mental health; to identify common problems in the prevalence of stigma associated with mental health among a segment of the Indian population, namely youngsters who aged 10 to 24 and are part of the overall population; and to record the suggestions for decreasing the stigma associated with mental health (Sharma & Kommu, 2019).

Stigma takes many forms, including discrimination, negative stereotyping, status loss, and labelling of individuals, public stigma refers to the widespread unfavourable attitudes and beliefs that cause people with addictions to be rejected by society, it is a component of structural stigma and is sustained by it, which shows itself as prejudiced institutional practices and policies, when someone absorbs the stigmatizing beliefs of society, they become stigmatized themselves (Sussman, 2021). Barriers are erected by public stigma on several levels, for example on a personal level, the fear of stigmatization might cause someone to want to conceal their substance and alcohol use, which can exacerbate social isolation and high-risk behaviours (Krendl & Perry, 2023). Public shame results in inadequate funding for a top-notch addiction treatment program and less-than-ideal care for those

suffering from substance use disorders at the level of the health system, public stigma can affect public judgement in favour of corrective instead of public health-oriented remedies, leading to collective not-in-my-backyard struggle to the provision of community-based services, and causing discrimination in insurance coverage, employment, and housing at the society level (McGinty & Barry, 2020).

Self-stigma

An individual that can feel, perceive, and predict is referred as self-stigma; due to stigma, individual with serious mental illness who have experienced prejudice are referred to as experiencing stigma (Collins et al., 2019). Anticipated stigma, or the belief that one would face discrimination due to serious mental illness, can arise even in the absence of prior discriminatory experiences and can lead to social disengagement and self-stigma, for example, the process through which an individual's prior social responsibilities that define one's social identity like friend, sister, brother, employee, son, or prospective spouse becomes increasingly substituted by a stigmatized and devalued perception of themselves identified as an "illness identity" is referred to as self-stigma or internalized stigma (Borenstein, 2020).

The internalization of these demeaning ideas is known as self-stigma, shown as the acceptance of these viewpoints is dependent on the person's identification with the marginalized group and their conviction that the stereotype is true, and a type of identity shift that leads to the loss of once held positive self-beliefs is included in the definition of self-stigma, it's one of several reactions to the stigma associated with mental illness; other replies include energization, righteous wrath, or no discernible emotion at all (Lewis et al., 2022). According to theory, self-stigma results from three related processes: self-concurrence, stereotype agreement, and a decline in self-esteem. Endorsing alleged stereotypes entails stereotyping agreement, when someone thinks they personally fit the stereotypes, they are

engaging in self-concurrence, also, people who internalize the stigma react by losing confidence in their own abilities and self-worth (Mills et al., 2020).

Studies have demonstrated instances of self-stigma in a variety of people with a lived experience of a broad spectrum of mental illnesses (Maharjan & Panthee, 2019). Studies on self-stigma and mental illness have mostly concentrated on psychotic conditions like schizophrenia, it has been estimated that self-stigma affects 20% to 50% of people with schizophrenia spectrum disorders and around 22% of those with mood disorders (Chang et al., 2019). Self-stigma seems to be a problem for those who suffer from personality disorders as well as drug and alcohol use problems (Dubreucq et al., 2021). Self-stigma increases the social burden of mental diseases and has a major detrimental effect on functional results (Cheng et al., 2019). It has been discovered to be connected to pessimism and a lower standard of living, it works as a major obstacle to recovery by undermining empowerment, decreasing the chance of seeking help, and negatively affecting adherence to therapy, recognizing self-stigma is essential to lessening its widespread effects (Lewis et al., 2022).

Self-stigma and perceived stigma have also been used to characterize the stigma associated with obtaining treatment, more precisely, the term "self-stigma around seeking treatment" describes how someone internalizes public stigma, which lowers their self-esteem or devalues them as a person (i.e., requesting assistance is a sign of weakness) (Calear et al., 2020). It has been discovered that self-stigma is linked to particular coping mechanisms, which increase self-blame and reduce the use of instrumental support (such as asking for guidance or assistance from others) (Chen et al., 2020). The idea that members of a social group would consider someone who sought psychiatric therapy to be less socially acceptable is known as perceived stigma around treatment, and it has been linked to avoidance coping mechanisms (Lui et al., 2022). Numerous research has linked stigma to psychological distress in general as well as unfavourable attitudes or intentions against seeking psychological

assistance, even in the case of college students (Eyllon et al., 2020). Other recent research indicated that self-stigma was adversely connected to mindset about obtaining expert psychological treatment, look for assistance and proposed that self-stigma may impair primary choices to seek mental health assistance and therapy info (Karaffa & Hancock, 2019).

Although self-stigma is significant, little is known about how it interacts with other variables to predict more pessimistic attitudes towards getting help, this is troublesome since efforts to lessen stigma and lessen its negative impacts have shown inconsistent outcomes, pointing to the possibility that there are additional contextual elements at play that may have an impact on this link, there is contextual variables can explain why treatments work for certain groups but not for others, and they can also assist guide future efforts by counsellor and practitioners to reduce stigma, a relevant environmental component to consider might be the degree of psychological distress experienced (Surapaneni et al., 2018). Self-stigma increases avoidant behaviours to get help while also predicting lower use of professional and social support, although obtaining professional care for those who suffer from metal health related issues had a unique association with self-stigma, it had a negative influence on how often people utilized social support (Cole & Ingram, 2020).

Fluctuations in experiencing of the emotion, increasing emotional awareness, and progressions in cognitive development, teenage is critical times for the growth of meta-emotional philosophies, or interpretations about one's emotional experiences, young people are more likely than adults to experience emotions more frequently, more intensely, and with a higher degree of emotional instability, hence self-stigma is likely to be more relevant to them (Bailen et al., 2019). However, considering the importance of peer acceptability in this age group compared to earlier age groups, social influences in this population are expected to have a major effect on emotion management objectives, young people may use self-stigma as

a defense technique to prevent rejection from their peers, however, these ideas could also encourage less flexible or maladaptive coping strategies as well as a decrease in help-seeking, all of which are linked to worse long-term results for wellbeing (Ward-Ciesielski et al., 2019). Therefore, it's critical to determine whether self-stigma prevents people from seeking help for psychological issues in a way that goes beyond commonly recognized types of stigmas, like mental illness or help-seeking stigma and this is especially important during the formative years of adolescence and early adulthood, when many people who most need mental health care are reluctant to do so (Aguirre Velasco et al., 2020).

The term "self-stigma" in the context of mental health refers to a person's unfavourable thoughts about their psychiatric symptoms or seeking assistance (Harvey & White, 2023). Individuals may be unable to access mental health care because of how they see their mental health issues, adolescents who struggle with mental health issues face stigma from their classmates and/or family members, are less likely to succeed academically in the future, and are more likely to resist obtaining psychiatric help than their peers (Velasco et al., 2020). In addition, teenagers who encounter self-stigmatization about their mental health may show hesitation to seek help for their mental health issues because they fear being called "mad" or "nuts" (Ferrie et al., 2020).

When a person internalizes the views of the public and feels guilty or ashamed for behaving contrary to popular opinion, this is known as self-stigma, the more someone believes that they are weak for experiencing a mental health issue, the more ambivalent they will be about getting help, because of this tension, deciding to get mental health help could only be considered as a last resort (Cole & Ingram, 2020). Research indicates that males are more likely to experience self-stigma when discussing subjects like mental health which they view as most dangerous to their sense of dignity (Silver et al., 2018). Remarkably, males are expected to seek for help in regards to the issues that have an external source, such as a

breakup in a relationship, as opposed to those that have an internal cause, like widespread depressive symptoms, also a man's sense of dignity is not as openly challenged by external factors associated with help-seeking since these external factors do not reflect onto an individual's intrinsic features and discovered that the existence of self-stigma inhibited a man's desire to ask friends and family for help rather than professional help (Cole & Ingram, 2020).

Through some research, self-stigma which was defined as a person's own stigmatizing sentiments was clearly more significant in predicting treatment-seeking behaviours, these findings validate most of the researchers' hypothesis that treatment-seeking inclinations are more predictive of one's own stigmatized attitudes, and self-stigma (Deguchi et al., 2021). About self-stigma, research found that it had a similar effect on college students' treatment-seeking as other forms of stigma, and numerous studies that looked at the relationship between self-stigma of mental illness and seeking mental health treatment also found that there was a negative correlation and a decreased likelihood of getting assistance when it came to self-stigma of mental disease (Guarneri et al., 2019).

Internalizing biased, discriminating, stereotyped, or other unfavourable ideas about one's own traits can lead to self-stigma, this is especially true for marginalized and minority groups, and a common phenomenon in psychiatric communities is self-stigma (Dubreucq et al., 2021). According to a previous study, cultural relevance and understanding of mental illnesses were found to be moderators of self-stigma and through a recent comprehensive analysis, 31.3% of people with mental problems on average reported having a high level of self-stigma, for example, southeast Asia has the greatest rate 39.7% of self-stigma worldwide, Guangzhou and Hong Kong, 38.3% to 49.5% of individuals with mental illness reported significant levels of self-stigma while an additional survey revealed that 54% of Nepalese people reported experiencing self-stigma (Yeung et al., 2021).

Self-efficacy and self-esteem are poor in those who experience self-stigma, researcher established a strong link between severe mental symptoms, poor treatment adherence, and self-stigma (Maharjan & Panthee, 2019b). Poor life satisfaction, damaged social connections, unemployment, and poor health outcomes including low help-seeking attitudes, treatment-seeking behaviours, and quality of life are all negative correlates of self-stigma (Brouwers, 2020). Healthcare professionals and doctors have a critical need to get a deeper knowledge of the self-stigma that individuals under their care face, since it may have a multitude of detrimental repercussions on those with psychiatric disorders (Fan et al., 2022).

Help-seeking behaviour

Help-seeking behaviours refers to behaviours that people use to cope with problems or painful experiences when they actively seek help from various resources such as communicating with others. The concept of help-seeking behaviours in the health field refers to the planned behaviours of seeking help from professional service providers especially counselling, when a change in health status, distressing experience or encountering an issue that is unable to go through individually is detected (Fakari et al., 2021). Seeking help for mental health issues needs to be expressing the need for individual and emotional support to receive guidance and assistance (Velasco et al., 2020). Rickwood and Thomas (2012) defined getting treatment for mental health issues as "the adaptive coping process of attempting to obtain external assistance to deal with mental health problems includes both formal (e.g., medical services) and informal (e.g., friends and family) sources of help", therefore, understanding and identifying what is the hinderance and barriers toward help-seeking is critical in the future developing interventions and programs to help and support those who suffer from painful experience also with mental health problems.

Help-seeking behaviours is a complex behaviour influenced by several factors and varies across contexts, especially when individual encounter high level of stress, lack self-regulation skills, unable to cope well with crisis, and many others, therefore, can shorten the time between a problem and getting professional help by identifying the contributing factors in their situation that is encountering (Ibrahim et al., 2019). In other words, by identifying factors such as embarrassment, facing transportation barriers, social stigma from friends and family members that influence one's help-seeking behaviours, early diagnosis and timely treatment can be achieved and the information regarding such actions may be transferred to their health care provider, thus, the purpose was to assess the aspects that influencing help-seeking behaviours among undergraduates nowadays (Radež et al., 2020).

Also, there are other reasons that may restrict help-seeking behaviour such as, loss of face, stigma tolerance, and acculturation factors and they are willing to live alongside anxiety, depression, and other mental health issues without seeking help (Martínez et al., 2020). There are research has shown that there are young people tend to be self-reliant when they encounter emotional especially personal issues, and when they do seek help, they are more likely to draw on informal help or social support rather than formal sources of help, also, information obtained from this research can facilitate the next stage of the help-seeking course and may influence individuals on how they will develop help-seeking attitudes (Pretorius et al., 2019). While there are many things that might prevent people from getting treatment, such social stigma, lack of access to resources, or unfavourable opinions of the therapeutic relationship, one major thing that commonly gets in the way of people obtaining appropriate support is ignorance about mental health (Radež et al., 2021).

When managing stress and its related stresses, a particular kind of individual coping that is essential is a willingness to seek professional assistance for psychological conditions (Panis et al., 2019). Three dimensions of coping strategies have been identified that are

emotion-focused which refers to an individual's attempts to manage thoughts and feelings connected to the stresses and lessen their emotional effects, problem-focused that involves proactive attempts to address the source of stress via personal action, and dysfunctional or avoidance coping (Fitz-Gibbon & Murphy, 2022). Psychological stress was shown to be lower when problem and emotion-focused techniques were employed, for example, problem-focused techniques were linked to a decrease in self-stigma while techniques centred on emotions increased both the public and self-stigma of getting assistance while the term "avoidance" or "dysfunctional coping" describes coping mechanisms that sidestep confronting the issue or the feelings that are connected to it and this might potentially hinder the process of obtaining assistance (Torres et al., 2022).

When someone actively seeks out assistance from others through conversation, they can obtain general support in the form of getting information, understanding, guidance, and therapy in response to an issue or upsetting experience, this behaviour is known as help-seeking (Clough et al., 2018). Help can be obtained from qualified sources, such as mental health specialists like psychiatrists, therapists, psychologists, and counsellors, who possess a recognised function, the required education or training to provide support, and guidance, help-seeking conduct is also essential to the mental health and wellness of young people (Ibrahim et al., 2019). Students' normalising of asking for help presents a chance for intervention as well as for them to look for approval and understanding for asking for aid, therefore, in order to address their psychological needs, young people need to be encouraged to seek treatment from the right sources (Kim et al., 2020).

It was also accepted that these stigmas (public stigma and self-stigma) functioned as obstacles to getting mental health assistance, it's interesting to note that self-stigma is influenced by public stigma and influences the choice to seek assistance, this is due to the possibility of internalising the stigma from society attached to seeking psychiatric assistance,

which leads to self-stigmatization (Vogel et al., 2017). In order to decrease the stigma connected with mental health related illness and boost the effectiveness of seeking care, mental health literacy is defined as the knowledge of how to maintain good mental health and its therapies, knowledge of mental health is positively correlated with attitudes towards mental health assistance, and those who have more favourable attitudes towards mental health assistance are likely to seek for help when they recognise the need of mental health support, it was determined that those with high mental health literacy had accurate views about the efficacy of counselling and treatment, a solid grasp of mental disease, and the ability to recognise and diagnose mental health difficulties (Vally et al., 2018).

Researchers in North America have been paying more and more attention to mental health difficulties among post-secondary students as a growing number of data suggested that throughout the past ten years, anxiety, eating disorders, panic disorder, and depression have been common among undergraduates (Wada et al., 2019). According to data from the American College Health Association, during a 12-month period, 65% of Canadian post-secondary students reported experiencing devastating anxiety; over 60% was reported to be experiencing "more than average" or "tremendous" stress, and 44% was reported to feel so depressed that it was tough for them to function; over 32% of the students said that their academic performance had been obstructed by anxiety, and over 21% had said that depression caused comparable impact (August et al., 2023). Relatively not many students seem to look for support or utilise mental health services that available, despite rising proof of the frequency of mental health related issues and their harmful consequences on undergraduates' academic achievement (Wada et al., 2019).

Prior research found that the percentage of students receiving treatment for mental health concerns was low (18% in 2005, 25% in 2007, 35% in 2011, and 36% in 2006 and 2008), while only 25% of students in Canadian post-secondary institutions said they would

not seek professional help for mental health issues, those who did may have the added challenge of not knowing who to turn to or what services to offer (August et al., 2023). Evidence suggests that other factors have an equally significant impact on the decisions made by students with mental health issues, despite some of them claiming that they did not seek treatment because they saw it as less important than meeting immediate, more tangible demands on their time, such as coursework, when it is not immediately apparent to them where such support may be located, students may feel discouraged from asking for it, moreover, their impression of how mental illness is seen on campus could bolster resistance to getting treatment (Wada et al., 2019).

Stigma in relation to help-seeking behaviours.

Stereotypes and stigma are two things that might make it difficult to adopt good coping mechanisms, when mental diseases are stigmatized more than any other sort of sickness, with a long history of stigmatization of those with psychological and psychiatric issues (Dagani et al., 2023). People with mental illnesses are still widely feared and discriminated against because they are frequently seen as dangerous, erratic, or untrustworthy, therefore, stigma may prevent people from getting care when they are suffering from mental illness, even when it is important to do so. Perceived stigma refers to the belief that others have negative attitudes or actions towards those who have mental illness, while internalized stigma refers to the shame that results from these beliefs (McArthur et al., 2019).

When mental health issues are left untreated, long-term negative effects on emotional, social, physical, and behavioural consequences can result, including in rare instances, suicide and stigma around mental health are often mentioned as an obstacle to help-seeking, it's time to put a stop to entire types of prejudice and stigma against persons with mental health

conditions, since they face few threats that are the detrimental impact of their underlying illness and the stigma, moreover, a lot of individuals claim that stigmatisation outweighs the sickness itself (Thornicroft et al., 2022). Stigma has been found to be a significant deterrent to getting treatment and has been linked to the underutilization of mental health care and there are three major systematic studies have examined stigma and help-seeking linked to mental health to date, according to every review, stigma has a definite and detrimental effect on people who seek care, from the majority of the research included in these evaluations were from the Canada, USA, Australia, New Zealand and Europe (Gallimore et al., 2023).

It is commonly known that stigma prevents people from getting the mental health care they need and according to research, people who hold stigmatized ideas about mental health are frequently less likely to seek professional assistance and have lower results for their mental health (Gaddis et al., 2018). Young adults who suffer from psychological distress and mental health issues have cited that stigma and other people's perceptions of them act as the primary obstacles to getting treatment or seeking help, although there is some evidence that measures to lessen public stigma might also lessen attitudes that impede reintegration into the society that many informational campaigns and interventions were proposed among as the several types of treatments (Mascayano et al., 2020). A frequent concept is that older adults are more unwilling to seek mental health care because of stigma, yet little research has examined this assumption and hypothesis (Mackenzie et al., 2019).

People with mental diseases have frequently identified stigma as the prejudice and discrimination associated with undervalued conditions and act as a key barrier to their ability to heal and lead fulfilling lives, for those suffering from severe mental illness, stigma has been linked to poor outcomes; 40% of this population reports having unfulfilled treatment requirements despite of the availability of efficient therapies (Pescosolido et al., 2019).

Psychiatrists who assert that stigma has diminished or is unimportant notwithstanding, stigma

still worries medical professionals, patients, advocacy organizations, and legislators, also, studies have not substantiated reports of a decline in stigma, help-seeking the goals and instances of prejudice and discrimination that people with mental illnesses have reported have been linked to national levels of public stigma (Braslow et al., 2021). The results of antistigma initiatives also highlight the fact that stigma still exists, that many of these programs are not scalable, and that the efficacy of both large- and small-scale interventions and messages is ambiguous, constrained, or temporary to give a thorough evaluation significant modifications to the kind and extent regarding significant mental health stigma in the public problems over the course of two decades (Pescosolido et al., 2021).

A person who actively seeks out psychological support from mental health professionals including psychiatrists, psychologists, and counsellors is said to be engaging in psychological help-seeking conduct, getting professional assistance is viewed as a coping strategy, a response to stress, and a technique that enhances wellbeing, getting psychological assistance is crucial since it lessens the detrimental long-term repercussions of mental health issues, because mental diseases and those who suffer from them are stigmatized, individuals are reluctant to seek mental health therapy (Nizam & Nen, 2022). When a person feeling that life is no longer worth living, when their thoughts, feelings, or actions are interfering with their relationships or employment, or when they are suffering from traumatic life experiences, they should seek professional assistance (Surapaneni et al., 2018). Having a mental illness managed and treated can help improve quality and value of life by making it much more controllable, letting one to enjoy life's activities without being limited by their condition, and it can also improve sleeping patterns, strengthen the immune system, reduce pain, increase productivity, improve focus on daily tasks, boost motivation, and lengthen life expectancy (Murphy et al., 2023).

It is acknowledged that having mental health specialists in schools, such as licensed counsellors, clinical psychologist is an effective way to handle psychological issues and distress, it is advised that educational institutions provide psychological treatments that are compatible with and adaptable to the demands of students who are in need of support (Fogaça, 2019). It is known that stigma, namely the public stigma and self-stigma, moderates the desire to look for therapy services and acts as a deterrent to obtaining psychiatric assistance, it is evident from the stigma construct (public stigma and self-stigma) that people's attitudes about asking for help are negatively impacted by it (Arslan et al., 2020). Rarely do attitudes towards getting psychological aid emerge from an evaluation of one's expectations about the procedure for getting psychological treatment, as an example of public stigma, such as "seeking mental health help or counselling help is for those who are crazy" and example of self-stigma, such as "if I seek counselling help, it signifies that I'm crazy or others will think I'm crazy," are examples of this kind of public stigma (Samsudin & Abdul Latif, 2023).

When someone experiences self-stigma, they may feel as though "he or she is socially unacceptable," which lowers their sense of value or self-esteem when they seek out psychological support, people begin to conceal their psychological issues as a result of this in order to prevent stigma (Aziz & Siti, 2023). The rise in negative self-labelling is a result of internalizing public stigma, which is the phrase used to characterize those who take on negative labels and beliefs that the general public connects with those who seek out psychiatric assistance, this is due to the fact that there was a stigma in the public eye linked to obtaining psychological services, which was expressed negatively or stigmatized by others, leading to the perception that those who sought out psychiatric help were more emotionally unstable, uninteresting, and insecure (Vogel et al., 2017).

Public stigma around mental health has a more negative impact effect on teenagers 's help-seeking compared to older adults, there is a higher likelihood of increased social distancing among youth with mental health issues (Pang et al., 2017). Furthermore, due to widespread worries about confidentiality, peer influence, a need for autonomy and a deficiency in understanding about mental health issues and compared to adults, youth are less likely to seek mental health services treatment for mental health condition, it should come as no surprise that teenagers in research discovered it more difficult to report mental health issues than did adults (Gaiha et al., 2020).

Teenagers face an even more complicated stigma related to mental diseases, according to the scant study in this area (which makes up only 3% of all studies), it is critical to comprehend it in young people, to identify processes and obstacles, particularly with regard to mental health attitudes, knowledge, and help-seeking behaviours (Schomerus et al., 2019). Adolescence is a critical time in a person's psychological and emotional development, which makes it highly significant, at this age, an adolescent's coping mechanisms for handling the dual burden of mental health issues and rejection from peers are determined by their desire for inclusive social networks and peer acceptability (Waqas et al., 2020). It is especially crucial to comprehend the dynamics of stigma and how peer perception affects the identity formation of young people with mental disorders in school settings, according to a World Health Organization (WHO) report, this is a major obstacle in more than 68% of the world's nations (Mental Health and Substance Use, 2005).

Approximately twenty-three percent of college students globally suffer from a psychiatric condition in any given year; of them, only sixteen percent obtain treatment for their mental health problem, since that by the age of 24, over 75% of all mental diseases begin, it is critical that those in this age range obtain the necessary therapy (Bird et al., 2020). College students who need assistance with mental health issues have several obstacles to

receiving treatment, including stigma and attitudes about asking for help (Sari & Asiyah, 2022). Online counselling offers advantages like ease and accessibility to clients, it is described as the delivery providing mental health services in an online or distant manner environment using online tools methods including phone, email, and videoconferencing, furthermore, this approach offers anonymity, which may decrease the impact of these obstacles and raise the possibility that a person will seek therapy (Wallin et al., 2018).

Despite the potential advantages of online counselling, prior studies have indicated that views towards this type of counselling are less favourable than those towards the more conventional in-person approach, whether this is because of varying degrees of stigma associated with this type of counselling is unknown, though. Furthermore, not much is known regarding the association between stigma, thoughts, and intentions or plans to seek help among college students and online counselling (Prim et al., 2023).

Theoretical frameworks

According to research, the best therapies for lessening stigmatizing beliefs about mental diseases involve social contact (Jorm, 2020). In order to identify and examine the underlying aspects that impact help-seeking behaviours among university students, Social Cognitive Theory (SCT) by Albert Bandura, speculated that modelling, behavioural processes, motivational, and most importantly learning are the result of the mutual and interdirectional interaction from both ways focus on three different main components that are environmental inputs, personal factors, and behavioural outcomes that have shown specific outcome socially that related with the surroundings interacting both dynamically and reciprocally, individual, and behaviours (Nwosu et al., 2022). However, the environmental inputs act as the most important factors, which offer chances for social group contact, that is connected to the social and cultural realm in which people learn, having direct encounters that involve talks and information exchanges with classmates, placement tutors, or managers

of the businesses where students complete their placement learning, thus, students' help-seeking behaviours may be influenced (Hayes, 2017).

The framework offered by social-cognitive theory is helpful in comprehending the causes and effects of internalized stigma (Catalano et al., 2021). Within this framework, a popular model suggests that people become generally aware of negative public stereotypes about mental illness through social exposure on a daily basis (awareness), and frequently agree, either explicitly or implicitly, that these stereotypes are true or legitimate (Hinzman et al., 2022). The social classification of being mentally ill then turns to individual significant when the individual has mental health difficulties, obtains a diagnosis or uses the system for mental health treatment, as a result, there may be a decline in self-concept, a feeling of inferiority in society, and a reduction in expectations for one's life (hurt) (Favre & Richard-Lepouriel, 2023). Concurring that the unfavourable public stereotypes apply to oneself (application), the negative effects of internalized stigma include decreased overall quality of life, interference with the pursuit of personally meaningful activities (i.e., "why try"), psychological results (such as increased hopelessness, suicide thoughts, depression, etc.), and other negative effects (Jin et al., 2021). Clinicians may find this model interesting because, if stigma exposure is a process that becomes worse over time, it makes sense to figure out when to step in to lessen its effects (Catalano et al., 2021).

"Social cognitive theory" is a psychological viewpoint on human behaviours that draws attention to the vital impact that social settings have on self-control, motivation, and learning (Schunk & Usher, 2019). A socially and culturally constructed process known as stigmatization where an individual is first seen as exception and then belittled, resulting in loss of status and discrimination, the process of stigmatization includes mental processes that result in stereotypes, affective responses that result in prejudice, and behavioural acts that result in discrimination (Roozen et al., 2020). SCT is a commonly recognized theory for

elucidating personal behaviours, it holds that a person's behaviours are determined by three factors: their "environment", refers to both the physical and social surroundings; "themselves" (person), alludes to a focused individual's unique cognitive characteristics; and their "behaviours", refers to the behaviours of that individual (Zhou & Fan, 2019). SCT states that any two of the three elements may interact with one another to impact each other's, for example, environmental structures and individual specific actions can shape and change human beliefs and cognitive abilities, recognizing that alterations in health outcomes are influenced by social structures in addition to individual behaviours (Xing et al., 2017).

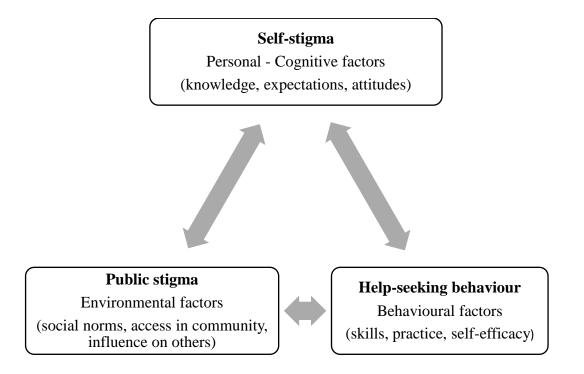


Figure 2.1 Theoretical framework of Social Cognitive Theory (SCT) related to public stigma and self-stigma on university students' psychological distress (Lahcen et al., 2020).

Conceptual framework

The current study looked at the relationship between help-seeking attitude and help-seeking self-stigma, or internalization of stigma, as well as the relative associations between these two forms of stigma, results indicated a high and positive correlation the stigma

associated with personally asking for help and public stigma of doing so (Yu et al., 2022). Furthermore, even after accounting for the interaction effect, there was still a significant correlation between help-seeking attitude and intention and self-stigma but not public stigma, the results show that persons with greater degrees of self-stigma are often those who believe that asking for aid from others is stigmatized more (Ma et al., 2020). Help-seeking self-stigma may have a greater influence on a person's attitude and desire to seek help than help-seeking public stigma, to encourage a positive attitude and intention towards getting assistance, programs to promote help-seeking should be designed to address both forms of stigma (Ajayi et al., 2021).

Anxiety, sadness, and post-traumatic stress disorder are among the psychological problems or distress that are more common in those who are emotionally and physically exhausted, and among the biggest hindrances to the stigma attached to mental illness is getting mental health care, which is pervasive nowadays (Drew & Martin, 2021). As a result of the difficulties our society is now facing, the frequency of mental health disorders among university students has been rising over the previous few decades, however, research shows that college students face several obstacles when trying to get treatment for mental health issues (Son et al., 2020). One enduring social issue that prevents people from getting the necessary care when they need it is the stigma around mental health disorders, students are more likely to seek treatment for such problems given the features of the student population and the high-stress, long-lasting study culture that has been actively or passively pushed in the academic sector (Johnson et al., 2023).

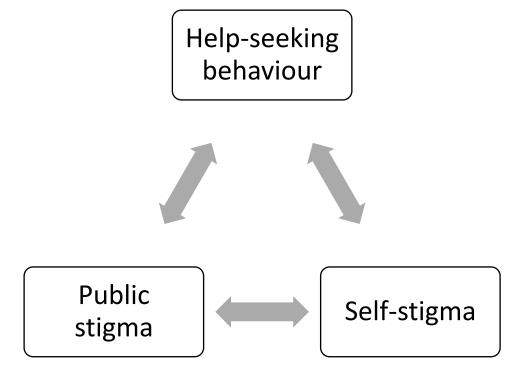


Figure 2.2 Conceptual framework of public stigma and self-stigma on university students' psychological distress in influencing help-seeking behaviours.

Chapter 3: Methodology

Research design

The present investigation is qualitative in nature and will utilise a case study research approach. Case study research is a kind of empirical inquiry that investigates a contemporary issue in-depth and in the actual world by focusing on one or a small number of participants (Yin, 2018). Without question, case study research is one of the most effective research strategies employed by researchers to achieve both theoretical and practical goals, according to its description, it is a stand-alone qualitative technique that has been recognised by seasoned qualitative researchers, published case studies show a great range in study design, and case studies are tailored to the case and research issue (Ebneyamini & Moghadam, 2018).

A qualitative research approach has emerged from a variety of academic and philosophical traditions; it is not a single, cohesive collection of methods or ideologies and it offers a comprehensive perspective on human relationships and behaviour, which is necessary when not only depending solely on data from surveys and other quantitative sources (Lane et al., 2019). According to Chowdhury and Shil (2021), the quantitative approach might vary depending on the viewpoints and experiences of individuals, whereas the qualitative research technique necessitates the use of standardised measurements and is characterised by an indepth and extensive investigation of a chosen topic (Aguboshim, 2021). Many scholars agree that data saturation is a major factor in deciding whether the sample size in a qualitative case study is sufficient, qualitative approaches offer in-depth details about a far smaller number of subjects and instances to assist in ensuring the reliability of data, researchers employ several strategies (Church et al., 2019).

Data analysis method

A technique that is becoming more and more common for analysing qualitative data is thematic analysis, which organises the data into relevant themes by identifying patterns in the raw data (Braun et al., 2019; Campbell et al., 2021). The legitimacy of theme research designs has suffered as a result of this flexibility (Braun & Clarke, 2020), as thematic analysis has been used with a "mishmash" of various methodologies and ideologies (Lochmiller, 2021). Kiger and Varpio (2020) contend that themes shouldn't just appear in the data passively; rather, researchers should actively participate in the process and be open about the actions they took in the analysis. Rather, researchers should recognise the abductive technique supporting study if preexisting theory or frameworks have guided the process of coding and topic development, however, there are lack of guidelines for abduction in thematic analysis (Thompson, 2022).

The goal of abduction is to strike a balance between deductive and inductive reasoning, which has its roots in the philosophical discipline of pragmatism, engages in equal and simultaneous interaction with both existing theoretical knowledge and empirical evidence rather than being data-driven or hypothesis-driven (Hurley et al., 2021). Thus, in accordance with abductive techniques, there is an eight-step procedure for thematic analysis that is both sophisticated and relevant (Earl, 2020). The systematic strategy approach overcomes the "anything is acceptable" critique by offering a clear, precise, and well-defined framework for the investigation, this is meant to serve as a guide, not a handbook, for researchers who wish to apply theoretical understanding to lead their empirical discoveries. It is not an attempt to build a uniform theme analysis approach that could be employed in all subsequent research projects. (Thompson, 2022).

Step 1: Transcription and Familiarisation

Detailed transcriptions of audio recordings and field notes can be completed before, during, or after the data collection stage of the study. The benefit of concurrent data collection and transcription is that it enables researchers to modify their data collection strategies to achieve clarity, since it may become clear which points need more information (Thompson, 2022). Researchers have two options for transcription: can conduct denaturalized transcription by making the grammar and syntax more readable for potential readers or might decide to accurately record stories by following their words and appreciating their speaking style (Jonsen et al., 2017). Most importantly, researcher need to be open and honest about this procedure, in order to find the meaning and context underlying stories and the circumstances in which participants occur, active reading of the data should occur either during or immediately after (Scharp & Sanders, 2018). At this point, researcher can take notes to identify and analyse any patterns or codes that may exist in the data. These may be useful for any future data collecting that have planned or may serve as the basis for the initial steps of data coding (Xu & Zammit, 2020).

Step 2: Coding

"A code is defined as "a term or short phrase that symbolically assigns a summative, salient, essence-capturing, and/or vivid attribute for a portion of language-based or visual data" (Peel, 2020). Coding is a method of organising large amounts of qualitative data by classifying and code certain words and paragraphs according to shared traits, since it is unusual for the first round of coding to identify all code, it is advised to code for at least two to three rounds (Peel, 2020). Coding is a cyclical process, the initial coding phase establishes the connection between the unprocessed data and your cognitive understanding of the information (Majumdar, 2022). Therefore, in the initial round of coding, each and every

significant point should be coded in order to extract an equal degree of semantic significance and knowledge as possible from the interview data (Majumdar, 2022). Codes that might be put under a single heading are consolidated in the following stage of coding, which is more discerning, additionally, codes that are judged trivial or not repeated can be eliminated (Taheri & Thompson, 2020). Researcher should get a greater degree of understanding for the patterns and correlations in the data via this heuristic approach (Thompson, 2022).

Step 3: Codebook

Code books are becoming more and more popular when used in topic analysis as a means of optimising and organising the coding process and act as a systematic guidance, derived from Guest et al. (2012). It should be mentioned that follow the form of thematic analysis that is reflective and inductive of the use of codebook as a positive approach instrument (Braun et al., 2019). According to Braun and Clarke (2020), a codebook just assesses if researcher have had the same training in coding and does not do anything to determine whether results are truly reliable, as that being said, a researcher employing this codebook is not making an effort to assess data correctness objectively. Rather, it gives the researcher the opportunity to consider their coding decisions and whether or not they are personally happy with the definition, language, and labelling, without using an impartial ranking or number method like inter-rater reliability, it might serve as a platform for coding the data (Thompson, 2022).

Step 4: Development of themes

In abductive thematic analysis, themes and codes are distinctly different. While codes are concise and precise, themes may be far more complex and incorporate several codes to conceptually describe occurrences (Guest et al., 2012). Therefore, the first stage in developing themes is looking at the relationships between different codes and rating them

based on how well they may be utilised to tell the story in the data as a whole., this kind of classification allows for the identification of a theme—a collection of codes that successfully depict a phenomenon (Braun & Clarke, 2006). According to Campbell et al. (2021), the label ought to be a succinct and readily assimilated term that effectively conveys the core idea of the topic to readers. The results of a thematic analysis can be classified as latent themes which go go beyond the facts and draw conclusions or semantic themes conceptually through theory summarised content gathering cursory details regarding what was directly said (Campbell et al., 2021). Latent themes should always be the result of abductive thematic analysis since, as will be covered in the next phase, theorization is essential to abductive reasoning (Thompson, 2022).

Step 5: Theorising

Up until now, the data had been broken down and categories into themes and codes. In this step, researcher will describe the connections and narratives that exist between the themes with the complete dataset, this distinguishes abductive theme analysis from other qualitative analysis guides and is a crucial component of it (Thompson, 2022). The process of theorising data starts with reviewing theoretical understanding and frameworks to determine how much the date can account for the connections among the themes (Scharp & Sanders, 2018). The researcher should, however, also look into cases where themes are not addressed by the existing literature, at this point, it could become evident that theory can be improved, modified, adjusted, or even combined with another conceptual notion in order to better explain the actual evidence (Majumdar, 2022). This sums up the overall theoretical contribution of the paper that this research will be a less theoretically significant confirmation study if the empirical data may sometimes be completely explained and accounted for by the current theory (Makadok et al., 2018). Nonetheless, minute exchanges, interactions, or abnormalities in the setting might lead to little theoretical advances, in order to arrive at

theoretical conclusions, it is crucial that the researcher engages cognitively with both theory and evidence in simultaneously (Themelis et al., 2022).

Step 6: Comparison of dataset

By offering a comparative study of several participant cohorts, unpack the findings in further depth and recommend evaluating participant co-concurrence and the frequency of codes across different categories using quantitative comparison methodologies (Thompson, 2022). But qualitative theme analysis does not need quantification, in fact, the fieldwork must be organised such that participants have an equal chance to respond to the same questions and encounter comparable contextual circumstances in order to quantify qualitative data (Guest et al., 2012). This procedure is frequently unfeasible when gathering qualitative data, and There is no need to quantify the data if the study's objective is to create conceptual knowledge via analysis (Guest et al., 2012).

Step 7: Data display

In order to present data more effectively graphically, Although converting qualitative data into quantitative matrices is usually linked to data display, quantification of the data display is not required, just like with Step 6 (Thompson, 2022). Thematic network analysis is a useful tool for demonstrating how codes and empirical texts give direction to theoretical concepts that researcher frequently wonder whether a data has gone too far and whether theoretical contributions accurately reflect the actual data when abductively assessing data, the use of a thematic analysis method can help with these issues (Thompson, 2022).

Step 8: Writing up

After completing Steps 1 through 7, the results are to be documented using headers that identify each topic (Guest et al., 2012). Along with quotes from the raw data to support every topic in the theorization should have a theoretical justification that demonstrates how

the theory relates to the empirical evidence (Braun & Clarke, 2006; Guest et al., 2012). According to Braun and Clarke (2006), researchers have to provide citations whenever there is a possibility that a reader lacking access to the empirical data may be confused about the theme development and abstraction. Selecting quotations that provide strong evidence for a subject is advised (Lochmiller, 2021). Quotations are a useful way to demonstrate reflexivity because they provide participants a voice that is apart from your own thoughts and sentiments (Thompson, 2022).

Researcher also increase trustworthiness since the validity of the raw empirical data is hard to dispute, additionally, researcher want to make an effort to give a thorough account of the players, context, and social situation (Guest et al., 2012). By providing this information, researcher have to make sure that any reader may assess the likelihood that the researcher's suggestions will be successful and beneficial in that setting, as well as if the fieldwork site and participants are reflective of their own situation, context, or condition (Thompson, 2022). Every time a participant's quotation is utilised in the findings, specific information on them, such as their age, gender, and fieldwork site, must be provided (Guest et al., 2012).

Sampling procedures

Sampling method

Using a non-probability sampling approach called the purposive sampling method, the researcher chooses only study participants who, in their opinion, meet the criteria that match the study's goals (Klar & Leeper, 2019). Using this sampling strategy, the researcher selects participants at random from the population, hence, the researcher's judgement and context-specific expertise are crucial to the entire sampling process (Obilor, 2023). Understanding the circumstances in which people or groups make decisions and behave in certain ways is the aim of this research, it also aims to provide an explanation for the exact observed phenomena

(Limna & Kraiwanit, 2022). In-depth knowledge of specific phenomena is necessary, and two-way communication makes it easier to get extra data during the in-depth interview, it increases the efficiency of data collection and follow-up by enabling the researchers to ask questions outside the boundaries of the semi-structured surveys (Limna, et al., 2022).

Participant characteristics and location of study

The preferable ages for recruitment of participants are from age 18 to 24 years old, need to be university students, although there is a wider age range of students who are studying at the university level, and this study is mainly targeted at youth or young people. Undergraduate students of the University Tunku Abdul Rahman (UTAR) will be recruited served as the study's participants. The students were selected by means of a purposive sampling method. Anyone who meets the research's eligibility requirements is welcome to participate, regardless of their race, academic year, or field of study, only have to be aware of the age range.

Ethical clearance approval

After completing Project Paper 1, the researcher will apply for the UTAR Scientific and Ethical Review Committee's approval for university ethical clearance. This will be done through the supervisor of the study, Miss Nur Shakila Binti Ibharim, the head of the Psychology and Counselling Department, Dr. Pung Pit Wan, and Dr. Lee Lai Meng, who is currently the dean of UTAR's Arts and Social Science Faculty. The permission for ethical clearance is crucial since it guarantees the present study's ethicality and the suitability of the interview for usage prior to the start of data collection from possible research participants. Because getting approval and gathering data are both time-consuming procedures, the approval will be applied as quickly as feasible. After the approval of ethical clearance, pilot study will be conducted.

Sample size

Undergraduate students on the UTAR campus will be reached out and look for voluntary participants for research. The interview will be conducted until data saturation is meet. Those students fulfill the inclusion and exclusion criteria by asking a few demographic questions and recruitment will be done until the number of target participants reaches.

Data sources and data collection procedures

Research participants were provided with information about the definition of key words to have more understanding of what this research will be done, also included an overview, research objectives, confidentiality concerns, and above all voluntary participation. Not only did this study meet its goals, but it also served as a student at UTAR's academic project. Thus, before consenting to engage in the study willingly, the research participants had to be thoroughly and correctly informed about the interview and their involvement, which is why this section was crucial. Having said that, there were no repercussions for research participants who choose to leave the study at any moment. The researcher's and supervisor's email addresses and phone numbers were also included in this area so that the study participants would have someone to contact in case they ran into any problems.

Inform consent

Inform consent will be brief to all the participants in the very first place, let all the participants sign and agree in order to ensure privacy and confidentiality, followed by the explanation of key words to have more understanding of what this research will be done. This research mainly aims to understand and identify the factors influencing help-seeking behaviours among university students in Malaysia to seek help from professionals when they encounter psychological distress, while not waiting until suffering from mental illness.

Participants will be selected based on a purposive sampling method from the UTAR campus

that meets the inclusive criteria and will go through in-depth interview sessions to obtain the data pertaining to understanding the factor that influences stigma in help-seeking behaviour (Woodeson et al., 2023).

Inclusive and exclusive criteria

The inclusive criteria for participants must be university students between 18 to 24 years old, who have experience or consulting counsellors in UTAR (students who have looked for professional services). The exclusive criteria in recruiting participants are that students who are aged above 24 and below 18 will not be selected based on the element of this research is to explore more about young people who are studying in a university that suffer from stigma and psychological distress and understand what are the factors that hinder them to seek help (United Nations, 2022). Those who never receive any services or treatment from professionals will be excluded as well.

Instruments

"Triangulation is defined as "a qualitative research strategy to test validity through the convergence of information from different sources" (Lemon & Hayes, 2020). To validate the subject of the study, it is necessary to examine a single point from at least three independent, varied sources, these sources might include a range of methodologies or data (Moon, 2019). In particular, the goal of triangulation is to assist in locating breakdowns in emergent patterns or inconsistencies in the data that may contribute to a better comprehension of the phenomena; inconsistencies are a strength rather than a weakness and the ultimate objective is to lessen systematic bias through triangulation, which might enhance the assessment of the results (Craig et al., 2021). In particular, triangulation offers a chance to strengthen a study's reliability and trustworthiness, which is one of the advantages of qualitative research since the data collected will be separated into a few sections by the

researcher, by combining data triangulation with a "slow" interviewing approach might be a useful strategy (Jentoft & Olsen, 2017).

Although there is a wide range of qualitative research techniques, focus groups, semi-structured interviews, and observations are the most often used techniques for gathering data (Moser & Korstjens, 2017). Semi-structured interviews are the suggested method for data collection when the researcher's goal is to better understand the participant's unique perspective as opposed to gaining a more generalised understanding of a phenomenon (McGrath et al., 2019). One of the primary benefits of semi-structured interviews is their capacity to remain focused while enabling the researcher or investigator to explore pertinent ideas that may occur during the interview, this act as other methods of data gathering have their place in qualitative research (Snyder et al., 2021).

Semi-structured interview questions

The most common exploratory interview format in the social sciences in gathering data for qualitative research projects or therapeutic reasons is the semi-structured interview and are a crucial research technique for getting precise information also known as valid information directly from key informants who are the most experienced with these kinds of initiatives (Ahlin, 2019). A semi-structured interview provides a basic framework by means of a prearranged guide or method that focuses on a major topic, it also allows for the exploration of topical avenues as discussion proceeds (Galletta & Cross, 2020). Conversely, semi-structured interviews work well for eliciting information on societal issues that are not immediately apparent and hidden (Belina, 2023).

31 semi-structured interview questions are designed based on the Social Cognitive
Theory (SCT) framework. Data will be extracted after the interview sessions, and thematic
analysis will be conducted to analyse data. Prior to analysis, the available qualitative data will

be transcribed, condensed into tables, and examined thoroughly, determining shared core ideas and key concepts by interpreting the evidence from the interview sessions (Ng et al., 2021). The analysis of the data will be based on three main dimensions; self-stigma, public stigma and help-seeking behaviours which are personal cognitive factors, environmental factors and behavioural factors (Lahcen et al., 2020). These semi-structured interview questions will then be distributed until data saturation is meet.

Observation

Maintaining the targeted sample under constant observation by the researcher is necessary to meet the confirmability criteria and achieve data saturation, regardless of how visible they are to the study participants, persistent observation is needed (Denny & Weckesser, 2022). In other words, research findings should be firmly based on enduring occurrences seen during the investigation, rather than a coincidental incident (Agazu et al., 2022). Scholars acknowledge that the inherent bias of researchers in terms of what to record, how to transcribe data for analysis, and what to monitor are the main causes of observational techniques' shortcomings (Stubsjøen et al., 2020). In order to achieve rigour and quality, the conceptual framework of research is essential because it provides guidance for developing preconceived ideas or methods for what to record, how to record it, and how to lessen the influence of any bias (Johnson et al., 2020). The accuracy and usage of researcher notes in data analysis or auditing processes to improve rigour in the study's interpretation phase will rise with their fullness and detail. In order to optimise accuracy, researcher notes must be written as soon as quickly possible after the observation event (He et al., 2019).

Reflexivity

Reflexivity plays a crucial role in the data-collection process of qualitative research, serving as a strategy for researchers to acknowledge and manage their subjectivity throughout

the investigation. As Peddle (2021) suggests, reflexivity acts as a tactic to ensure the standard and quality of the research procedure. This involves researchers continuously reflecting on their own perspectives, biases, and assumptions that may influence the data collection and interpretation process.

In qualitative research, the goal is to capture the messy nature of participants' experiences and social practices authentically. Therefore, researchers must recognize that their subjective viewpoint inevitably shapes their approach to data collection and analysis (Pousti et al., 2020). By acknowledging and addressing their biases, researchers can make ethically informed judgments about how to navigate the complexities of the research context.

Dodgson (2019) emphasizes that researchers' subjectivity, often referred to as "bias," is an integral part of qualitative research methods. Rather than attempting to eliminate bias entirely, researchers should strive to understand and manage it through reflexivity. This involves critically examining their own perspectives and how they may influence their interactions with participants and the interpretation of data.

Neglecting reflexivity can have significant implications for the quality and validity of qualitative research findings (Olmos-Vega et al., 2022). Without actively engaging in reflexivity, researchers risk overlooking important nuances in participants' experiences or misinterpreting data due to their own biases. Therefore, integrating reflexivity into the data-collection process is essential for maintaining the integrity and rigor of qualitative research.

Chapter 4: Results

Introduction

This chapter presents a comprehensive breakdown of the evidence gathered during the data-collection process, allowing researcher to discover the intricate relationships between participants' experiences. By examining a series of a subtle difference in meaning or opinion or attitude from different participants, this chapter intend to offer a multifaceted explanation of the contributing factors influencing help-seeking behaviours among university students in Malaysia, as outlined in the research objectives.

The initial section of this chapter focuses on reviewing the research questions formulated to guide and inform the study. It underscores the significance of comprehensively recognizing the diverse viewpoints, occurrences, and insights expressed by participants regarding the interview process and the main research topics. The interviews were conducted in person, taking place at UTAR Community Counselling Centre (UCCC), thereby fostering an environment conducive to truthful discussion and authentic sharing. Each interview session typically lasted between 40 minutes to one hour and was recorded with the explicit permission of the participants.

The overarching objective of this study was to delve into the multifaceted landscape of help-seeking behaviours among university students in Malaysia. Specifically, the research aimed to achieve the objectives:

- 1. To identify the factors that are influencing help-seeking behaviours among university students in Malaysia. This involved examining the diverse array of internal and external factors that shape students' decisions regarding seeking help for academic or other issues.
- 2. To explore the perceptions of public stigma that affect students' willingness to seek help for academic or other issues. By delving into societal attitudes and stereotypes, the study

sought to illuminate the nuanced ways in which public stigma influences help-seeking behaviours among university students.

- 3. To explore the role of self-stigma in shaping students' decisions in help-seeking. This objective involved unpacking the internalized barriers and negative perceptions that individuals may experience, which hinder their willingness to seek help for academic or other issues.
- 4. To identify the strategies or steps done to improve help-seeking behaviour among students. By examining existing initiatives and existed interventions that provide from different parties, the study aimed to uncover effective approaches to fostering a supportive help-seeking environment within university settings.

Through a thorough analysis of the evidence gathered, this chapter endeavours to provide insightful observations about the intricate dynamics underlying help-seeking behaviours among university students in Malaysia, shedding light on potential avenues for intervention and support. This research is bringing attention to possible methods or approaches that could be implemented to address the issues identified in the study. In this context, it is highlighting strategies or initiatives that could effectively improve help-seeking behaviours among university students in Malaysia when they face psychological distress. These interventions could include counselling services, mental health awareness campaigns, peer support programs, training for educators and staff, or other forms of support aimed at creating a more conducive environment for students to seek help when needed.

Demographic information

Participant	A	В	С	D	Е	F
Age	22	22	23	22	21	20
Gender	Female	Female	Female	Male	Female	Female
Race	Chinese	Chinese	Chinese	Chinese	Chinese	Chinese
Educational	Bachelor	Bachelor	Bachelor	Bachelor	Bachelor	Bachelor
level	degree	degree	degree	degree	degree	degree
Course	GC	GC	GC	GC	GC	GC
Employment	Student	Student	Student	Student	Student	Student
status						

Table 4.1 *Demographic Information of Respondents (n=6)*

Discussion of results

Theme 1: Factors Shaping Help-seeking Behaviors

This overarching theme encompasses various aspects related to help-seeking behaviors among university students, including personal skills and strategies, external influences, barriers and facilitators, skill development, personal experiences, impact, and beliefs. It highlights the complex interplay of individual, social, and environmental factors that contribute to whether students seek support for their mental health concerns.

Under this theme, sub-themes can further delve into specific factors such as personal skills and strategies, external influences, challenges and barriers, confidence levels, and the influence of beliefs on help-seeking behavior. Each sub-theme can explore how these factors interact and impact the likelihood of students seeking help for mental health issues, providing

a comprehensive understanding of the dynamics involved in help-seeking behaviors among university students in Malaysia.

Subtheme 1.1: Personal Skills and Strategies for Help-seeking

Participants have shared that self-awareness and confidence is important and act as an important personal skills and strategies for seeking help when they face psychological distress. Other than that, belief in themselves could be able increase their ability to get through the difficulties and issues they face.

"I think one of the specific skill or strategy is self awareness and also umm I I'm not sure is it belief and self confidence is under specific skill or strategy but I think this is also quite important to like continue the process of seeking help."

(Extract from participant A)

"I think first they could be self awareness. Umm, because a person that need to be self aware of their issue so they could know whether they need help from others."

(Extract from participant B)

"I feel like the awareness and knowledge is quite important. Because without the awareness, as well as the knowledge towards the mental health, you won't voluntarily to seek the help."

"...if the person thinking that the to seek help for professional, it really could help them to deal with that issue."

(Extract from participant D)

"I believe self-awareness is crucial, along with having confidence in oneself and the professionals providing help. These factors motivate me to seek assistance when needed."

"I guess individuals belief and their perception is quite important... So I guess individuals should have a very positive attitudes and belief so that they can be more open enough to receive the help and support from the practitioner."

(Extract from participant F)

These skills equipped by them increase the motivation of seeking help because they trust that the professional could aid in overcome the issue they are facing. Self-awareness allows them to notice the mental health issue and at the same time to request assistance from others, especially from the experts. While self-awareness assists in identifying their psychological distress, confidence encourage them to seek for support without much hesitation even when they thought that they can solve it by themselves.

Participants have also shared that gather enough information and right communication towards their loves one act as an important strategies and skills because with accurate information gathered, it will navigate the process of seeking help for mental help issue.

"I feel like if I were the person with mental health issue, I would ask information from others first. Then only I would go to the mental health or a counsellor or clinical psychologist."

(Extract from participant C)

"I have watched some psychological related books at that time. And then I it feels like I want to help myself from not be from from, avoiding this abuse anymore. And then there's one one of my friends, she also encouraged me encouraged me to seek for help from counselling. So I asked my mother to take me to the counselling."

(Extract from participant E)

Enquiring relevant information and having effective communication are important.

Before reaching out to professionals, it would be best to search for mental health information through the related reading materials or peers to be more understanding on personal mental status and type of measurement needed to be taken. On the other hand, effective communication is where one needs to be understood that engaging in counselling session is not to be terrified of or being labelled as abnormal instead it assists them to overcome overwhelmed stress or other psychological distress faced.

Participants shared that cultural and social perceptions act as an important triggering factor that will influence them to seek for help from professionals. This is because social perceptions are different, non-acceptance, being judgemental and others may influence their likelihood of asking for help.

"I think could be the other people's perception because mostly in the country or more of a Asian culture, people who view mental health as a very bad things, they they don't perceive, like, mental health thing as mental health illness. So if there were anything that could stop me from going would be my parents or their perception, like, telling me, like, oh, you must be crazy. That's why you need to go to the counselling session like that."

: "...some cultures, they don't really rely on professionals... they would rather trust that god could solve their issue..."

(Extract from participant C)

"The most important is, the way of openness to the counselling setting. Because, there are still there are still a lot of students, they, having some stereotype through the counselling or through the how to say The psychiatrist. Because they may think that, they may influenced by their families, members, or any other source of information. They feels like, be seeking help

from counselling or seeking help from psychiatric is one of the, is one of the abnormal behaviour. Like, for my mother, my mother in the past also not thinks that, I need to go to counselling. And because she think that if I go to counselling, I go to seek for psychiatric or I take the medicines, I will be judged by others, being being, being abnormal, I can say."

"...because my mother and I view that causing setting. Psychology setting is not that profession. So it also delay my... seek help from the counselling setting."

(Extract from participant E)

Major Asians' perspective on mental health stigma hindered on help-seeking behavioural as they do not recognize it as a type of illness and find it shameful to have labelled it as mental illness. Cultural and familial beliefs that can hinder help-seeking behaviours for issues related to mental health. There in some cultures, there is a preference to rely on religious or spiritual beliefs rather than seeking professional help. Meanwhile, familial views on counselling led to a delay in seeking help from mental health professionals. These perspectives emphasize the influence of cultural and familial beliefs on individuals' decisions to look for mental health assistance.

Participants also shared that education on mental health knowledge plays a vital role to increase the awareness of mental health issues nowadays, that is commonly occurring in current society.

"For me, personally, I feel like education from the authority is quite important, especially from the school authorities since our since we are young."

(Extract from participant D)

"To develop the openness skills, I think the most important for me is reading because, I open my world view or I open my perspective..."

(Extract from participant E)

Knowledge on mental health is required since young, hence it is important to include in day-to-day education system, so that the youngsters will be able to view mental health illness as commonly as any kind of today's known illness which can greatly avoid current situations whereby people do not recognize it as an issue but a disgraceful thing.

Subtheme 1.2: Encouraging help-seeking culture in university

Normalize help-seeking behaviours is important as mentioned by participants, because they understand that not all people will seek help when they really cannot take it, they don't want others to view them as abnormal or crazy, they may choose to end their life to get through everything. Other than that, there are still people who view psychological distress as normal, there are people can get through it, but still there are people that cannot get through it, may because of their self-regulation skills is lack and limited. They may try hard to get through it, but it seems hard for them. Through this subtheme, it highlights practical steps universities can take to foster a culture where seeking help for mental health concerns is normalized and accessible to students.

"I think, but I think university can try to emphasize on like seeking help. No, not means you are weak because I think. I think if the school or the university can emphasize of on this one, maybe can, yeah, can encourage the culture."

(Extract from participant A)

I think university and student representative should always promote counselling service. ... I think the most important is, make make the centers of seeking for help become a normal."

(Extract from participant E)

They emphasize the importance of normalizing help-seeking behaviours within university settings. They suggest that universities should actively promote counselling services and create an environment where seeking help is viewed as a normal and acceptable practice. This normalization can help reduce the stigma associated with seeking help and encourage more students to access the support they need.

On the other hand, participants also shared about providing awareness and education to students to increase their awareness on mental health issues and promote that seeking for help when you face psychological distress is normal, not to be ashamed of. It is important to seek help before making any decisions that will make you regret for the rest of your life.

"I think is to conduct some some program um, for example, the um the talk regarding to.

Umm. Regarding about the mental health awareness and also some workshop to include the interesting activities to help them do to know more about actually having mental health concern are really normal. ...also some events that are quite interesting and funny. That could help them to, to, to know more about the importance to be aware of their mental health concerns."

Extract from participant B

"Education is quite important, so that through education, so I are learning what is mental health, why mental health is important, what is the influence of mental health towards our

life. So from this the students may be aware of what is mental health, why keep mentioning mental health is important."

Extract from participant D

They focus the significance of educational programs and workshops in promoting mental health awareness among university students. They suggest organizing talks, workshops, and events that make learning about mental health engaging and enjoyable. Additionally, they emphasize the importance of formal education in helping students understand the significance of mental health and its impact on their lives, thereby encouraging proactive engagement with mental health support services.

Participants also shared that creating accessible resources is also extremely important, this is to let students know that where can they seek help, what are the available resources nearby, when student are in need, where can they go to, who is available there for them.

"University representative to guide us to know about to get us to know more about that. What facility or what kind of what facility in our university would have, for example, like the, DSA counselling, for example, the any other resources that are nearby our school that can help us to seek for help. ...make all the facilities becomes visible so that we can able to use it when we need."

Extract from participant E

"...the school authority can also pushing the mental health idea through some activity like organizing trainings, workshop, exhibition regarding mental health.... I guess these exhibitions help a lot because it create awareness and then for the students to participate in the event so that they're aware of why mental health is important. And they also invited a lot

of expert from outside to, enhance and give a lot of exposure to the students. I guess this is a very good opportunity for us to enhance the awareness among students. "

Extract from participant D

The importance of making mental health resources and facilities easily accessible and visible to university students. They suggest that university representatives should actively guide students in accessing available mental health support services, such as counselling centres and other resources within the campus. Additionally, they highlight the effectiveness of organizing various activities, including trainings, workshops, and exhibitions focused on mental health awareness. These events not only raise awareness but also provide opportunities for students to engage with experts and gain valuable insights into the importance of mental health.

Theme 2: Societal perceptions and help-seeking behaviour

This theme delves into the intricate interplay between societal attitudes, public perception, and university students' inclination to seek help for academic or other issues. It encompasses two sub-themes that shed light on the various factors influencing help-seeking behaviours among students. Firstly, the discussion on public stigma and help-seeking behaviour examines how societal norms and attitudes towards mental health impact students' perceptions and actions regarding seeking help. It underscores the significant role played by stigma in erecting barriers to seeking assistance, particularly concerning academic or mental health concerns.

Secondly, the exploration of accessibility of mental health resources delves into how the availability and accessibility of mental health services within university settings intersect with public stigma to shape students' help-seeking behaviours. It scrutinizes how the presence

or absence of resources influences students' beliefs about the feasibility and effectiveness of seeking help. This comprehensive analysis illuminates the complex relationship between societal perceptions, resource accessibility, and students' willingness to seek help, aligning closely with the research question and objective aimed at understanding the effect of public stigma on help-seeking behaviours among university students. This theme underscores the need for initiatives to challenge stigma, promote open dialogue, and enhance support systems to encourage help-seeking behaviour among university students in Malaysia.

Subtheme 2.1: Impact of societal attitudes on help-seeking behaviours

The "Impact of Societal Attitudes on Help-seeking Behaviour" focuses on how broader cultural norms and beliefs affect individuals' willingness to seek help. It examines how stigma, labelling, and societal perceptions surrounding mental health shape individuals' behaviours and attitudes towards seeking assistance.

One aspect of this phenomenon involves stigmatization, societal judgement and labelling, wherein societal attitudes cast seeking help as a sign of weakness or inadequacy. This perception can lead to students fearing judgment or negative labels if they were to seek assistance, particularly for issues related to mental health or academic struggles.

Consequently, students may internalize these stigmatizing beliefs, deterring them from seeking the support they need to address their challenges effectively.

"I think the social norm is like a exist around the mental health is like if the person having mental health issue is a kind of shame. And also in will become a label for the person forever or for a long time, not only the person and also yeah family members also will be label yeah. When, when, when they are having mental health issue."

"The judgment towards others who seek help is that they have a very, very serious mental health issue."

"The opinion or judgment of others doesn't impact me much... I will just seek help from a professional."

(Extract from participant A)

"So I think for the Community they are not really having a clear concept about the mental health disorder and also and also the mental health. So they will think that if they do seek some mental health support from others, meaning that they are having mental health disorder. But but it is not like even though you having a small issue having a maybe just a academic stress or some relationship issue, you could also seek help from the professional. Umm, it is quite normal, but they will think that seek help from professional is a very big things."

"If they're having a lot of peers that thinking that thinking the, uh, uh, like some some people may make a joke about mental health issues. If the person having this kind of friends, so they

may make a joke about mental health issues. If the person having this kind of friends, so they might be less likely to seek help, because they are not really getting support from others when they want to decide to seek help."

"I think it will make me... more hesitated when I want to seek help."

(Extract from participant B)

"I feel like they will be very afraid to to even seek help because of the stigma and in being shamed by others and being told as, problematic problematic behavior. Being viewed as weak, it's not easy for an individual."

"Some may view it as attention seeking... blame individuals for their mental health struggles."

"My decision-making for seeking mental health is weak... if I don't have the knowledge of mental health."

(Extract from participant C)

"The perceptions and judgment of your surroundings are quite influential towards an individual's decision-making process."

(Extract from participant D)

How mental health issues are often stigmatized, leading to shame and labelling not only for the individual but also for their family members, noting that community members may lack a clear understanding of mental health, leading them to perceive seeking professional help as indicative of severe mental health disorders rather than a normal response to everyday stressors. Besides, echoes these sentiments, emphasizing the fear of being shamed or viewed as weak by others, which discourages individuals from seeking the assistance they need.

The exploration of perceptions of public stigma also reveals how it contributes to the suppression and hiding of distress among students. Fearing the repercussions of seeking help, students may choose to conceal their struggles rather than openly acknowledge or address them. This suppression can exacerbate existing issues, leading to prolonged distress, and diminished academic performance. Moreover, the societal pressure to maintain a facade of strength or competence may further deter students from reaching out for assistance, perpetuating a cycle of silent suffering and unmet needs.

"I think this attitude, this societal attitude, caused the universities students tend to suppress their feeling and will not like truly express their issue or psychological distress that they face."

(Extract from participant A)

"I think if if the university students are in the always receiving the negative societal attitudes in mental health, ... or they are having a lot of stigma about mental health, then the person, even though they think they are not OK having a psychological distress. They will tend to hide their psychological distress because they were afraid."

(Extract from participant B)

These extracts shed light on how negative societal attitudes towards mental health contribute to students' tendency to suppress their feelings and hide psychological distress. There are suggestions that such societal attitudes cause students to refrain from expressing their issues or distress openly should be address and stop. It further emphasizes that if students perceive mental health stigma in their surroundings, they may feel compelled to conceal their psychological distress out of fear and apprehension. Together, these perspectives underscore the detrimental impact of societal attitudes on students' willingness to acknowledge and address their mental health concerns openly, highlighting the need for greater support and destigmatization efforts within university communities.

Public stigma significantly influences students' perceptions and responses to seeking help. Negative societal attitudes towards mental health or academic challenges may shape students' beliefs about the effectiveness or appropriateness of seeking assistance. For instance, if seeking help is perceived as a sign of weakness or failure, students may be less inclined to seek support, even when facing significant difficulties. These perceptions can impact how students internalize their struggles and determine their willingness to seek help from available resources or support services within the university community.

"So if the societal attitudes are towards mental health are are, like, good and then not to say good, probably kind and in nonjudgmental, could actually influence the level of awareness

and education available to students. So if mental health is openly discussed and and everyone understood what mental health is, The students are more likely to, like, have an interest in psychological well-being, and then they would literally go their way out to even seek resources to enhance their mental health."

(Extract from participant C)

"The societal influence is quite impactful because people nowadays are very attracted with social media... it always give a very big impact to our life, especially university students, ... it will definitely influence the university psychological distress."

(Extract from participant D)

The significant influence of societal attitudes, particularly regarding mental health, on university students that positive societal attitudes, characterized by kindness and non-judgmentalism towards mental health, can foster awareness and education among students.

The pervasive influence of social media on students' lives, suggesting that societal factors, including media portrayal, can impact students' psychological distress.

Perceptions of public stigma create substantial barriers to seeking help for academic or other issues among students. The fear of judgment, discrimination, or social repercussions may prevent students from accessing the support they need, leading to delays in seeking assistance or avoidance of help-seeking altogether. These barriers can manifest in various forms, such as reluctance to disclose personal challenges, scepticism about the effectiveness of available resources, or concerns about confidentiality and privacy. Ultimately, public stigma acts as a significant impediment to students' readiness to seek help, underscoring the necessity for targeted interventions to address these barriers and promote a more supportive and inclusive environment for help-seeking within university settings.

"I think it's also the openness. Like, the social attitude, If they hold a very conservative attitude... they may be unable to really open their heart to the counsellor. ... the bad social attitude or negative social attitude to this setting also influenced the University students to seek for help."

(Extract from participant E)

"Societal attitudes toward mental health tend to make university students suppress their feelings and avoid expressing their psychological distress openly."

(Extract from participant F)

The impact of societal attitudes, particularly conservative or negative ones, on university students' willingness to seek help for mental health issues. Conservative attitudes may hinder students from reaching out to counsellors, suggesting a reluctancy to seek help due to societal norms. Similarly, societal attitudes can lead students to suppress their feelings and avoid expressing psychological distress openly. The importance of fostering a more open and supportive environment for mental health within university communities is encourage.

Subtheme 2.2: Accessibility of mental health resources in university communities

This sub-theme highlights the critical role of university counselling services in providing support to students, as well as the challenges associated with accessing professional help outside the university setting. It also underscores the importance of community support systems, such as peer support and workshops, in complementing formal mental health services. The sub-themes collectively emphasize the need for universities to enhance the accessibility and affordability of mental health resources to better support students' mental well-being.

Participants shared that the counselling services in university communities is clearly known and are easily accessible by everyone in campus. This is because there is some poster and email that are promoting these services, and it is totally free of charge for everyone in the university. It is very convenient but have to queue up quite long for the appointment.

"I think it's the counselling service in the university that are easily accessible for university students dealing with mental health challenges."

(Extract from participant A)

"I think it's the counselling services provided by the school and also there are a lot of uh helpline and and I think now nowadays on the social media there are also a lot of people promoting their counselling services so is the so I think mostly is the counselling services from school or from social media.."

(Extract from participant B)

"I could say that I could say that probably university counselling centres that could offer, like, confidential counselling sessions for student. For example, like, psychologists or counsellors that they could help out with various mental health issues. The second one would be, mental health workshops or even programs."

(Extract from participant C)

These statements underscore the importance of accessible mental health services provided by universities in supporting students facing mental health challenges. Can see that the significance of counselling services offered by schools, emphasizing their accessibility for students in need. Additionally, the value of university counselling centres in providing confidential counselling sessions and mental health workshops or programs. Collectively,

these perspectives emphasize the crucial role of university-based mental health services in facilitating students' access to support and resources for addressing mental health issues.

Besides, participants also share some challenges they face when they look for professional services. This may because they seriously want to get through their issue and have thoughtful consideration before they seek for help. They do much survey and gain more reliable information before they make appointment to meet with the professional.

"Actually they a lot of student could access to these resources, but just concerns on the effectiveness because the students are still practicing. So maybe some of maybe some of the student could not really get the help they want and if to seek some really professional having license then I think. For what I think it is quite a limited. The resources is quite limited, like a lot of professionals, they are having a very pack schedule, so need to include new client it is quite difficult for them."

(Extract from participant B)

"Actually, there are quite a challenge in assessing mental health services because it is very limited and sometimes are quite long distances to even travel. ... so we have very limited options to even go for professional help seeking."

(Extract from participant C)

"For me personally, I feel like I am quite sad well looking in the larger perspective whereby the community outside, they have to pay a very high amount in order to get the counselling services, especially the public. ... that the fee is too expensive in certain sense. And actually it is quite because you have to consistently, participate in the counselling session, so you have to pay every time whenever you enter the session. So it's a very quiet burden."

(Extract from participant D)

The challenges students face in accessing effective mental health services by participants is that they concern about the effectiveness of available resources due to students' limited access to professional help, citing packed schedules and difficulty in including new clients. Accessing mental health services can be challenging due to limited options and long distances to travel. Furthermore, the financial burden associated with counselling services, particularly for the public, due to high fees and the need for consistent participation. Overall, these perspectives underscore the barriers students encounter in accessing affordable, effective mental health support.

Community support systems play a pivotal role in facilitating individuals' access to help by providing resources, guidance, and encouragement. These systems serve as a vital support network that can offer valuable assistance in navigating the complexities of seeking help, whether for mental health issues, academic challenges, or other concerns. Through community support, individuals can access information about available services, receive emotional support and understanding, and feel empowered to take proactive steps toward seeking help. By fostering an environment of openness and understanding, community support systems contribute to breaking down barriers to help-seeking behaviours and promote overall well-being within the community.

"The university student had more resources, have more chances to get mental health support from the, I shouldn't say expert because the practicum students are still students in practising in counselling, but at least they get some sort of support from someone who are quite experts and experience in mental health field and in counselling. So I could say that not only they're

able to get the services from the Student Department Affairs, DSA, but they also can choose to go for the practicum students, which is free as well."

(Extract from participant D)

"The social support from peers is the most the most the most the most method that can help that can assist the person who are suffering from any any issues or any problems in their daily life. And the second is the lectures."

(Extract from participant E)

"Counselling services provided by the university are easily accessible for university students dealing with mental health challenges."

(Extract from participant F)

University students have various avenues for accessing mental health support, ranging from services offered by the Student Department Affairs (DSA) to support provided by practicum students gaining experience in counselling. Though practicum students may not be experienced professionals, they still offer valuable assistance. Additionally, social support from peers and guidance from lecturers are highlighted as crucial sources of assistance for students facing challenges. Overall, these resources contribute to a comprehensive support system within the university community, ensuring that students have access to the help they need for their mental well-being.

Subtheme 2.3: Influence of Public Perception on Help-seeking Behaviour

The "Influence of Public Perception on Help-seeking Behavior" examines how societal attitudes, family expectations, and peer influence shape individuals' decisions to seek mental health support. It considers how supportive attitudes from family and peers can

encourage seeking help, while societal stigmas propagated through media and social platforms may discourage individuals from accessing mental health services. Understanding these dynamics helps elucidate how public perceptions impact individuals' willingness to engage with mental health support systems.

Supportive attitudes from family and peers play a vital part in forming people's willingness to seek assistance with mental health problems. When individuals feel supported by their family members and friends, they are more likely to feel comfortable discussing their challenges and seeking assistance.

"I think if the public perception is positive towards the mental health issue, the university students will tend to actively seek help will like willing to openly discuss and discuss about the mental health issue and then they can give support to each other like share their experience and then share the way they are."

(Extract from participant A)

"If the friends have a very supportive and understanding attitude towards the mental health, then it may encourage, like, people to seek help without judgment or even rejection because you know that your friends are supporting you by your side to go for the mental health seeking field."

(Extract from participant C)

"My community is very open to it... it actually helps students to seek professional helps the university students to be voluntary and open enough to stick for the mental health services."

(Extract from participant D)

Positive public perceptions towards mental health issues contribute to a supportive environment where university students feel encouraged to seek help. When the general

attitude is understanding and accepting, individuals are more likely to openly discuss their mental health challenges and seek assistance without fear of judgment or rejection. This supportive atmosphere fosters a sense of community where students can share their experiences and support each other in accessing mental health services voluntarily.

Conversely, family expectations can sometimes create pressure or stigma around mental health, making individuals hesitant to acknowledge their struggles or seek professional help.

"For the family expectation, I could say that I could say that it really influence students decision into seek help. Because if the families is very open minded, very supportive, and and values, like, their own self, like, mental well-being, then then the student or even the child would willingly go to seek help."

(Extract from participant C)

"I actually realized that some other families, some other communities, they are quite, having, I should say, prejudice and negative stigma towards mental health services and so on.

Because sometimes they persist mental health, People who have mental disorder or mental health concerns, they are they are incapable of during of their life or even they are possessed by the evil spirits and so on, I guess. So I think the public perception still need to be improved in certain sense."

(Extract from participant D)

Family expectations play a significant role in influencing students' decisions to seek assistance with mental health problems. When families are open-minded, supportive, and prioritize mental well-being, students are more likely to feel comfortable seeking assistance.

Conversely, negative stigma and prejudice within families and communities can create barriers to help-seeking behaviour by perpetuating misconceptions about mental health and fostering reluctance to access support services. There is a need for ongoing efforts to improve public perceptions and reduce stigma surrounding mental health to facilitate greater acceptance and support within families and communities.

Peer influence, on the other hand, can either encourage or discourage help-seeking behaviours depending on the prevailing attitudes within a social group. Positive peer support can normalize seeking help and reduce stigma, while negative peer attitudes may deter individuals from reaching out for support.

"If your friends are also a seeking help of a about the mental health issue, like if you heard that your friends are also seeking help, then then you'll be more able more likely to also take help about mental health."

(Extract from participant B)

"We used to be with our peers, be with our society and be with them a lot of time. So if you unable to get any other opinions or resource in from the outside world, for example, like Internet or maybe some of them their Internet will still remain the same like that because due to due to the preference of the looking of the video Internet. So they may unable to get another opinion, get another info outside others from their peers, their societies. And so it shaped, their social attitude. It shapes their, their perspective. So it will also limit themselves not to seek help from counsellor."

(Extract from participant E)

"The opinions or judgments of others don't impact my decision-making process much. I prioritize my health, both physical and mental, and seek help from professionals as needed."

(Extract from participant F)

Peer influence plays a significant part in influencing people's perceptions about getting mental health treatment. When friends are open about their own experiences and seek help, it can encourage others to do the same, fostering a supportive environment for seeking assistance. However, the influence of peers can also contribute to reluctance to seek help if social attitudes within the peer group discourage or stigmatize help-seeking behaviour.

Despite external influences, some individuals prioritize their health and are less affected by the opinions or judgments of others, seeking professional help as needed.

Theme 3: Influence of self-stigma on help-seeking behaviour

This theme delves into the internalized stigma known as self-stigma, which profoundly affects university students' attitudes towards seeking help for mental health issues. Self-stigma arises from a combination of factors, including the individual's knowledge about mental health, existing misconceptions, and personal beliefs. When students possess accurate knowledge about mental health, coupled with positive attitudes and beliefs, they have a higher probability of seek assistance when facing mental health challenges. However, misconceptions and negative beliefs can lead to self-stigma, causing students to view seeking help as a sign of weakness or failure. This internalized stigma can create significant barriers to seeking assistance, as individuals may fear judgment or discrimination from others, leading them to avoid seeking support altogether.

Understanding the role of self-stigma is crucial in addressing barriers to mental health support among university students. By challenging misconceptions, promoting accurate

knowledge, and fostering positive attitudes towards mental health, universities can help alleviate self-stigma and encourage students to seek help when needed. Additionally, initiatives aimed at reducing self-stigma, such as educational programs and awareness campaigns, can empower students to overcome internalized barriers and access the support they require for their mental well-being.

Subtheme 3.1: Influence of knowledge and misconceptions on help-seeking behaviour

The sub-themes and associated quotes offer valuable insights into the pervasive impact of self-stigma on students' attitudes towards seeking help for mental health concerns. Self-stigma operates as a terrifying barrier, shaping students' perceptions and decisions regarding mental health support.

Definition and perception	Influence on help-seeking perception	
"mental health, I think it's like mental well-	"This knowledge didn't affect me much on	
being, like, include the emotional,	the seeking help part, yeah."	
psychological and social and then for self	(Extract from participant A)	
stigma, I think it's individual have like a		
negative feeling or stereotype about self"		
(Extract from participant A)		
"for self stigma. I think is if you're	"Even though I think it's normal to seek	
having mental health issue then because I	help, but sometimes it will also, I will also	
think it too much because we are weak."	hesitate to seek help."	
(Extract from participant B)	(Extract from participant B)	

"self stigma could actually refer to our	"self stigma would always exist, and it
own acceptance towards stereotypes or even	could contribute, like, fear But that would
the negative beliefs about mental health	not stop me from seeking help."
we might think that we are not worthy to	(Extract from participant C)
even seek for mental health sometimes."	
(Extract from participant C)	
"self stigma it could be a barrier or	"I am having a very open and positive
challenge for university students in order to	attitudes towards mental health. That's why
get support from the mental health	it helped me and it reinforced my help
practitioners."	seeking behaviour in certain sense."
(Extract from participant D)	(Extract from participant D)
"self limitations we may think that we	"self limit may also affect the
are not that good, not that able to do things,	effectiveness and willingness to seek help."
or not that courage to seek for help."	(Extract from participant E)
(Extract from participant E)	
"Self-stigma involves individuals having	"This understanding doesn't significantly
negative feelings or stereotypes about	impact my perception of seeking help."
themselves, leading to a negative attitude."	(Extract from participant F)
(Extract from participant F)	

 Table 4.2 Knowledge shared vs the influences on participants help-seeking perceptions.

The quotes illustrate how self-stigma manifests through barriers and misconceptions, ultimately hindering help-seeking behaviours among students. By internalizing negative beliefs and societal attitudes, individuals may perceive seeking help as a sign of weakness or failure, leading to reluctance in accessing support services. These insights illuminate the complex connection between self-stigma and help-seeking behaviours, emphasizing the

importance of addressing misconceptions and fostering supportive environments to encourage students to seek the assistance they need for their mental well-being.

Misconceptions and lack of information contribute significantly to self-stigma and hinder students' willingness to look for mental health assistance regarding their issues. Misconceptions about mental health perpetuate negative stereotypes and beliefs, leading individuals to view seeking help as taboo or indicative of weakness. Moreover, limited knowledge about available resources and support services may prevent students from accessing assistance, as they may be unaware of where to turn for help or may hold inaccurate beliefs about the effectiveness of mental health interventions. These misconceptions and gaps in information create barriers to help-seeking behaviours, reinforcing self-stigma and exacerbating the reluctance to seek support for mental health concerns. Addressing these misconceptions and providing accurate information about mental health services are crucial steps in promoting A warm environment where students feel confident asking for assistance without worrying about stigma or condemnation.

"For university students having stress having a bit, a mental health problem is normal. So they will like contribute... to the self-stigma."

(Extract from participant A)

"..., they think if they have it enough money, then mental health, their mental health will be will be, will be, will be no issue so, because they will think money can settle a lot of difficulties and could make a make a life make a life, make their life be be easy, be relax. So by having money, they will be a having no mental health issue. So. Umm. Umm. But I think it is not really. Because umm money may settle of things, but not everything can be settled by money. Ohh and also. Umm. And also they may think that a person is a uh uh. If they having

mental health issues because they are weak, so they might having the so. So when they think so, when they face some difficulties, they may have a self stigma that if a if I'm strong enough, then I will not be be affect by the difficulties."

(Extract from participant B)

"I could say that based on my experience, I heard from a lot of students that going to, go seeking help from from professionals, actually, is a sign of weakness. They they viewed it as someone who are weak. That's why they need to see counseling session and need help, and they feel like they are kind of useless because they can't They feel that they felt that, they can't control their own thoughts while while they are supposed to do that. And then, oh, also, like, the crazy part or unstable part. So they would view it as or I, I should say that after a person get a diagnosis from a counseling session, then they may think that it's crazy or unstable because they are being labeled as that, they have a misconception about diagnosis actually. Like those people who had diagnosis are crazy or unstable. And then at the same time, they also think that going to, seeking a mental health professionals are actually unnecessary because they think that they could handle themselves."

(Extract from participant C)

"... they might feel with they might view help seeking behavior, or they might associate the help seeking behavior with certain sense of weakness because they view it as, if I if I seek help from the counsellor, I am weak, I am sick, I am not able to cope with my life, Then they might feel ashamed of it. That's why the societal stigma or their self stigma will impact their help seeking behaviour. And also another one will be they are having negative details towards the counselling profession as well."

(Extract from participant D)

"One of the misconceptions is, counsellors can read your heart... and leading them have a very high high expectation to the counsellor and they may rely a lot to counsellor and not rely on themselves. So it caused them have a self stigma that, oh, I don't need to do anything. So I just tell it to counsellor and the counsellor will help me solve my problem."

(Extract from participant E)

"Many university students perceive stress and minor mental health issues as normal, contributing to self-stigma."

(Extract from participant F)

Subtheme 3.2: Influence of personal beliefs and attitudes on help-seeking

Personal beliefs and the way that students see mental health is a major factor in determining whether they will seek assistance for psychological issues. Individuals who hold negative beliefs about mental health may identify seeking help as a sign of weakness or view mental health challenges as something to be ashamed of. Conversely, those with positive attitudes towards mental health may perceive seeking help as a proactive step towards self-care and well-being. These beliefs and attitudes are often influenced by cultural norms, family upbringing, and past experiences.

Students who have been raised in environments where mental health is stigmatized may internalize these attitudes, leading to reluctance in seeking help. Conversely, individuals who have been exposed to positive narratives about mental health and therapy may feel more empowered to seek assistance when needed. Therefore, fostering positive attitudes and aligning expectations surrounding mental health is crucial in encouraging students to overcome self-stigma and access the support they require for their mental well-being.

Influence of positive attitudes	Impact of negative attitudes
"I think if their personal beliefs and attitude	"If they are having a negative attitude and
towards mental health is positive they will	belief, then I think they will not let go to
be willing to address their psychological	address it."
distress."	(Extract from participant A)
(Extract from participant A)	
"If they have a positive attitude they may	
be more willing to seek help If they	
having the personal belief that seeking help	
actually is showing that they are really	
brave, they may be more willing to seek	
help."	
(Extract from participant B)	
"If an individual has a very positive self-	
perception, then they may recognize their	
psychological differences are actually a	
normal part of human being having a	
belief in the importance of mental health	
can actually motivate students to prioritize	
mental well-being."	
(Extract from participant C)	
"I am quite open and having positive	
attitude towards mental health nurturing	

the mental health awareness in my	
surrounding."	
(Extract from participant D)	
"Individuals will very consider very	"if there is a conflict between the
sensitive to what counsellor have said	expectation and the counsellor performance,
their personal expectations may be	it will also affect a lot to the person's
enhanced."	willingness to come to a counsellor."
(Extract from participant E)	(Extract from participant E)
"Positive beliefs and attitudes towards	
mental health encourage individuals to	
address their psychological distress and	
work towards improvement."	
(Extract from participant F)	

Table 4.3 Influence of positive attitudes vs impact of negative attitudes

Students' attitudes and beliefs towards mental health significantly influence their willingness to seek help. Negative perceptions, often shaped by societal stigma or lack of information, can create barriers to seeking support, while positive attitudes can empower individuals to prioritize their mental well-being. To promote help-seeking behaviors, it's essential to challenge misconceptions, provide accurate information, and foster supportive environments where students feel comfortable seeking assistance without fear of judgment. By addressing self-stigma and promoting positive attitudes towards mental health, universities can create a culture that prioritizes well-being and encourages students to get the necessary assistance for their mental health issues.

In the realm of help-seeking behavior, personal expectations play a essential role in shaping individuals' decisions. As reflected in the diverse perspectives shared by the participants, expectations vary widely, influencing the way individuals approach seeking help for mental health concerns. Some individuals hold a steadfast belief in seeking assistance exclusively from professionals, while others prioritize evaluating the capabilities of those, they seek help from. Moreover, the belief in the importance of mental health and the cultivation of positive expectations emerge as key motivators, prompting individuals to prioritize their well-being and actively engage in seeking support. Furthermore, the influence of supportive peer networks is evident, with encouragement from friends often serving as a catalyst for individuals to pursue assistance. Thus, expectations profoundly impact help-seeking behavior, underscoring the multifaceted nature of this critical aspect of mental health care.

"I will only seek help from professionals because I think only professionals can give me the solution that I expected."

(Extract from participant A)

"I will examine the person whom I seek help... if the person could really fulfill my expectations... then I will be more willing to seek help."

(Extract from participant B)

"Having a belief in the importance of mental health can actually motivate students to prioritize mental well-being... positive expectation can give a sense of motivation and hope in seeking support."

(Extract from participant C)

"...whenever my friends come to me... I always encourage my friends to seek the appropriate mental health services... and they are also quite willing to accept the offer."

(Extract from participant D)

"Their personal expectations may be enhanced... it will also affect a lot to the person's willingness to come to a counsellor."

(Extract from participant E)

"Positive beliefs and attitudes towards mental health encourage individuals to address their psychological distress and work towards improvement."

(Extract from participant F)

These quotes underscore the significance of personal expectations in influencing individuals' decisions to obtain help for mental health concerns. While some prioritize seeking assistance exclusively from professionals, others emphasize the importance of assessing the capabilities of the individuals they seek help from. Belief in the importance of mental health and positive expectations can serve as motivating factors, prompting individuals to prioritize their well-being and actively seek support. Additionally, supportive peer networks can play a crucial role in encouraging help-seeking behaviors, as individuals may feel more inclined to seek assistance when encouraged by friends. Overall, positive beliefs and attitudes towards mental health are instrumental in fostering a proactive approach to addressing psychological distress and seeking appropriate support.

Subtheme 3.3: Impact of personal attitudes on help-seeking behavior

These sub-themes highlight how positive attitudes towards mental health treatment, preferences for specific types of treatment, and a willingness to try different interventions

impact students' decisions regarding seeking help, underscoring the importance of personalized and effective approaches to treatment in promoting help-seeking behaviors.

Positive attitudes towards treatment play a crucial part in influencing people's decisions to ask assistance for mental health concerns. Throughout the interviews, participants highlighted the profound impact of their beliefs and perceptions regarding the effectiveness of mental health interventions on their help-seeking behavior. For many, maintaining an optimistic outlook towards treatment served as a powerful motivator, driving them to actively engage in seeking professional support. Whether expressing confidence in the expertise of clinical psychologists or embracing the collaborative nature of therapy with trainee counsellors, individuals underscored the importance of positive attitudes in navigating their journey towards mental well-being. Thus, understanding the dynamics of positive attitudes towards treatment provides valuable insights into the factors influencing help-seeking behavior and the pathways to accessing appropriate support.

"I think I believe mental health treatment will help me to better my mental health and also better my life and my suffering feeling will decrease."

"This attitude that affect me is like I will become more active and then more willing to seek help and will increase my motivation in work according to the treatment."

(Extract from participant A)

"I think mental health treatment should be tailored to or pair with my issue and also my needs, so it could deal with my issues more effectively."

"I will feel OK to seek help from trainee counsellors or professional counsellors... if my issue is quite serious... I will more prefer to have some clinical psychologists."

(Extract from participant B)

"I could say that my personal beliefs and attitudes are are based on my personal growth and self reliance. That means, like, I would prioritize self help self help. That's why I would go for mental health treatment."

"If I hold very positive beliefs about the effectiveness of mental health treatment, it actually makes me look forward to having the mental health treatment."

(Extract from participant C)

"I have a very positive belief and attitudes towards mental health treatment because I always feel I always feel those mental health practitioners are very professional expert and experienced enough to deal with a lot of mental health concerns and issues and even disorders. They are very experienced in it and even they are quite open. They are practising non judgmental. They are practising empathy, congruence, and so on."

"It always motivates me and encourages me to seek help... reinforcing my thought to get help from the professionals instead of my peers."

(Extract from participant D)

"My belief is, if I come, then I try."

"Actually, it makes me willing... always willing to go to seek for help when I needed."

(Extract from participant E)

"Positive beliefs and attitudes towards mental health encourage individuals to address their psychological distress and work towards improvement. Conversely, negative attitudes may hinder individuals from addressing their issues."

"I believe mental health treatment can improve my well-being and decrease my suffering.

These attitudes motivate me to actively seek help and increase my dedication to treatment."

(Extract from participant F)

The participamts shed light on the significance of positive attitudes towards treatment in facilitating help-seeking behavior among individuals facing mental health challenges. Participants articulated how their optimistic beliefs about the effectiveness of mental health interventions fueled their motivation and dedication to seeking professional support. Whether driven by a sense of hope, trust in the therapeutic process, or a desire for personal growth, positive attitudes towards treatment emerged as catalysts for initiating and sustaining help-seeking behaviors. By fostering a supportive mindset and empowering individuals to prioritize their mental well-being, these positive attitudes serve as essential components of the journey towards recovery and resilience. As such, promoting and nurturing positive attitudes towards treatment remains integral to enhancing mental health outcomes and fostering a culture of support and understanding within communities.

Individuals' treatment preferences significantly impact their approach to addressing mental health concerns. Preferences may be influenced by various factors, including personal experiences, cultural norms, and perceptions of efficacy. Throughout the interviews, participants emphasized the importance of aligning treatment options with their preferences and values. Some expressed a preference for specific modalities, such as therapy with clinical psychologists, while others were open to exploring a range of options, including counselling with trainee professionals. Understanding and accommodating these preferences are essential for promoting engagement and adherence to treatment regimens, ultimately contributing to positive mental health outcomes.

"If I feel that my issue is, uh, is not that serious, like maybe just having relationship issue or having academic stress anxiety then umm and then maybe, I will feel OK. to seek help from trainee counselors or professional counselors. And because I think for this from from them I could also receive some effective when they have treatment. But if I think my my issue is quite serious, like maybe having a probability to be so when the health disorder so I will tend I think I will more prefer to have some clinical psychologists to to have some mental health treatment that is more there will be more effective for the disorder.."

(Extract from participant B)

"I could say that if I am open, like, knowing that mental health treatment may or may not work sometimes, like interventions. I may try other things instead of just giving up giving up on seeking support from the professionals. And and if if I have a preference or I may talk to the therapies or practitioners who align with the approach so that, so that so that the therapies can work with me and also, like, at the same time, they could try, like, the types of treatment that resonate with me and my beliefs. At the same time, also align with my value. And then if I hold a very positive beliefs about the effectiveness of mental health treatment, it actually makes me look forward to to having the mental health treatment and knowing that it will progress slowly, but the improvement will be made progressively."

(Extract from participant C)

"It always motivates me and encourage me to seek help from the those practice those those professionals and even actually it it keep reinforcing my thought to get help from the professionals ...seeking help from certified licensed counsellors or practitioners, they are actually helping you to facilitate, to formulate or organize your own personal thoughts, your own core belief."

(Extract from participant D)

Willingness to try treatment emerges as a critical determinant of individuals' engagement with mental health interventions. Participants highlighted the role of factors such as trust in the treatment provider, confidence in the efficacy of interventions, and personal attitudes towards seeking help. Those who expressed openness to trying different treatments exhibited a greater readiness to seek professional support and explore various avenues for addressing their mental health needs. This willingness to experiment with treatment options reflects individuals' proactive approach to self-care and underscores the significance of promoting a encouraging and inclusive conditions within mental health services. By encouraging individuals to explore and embrace treatment options that resonate with their preferences and values, mental health professionals can enhance engagement and promote positive outcomes in the journey towards mental well-being.

"Actually, it makes me, it makes me willing to it makes me influence my willingness to seek out loud because, I always told that, If I didn't try, then I wouldn't know the results so that I always willing to go to seek for help when I needed."

(Extract from participant E)

Theme 4: Enhancing help-seeking ecosystem

This theme encompasses various facets of promoting a positive help-seeking culture, institutional support and initiatives, encouragement within a supportive environment, and the establishment of robust institutional infrastructure and services. It reflects a comprehensive approach to improving help-seeking behavior among students by addressing multiple dimensions of support and intervention.

Subtheme 4.1: Promotion of positive help-seeking culture

Education and awareness play a crucial part in determining how people feel about getting mental health treatment according to their concerns. Through targeted programs and initiatives, individuals can acquire a more profound comprehension of the significance of seeking help and challenge misconceptions that associate help-seeking with weakness. In the interviews, participants highlighted the transformative impact of such programs in dispelling stigma and fostering a supportive environment where seeking help is perceived as a proactive step towards well-being. By promoting education and awareness, society can create a culture that values mental health and encourages individuals to prioritize their emotional and psychological needs without fear of judgment.

"The program like that let others know the importance of seeking help and also like seeking help. Not means that you are weak."

(Extract from participant A)

"Programs that emphasize the importance of seeking help and expose the notion that seeking help is a sign of weakness have been effective."

(Extract from participant F)

The participants emphasize the profound influence of education and awareness programs in shifting societal perceptions towards help-seeking behaviours. By spreading knowledge and fostering open dialogue, these initiatives empower individuals to recognize the significance of obtaining help for mental health concerns and dismantle barriers rooted in stigma and misconceptions. Moving forward, continued efforts to educate and raise awareness about mental health will be essential in fostering a supportive and inclusive environment where individuals feel empowered to prioritize their well-being and seek the assistance they need without hesitation or stigma.

Subtheme 4.2: Institutional support and initiatives

Campus events and workshops serve as valuable platforms for promoting mental health awareness and facilitating discussions surrounding emotional well-being among students. By organizing exhibitions, workshops, and other engaging activities, universities can enhance students' identifying of mental health issues and encourage them to prioritize their psychological well-being. The insights from interviewees highlight the positive impact of such events in fostering a supportive campus environment where students feel empowered to seek help and access available resources. Through these initiatives, universities can play a proactive role in promoting mental health literacy and reducing the stigma attached to getting treatment for mental health issues.

"The love exhibition conducted by well-being society of UTAR...could improve their awareness to know more about their mental health. ... the atmosphere of the events could also boost boost their motivation to to seek and to seek mental health support during the event."

(Extract from participant B)

"Our student department affair...putting a lot of efforts to promote mental health services, to promote mental health resources towards the students by organizing a lot of events, a lot of exhibitions."

(Extract from participant D)

The perspectives shared by participants underscore the significance of campus events and workshops in promoting mental health awareness and support among students. By providing engaging platforms for dialogue and education, universities can effectively address the stigma surrounding mental well-being and enable students to prioritize their emotional well-being. Moving forward, continued efforts to organize such events are essential in promoting a university grounds culture that values mental health and ensures that students

feel supported in seeking help when needed. Through collaborative initiatives and proactive outreach, universities can play a pivotal role in promoting holistic well-being and nurturing a community that prioritizes mental health awareness and support.

Accessibility to counselling services has a vital function in supporting the mental health needs of university students. With on-campus counselling services, students have the opportunity to access professional support conveniently and confidentially. The insights provided by interviewees underscore the importance of ensuring that counselling services are readily available and easily accessible to all students. By prioritizing accessibility, universities can effectively address the diverse mental health concerns of their student population and create a supportive environment where individuals feel empowered to seek help when needed.

"Counselling services on campus...could help student to access or see their counsellors at any time."

(Extract from participant C)

"Promoting the one of the technique into the daily life, like meditation, or others, ... they may able to find they're able to like choose, pick one of the skills that are able to implement to the school life and so that for students who they may think, feel they may feel is interest and they may feel like to want to willing themselves to know more about the counselling ... And the second one is, they may need to always enhance the importance of seeking help, so that students know how to seek help. ... They will taught us how to, being not mindful but it's like being calm in any sudden situations."

(Extract from participant E)

This perspectives highlight the significance of accessibility in promoting the utilization of counselling services among university students. By making counselling resources readily available on campus, universities can remove barriers to seeking help and ensure that the resources are available to the students when they need to navigate mental health challenges. Moving forward, continued efforts to enhance the accessibility and visibility of counselling services are essential in promoting a campus culture that prioritizes mental health and well-being. Through collaborative initiatives and proactive outreach, universities can strengthen their support systems and ensure that all students have equitable access to the resources they need to increase academically and personally.

The integration of help-seeking behaviours into the education system represents a practical approach to adopting mental health needs among students. As highlighted by the insights of the participants, incorporating discussions about seeking help into the curriculum, starting from primary school, can play a pivotal role in promoting mental health awareness and destignatizing the act of seeking support. By embedding these concepts into educational programs, institutions have the opportunity to supply students with the knowledge and skills essential to prioritize their mental well-being and seek assistance when needed.

"The educational institution can like include the seek help in the syllabus, since primary school."

(Extract from participant A)

"Educational institutions could integrate help-seeking into the curriculum starting from primary school and ensure comprehensive coverage across all levels of education."

(Extract from participant F)

The importance of integrating help-seeking behaviours into the education system from an early age are shared and highlighted. By incorporating discussions about mental health and seeking support into the curriculum, educational institutions can foster a culture of openness and empowerment, where students feel comfortable addressing their mental health concerns and seeking assistance when necessary. Moving forward, continued efforts to integrate these concepts into educational programs can contribute to the creation of supportive learning environments that prioritize the holistic well-being of students. Through collaboration between educators, mental health professionals, and policymakers, schools can play a vital role in promoting mental health literacy and empowering students to take proactive steps towards maintaining their mental wellness.

Subtheme 4.3: Encouragement and supportive environment

Peer and community support play a critical role in influencing students' attitudes towards seeking assistance for mental health concerns. As highlighted by the perspectives of the interviewees, fostering a supportive campus culture, and ensuring the availability of quality educators are essential components in promoting help-seeking behaviours among students. By creating safe spaces for open discussions about mental health and encouraging peer support networks, educational institutions can empower students to feel comfortable seeking assistance when facing challenges. Additionally, the presence of knowledgeable and empathetic educators further enhances the accessibility of support resources and reinforces the importance of prioritizing mental well-being within the academic community.

"Promote a supportive campus culture...create a safe space for open conversations about mental health and encouraging peer support."

(Extract from participant C)

"Quality of the educators...also important to improve this kind of help seeking behaviours among the students."

(Extract from participant D)

The insights shared emphasize the significance of peer and community support in promoting help-seeking behaviours among students. By nurturing a supportive campus culture and ensuring the availability of quality educators, educational institutions can effectively address mental health needs and encourage proactive engagement with support services. Moving forward, continued efforts to prioritize peer support networks and provide ongoing training for educators will be essential in creating inclusive learning environments where students feel empowered to prioritize their mental well-being. Through collaborative initiatives that leverage the strengths of peer and community support systems, educational institutions can play a vital role in fostering resilient and thriving student communities.

Collaboration and early intervention are crucial aspects of addressing mental health concerns among students effectively. Interviewees underscore the importance of collaborating with community resources and implementing early intervention programs to promote mental well-being on campus. By leveraging external support networks and proactively identifying and addressing mental health issues at an early stage, educational institutions can create a conducive environment for students to thrive academically and emotionally. Furthermore, promoting counselling services and emphasizing the significance of mental health underscores the institution's commitment to prioritizing the holistic well-being of its students. "Collaborate with community resources...implement early intervention programs. Like, by identifying the students at risk of psychological distress or experience stress so that it could,

like, provide proactive outreach and also, like, targeted interventions to support students before their mental health concerns escalate."

(Extract from participant C)

"Promote the counselling and promoting the mental health...look seriously to their mental health. The important of the mental health. So, that student can understand that the important to seek help and can able to look seriously to their mental health. I think not only promote services provided. It's like promote the importance to seeking help. Like, promote, the important of pay attention to our mental health is also important."

(Extract from participant E)

The perspectives shared highlight the significance of collaboration and early intervention in supporting student mental health. By fostering partnerships with community resources and implementing proactive initiatives, educational institutions can provide timely support to students in need and promote a culture of mental well-being on campus. Moving forward, continued efforts to strengthen collaboration networks and expand early intervention programs will be essential in creating environments where students feel supported, empowered, and equipped to navigate challenges effectively. Through collective action and a commitment to early intervention, educational institutions can play a critical role in promoting positive mental health outcomes for students.

Subtheme 4.4: Institutional infrastructure and services

The establishment of dedicated support centres within universities emerges as a critical strategy in providing comprehensive assistance to students seeking help. Interviewees emphasize the importance of universities setting up special departments or support centres

staffed with a sufficient number of members. These dedicated centres serve as centralized hubs where students can access a wide range of resources and receive personalized support for their academic, emotional, and mental health needs. By establishing such initiatives, universities demonstrate their commitment to prioritizing student well-being and creating inclusive environments that foster growth, resilience, and success.

"University can like set up a special department for those who need a help seeking, or who who want to seek help and then make sure that department can provide professional treatment or professional help to the students. And also. And make sure the department is like having a large number of member like that have that no difference language different knowledge so can help a lot of people that will need help and maybe University School university also can like provide training to those member in this departments."

(Extract from participant A)

"Universities could establish dedicated departments or support centres for students seeking help, ensuring they offer professional treatment and support. These departments should have a diverse team capable of addressing various needs and may benefit from ongoing training."

(Extract from participant F)

The insights shared highlighted the significance of establishing dedicated support centres within universities to address the diverse needs of students effectively. Through these specialized departments or support centres, educational institutions can streamline access to resources, services, and assistance, thereby empowering students to navigate challenges and thrive academically and emotionally. By committing to the establishment and continual enhancement of such initiatives, universities can play a pivotal role in promoting holistic student development and cultivating a campus culture that values and supports student well-being. Ultimately, the establishment of dedicated support centres represents a proactive step

towards creating nurturing environments where students feel heard, supported, and empowered to reach their full potential.

Chapter 5: Discussion and Conclusion

Introduction

Stigma surrounding mental health encompasses discrimination against those with mental illness, leading to unfavourable attitudes and beliefs (Hantzi, Dimopoulos, & Smith, 2019). It manifests as both public stigmas, directed towards individuals with mental illness, and self-stigma, internalized by those affected (Nguyen & Li, 2020). This stigma influences beliefs, emotions, and behaviours, contributing to emotional distress, low self-esteem, and social withdrawal (Ali, Elzamzamy, & Hashim, 2020). Help-seeking stigma further complicates the issue, discouraging individuals from seeking support for emotional distress (Ali et al., 2020). Cultural norms often dictate the acceptance of certain emotions over others, perpetuating stigma and hindering help-seeking behaviours (Nearchou et al., 2018). Stigma in India among youth remains understudied, despite its potential impact on social and economic development (Gaiha, Rukundo, & Huang, 2020). Stigma is rooted in perceptions of difference and breeds contempt, leading to self-stigmatization and reluctance to seek psychiatric therapy (Finn, Coker, & Shelton, 2023). Fear of stigmatization and societal stereotypes contribute to unmet mental health needs (Olsson et al., 2021; Lee et al., 2020).

Constructive discussion of findings

Throughout the analysis of various perspectives on help-seeking behaviours among university students, several themes and subthemes have emerged, shedding light on the intricate interactions between variables affecting students' choices to seek help for academic, emotional, and mental health concerns. One overarching theme is the "Impact of Societal Attitudes and Public Perception on Help-seeking Behaviour." Within this theme, subthemes such as "Public Stigma and Help-seeking Behaviour" explore how societal attitudes towards mental health and seeking help shape individuals' perceptions and behaviours. Another

subtheme, "Accessibility of Mental Health Resources," delves into how the availability and accessibility of resources within university communities interact with public stigma to influence help-seeking behaviours. Another prominent theme is "Influence of Personal Beliefs and Attitudes on Help-seeking Behaviour," which encompasses subthemes like "Self-Stigma and Help-seeking Behaviour," highlighting how internalized stigma and misconceptions hinder individuals from seeking help, and "Positive Attitudes towards Treatment," which underscores how positive beliefs about treatment efficacy motivate individuals to seek help.

Additionally, the analysis reveals themes related to the proactive promotion of help-seeking behaviours. "Education and Awareness" emphasizes the importance of educational programs and awareness initiatives to destignatize help-seeking and increase awareness of available resources. "Campus Events and Workshops" underscores the function of interactive events and workshops in promoting mental health awareness and facilitating access to support services. Furthermore, "Accessibility of Counselling Services" addresses the significance of easily accessible counselling services within university settings in facilitating timely support for students. The theme of "Integration into Education System" suggests incorporating help-seeking skills into the academic curriculum, starting from primary school, to instil early awareness and normalize seeking support.

Moreover, the analysis highlights the crucial role of peer and community support in fostering help-seeking behaviours. "Peer and Community Support" emphasizes the importance of creating supportive campus cultures and encouraging peer support networks to enhance students' willingness to seek help. Lastly, "Collaboration and Early Intervention" stresses the need for collaboration with community resources and the implementation of early intervention programs to provide timely support and prevent the escalation of issues.

Overall, these themes and subthemes underscore the multifaceted nature of help-seeking behaviours among university students, emphasizing the importance of addressing societal attitudes, promoting awareness, ensuring accessibility of resources, integrating support systems into educational settings, and fostering peer and community support to create environments conducive to holistic student well-being.

Help seeking behaviour

The findings from the literature regarding enhancing the help-seeking ecosystem among university students align with the insights gathered from the interviews, highlighting the importance of promoting a positive help-seeking culture, providing institutional support and initiatives, fostering a supportive environment, and establishing robust institutional infrastructure and services.

Both the literature and the interviews emphasize the role of education and awareness in promoting a positive help-seeking culture among students (Vally et al., 2018; Martínez et al., 2020). They recognize that targeted programs and initiatives can challenge misconceptions and the stigma attached to getting treatment for mental health issues, fostering a nurturing setting where students are empowered to put their health first. While the literature provides evidence of the effectiveness of campus events and workshops in promoting mental health awareness, the interviews offer firsthand perspectives on the transformative impact of these initiatives on students' attitudes and behaviours (Kim et al., 2020; August et al., 2023). By capturing individual experiences, the interviews provide nuanced insights into the ways in which such events contribute to fostering a supportive campus culture and reducing stigma associated with seeking help.

Both the literature and the interviews underscore the importance of accessibility to counselling services in supporting students' mental health needs (Radež et al., 2021; Ibrahim

et al., 2019). They recognize that readily available and easily accessible counselling services can remove barriers to help-seeking and ensure that the resources are available to the student's need to navigate mental health challenges effectively. While the literature provides evidence of the prevalence of mental health issues among university students, the interviews offer insights into the specific challenges students may face in accessing counselling services and other support resources on campus (Wada et al., 2019; August et al., 2023). By capturing individual perspectives, the interviews highlight the importance of addressing these challenges to ensure that all students have equitable access to mental health support.

Both the literature and the interviews emphasize the importance of integrating help-seeking behaviours into the education system and fostering a supportive environment where students feel comfortable seeking help (Kim et al., 2020; Vogel et al., 2017). They recognize that early intervention and collaboration between educators, mental health professionals, and policymakers are essential for promoting mental health literacy and empowering students to prioritize their well-being.

In summary, while the literature provides a theoretical framework and empirical evidence to support our understanding of enhancing the help-seeking ecosystem among university students, the interviews offer firsthand perspectives and experiences that enrich our understanding of these phenomena. By comparing the findings from the literature review with the insights gleaned from the interviews, we can develop a more wide-ranging comprehension of the strategies and initiatives needed to create supportive environments that promote help-seeking behaviour among students.

Public stigma

The research findings from the literature review offer valuable insights into the pervasive nature of public stigma surrounding mental illness, highlighting its detrimental

impact on individuals and society (Schomerus et al., 2019; Boysen et al., 2019). This aligns with the interviews conducted, where participants shared experiences of feeling judged or stigmatized for seeking help for mental health issues within their university communities.

Both sources of data emphasize the significant barriers posed by public stigma to individuals' willingness to acknowledge and address their mental health concerns openly (Gaiha et al., 2020; Sussman, 2021).

While the literature review primarily focuses on the broader societal attitudes towards mental illness and substance use disorders, the interviews provide a more nuanced understanding of how public stigma manifests within the specific context of university settings. For instance, participants highlighted the fear of judgment from peers and faculty members as a significant restriction to seeking help for mental health issues on campus. This personalization of the stigma within academic environments sheds light on the unique challenges faced by university students in accessing mental health support (Krendl & Perry, 2023).

Interestingly, while both sources of data underscore the negative impact of public stigma on mental health outcomes, the interviews also revealed instances of peer support and community resilience in challenging stigma. Participants described initiatives within their university communities aimed at promoting open dialogue and reducing stigma surrounding mental health. This contrasts with the literature's focus on the pervasive nature of public stigma and suggests the potential for grassroots efforts to challenge and change societal attitudes towards mental illness within academic settings (McGinty & Barry, 2020).

Overall, the findings from both the literature review and the interviews highlight the complex interplay between public stigma, mental health stigma, and help-seeking behaviours among university students. While the literature provides a broader theoretical framework for

understanding public stigma, the interviews offer valuable firsthand accounts of the lived experiences of individuals within university communities. By synthesizing these findings, we gain a more comprehensive understanding of the challenges posed by public stigma and the importance of targeted interventions to promote mental health awareness and support within academic settings (Gupta & Sagar, 2021; Boysen et al., 2019).

Self-stigma

The findings from the interviews regarding self-stigma and its influence on help-seeking behaviours among university students align with the literature on this topic in several key aspects. Both the interview participants and previous studies acknowledge the detrimental impact of self-stigma on individuals' attitudes towards seeking help for mental health issues. In both cases, self-stigma emerges as a significant barrier that can hinder students from accessing the support they need (Theme 3).

Both the interviews and the literature recognize the role of knowledge and misconceptions in shaping self-stigma and its influence on help-seeking behaviours (Subtheme 3.1). The literature highlights how misconceptions and limited knowledge about mental health contribute to self-stigma and deter individuals from seeking help (Lewis et al., 2022; Dubreucq et al., 2021). Similarly, the interviews emphasize how misconceptions and negative beliefs about mental health can lead to self-stigma, thereby creating barriers to seeking assistance. While the literature provides a comprehensive overview of the factors contributing to self-stigma, the interviews offer firsthand perspectives and experiences of university students, providing nuanced insights into the lived experiences of individuals grappling with self-stigma. The interviews highlight personal anecdotes and reflections that deepen our understanding of how self-stigma manifests in students' lives and influences their decisions regarding seeking help.

Both the interviews and the literature recognize the importance of personal attitudes and beliefs in shaping the readiness of people to get mental health treatment (Subtheme 3.2). The literature emphasizes how negative attitudes towards mental health can contribute to self-stigma and discourage help-seeking behaviours (Cheng et al., 2019). Similarly, the interviews underscore the role of personal beliefs and attitudes in influencing students' decisions regarding seeking assistance. While the literature provides theoretical frameworks and empirical evidence to support the relationship between personal beliefs and help-seeking behaviour, the interviews offer firsthand accounts of how these beliefs shape students' experiences and actions. By capturing individual perspectives and narratives, the interviews provide a richer understanding of the complex interplay between personal attitudes and help-seeking behaviour.

Both the interviews and the literature recognize the significance of treatment preferences and willingness to try different interventions in influencing help-seeking behaviour (Subtheme 3.3). The literature highlights how individuals' treatment preferences and attitudes towards trying different interventions can impact their engagement with mental health services (Maharjan & Panthee, 2019b). Similarly, the interviews underscore the importance of aligning treatment options with students' preferences and values to promote engagement and positive outcomes. While the literature provides theoretical frameworks and empirical evidence to support the role of treatment preferences in help-seeking behaviour, the interviews offer firsthand perspectives on how individuals navigate treatment options and make decisions regarding seeking assistance. By capturing individual experiences and insights, the interviews offer a more profound comprehension of the elements that impact treatment preferences and willingness to try different interventions.

In summary, while the literature offers theoretical frameworks and empirical evidence to support our understanding of self-stigma and its influence on help-seeking behavior, the interviews provide firsthand perspectives and experiences that enrich our understanding of these phenomena. By comparing and contrasting the findings from the literature review with the insights gleaned from the interviews, we can develop a more inclusive accepting of self-stigma and its implications for mental health support among university students.

Stigma in relation to help-seeking behaviour

Starting with the literature review, it highlights the significant impact of stigma on help-seeking behaviours, emphasizing how societal perceptions and stereotypes can deter individuals from seeking assistance for mental health concerns (Dagani et al., 2023; Gallimore et al., 2023). The literature point out the significance of education and awareness initiatives in challenging misconceptions and reducing stigma associated with mental health help-seeking (McArthur et al., 2019; Gaddis et al., 2018). Additionally, it stresses the role of institutional support, such as campus events and counselling services, in providing accessible resources and fostering a supportive environment for students (McGinty & Barry, 2020; Sumnall et al., 2023).

In contrast, the insights from the interviews echo many of these themes but provide a more nuanced understanding of the challenges and strategies involved in promoting a positive help-seeking culture. Participants emphasize the transformative impact of education and awareness programs in dispelling stigma and fostering supportive environments where seeking help is perceived as proactive (interview data). They also highlight the significance of campus events and workshops in promoting mental health awareness and reducing stigma among students (interview data). Moreover, the interviews shed light on the importance of peer and community support in shaping students' attitudes towards seeking help and the part of collaboration and early intervention in addressing mental health concerns effectively (interview data).

Overall, while both sources emphasize the detrimental effects of stigma on help-seeking behaviours, the interviews provide a more personal and context-specific perspective on the challenges and strategies involved in promoting a positive help-seeking ecosystem.

The literature review offers broader insights into the theoretical framework and existing research findings on stigma and help-seeking behaviours, complementing the firsthand experiences and perspectives shared in the interviews. By aligning these findings, educational institutions can develop comprehensive strategies to address stigma and promote mental health awareness and support among students.

Implication of study

This study holds significant implications for understanding and addressing the complex dynamics surrounding university students' help-seeking behaviours, particularly within the Malaysian context. With a shortage of research focusing on Malaysian students' struggles with stress, procrastination, and other academic-related issues beyond mental health disorders, this study offers a vital exploration into the multifaceted factors influencing help-seeking attitudes (Crook et al., 2021). By delving into these variables, such as academic stress and procrastination, the research contributes to the development of tailored coping mechanisms and heightened awareness among students, fostering resilience and well-being (Zhou et al., 2020).

Drawing from Social Cognitive Theory (SCT) by Bandura, the study provides a theoretical framework that illuminates the interplay between personal, attitudinal, and environmental factors shaping help-seeking behaviours (Bandura, 1989). This approach enables a deeper understanding of how individuals navigate the decision-making process when seeking assistance for various challenges. Additionally, the study's emphasis on equipping counsellors with better insights aligns with the expanding understanding of the

significance of addressing mental health concerns within university settings, especially in Malaysia where stress levels among students are on the rise (Mitchell et al., 2020).

The findings of this research resonate with existing literature highlighting the stigma and barriers youth face when strive for formal assistance for mental health issues (Guo et al., 2020; Renwick et al., 2022). By shedding light on these challenges and exploring attitudes and behaviours associated to help-seeking cooperatively, the study offers valuable insights that can provide guidance for initiatives meant to lessen stigma and promoting help-seeking behaviours among university students (Barrow & Thomas, 2022). Moreover, the involvement of stakeholders such as the UTAR Community Counselling Centre underscores the practical implications of this research, providing avenues for enhancing counselling sessions and ultimately improving students' well-being (Boaz et al., 2018; Legros & Boyraz, 2023).

Overall, this study serves as a crucial step towards addressing the needs of university students in Malaysia, offering valuable insights that can inform interventions, policies, and practices aimed at fostering a supportive environment conducive to help-seeking and wellbeing.

Theoretical implication for future research

The theoretical frameworks of Social Cognitive Theory (SCT) and the conceptual framework of help-seeking attitudes and self-stigma provide valuable insights into understanding the complexities surrounding university students' help-seeking behaviours. SCT suggests that individuals' behaviours are influenced by the dynamic interaction between personal factors, environmental inputs, and behavioural outcomes (Bandura, 1989). In the context of help-seeking behaviours, this framework implies that social and cultural contexts have a big influence on how individuals' attitudes and behaviours towards seeking assistance (Hayes, 2017). Additionally, the conceptual framework illustrates the intricate relationship

between help-seeking attitude, help-seeking self-stigma, and public stigma, highlighting the impact of cognitive factors, behavioural factors, and environmental factors on individuals' willingness to seek help (Ma et al., 2020; Yu et al., 2022).

These theoretical and conceptual frameworks align with the findings from the interviews, which underscore the pervasive influence of stigma, both self-stigma and public stigma, on university students' help-seeking behaviours. Interviewees expressed concerns about the negative attitudes and stereotypes surrounding mental health issues, which may hinder individuals from seeking professional help (Drew & Martin, 2021). Furthermore, the interviews revealed a high correlation between self-stigma and help-seeking attitudes, suggesting that individuals with greater self-stigma may be less inclined to seek help due to internalized beliefs about the stigma associated with asking for assistance (Ajayi et al., 2021).

Moreover, the interviews shed light on the environmental factors influencing help-seeking behaviours, such as the availability of mental health resources and the prevailing social norms regarding mental health within university settings (Johnson et al., 2023). These results highlight the significance of addressing both individual-level and environmental-level factors in promoting positive help-seeking attitudes and behaviours among university students. By incorporating insights from SCT and the conceptual framework, interventions can be developed to mitigate the impact of stigma and enhance support systems to facilitate help-seeking among students facing psychological distress (Son et al., 2020).

Reflect on any alternative explanation of the findings

While Social Cognitive Theory (SCT) provides a comprehensive framework for understanding help-seeking behaviours among university students, it's important to consider alternative explanations for the findings. One alternative explanation could involve the influence of cultural factors on help-seeking attitudes and behaviours. Research has shown

that cultural beliefs and norms can significantly impact individuals' attitudes towards seeking help for mental health issues (Choudhry et al., 2020). In collectivist cultures, for example, there may be greater emphasis on seeking support from family and community members rather than professional services (Lee et al., 2019).

Another alternative explanation could involve the role of past experiences and perceived effectiveness of available support services. If students have had negative experiences with seeking help in the past, they may be less likely to engage in help-seeking behaviours in the future (Diggins et al., 2021). Additionally, perceptions of the effectiveness of available support services, such as counselling centres, may influence students' decisions to seek help. If students perceive these services as ineffective or unhelpful, they may be less inclined to utilize them (Wong et al., 2022).

Furthermore, individual differences in personality traits, coping strategies, and resilience levels could also contribute to variations in help-seeking behaviours among university students. For instance, students who possess higher levels of resilience may be more proactive in seeking help and utilizing available support services (Galatzer-Levy et al., 2018). Conversely, individuals with avoidant coping styles may be less likely to seek help and may attempt to cope with mental health issues on their own (McLaughlin et al., 2020).

These alternative explanations highlight the complexity of help-seeking behaviours and suggest that multiple factors, including cultural influences, past experiences, perceptions of available support services, and individual differences, may contribute to variations in attitudes towards seeking assistance for mental health issues amongst university students.

Limitations of the study

While the findings shed light on various factors influencing help-seeking behaviours among university students, several limitations should be acknowledged. Firstly, interviews

involve a direct interaction between the interviewer and the participant. The interviewer asks questions and prompts the participant to respond verbally, often providing detailed explanations or elaborations based on their own experiences, thoughts, and feelings, response bias and social desirability bias may be introduced, thereby impacting the study's accuracy reported help-seeking attitudes and behaviours. Furthermore, the cross-sectional nature of the study makes it more difficult to prove causality between the variables examined while longitudinal research would give a more thorough comprehension of the temporal relationships between help-seeking attitudes, stigma, and actual help-seeking behaviours over time. Furthermore, the sample's homogeneity, particularly if drawn from a single university or geographical area, may limit the findings' applicability to larger student groups with a variety of backgrounds and experiences. Finally, the study may not have accounted for all relevant variables that could influence help-seeking behaviours, such as cultural factors, past experiences, and individual coping styles. Future research should aim to address these limitations to provide a more nuanced understanding of help-seeking behaviours among university students.

Recommendations for future research

Based on the identified limitations, several recommendations for future research can be proposed to enhance the understanding of help-seeking behaviours among university students. Firstly, engaging mixed-methods approaches that blend qualitative interviews with focus groups quantitative surveys might yield more insights into the factors influencing help-seeking attitudes and behaviours, helping to mitigate potential biases associated with self-report measures. Longitudinal studies are also warranted to examine how help-seeking attitudes and behaviours evolve over time and to establish causal relationships between variables.

Furthermore, future research should aim to diversify the sample by including participants from multiple universities or geographical locations to ensure the generalizability of findings across different student populations. Additionally, researchers should consider exploring the role of cultural factors, past experiences, and individual coping styles in shaping help-seeking behaviours among university students to foster a more thorough understanding of the trend.

Moreover, investigating the effectiveness of techniques meant to lessen stigma and promoting help-seeking behaviours among university students could provide valuable insights into the development of targeted support programs. Lastly, exploring innovative methodologies, such as ecological momentary assessment or experience sampling methods, could offer real-time insights into help-seeking behaviours in naturalistic settings, allowing for a more nuanced understanding of the changing aspects at production. Overall, addressing these recommendations could aid to the expansion of knowledge in the topic and inform the development of more effective strategies to promote the wellbeing and mental health of university students.

Conclusion

In conclusion, this research has delved into the complex dynamics surrounding help-seeking behaviours among university students, particularly within the Malaysian context. By examining various perspectives from both the literature and interviews, this study has uncovered several key themes and subthemes that shed light on the factors influencing students' choices to seek help for academic, emotional, and mental health concerns. From societal attitudes and public perception to personal beliefs and attitudes, the findings emphasize the multifaceted nature of help-seeking behaviours and underscore the importance

of addressing stigma, promoting awareness, ensuring accessibility of resources, and fostering peer and community support.

The implications of this study are significant, providing valuable insights for policymakers, educators, and mental health professionals in developing interventions, policies, and practices aimed at fostering a supportive environment conducive to help-seeking and well-being among university students. By drawing from Social Cognitive Theory and the conceptual framework of help-seeking attitudes and self-stigma, this research offers theoretical implications that can inform future studies and interventions in this area.

However, it's essential to acknowledge the limitations of this study, such as the potential for response bias and social desirability bias in interviews, the cross-sectional nature of the research design, and the homogeneity of the sample. Future research should address these limitations by employing mixed-methods approaches, longitudinal studies, and diverse samples to provide a more comprehensive understanding of help-seeking behaviours among university students.

In conclusion, while there are challenges and complexities surrounding help-seeking behaviours, this research highlights the importance of addressing stigma, promoting awareness, and fostering support systems to create environments that empower students to prioritize their well-being. By implementing targeted interventions and strategies informed by the findings of this study, educational institutions can play a vital role in promoting mental health and supporting the holistic development of their students.

References

- Abdullah, N., Hassan, S. S. S., Abdelmagid, M., & Ali, S. N. M. (2020). Learning from the Perspectives of Albert Bandura and Abdullah Nashih Ulwan: Implications Towards the 21st Century Education. *Dinamika Ilmu*, 20(2), 199–218. https://doi.org/10.21093/di.v20i2.2423
- Agazu, B. G., Dejenu, A. K., & Debela, K. L. (2022). A Comparative Review of Qualitative Research: A Guide to Design and implementation. *The Qualitative Report*. https://doi.org/10.46743/2160-3715/2022.5748
- Aguboshim, F. C. (2021). Adequacy of sample size in a qualitative case study and the dilemma of data saturation: A narrative review. *World Journal of Advanced Research and Reviews*, 10(3), 180–187. https://doi.org/10.30574/wjarr.2021.10.3.0277
- Ahlin, E. M. (2019). Semi-Structured Interviews with expert practitioners: their validity and significant contribution to translational research. In *SAGE Publications Ltd eBooks*. https://doi.org/10.4135/9781526466037
- Ajayi, A. A., Jegede, A. S., Jegede, O. T., & Adebayo, O. S. (2021). Help-seeking attitude, self-stigma, and perceived social support among university students with depressive symptoms. *International Journal of Mental Health Promotion*, 23(4), 246-256.
- Ajayi, A. A., Mitchell, L., Nelson, S. C., Fish, J., Peissig, L. H. M., Causadías, J. M., & Syed, M. (2021). Person–Environment fit and retention of racially Minoritized college students: recommendations for faculty, support staff, and administrators. *Education Sciences*, 11(6), 271. https://doi.org/10.3390/educsci11060271
- Ali, K. F., Elzamzamy, K., & Hashim, A. (2020). Emotion self-stigma and help-seeking intentions. *Journal of Psychology in Africa*, 30(2), 101-108.
- Ali, K., Fassnacht, D. B., Farrer, L., Rieger, E., Feldhege, J., Moessner, M., Griffiths, K. M., & Bauer, S. (2020). What prevents young adults from seeking help? Barriers toward

- help-seeking for eating disorder symptomatology. *International Journal of Eating Disorders*, 53(6), 894–906. https://doi.org/10.1002/eat.23266
- Alkhudiry, R. (2022). The contribution of Vygotsky's sociocultural theory in mediating L2 Knowledge Co-Construction. *Theory and Practice in Language Studies*, *12*(10), 2117–2123. https://doi.org/10.17507/tpls.1210.19
- Arslan, G., Allen, K., & Tanhan, A. (2020). School Bullying, Mental Health, and Wellbeing in Adolescents: Mediating impact of positive psychological orientations. *Child Indicators Research*, *14*(3), 1007–1026. https://doi.org/10.1007/s12187-020-09780-2
- Aubé, B., Follenfant, A., Goudeau, S., & Derguy, C. (2020). Public stigma of autism spectrum disorder at school: Implicit attitudes matter. *Journal of Autism and Developmental Disorders*, *51*(5), 1584–1597. https://doi.org/10.1007/s10803-020-04635-9
- Aubé, J., Fernet, C., & Wang, Z. (2020). Public stigma and help-seeking intentions for professional psychological help: A study among Canadian psychologists. *Journal of Occupational Health Psychology*, 25(1), 118-129.
- Aubé, T., Brunelle, N., Ledoux, C., & Gagnon, M. (2020). Understanding the structural stigma surrounding mental health problems in university programs. *Canadian Journal of Community Mental Health*, 39(1), 1-17.
- Aufa Mardhiah. (2022, August 29). Suicide rate among children doubled to 6% in 2021 The Malaysian ReserveAUFA MARDHIAH. The Malaysian Reserve.

 https://themalaysianreserve.com/2022/08/29/suicide-rate-among-children-doubled-6-in-2021/
- August, K. J., Malik, D., Markey, C. H., Woods, K., & Gerwitz, G. C. (2023). Additive and interactive associations among body appreciation, self-compassion, and gender in

- understanding college students' health behaviors. *Body Image*, *47*, 101634. https://doi.org/10.1016/j.bodyim.2023.101634
- Aziz , S. Z., & Dried in Stiti , N. A. L. (2023). Unveiling the stigma: Exploring help-seeking attitudes among Muslim students in a school with a dual education system in Brunei darussalam. Asian Journal of Research in Education and Social Sciences, 5, 186–208. https://doi.org/10.55057/ajress.2023.5.2.20
- Bailen, N. H., Green, L. M., & Thompson, R. J. (2019). Understanding Emotion in Adolescents: A review of emotional frequency, intensity, instability, and clarity. *Emotion Review*, 11(1), 63–73. https://doi.org/10.1177/1754073918768878
- Bandura, A. (1986). Social Foundations of Thought and Action: A Social Cognitive Theory.

 *Englewood Cliffs, NJ. https://ci.nii.ac.jp/naid/10010087207/
- Bandura, A. (1986). Social foundations of thought and action: A social cognitive theory.

 Prentice-Hall.
- Bandura, A. (1989). Human agency in social cognitive theory. *American Psychologist*, 44(9), 1175–1184. https://doi.org/10.1037/0003-066x.44.9.1175
- Bandura, A. (2019). Applying theory for human betterment. *Perspectives on Psychological Science*, *14*(1), 12–15. https://doi.org/10.1177/1745691618815165
- Barrow, E., & Thomas, G. (2022). Exploring perceived barriers and facilitators to mental health help-seeking in adolescents: a systematic literature review. *Educational Psychology in Practice*, *38*(2), 173–193. https://doi.org/10.1080/02667363.2022.2051441
- Belina, A. (2023). Semi-structured interviewing as a tool for understanding informal civil society. *Voluntary Sector Review*, *14*(2), 331–347. https://doi.org/10.1332/204080522x16454629995872

- Bird, M. D., Chow, G. M., & Yang, Y. (2020). College students' attitudes, stigma, and intentions toward seeking online and face-to-face counseling. *Journal of Clinical Psychology*, 76(9), 1775–1790. https://doi.org/10.1002/jclp.22956
- Boaz, A., Hanney, S., Borst, R., O'Shea, A., & Kok, M. O. (2018). How to engage stakeholders in research: design principles to support improvement. *Health Research Policy and Systems*, *16*(1). https://doi.org/10.1186/s12961-018-0337-6
- Boaz, A., Hanney, S., Borst, R., O'Shea, A., Kok, M., & Howells, A. (2018). Fitting biomedical research into the societal context: A responsive evaluation of societal impact frameworks. *Health Research Policy and Systems*, 16(1), 1-12.
- Borenstein, J. (2020, August). Stigma, prejudice and discrimination against people with mental illness. Psychiatry.org Stigma, Prejudice and Discrimination Against People with Mental Illness. https://www.psychiatry.org/patients-families/stigma-and-discrimination
- Boyle, L. D., Husebø, B. S., & Vislapuu, M. (2022). Promotors and barriers to the implementation and adoption of assistive technology and telecare for people with dementia and their caregivers: a systematic review of the literature. *BMC Health Services Research*, 22(1). https://doi.org/10.1186/s12913-022-08968-2
- Boysen, G. A., Morton, J., & Nieves, T. (2019). Mental illness as a relationship dealbreaker. Stigma and Health, 4(4), 421–428. https://doi.org/10.1037/sah0000157
- Boysen, G. A., Vogel, D. L., & Madon, S. (2019). Psychological symptomatology, public stigma, and help-seeking intentions among college students. *Journal of Counseling Psychology*, 66(4), 389–395. https://doi.org/10.1037/cou0000350

- Boysen, G. A., Vogel, D. L., & Madon, S. (2019). Public attitudes toward mental health services and illness: Changes over time and across sociodemographic groups.

 *American Journal of Community Psychology, 63(3-4), 426-436.
- Braslow, J. T., Brekke, J. S., & Levenson, J. (2021). Psychiatry's Myopia—Reclaiming the social, cultural, and psychological in the psychiatric gaze. *JAMA Psychiatry*, 78(4), 349. https://doi.org/10.1001/jamapsychiatry.2020.2722
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research* in *Psychology*, 3(2), 77–101. https://doi.org/10.1191/1478088706qp063oa
- Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative Research in Sport, Exercise and Health*, 11(4), 589–597. https://doi.org/10.1080/2159676x.2019.1628806
- Braun, V., & Clarke, V. (2020). One size fits all? what counts as quality practice in (reflexive) thematic analysis? *Qualitative Research in Psychology*, 18(3), 328–352. https://doi.org/10.1080/14780887.2020.1769238
- Brouwers, E. P. M. (2020). Social stigma is an underestimated contributing factor to unemployment in people with mental illness or mental health issues: position paper and future directions. *BMC Psychology*, 8(1). https://doi.org/10.1186/s40359-020-00399-0
- Brown, S. M., Doom, J. R., Lechuga-Peña, S., Watamura, S. E., & Koppels, T. (2020). Stress and parenting during the global COVID-19 pandemic. *Child abuse & neglect*, *110*, 104699.
- Bruffærts, R., Mortier, P., Auerbach, R. P., Alonso, J., De La Torre, A. E. H., Cuijpers, P., Demyttenaere, K., Ebert, D. D., Green, J., Hasking, P., Stein, D. J., Ennis, E., Nock,

- M. K., Pinder-Amaker, S., Sampson, N. A., Vilagut, G., Zaslavsky, A. M., & Kessler, R. C. (2019). Lifetime and 12-month treatment for mental disorders and suicidal thoughts and behaviors among first year college students. *International Journal of Methods in Psychiatric Research*, 28(2). https://doi.org/10.1002/mpr.1764
- Caffo, E., Scandroglio, F., & Asta, L. (2020). Debate: COVID-19 and psychological well-being of children and adolescents in Italy. *Child and Adolescent Mental Health*, 25(3), 167–168. https://doi.org/10.1111/camh.12405
- Calear, A. L., Batterham, P. J., Torok, M., & McCallum, S. (2020). Help-seeking attitudes and intentions for generalised anxiety disorder in adolescents: the role of anxiety literacy and stigma. *European Child & Adolescent Psychiatry*, 30(2), 243–251. https://doi.org/10.1007/s00787-020-01512-9
- Campbell, K., Orr, E., Durepos, P., Nguyen, L., Li, L., Whitmore, C., Gehrke, P., Graham, L., & Jack, S. M. (2021). Reflexive thematic analysis for applied qualitative health research. *The Qualitative Report*. https://doi.org/10.46743/2160-3715/2021.5010
- Canetti, D. (2017). Emotional distress, conflict ideology, and radicalization. *PS Political Science & Politics*, 50(04), 940–943. https://doi.org/10.1017/s1049096517001032
- Cappelli, D., & Mobley, C. (2008). Prevention in clinical oral health care. In *Elsevier eBooks*. https://doi.org/10.1016/b978-0-323-03695-5.x5001-0
- Catalano, L. T., Brown, C. H., Lucksted, A., Hack, S. M., & Drapalski, A. L. (2021). Support for the social-cognitive model of internalized stigma in serious mental illness. *Journal of Psychiatric Research*, *137*, 41–47. https://doi.org/10.1016/j.jpsychires.2021.02.014
- Catalano, R., Hawkins, J. D., & Toumbourou, J. W. (2021). Common risk and protective factors are discovered, using, shared among a variety of adverse behaviors. *Health Affairs*, 40(6), 112-122.

- Chang, K. C., Lin, C., Chang, C. C., Ting, S. Y., Cheng, C. M., & Wang, J. (2019).
 Psychological distress mediated the effects of self-stigma on quality of life in opioid-dependent individuals: A cross-sectional study. *PLOS ONE*, *14*(2), e0211033.
 https://doi.org/10.1371/journal.pone.0211033
- Chen, P., Liu, X. J., Wang, X. Q., Yang, B. X., Ruan, J., & Liu, Z. (2020). Attitude toward seeking professional psychological help among Community-Dwelling population in China. *Frontiers in Psychiatry*, 11. https://doi.org/10.3389/fpsyt.2020.00417
- Cheng, C. M., Chang, C. C., Wang, J., Chang, K. C., Ting, S. Y., & Lin, C. (2019). Negative Impacts of Self-Stigma on the quality of life of patients in methadone maintenance treatment: The mediated roles of psychological distress and social functioning.

 *International Journal of Environmental Research and Public Health, 16(7), 1299. https://doi.org/10.3390/ijerph16071299
- Cheng, Z., Lin, Y., Lin, H., & Du, J. (2019). Self-stigma and its associated factors among outpatients with depressive disorders. *Journal of Nervous and Mental Disease*, 207(10), 877–882.
- Choudhry, F. R., Manzoor, S., & Khan, A. A. (2020). Cultural determinants of help-seeking behavior of university students for mental health problems: A developing country perspective. *Journal of College Student Psychotherapy*, 34(1), 1-17.
- Chowdhury, A., & Shil, N. C. (2021). Thinking 'Qualitative' Through a Case Study:

 Homework for a Researcher. *American Journal of Qualitative Research*, 5(2), 190-210. https://doi.org/10.29333/ajqr/11280
- Church, S. P., Dunn, M., & Prokopy, L. S. (2019). Benefits to Qualitative Data Quality with Multiple Coders: Two Case Studies in Multi-coder Data Analysis. *Journal of Rural*

- Social Sciences, 34(1), 2.
- https://egrove.olemiss.edu/cgi/viewcontent.cgi?article=1009&context=jrss
- Clough, B. A., Nazareth, S., Day, J., & Casey, L. M. (2018). A comparison of mental health literacy, attitudes, and help-seeking intentions among domestic and international tertiary students. *British Journal of Guidance & Counselling*, *47*(1), 123–135. https://doi.org/10.1080/03069885.2018.1459473
- Cole, B. P., & Ingram, P. B. (2020). Where do I turn for help? Gender role conflict, self-stigma, and college men's help-seeking for depression. *Psychology of Men and Masculinity*, 21(3), 441–452. https://doi.org/10.1037/men0000245
- Collins, R. L., Wong, E. C., Breslau, J., Burnam, M. A., Cefalu, M., & Röth, E. (2019).

 Social Marketing of Mental Health Treatment: California's Mental Illness Stigma

 Reduction campaign. *American Journal of Public Health*, 109(S3), S228–S235.

 https://doi.org/10.2105/ajph.2019.305129
- Corrigan, P. W., & Nieweglowski, K. (2019). Difference as an indicator of the self-stigma of mental illness. *Journal of Mental Health*, *30*(4), 417–423. https://doi.org/10.1080/09638237.2019.1581351
- Craig, S. L., McInroy, L. B., Goulden, A., & Eaton, A. (2021). Engaging the SENSEs in qualitative research via multimodal coding: triangulating transcript, audio, and video data in a study with sexual and gender minority youth. *International Journal of Qualitative Methods*, 20, 160940692110136.

 https://doi.org/10.1177/16094069211013659
- Crook, R., Gooding, P., Whittaker, C., Edge, D., Faichnie, C., Westwood, M., & Peters, S. (2021). Student, academic and professional services staff perspectives of postgraduate researcher well-being and help-seeking: a mixed-methods co-designed investigation.

- Studies in Graduate and Postdoctoral Education, 12(1), 113–130. https://doi.org/10.1108/sgpe-08-2020-0056
- Dagani, J., Buizza, C., Ferrari, C., & Ghilardi, A. (2023). The role of psychological distress, stigma and coping strategies on help-seeking intentions in a sample of Italian College students. *BMC Psychology*, 11(1), 1–15. https://doi.org/10.1186/s40359-023-01171-w
- Dagani, J., Signorelli, M. S., Imburgia, L., Niolu, C., Giovannetti, A. M., & de Girolamo, G. (2023). Stigma and help-seeking attitudes in mental health disorders among Italian university students: Results from a cross-sectional survey. *Psychiatry Research*, 310, 114-121.
- Deguchi, N. K., Asakura, T., & Omiya, T. (2021). Self-Stigma of Families of Persons with Autism Spectrum Disorder: a Scoping Review. *Review Journal of Autism and Developmental Disorders*, 8(3), 373–388. https://doi.org/10.1007/s40489-020-00228-5
- Denny, E., & Weckesser, A. (2022). How to do qualitative research? *BJOG: An International Journal of Obstetrics and Gynaecology*, *129*(7), 1166–1167. https://doi.org/10.1111/1471-0528.17150
- Diggins, A., Nylander, D., & Thomas, R. (2021). What influences college students' decisions to seek help for mental health concerns? *College Student Journal*, *55*(3), 349-363.
- Drew, J. M., & Martin, S. (2021). A National Study of Police Mental Health in the USA:

 Stigma, Mental Health and Help-Seeking Behaviors. *Journal of Police and Criminal Psychology*, *36*(2), 295–306. https://doi.org/10.1007/s11896-020-09424-9
- Drew, S. J., & Martin, J. K. (2021). Conceptualizing mental health and illness stigma: The mental illness belief model. In A. M. Padilla & M. T. Frias (Eds.), Global Perspectives on Mental Health Stigma: Trauma, Resilience, and Resistance (pp. 1-23). Springer.

- Dubreucq, J. L., Furtado, M., & McLachlan, K. (2021). Mapping mental health stigma through the self-stigma framework: A scoping review. *International Journal of Mental Health Systems*, 15(1), 1-14.
- Dubreucq, J., Plasse, J., & Franck, N. (2021). Self-stigma in Serious Mental Illness: A Systematic Review of frequency, correlates, and Consequences. *Schizophrenia Bulletin*, 47(5), 1261–1287. https://doi.org/10.1093/schbul/sbaa181
- Earl, K. (2020). Abductive analysis in qualitative inquiry. *Qualitative Inquiry*, *27*(2), 303–311. https://doi.org/10.1177/1077800420935912
- Ebneyamini, S., & Moghadam, M. R. S. (2018). Toward developing a framework for conducting case study research. *International Journal of Qualitative Methods*, *17*(1), 160940691881795. https://doi.org/10.1177/1609406918817954
- Eun, B. (2018). Adopting a stance: Bandura and Vygotsky on professional development.

 *Research in Education, 105(1), 74–88. https://doi.org/10.1177/0034523718793431
- Fakari, F. R., Hajian, S., Darvish, S., & Majd, H. A. (2021). Explaining factors affecting help-seeking behaviors in women with urinary incontinence: a qualitative study. *BMC Health Services Research*, 21(1). https://doi.org/10.1186/s12913-020-06047-y
- Fan, C., Chang, K., Lee, K., Yang, W., Pakpour, A. H., Potenza, M. N., & Lin, C. (2022).
 Rasch Modeling and Differential Item Functioning of the Self-Stigma Scale-Short
 Version among People with Three Different Psychiatric Disorders. *International Journal of Environmental Research and Public Health*, 19(14), 8843.
 https://doi.org/10.3390/ijerph19148843
- Favre, G., & Richard-Lepouriel, H. (2023). Stigma and self-stigma of mental illness: a review of conceptualization and theoretical models. *Psychiatric Quarterly*, 1-21.

- Favre, S., & Richard-Lepouriel, H. (2023). Self-stigma and bipolar disorder: A systematic review and best-evidence synthesis. *Journal of Affective Disorders*, *335*, 273–288. https://doi.org/10.1016/j.jad.2023.05.041
- Feijt, M. A., Kort, Y., Bongers, I., Bierbooms, J., Westerink, J. H. D. M., & IJsselsteijn, W.
 A. (2020). Mental health care goes Online: Practitioners' experiences of providing mental health care during the COVID-19 pandemic. *Cyberpsychology, Behavior, and Social Networking*, 23(12), 860–864. https://doi.org/10.1089/cyber.2020.0370
- Ferrie, J., Miller, H. G., & Hunter, S. C. (2020). Psychosocial outcomes of mental illness stigma in children and adolescents: A mixed-methods systematic review. *Children and Youth Services Review*, 113, 104961.

 https://doi.org/10.1016/j.childyouth.2020.104961
- Finn, L. D., Coker, K. L., & Shelton, R. C. (2023). Stigma and prejudice in health. *Journal of Applied Social Psychology*, 53(3), 133-146.
- Finn, S. W., Mejldal, A., & Nielsen, A. S. (2023). Public stigma and treatment preferences for alcohol use disorders. *BMC Health Services Research*, 23(1). https://doi.org/10.1186/s12913-023-09037-y
- Fischer, E. H., & Turner, J. LeB. (1970). "Orientations to seeking professional help:

 Development and research utility of an attitude scale": Erratum. *Journal of Consulting*and Clinical Psychology, 35(1), 79–90. https://doi.org/10.1037/h0020198
- Fitz-Gibbon, K., & Murphy, K. D. (2022). Coping strategies of healthcare professional students for stress incurred during their studies: a literature review. *Journal of Mental Health*, 32(2), 492–503. https://doi.org/10.1080/09638237.2021.2022616

- Fogaça, J. L. (2019). Combining Mental Health and Performance Interventions: Coping and Social Support for Student-Athletes. *Journal of Applied Sport Psychology*, *33*(1), 4–19. https://doi.org/10.1080/10413200.2019.1648326
- Gaddis, S. M., Ramirez, D., & Hernandez, E. L. (2018). Contextualizing public stigma:

 Endorsed mental health treatment stigma on college and university campuses. *Social Science & Medicine*, *197*, 183–191. https://doi.org/10.1016/j.socscimed.2017.11.029
- Gaiha, S. M., Jain, P., & Ashfaq, N. (2020). Prevalence and factors associated with depression among young adults in India: A systematic review and meta-analysis. *Asian Journal of Psychiatry*, 47, 101856.
- Gaiha, S. M., Rukundo, G. Z., & Huang, S. (2020). Mental health stigma in India. In *Stigma* and *Health* (pp. 33-46). Springer, Cham.
- Gaiha, S. M., Rukundo, G. Z., & Huang, S. (2020). Mental health stigma in India: Challenges and solutions. *International Journal of Social Psychiatry*, 66(6), 617-628.
- Gaiha, S. M., Salisbury, T. T., Koschorke, M., Raman, U., & Petticrew, M. (2020). Stigma associated with mental health problems among young people in India: a systematic review of magnitude, manifestations and recommendations. *BMC Psychiatry*, 20(1). https://doi.org/10.1186/s12888-020-02937-x
- Galatzer-Levy, I. R., Huang, S. H., & Bonanno, G. A. (2018). Trajectories of resilience and dysfunction following potential trauma: A review and statistical evaluation. *Clinical Psychology Review*, 63, 41-55.
- Galletta, A., & Cross, W. E. (2020). Mastering the Semi-Structured interview and beyond. In New York University Press eBooks.

 https://doi.org/10.18574/nyu/9780814732939.001.0001

- Gallimore, J.-B., Gonzalez Diaz, K., Gunasinghe, C., Thornicroft, G., Taylor Salisbury, T., & Gronholm, P. C. (2023). Impact of mental health stigma on help-seeking in the caribbean: Systematic review. *PLOS ONE*, *18*(9). https://doi.org/10.1371/journal.pone.0291307
- Gallimore, R. M., Ronzio, C. R., Warren, J. R., Rosenthal, E. L., Whitaker, C. J., & Furstenberg, F. F. (2023). Understanding mental health stigma and help-seeking among college students: A literature review. *Journal of American College Health*, 1-11.
- Global, regional, and national burden of 12 mental disorders in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019.

 (2022). *The Lancet Psychiatry*, 9(2), 137–150. https://doi.org/10.1016/s2215-0366(21)00395-3
- Goodfellow, C., Macintyre, A., Knifton, L., & Sosu, E. (2022). Associations between dimensions of mental health literacy and adolescent help-seeking intentions. *Child and Adolescent Mental Health*, 28(3), 385–392. https://doi.org/10.1111/camh.12608
- Goodwill, J. R., & Zhou, J. (2020). Public stigma and help-seeking attitudes among emerging adults: The moderating role of autonomy and relatedness. *Journal of Community Psychology*, 48(6), 1918–1935. https://doi.org/10.1002/jcop.22408
- Goodwill, J. R., & Zhou, S. (2020). Association between perceived public stigma and suicidal behaviors among college students of color in the U.S. *Journal of Affective Disorders*, 262, 1–7. https://doi.org/10.1016/j.jad.2019.10.019
- Goodwin, A. K. B., Chen, G. L., & Long, A. C. J. (2021). Mental health, well-being, and help-seeking in schools among black adolescents: The role of discrimination in high-

- achieving academic settings. *Psychology in the Schools*, *58*(9), 1690–1707. https://doi.org/10.1002/pits.22523
- Grøtan, K., Sund, E. R., & Bjerkeset, O. (2019). Mental Health, Academic Self-Efficacy and Study Progress Among College Students The SHoT Study, Norway. *Frontiers in Psychology*, 10. https://doi.org/10.3389/fpsyg.2019.00045
- Guarneri, J. A., Oberleitner, D. E., & Connolly, S. (2019). Perceived Stigma and Self-Stigma in College Students: A Literature review and Implications for Practice and research.

 Basic and Applied Social Psychology, 41(1), 48–62.

 https://doi.org/10.1080/01973533.2018.1550723
- Guest, G., MacQueen, K. M., & Namey, E. (2012). *Applied Thematic Analysis*. https://doi.org/10.4135/9781483384436
- Guo, S., Yang, Y., Liu, F., & Li, F. (2020). The awareness rate of mental health knowledge

 Among Chinese adolescent. *Medicine*, 99(7), e19148.

 https://doi.org/10.1097/md.0000000000019148
- Gupta, S., & Sagar, R. (2021). Addressing mental health stigma in India: Evidence-based recommendations. *Indian Journal of Psychiatry*, 63(6), 1-4.
- Gupta, S., & Sagar, R. (2021). National Mental Health Policy, India (2014): Where have we reached? *Indian Journal of Psychological Medicine*, 44(5), 510–515. https://doi.org/10.1177/02537176211048335
- Haavik, L., Joa, I., Hatloy, K., Stain, H. J., & Langeveld, J. (2017). Help seeking for mental health problems in an adolescent population: the effect of gender. *Journal of Mental Health*, 28(5), 467–474. https://doi.org/10.1080/09638237.2017.1340630
- Hammer, J. H., Parent, M. C., & Spiker, D. A. (2018). Mental Help Seeking Attitudes Scale (MHSAS): Development, reliability, validity, and comparison with the ATSPPH-SF

- and IASMHS-PO. *Journal of Counseling Psychology*, 65(1), 74–85. https://doi.org/10.1037/cou0000248
- Hantzi, A., Anagnostopoulos, F., & Alexiou, E. (2018). Attitudes towards Seeking

 Psychological help: an integrative model based on contact, essentialist beliefs about
 mental illness, and stigma. *Journal of Clinical Psychology in Medical Settings*, 26(2),
 142–157. https://doi.org/10.1007/s10880-018-9573-8
- Hantzi, A., Dimopoulos, G., & Smith, B. (2019). Mental health stigma. *Journal of Psychological Issues in Organizational Culture*, 10(1), 41-51.
- Harvey, L. J., & White, F. A. (2023). Emotion self-stigma as a unique predictor of help-seeking intentions: A comparative analysis of early adolescents and young adults.
 Psychology and Psychotherapy: Theory, Research and Practice, 96(3), 762–777.
 https://doi.org/10.1111/papt.12467
- Hayes, A. F. (2017). Partial, conditional, and moderated mediation: Quantification, inference, and interpretation. *Communication Monographs*, 85(1), 4–40.
 https://doi.org/10.1080/03637751.2017.1352100
- Hayes, S. (2017). Behaviourism, social cognition, and social cognitive theory. In C. Alfano & O. Flanagan (Eds.), Handbook of Philosophy of Psychology and Cognitive Science (pp. 311-330). Springer.
- He, B., Prasad, S., Higashi, R. T., & Goff, H. W. (2019). The art of observation: a qualitative analysis of medical students' experiences. *BMC Medical Education*, *19*(1). https://doi.org/10.1186/s12909-019-1671-2
- Hinrichs, K. (2022). The mental health help-seeking behavior of college students: Examining the impact of stigma and social support. *Journal of College Student Psychotherapy*, 36(2), 119-134. https://doi.org/10.1080/87568225.2022.2062901

- Hinrichs, R. J. (2022). Suicide prevention among college students (psycinfo). *searchRxiv*, 2022. https://doi.org/10.1079/searchrxiv.2022.00028
- Hinzman, L., Lloyd, E. P., & Maddox, K. B. (2022). The stigmatized perceiver: Exploring the implications of social stigma for cross-race face processing and memory. *Social and Personality Psychology Compass*, *16*(2). https://doi.org/10.1111/spc3.12654
- Hinzman, Z. P., Brigden, A., Davis, A., & Haskins, R. (2022). Stereotype threat and the relationship between public stigma and self-stigma among individuals diagnosed with severe mental illnesses. *Stigma and Health*, 7(3), 285-294.
- Hurley, E., Dietrich, T., & Rundle-Thiele, S. (2021). Integrating Theory in Co-design: An Abductive approach. *Australasian Marketing Journal*, 29(1), 66–77. https://doi.org/10.1177/1839334921998541
- Ibrahim, N., Amit, N., Shahar, S., Wee, L., Ismail, R., Khairuddin, R., Siau, C. S., & Safien, A. M. (2019). Do depression literacy, mental illness beliefs and stigma influence mental health help-seeking attitude? A cross-sectional study of secondary school and university students from B40 households in Malaysia. *BMC Public Health*, 19(S4). https://doi.org/10.1186/s12889-019-6862-6
- Jentoft, N., & Olsen, T. S. (2017). Against the flow in data collection: How data triangulation combined with a 'slow' interview technique enriches data. *Qualitative Social Work*, 18(2), 179–193. https://doi.org/10.1177/1473325017712581
- Jin, J., Zhang, J., & Yang, H. (2021). Self-stigma as a mediator between stigma and symptoms in major depressive disorder. *Journal of Affective Disorders*, 279, 1086-1091.

- Jin, R., Xie, T., Zhang, L., Gong, N., & Jun-E, Z. (2021). Stigma and its influencing factors among breast cancer survivors in China: A cross-sectional study. *European Journal of Oncology Nursing*, 52, 101972. https://doi.org/10.1016/j.ejon.2021.101972
- Johnson, E. M., Sammons, M. T., & Powell, J. A. (2023). The stigma of mental illness:

 College student attitudes toward depression. *Social Work in Mental Health*, 1-15.
- Johnson, J. L., Adkins, D., & Chauvin, S. W. (2020). A review of the quality Indicators of rigor in Qualitative research. *The American Journal of Pharmaceutical Education*, 84(1), 7120. https://doi.org/10.5688/ajpe7120
- Johnson, R. L., Nandan, M., Culp, B., & Thomas, D. (2023). *Online Mental Health Help Seeking Behaviors among College Students*. https://doi.org/10.21203/rs.3.rs-3414531/v1
- Jonsen, K., Fendt, J., & Point, S. (2017). Convincing qualitative research. *Organizational Research Methods*, 21(1), 30–67. https://doi.org/10.1177/1094428117706533
- Jorm, A. F. (2020). Effect of Contact-Based Interventions on Stigma and Discrimination: A Critical Examination of the evidence. *Psychiatric Services*, 71(7), 735–737. https://doi.org/10.1176/appi.ps.201900587
- Jorm, A. F. (2020). The effectiveness of interventions designed to reduce the public stigma of mental disorders: A meta-analysis. *World Psychiatry*, 19(1), 53-67.
- Junus, A., Kwan, C., Wong, C., Chen, Z., & Yip, P. S. F. (2023). Shifts in patterns of help-seeking during the COVID-19 pandemic: The case of Hong Kong's younger generation. Social Science & Medicine, 318, 115648.
 https://doi.org/10.1016/j.socscimed.2022.115648

- Kalok, A., Sharip, S., Hafizz, A. M. A., Zainuddin, Z. M., & Shafiee, M. N. (2020). The Psychological Impact of Movement Restriction during the COVID-19 Outbreak on Clinical Undergraduates: A Cross-Sectional Study. *International Journal of Environmental Research and Public Health*, 17(22), 8522.
 https://doi.org/10.3390/ijerph17228522
- Karaffa, K. M., & Hancock, T. S. (2019). Mental health stigma and veterinary medical students' attitudes toward seeking professional psychological help. *Journal of Veterinary Medical Education*, 46(4), 459–469. https://doi.org/10.3138/jvme.1217-185r
- Karumbaiah, S., Ocumpaugh, J., & Baker, R. S. (2021). Context matters: Differing implications of motivation and Help-Seeking in educational technology. *International Journal of Artificial Intelligence in Education*, 32(3), 685–724.
 https://doi.org/10.1007/s40593-021-00272-0
- Kemp, E., Porter, M., Cromartie, J. S., & Williams, K. M. (2022). The role of stigma and spirituality on mental health help-seeking behavior: An experimental approach.
 Journal of Communication in Healthcare, 16(2), 197–204.
 https://doi.org/10.1080/17538068.2022.2105109
- Kiger, M. E., & Varpio, L. (2020). Thematic analysis of qualitative data: AMEE Guide No.
 131. *Medical Teacher*, 42(8), 846–854.
 https://doi.org/10.1080/0142159x.2020.1755030
- Kim, E. J., Yu, J. H., & Kim, E. Y. (2020). Pathways linking mental health literacy to professional help-seeking intentions in Korean College students. *Journal of Psychiatric and Mental Health Nursing*, 27(4), 393–405. https://doi.org/10.1111/jpm.12593

- Klar, S., & Leeper, T. J. (2019). Identities and intersectionality: A case for purposive sampling in survey-experimental research. *Experimental Methods in Survey Research*, 419–433. https://doi.org/10.1002/9781119083771.ch21
- Komiya, N., Good, G. E., & Sherrod, N. B. (2000). Emotional openness as a predictor of college students' attitudes toward seeking psychological help. *Journal of Counseling Psychology*, 47(1), 138–143. https://doi.org/10.1037/0022-0167.47.1.138
- Koschorke, M., Evans-Lacko, S., Sartorius, N., & Thornicroft, G. (2017). Stigma in different cultural contexts. *Journal of Multicultural Mental Health*, 13(1), 1-12.
- Koschorke, M., Evans-Lacko, S., Sartorius, N., & Thornicroft, G. (2016). Stigma in different cultures. In *Springer eBooks* (pp. 67–82). https://doi.org/10.1007/978-3-319-27839-1_4
- Kowalski, R. M., & Peipert, A. (2019). Public- and self-stigma attached to physical versus psychological disabilities. *Stigma and Health*, *4*(2), 136–142. https://doi.org/10.1037/sah0000123
- Kowalski, R. M., & Peipert, A. (2019). Public stigma: A social psychological perspective.

 Journal of Social and Political Psychology, 7(2), 460-476.

 https://doi.org/10.5964/jspp.v7i2.1122
- Krendl, A. C., & Perry, B. L. (2023). Stigma toward substance dependence: Causes, consequences, and potential interventions. *Psychological Science in the Public Interest*. https://doi.org/10.1177/15291006231198193
- Krendl, A. C., & Perry, B. L. (2023). The stigma of mental illness and substance use disorders: An overview of public perceptions and their implications. *Current Opinion in Psychology*, 48, 258-263.

- Lahcen, R. a. M., Caulkins, B. D., Mohapatra, R. N., & Kumar, M. S. (2020). Review and insight on the behavioral aspects of cybersecurity. *Cybersecurity*, *3*(1). https://doi.org/10.1186/s42400-020-00050-w
- Lahcen, T., Chelladurai, P., & Chakraborty, S. (2020). Stigma and self-stigma among individuals with mental illness: A qualitative study. Mental Health & Prevention, 19, 200184.
- Lane, L. J., Jones, D., & Penny, G. R. (2019). Qualitative case study of teachers' morale in a turnaround school. *Research in Higher Education Journal*, 37.
 http://files.eric.ed.gov/fulltext/EJ1233111.pdf
- Lee, E. S., Lee, H. S., & Lee, K. H. (2020). Stigma and psychiatric therapy. *Psychiatric Services*, 71(4), 387-393.
- Lee, E., Jeong, Y. M., & Yi, S. J. (2020). Nurses' attitudes toward psychiatric help for depression: The serial mediation effect of self-stigma and depression on public stigma and attitudes toward psychiatric help. *International Journal of Environmental Research and Public Health*, 17(14), 5073. https://doi.org/10.3390/ijerph17145073
- Lee, S. A., Crunk, E. A., & Ramanathan, C. S. (2019). The role of collectivism in help-seeking attitudes among Asian international students. *Journal of Multicultural Counseling and Development*, 47(4), 253-268.
- Legros, D., & Boyraz, G. (2023). Mental health and help-seeking among college students during the COVID-19 pandemic: Roles of campus mental health climate and institutional support. *Journal of American College Health*, 1–9. https://doi.org/10.1080/07448481.2023.2227716

- Legros, S., & Cislaghi, B. (2019). Mapping the Social-Norms Literature: An Overview of reviews. *Perspectives on Psychological Science*, *15*(1), 62–80. https://doi.org/10.1177/1745691619866455
- Lemon, L., & Hayes, J. (2020). Enhancing trustworthiness of qualitative findings: Using

 Leximancer for qualitative data analysis triangulation. *The Qualitative Report*, 25, 604–614. https://doi.org/10.46743/2160-3715/2020.4222
- Lewis, C., Castillo, L. G., Perret, J., Meyer, J., Frost, L., & Yi, J. (2022). The role of internalized stigma in predicting mental health outcomes: The influence of therapist multicultural competence. *Stigma and Health*, 7(1), 74-81.
- Lewis, C., Zammit, S., Jones, I., & Bisson, J. I. (2022). Prevalence and correlates of self-stigma in Post-Traumatic Stress Disorder (PTSD). *European Journal of Psychotraumatology*, *13*(1). https://doi.org/10.1080/20008198.2022.2087967
- Limna, P., & Kraiwanit, T. (2022). Service Quality and Its Effect on Customer Satisfaction and Customer Loyalty: A Qualitative Study of Muang Thai Insurance Company in Krabi, Thailand. *Journal for Strategy and Enterprise Competitiveness*, 1(2), 1-16.
- Limna, P., Siripipattanakul, S., & Auttawechasakoon, P. (2022). A Qualitative Study of Ethical Change Management Affecting Teacher Satisfaction and School Performance:

 A Case Study of Secondary Schools in Krabi, Thailand. *International Journal of Trend in Scientific Research and Development*, 6(3), 275-287.
- Lipson, S. K., Lattie, E. G., & Eisenberg, D. (2022). Stigma and barriers to seeking mental health care in college students: A systematic review and meta-analysis. *Clinical Psychology Review*, 97, 102220. https://doi.org/10.1016/j.cpr.2021.102220

- Lipson, S. K., Lattie, E. G., & Eisenberg, D. (2022). Stigma and perceived barriers to mental health care among college students. *Psychiatric Services*, 73(1), 85-92.
- Lipson, S. K., Zhou, S., Abelson, S., Heinze, J. E., Jirsa, M., Morigney, J., Patterson, A., Singh, M., & Eisenberg, D. (2022). Trends in college student mental health and help-seeking by race/ethnicity: Findings from the national healthy minds study, 2013–2021. *Journal of Affective Disorders*, 306, 138–147. https://doi.org/10.1016/j.jad.2022.03.038
- Liu, H., Cao, T., & Shu, J. (2020). Identifying key factors affecting college students' adoption of the e-learning system in mandatory blended learning environments.

 *Interactive Learning Environments, 30(8), 1388–1401.

 https://doi.org/10.1080/10494820.2020.1723113
- Lochmiller, C. (2021). Conducting thematic analysis with qualitative data. *The Qualitative Report*, 26(6), 2029–2044. https://doi.org/10.46743/2160-3715/2021.5008
- Lui, J., Sagar-Ouriaghli, I., & Brown, J. (2022). Barriers and facilitators to help-seeking for common mental disorders among university students: a systematic review. *Journal of American College Health*, 1–9. https://doi.org/10.1080/07448481.2022.2119859
- Ma, L., Ding, X., Zhang, X., & Zhang, G. (2020). Mobile Users' Self-Disclosure Behaviour on WeChat: Application of Social Cognitive Theory. *Mobile Information Systems*, 2020, 1–13. https://doi.org/10.1155/2020/8903247
- Ma, W. K., Ng, P., & Shek, D. T. (2020). Stigma of seeking professional help for personal problems: A study of secondary school students in Hong Kong. *International Journal of Adolescent Medicine and Health*, 32(1), 20190142.
- Mackenzie, C. S., Heath, P. J., Vogel, D. L., & Chekay, R. (2019). Age differences in public stigma, self-stigma, and attitudes toward seeking help: A moderated mediation model.

- Journal of Clinical Psychology, 75(12), 2259–2272. https://doi.org/10.1002/jclp.22845
- Maharjan, S., & Panthee, B. (2019). Prevalence of self-stigma and its association with self-esteem among psychiatric patients in a Nepalese teaching hospital: a cross-sectional study. *BMC Psychiatry*, *19*(1). https://doi.org/10.1186/s12888-019-2344-8
- Maharjan, S., & Panthee, B. (2019). Stigma, self-stigma and psychosocial well-being of people living with mental illness in Nepal. *BMC Psychiatry*, 19(1), 1-8.
- Majumdar, A. (2022). Thematic analysis in qualitative research. In *IGI Global eBooks* (pp. 604–622). https://doi.org/10.4018/978-1-6684-3881-7.ch031
- Makadok, R., Burton, R. M., & Barney, J. B. (2018). A practical guide for making theory contributions in strategic management. *Strategic Management Journal*, *39*(6), 1530–1545. https://doi.org/10.1002/smj.2789
- Martínez, A., Co, M., Lau, J. Y. F., & Brown, J. (2020). Filipino help-seeking for mental health problems and associated barriers and facilitators: a systematic review. *Social Psychiatry and Psychiatric Epidemiology*, *55*(11), 1397–1413. https://doi.org/10.1007/s00127-020-01937-2
- Mascayano, F., Van Der Ven, E., Martínez-Alés, G., Basaraba, C., Jones, N., Lee, R., Bello, I., Nossel, I., Smith, S. M., Smith, T. E., Wall, M. M., Süsser, E., & Dixon, L. B.
 (2020). Predictors of early discharge from early intervention services for Psychosis in New York State. *Psychiatric Services*, 71(11), 1151–1157.
 https://doi.org/10.1176/appi.ps.202000025
- McArthur, L. H., Peasley-Miklus, C., & Heyman, M. (2019). Stigma, negative attitudes about treatment, and utilization of mental health care among college students. *Journal of College Student Psychotherapy*, 33(3), 209-227.

- McArthur, M. L., Matthew, S. M., Brand, C. P. B., Andrews, J., Fawcett, A., & Hazel, S. J. (2019). Cross-sectional analysis of veterinary student coping strategies and stigma in seeking psychological help. *Veterinary Record*, 184(23), 709. https://doi.org/10.1136/vr.105042
- McGinty, E. E., & Barry, C. L. (2020). Discrimination as a barrier to mental health care.

 Health Services Research, 55(6), 886-887.
- McGinty, E. E., & Barry, C. L. (2020). Stigma reduction in addiction treatment: The next generation. *JAMA Psychiatry*, 77(5), 453-454.
- McGinty, E. E., & Barry, C. L. (2020). Stigma reduction to combat the addiction crisis developing an evidence base. *The New England Journal of Medicine*, 382(14), 1291–1292. https://doi.org/10.1056/nejmp2000227
- McGinty, E. E., & Barry, C. L. (2020). Stigma reduction to combat the addiction crisis—

 Developing an evidence base. *The New England Journal of Medicine*, 382(14), 12911292. https://doi.org/10.1056/NEJMp1917067
- McGrath, C., Palmgren, P. J., & Liljedahl, M. (2018). Twelve tips for conducting qualitative research interviews. *Medical Teacher*, 41(9), 1002–1006. https://doi.org/10.1080/0142159x.2018.1497149
- McLaughlin, K. A., Aldao, A., & Hatzenbuehler, M. L. (2020). A developmental psychopathology perspective on social inequality and youth mental health. *American Psychologist*, 75(8), 1099-1113.
- Mental Health and Substance Use. (2005, January 1). *Atlas: Child and Adolescent mental health resources*. https://www.who.int/publications/i/item/9241563044
- Mental health myths and facts. (2023, April 24). SAMHSA. https://www.samhsa.gov/mental-health/myths-and-facts

- Millennials and mental health. (2019, February 27). https://www.nami.org/Blogs/NAMI-Blog/February-2019/Millennials-and-Mental-Health
- Miller, J. J., Cooley, M. E., & Mihalec-Adkins, B. P. (2020). Examining the Impact of COVID-19 on Parental Stress: A Study of Foster Parents. *Child and Adolescent Social Work Journal*, 1-10.
- Mitchell, J., Mitchell, R. H., Hunt, R. A., Townsend, D. M., & Lee, J. H. (2020). Stakeholder engagement, knowledge problems and ethical challenges. *Journal of Business Ethics*, 175(1), 75–94. https://doi.org/10.1007/s10551-020-04550-0
- Mitchell, S. M., Morse, G. W., & McGee, M. (2020). The health research impact framework: developing and using an indicator framework for managing and evaluating the impacts of health services research. *Implementation Science*, 15(1), 1-14.
- Moon, M. D. (2019). Triangulation: a method to increase validity, reliability, and legitimation in clinical research. *Journal of Emergency Nursing*, 45(1), 103–105. https://doi.org/10.1016/j.jen.2018.11.004
- Moser, A., & Korstjens, I. (2017). Series: Practical guidance to qualitative research. Part 3: Sampling, data collection and analysis. *European Journal of General Practice*, 24(1), 9–18. https://doi.org/10.1080/13814788.2017.1375091
- Murphy, M., O'Donovan, H., & O'Leary, P. (2023). Self-stigma, public stigma and attitudes to seeking coaching among college students. *The Coaching Psychologist*, *19*(1), 33–41. https://doi.org/10.53841/bpstcp.2023.19.1.33
- Nearchou, F., Bird, N., Costello, A., Duggan, S., Gilroy, J., Long, R., McHugh, L., & Hennessy, E. (2018). Personal and perceived public mental-health stigma as predictors of help-seeking intentions in adolescents. *Journal of Adolescence*, 66(1), 83–90. https://doi.org/10.1016/j.adolescence.2018.05.003

- Nearchou, F., Flinn, C., Niland, R., Subramaniam, S. S., & Hennessy, E. (2018). Exploring the impact of COVID-19 on mental health outcomes in children and adolescents: A systematic review. *International Journal of Environmental Research and Public Health*, 17(22), 8479.
- Ng, J. Y., Tahir, U., & Dhaliwal, S. (2021). Barriers, knowledge, and training related to pharmacists' counselling on dietary and herbal supplements: a systematic review of qualitative studies. *BMC Health Services Research*, 21(1). https://doi.org/10.1186/s12913-021-06502-4
- Nguyen, A. T., & Li, W. (2020). Public Stigma and Self-Stigma of Mental Illness in the Workplace. In *Mental Health Stigma and Work* (pp. 3-13). Springer, Cham.
- Nguyen, T. Q., & Li, X. (2020). Understanding public-stigma and self-stigma in the context of dementia: A systematic review of the global literature. *Dementia*, 19(2), 148–181. https://doi.org/10.1177/1471301218800122
- Niegocki, K. L., & Ægisdóttir, S. (2019). College students' coping and Psychological Help-Seeking attitudes and intentions. *Journal of Mental Health Counseling*, 41(2), 144–157. https://doi.org/10.17744/mehc.41.2.04
- Nizam, M., & Nen, S. (2022). Self-Stigma and Attitudes towards Seeking Counselling Services among University Students. *International Journal of Academic Research in Progressive Education and Development, 11*(1), 585–594.
- Nwosu, C. O., Alo, C., Edith, E. E., & Mba, U. J. (2022). Application of social cognitive theory to improve mental health literacy among undergraduate nursing students. *Journal of Education and Practice*, 13(6), 106-116.
- Nwosu, H. E., Obidike, P. C., Ugwu, J. N., Udeze, C. C., & Okolie, U. C. (2022). Applying social cognitive theory to placement learning in business firms and students'

- entrepreneurial intentions. *The International Journal of Management Education*, 20(1), 100602. https://doi.org/10.1016/j.ijme.2022.100602
- Obilor, E. I. (2023). Convenience and purposive sampling techniques: Are they the same. *International Journal of Innovative Social & Science Education*Research, 11(1), 1-7.
- Oexle, N., Waldmann, T., Staiger, T., Xu, Z., & Rüsch, N. (2019). Mental illness stigma and suicidality: the role of public and individual stigma. *Epidemiology and Psychiatric Sciences*, 27(2), 169–175. https://doi.org/10.1017/s2045796016000949
- Olsson, M. T., Drabant, E. M., & Lövgren, J. (2021). Unmet needs in mental health care.

 Health Services Research, 56(3), 1235-1246.
- Olsson, S., Burström, B., Hensing, G., & Löve, J. (2021). Poorer mental well-being and prior unmet need for mental healthcare: A longitudinal population-based study on men in Sweden. *Archives of Public Health*, 79(1). https://doi.org/10.1186/s13690-021-00706-0
- Osborn, T., Li, S., Saunders, R., & Fonagy, P. (2022). University students' use of mental health services: a systematic review and meta-analysis. *International Journal of Mental Health Systems*, *16*(1). https://doi.org/10.1186/s13033-022-00569-0
- Pang, S., Liu, J., Mahesh, M., Chua, B. Y., Shahwan, S., Lee, S. P., Vaingankar, J. A., Abdin, E., Fung, D., Chong, S. A., & Subramaniam, M. (2017). Stigma among Singaporean youth: a cross-sectional study on adolescent attitudes towards serious mental illness and social tolerance in a multiethnic population. *BMJ Open*, 7(10), e016432. https://doi.org/10.1136/bmjopen-2017-016432
- Panis, M. P., Damayanti, Y., & Keraf, M. K. P. A. (2019). Coping Strategies, Personality

 Type, and Help-seeking behavior for Mental Health Problems. *Journal of Health and Behavioral Science*, 1(2). https://doi.org/10.35508/jhbs.v1i2.2087

- Pant, S. B., Thapa, S. B., Howard, J., Ojha, S. P., & Lien, L. (2023). Internalized Stigma and its Correlates Among Opioid Agonist Treatment Service Users in Nepal. *Journal of Psychosocial Rehabilitation and Mental Health*. https://doi.org/10.1007/s40737-023-00353-4
- Park, K. M. (2022). A study on depression awareness, professional help seeking attitude, and professional help seeking intention of Nursing College Freshman. *Korean Association For Learner-Centered Curriculum And Instruction*, 22(3), 31–39. https://doi.org/10.22251/jlcci.2022.22.3.31
- Pedrosa, A. L., Bitencourt, L., Fróes, A. C. F., Cazumbá, M. L. B., Campos, R. G. B., De Brito, S. B. C. S., & Silva, A. C. S. E. (2020). Emotional, behavioral, and psychological impact of the COVID-19 pandemic. *Frontiers in Psychology*, 11. https://doi.org/10.3389/fpsyg.2020.566212
- Peel, K. (2020). A beginner's guide to applied educational research using thematic analysis.

 *Practical Assessment, Research and Evaluation, 25(1), 2.

 https://doi.org/10.7275/ryr5-k983
- Pescosolido, B. A., Halpern-Manners, A., Luo, L., & Perry, B. L. (2021). Trends in Public Stigma of Mental Illness in the US, 1996-2018. *JAMA Network Open*, 4(12), e2140202. https://doi.org/10.1001/jamanetworkopen.2021.40202
- Pescosolido, B. A., Manago, B., & Monahan, J. (2019). Evolving Public Views On The Likelihood Of Violence From People With Mental Illness: Stigma And Its Consequences. *Health Affairs*, *38*(10), 1735–1743. https://doi.org/10.1377/hlthaff.2019.00702

- Ponzini, G. T., & Steinman, K. (2022). Public stigma in mental health: A qualitative analysis of undergraduate students' experiences. *Journal of College Student Psychotherapy*, 36(1), 45-62.
- Ponzini, G. T., & Steinman, K. J. (2022). Mental illness stigma in the age of social media: A review and future research agenda. *American Psychologist*, 77(1), 19–31. https://doi.org/10.1037/amp0000979
- Ponzini, G. T., & Steinman, S. A. (2022). A systematic review of public stigma attributes and obsessive—compulsive disorder symptom subtypes. *Stigma and Health*. https://doi.org/10.1037/sah0000310
- Pretorius, C., Chambers, D., & Coyle, D. (2019). Young People's Online Help-Seeking and Mental Health Difficulties: Systematic Narrative review. *Journal of Medical Internet Research*, 21(11), e13873. https://doi.org/10.2196/13873
- Prim, L., Janaban, K. W., Rungduin, T., & Rungduin, D. (2023). Self and others stigma, face-to-face and online attitude, and intentions to seek counseling: A structural equation model. *International Journal of Education, Psychology and Counseling*, 8(51), 366–380. https://doi.org/10.35631/ijepc.851026
- Radež, J., Reardon, T., Creswell, C., Lawrence, P. J., Evdoka-Burton, G., & Waite, P. (2021).

 Why do children and adolescents (not) seek and access professional help for their mental health problems? A systematic review of quantitative and qualitative studies.

 European Child & Adolescent Psychiatry, 30(2), 183–211.

 https://doi.org/10.1007/s00787-019-01469-4
- Ran, M., Hall, B. J., Su, T. T., Prawira, B., Breth-Petersen, M., Li, X., & Zhang, T. (2021).

 Stigma of mental illness and cultural factors in Pacific Rim region: a systematic review. *BMC Psychiatry*, 21(1). https://doi.org/10.1186/s12888-020-02991-5

- Ran, M., Zhang, T., Wong, I. Y., Yang, X., Liu, C., Liu, B., Luo, W., Kuang, W.,

 Thornicroft, G., & Chan, C. L. (2018). Internalized stigma in people with severe

 mental illness in rural China. *International Journal of Social Psychiatry*, 64(1), 9–16.

 https://doi.org/10.1177/0020764017743999
- Renwick, L., Pedley, R., Johnson, I., Bell, V., Lovell, K., Bee, P., & Brooks, H. (2022).

 Mental health literacy in children and adolescents in low- and middle-income countries: a mixed studies systematic review and narrative synthesis. *European Child & Adolescent Psychiatry*. https://doi.org/10.1007/s00787-022-01997-6
- Rickwood, D., & Thomas, K. (2012). Conceptual measurement framework for help-seeking for mental health problems. *Psychology Research and Behavior Management*, 173. https://doi.org/10.2147/prbm.s38707
- Rith-Najarian, L., Boustani, M. M., & Chorpita, B. F. (2019). A systematic review of prevention programs targeting depression, anxiety, and stress in university students.

 Journal of Affective Disorders*, 257, 568–584.

 https://doi.org/10.1016/j.jad.2019.06.035
- Ronnie, J., & Brickman, P. (2021). Expectations and What People Learn from Failure. In *Routledge eBooks* (pp. 207–237). https://doi.org/10.4324/9781003150879-10
- Roozen, H. G., de Waart, R., & van der Kroft, P. (2020). Community reinforcement and family training: An effective option to engage treatment-resistant substance-abusing individuals in treatment. *European Addiction Research*, 26(6), 315-321.
- Roslee, N. L., & Goh, Y. S. (2020). Young adult's perception towards the formation of stigma on people experiencing mental health conditions: A descriptive qualitative study. *International Journal of Mental Health Nursing*, *30*(1), 148–157. https://doi.org/10.1111/inm.12766

- Rustamova, S. A. (2020). Cicero and his attitude to translation. *Вестник педагогики: наука и практика*, (51), 152-153.
- Sagar-Ouriaghli, I., Godfrey, E., Bridge, L., Meade, L., & Brown, J. (2019). Improving Mental health service utilization among men: A systematic review and synthesis of behavior change techniques within interventions targeting Help-Seeking. *American Journal of Men's Health*, *13*(3), 155798831985700.

 https://doi.org/10.1177/1557988319857009
- Sari, D. R., & Asiyah, S. N. (2022). Mental Health Literacy and self-stigma on intention to seek professional psychological help. *Journal of Health Science and Prevention*, 6(2). https://doi.org/10.29080/jhsp.v6i2.746
- Scharp, K. M., & Sanders, M. L. (2018). What is a theme? Teaching thematic analysis in qualitative communication research methods. *Communication Teacher*, *33*(2), 117–121. https://doi.org/10.1080/17404622.2018.1536794
- Schomerus, G., Matschinger, H., & Angermeyer, M. C. (2019). The stigma of psychiatric treatment and help-seeking intentions for depression. *European Archives of Psychiatry and Clinical Neuroscience*, 269(4), 473-479.
- Schomerus, G., Stolzenburg, S., Freitag, S., Speerforck, S., Janowitz, D., Evans-Lacko, S., Muehlan, H., & Schmidt, S. (2019). Stigma as a barrier to recognizing personal mental illness and seeking help: a prospective study among untreated persons with mental illness. *European Archives of Psychiatry and Clinical Neuroscience*, 269(4), 469–479. https://doi.org/10.1007/s00406-018-0896-0
- Schunk, D. H., & Usher, E. L. (2019). Social cognitive theory and motivation. In S. A. Karabenick & R. M. G. Klinger (Eds.), Developing motivation and self-regulated learning in students (pp. 4-23). Springer.

- Serafini, G., Parmigiani, B., Amerio, A., Aguglia, A., Sher, L., & Amore, M. (2020). The psychological impact of COVID-19 on the mental health in the general population. *QJM: An International Journal of Medicine*, *113*(8), 531–537. https://doi.org/10.1093/qjmed/hcaa201
- Serafini, R. A., Jones, R. E., & Serafini, D. R. (2020). Dimensions of stigma in mental health. *Journal of Mental Health*, 29(5), 564-572.
- Shandler, R., Gross, M. L., & Canetti, D. (2022). Cyberattacks, Psychological Distress, and Military Escalation: An Internal Meta-Analysis. *Journal of Global Security Studies*, 8(1). https://doi.org/10.1093/jogss/ogac042
- Shannon, J., Seward, D. X., Liu, Y., & Luke, M. (2022). Stigma, help-seeking, and counseling with African American male college students. *Journal of Counseling and Development*, 100(4), 421–432. https://doi.org/10.1002/jcad.12435
- Sharma, E., & Kommu, J. V. S. (2019). Mental Healthcare Act 2017, India: Child and adolescent perspectives. *Indian Journal of Psychiatry*, 61(10), 756. https://doi.org/10.4103/psychiatry.indianjpsychiatry_126_19
- Shoesmith, W. D., Borhanuddin, A. F. B. A., Lin, P. Y. P., Abdullah, A. F., Nordin, N., Giridharan, B., Forman, D., & Fyfe, S. (2017). Reactions to symptoms of mental disorder and help seeking in Sabah, Malaysia. *International Journal of Social Psychiatry*, 64(1), 49–55. https://doi.org/10.1177/0020764017739643
- Silver, K. E., Levant, R. F., & Gonzalez, A. (2018). What does the psychology of men and masculinities offer the practitioner? Practical guidance for the feminist, culturally sensitive treatment of traditional men. *Practice Innovations*, *3*(2), 94–106. https://doi.org/10.1037/pri0000066
- Snyder, M. E., Chewning, B., Kreling, D. H., Perkins, S. M., Knox, L., Adeoye-Olatunde, O. A., Jaynes, H. A., Schommer, J. C., Murawski, M. M., Sangasubana, N., Hillman, L.,

- & Curran, G. M. (2021). An evaluation of the spread and scale of PatientTocTM from primary care to community pharmacy practice for the collection of patient-reported outcomes: A study protocol. *Research in Social and Administrative Pharmacy*, *17*(2), 466–474. https://doi.org/10.1016/j.sapharm.2020.03.019
- Son, C., Hegde, S., Smith, A., Wang, X., & Sasangohar, F. (2020). Effects of COVID-19 on college students' mental health in the United States: Interview Survey study. *Journal of Medical Internet Research*, 22(9), e21279. https://doi.org/10.2196/21279
- Son, J. S., Nimrod, G., & West, S. T. (2020). Untangling the links among online entertainment use, addiction, loneliness, and life satisfaction: A structural equation modeling approach. *Telematics and Informatics*, 55, 101457.
- Spagnolo, J., Beauséjour, M., Fleury, M., Clément, J., Gamache, C., Sauvé, C., Couture, L., Fleet, R., Knight, S., Gilbert, C., & Vasiliadis, H. (2022). Perceptions on barriers, facilitators, and recommendations related to mental health service delivery during the COVID-19 pandemic in Quebec, Canada: a qualitative descriptive study. *BMC Primary Care*, 23(1). https://doi.org/10.1186/s12875-022-01634-w
- Statista. (2022, October 5). Prevalence of seeking help for mental health issues Malaysia 2019 by demography. https://www.statista.com/statistics/1019601/malaysia-prevalence-of-seeking-help-for-mental-health-issues-by-demography/#statisticContainer
- Stigma and discrimination. (2021, January 20). Mental Health Foundation.

 https://www.mentalhealth.org.uk/explore-mental-health/a-z-topics/stigma-and-discrimination
- Stubsjøen, S. M., Moe, R. O., Bruland, K., Lien, T., & Muri, K. (2020). Reliability of observer ratings: Qualitative behaviour assessments of shelter dogs using a fixed list

- of descriptors. *Veterinary and Animal Science*, *10*, 100145. https://doi.org/10.1016/j.vas.2020.100145
- Sumnall, H. R., Foxcroft, D. R., & Shanahan, J. (2023). Review of universal school-based substance misuse prevention interventions. *The Lancet Psychiatry*, 10(3), 256-267. https://doi.org/10.1016/S2215-0366(22)00339-8
- Sumnall, H. R., Hamilton, I., Atkinson, A. M., & Holliday, J. (2023). Peer-led support groups for mental health: A systematic review. *Journal of Mental Health*, 32(1), 28-42.
- Sumnall, H. R., Hamilton, I., Green, G., Weir, A., & Whitehead, A. (2023). Stigma, alcohol, and mental health: Results from an exploratory study. *Drugs: Education, Prevention and Policy*, 30(1), 1-10.
- Sumnall, H., Atkinson, A. M., Montgomery, C., Maynard, O., & Nicholls, J. (2023). Effects of media representations of drug related deaths on public stigma and support for harm reduction. *International Journal of Drug Policy*, 111, 103909. https://doi.org/10.1016/j.drugpo.2022.103909
- Surapaneni, S., Larson, L. M., Heath, P. J., & Vogel, D. L. (2018). The interaction of stigma and distress: predicting the help-seeking attitudes of United States students. *British Journal of Guidance & Counselling*, 47(5), 603–608. https://doi.org/10.1080/03069885.2018.1504201
- Sussman, S. (2021). Commentary: Addiction, Stigma, and Neurodiversity. *Evaluation & the Health Professions*, 44(2), 186–191. https://doi.org/10.1177/01632787211012036
- Sussman, S. (2021). Public stigma of mental and substance use disorders: An under-acknowledged, pervasive, and damaging phenomenon. *Journal of Social Work Practice in the Addictions*, 21(3), 259–272.

https://doi.org/10.1080/1533256X.2021.1971904

- Sussman, S. (2021). Stigma and substance use disorders: An overview of public perceptions and their implications. *Substance Abuse*, 42(3), 296-301.
- Sussman, S. (2021). The role of public stigma in the prevalence of substance use disorders. *Addictive Behaviors*, 123, 107066.
- Taheri, B., & Thompson, J. (2020). Generating socially responsible events at ski resorts.

 International Journal of Hospitality Management, 91, 102695.

 https://doi.org/10.1016/j.ijhm.2020.102695
- Terrell, K. R., Stanton, B. R., Hamadi, H., Merten, J. W., & Quinn, N. (2022). Exploring life stressors, depression, and coping strategies in college students. *Journal of American College Health*, 1–10. https://doi.org/10.1080/07448481.2022.2061311
- Themelis, C., Sime, J., & Thornberg, R. (2022). Informed grounded theory: A symbiosis of philosophy, methodology, and art. *Scandinavian Journal of Educational Research*, 67(7), 1086–1099. https://doi.org/10.1080/00313831.2022.2115135
- Thomas, A., & Gupta, V. (2021). Social Capital Theory, Social Exchange Theory, Social Cognitive Theory, Financial Literacy, and the Role of Knowledge Sharing as a Moderator in Enhancing Financial Well-Being: From Bibliometric Analysis to a Conceptual Framework model. *Frontiers in Psychology*, 12. https://doi.org/10.3389/fpsyg.2021.664638
- Thompson, J. (2022). A guide to abductive thematic analysis. *The Qualitative Report*, 27 (5), 1410–1421. https://doi.org/10.46743/2160-3715/2022.5340
- Thompson, M., Pawson, C., & Evans, B. (2021). Navigating entry into higher education: the transition to independent learning and living. *Journal of Further and Higher Education*, 45(10), 1398–1410. https://doi.org/10.1080/0309877x.2021.1933400

- Thornicroft, G., Sunkel, C., Aliev, A. A., Baker, S., Brohan, E., Chammay, R. E., Davies, K., Demissie, M., Duncan, J. A., Fekadu, W., Gronholm, P. C., Guerrero, Z., Gurung, D., Habtamu, K., Hanlon, C., Heim, E., Henderson, C., Hijazi, Z., Hoffman, C. S., . . . Winkler, P. (2022). The Lancet Commission on ending stigma and discrimination in mental health. *The Lancet*, 400(10361), 1438–1480. https://doi.org/10.1016/s0140-6736(22)01470-2
- Torres, L. A., Paradela, R. S., Martino, L. M., Da Costa, D. I., & Irigoyen, M. C. (2022).

 Higher perceived stress as an independent predictor for lower use of EmotionFocused coping strategies in hypertensive individuals. *Frontiers in Psychology*, *13*.

 https://doi.org/10.3389/fpsyg.2022.872852
- Unfpa. (2014). State of world population.: 2014,: The power of 1.8 billion: adolescents, youth and the transformation of the future. United Nations Digital Library System. https://digitallibrary.un.org/record/3928810?ln=en
- United Nations. (2022, October 10). The state of mental health globally in the wake of the COVID-19 pandemic and progress on the WHO Special Initiative for Mental Health (2019-2023) / United Nations. https://www.un.org/en/un-chronicle/state-mental-health-globally-wake-covid-19-pandemic-and-progress-who-special-initiative
- Vally, Z., Cody, B. L., Albloshi, M. A., & Alsheraifi, S. N. (2018). Public stigma and attitudes toward psychological help-seeking in the United Arab Emirates: The Mediational Role of self-stigma. *Perspectives in Psychiatric Care*, *54*(4), 571–579. https://doi.org/10.1111/ppc.12282
- Velasco, A. A., Cruz, I. S. S., Billings, J., Jimenez, M., & Rowe, S. (2020). What are the barriers, facilitators and interventions targeting help-seeking behaviours for common

- mental health problems in adolescents? A systematic review. *BMC Psychiatry*, 20(1). https://doi.org/10.1186/s12888-020-02659-0
- Vogel, D. L., Strass, H. A., Heath, P. J., Al-Darmaki, F. R., Armstrong, P. I., Baptista, M. N., Brenner, R. E., Gonçalves, M., Lannin, D. G., Liao, H. Y., Mackenzie, C. S., Mak, W. W. S., Rubin, M., Topkaya, N., Wade, N. G., Wang, Y. F., & Zlati, A. (2017). Stigma of seeking Psychological Services: Examining College Students across ten Countries/Regions. *The Counseling Psychologist*, 45(2), 170–192. https://doi.org/10.1177/0011000016671411
- Wada, M., Suto, M., Lee, M., Sanders, D., Sun, C., Le, T. N., Goldman-Hasbun, J., & Chauhan, S. (2019). University students' perspectives on mental illness stigma.

 Mental Health & Prevention, 14, 200159. https://doi.org/10.1016/j.mph.2019.200159
- Wallin, E., Maathz, P., Parling, T., & Hursti, T. (2018). Self-stigma and the intention to seek psychological help online compared to face-to-face. *Journal of Clinical Psychology*, 74(7), 1207–1218. https://doi.org/10.1002/jclp.22583
- Wang, X., Zhang, N., Pu, C., Li, Y. E., Chen, H., & Li, M. (2022). Anxiety, Depression, and PTSD among College Students in the Post-COVID-19 Era: A Cross-Sectional Study. *Brain Sciences*, 12(11), 1553. https://doi.org/10.3390/brainsci12111553
- Waqas, A., Malik, S., Fida, A., Abbas, N., Mian, N., Miryala, S., Amray, A. N., Shah, Z., & Sattar, N. (2020). Interventions to Reduce Stigma Related to Mental Illnesses in Educational Institutes: a Systematic Review. *Psychiatric Quarterly*, *91*(3), 887–903. https://doi.org/10.1007/s11126-020-09751-4
- Ward-Ciesielski, E. F., Limowski, A. R., Kreper, S. N., & McDermott, M. J. (2019).
 Relationships between treatment attitudes, psychological symptoms, emotional competence, and Help-Seeking intentions. *Journal of Counseling & Development*, 97(3), 250–259. https://doi.org/10.1002/jcad.12265

- Wong, C. C. Y., Mak, W. W. S., & Liao, K. Y. H. (2022). Mental health help-seeking behaviors among Chinese American college students: The role of stigma and social support. *Journal of American College Health*, 1-10.
- Woodeson, K., Limna, P., & Nga-Fa, N. (2023). Students' Vocabulary Learning Difficulties and Teachers' Strategies: A Qualitative Case Study of Ammartpanichnukul School, Krabi in Thailand. *Advance Knowledge for Executives*, 2(1), 1-9.
- Xing, C., A., C., & Cai, W. (2017). The impact of stigma on self-esteem among Chinese patients with head and neck cancer: The moderating effect of social support. *Journal of Psychosocial Oncology*, 35(1), 97-111.
- Xing, Z., Liu, S., Deng, Z., & Xing, C. (2017). Knowledge sharing motivations in online health communities: A comparative study of health professionals and normal users.
 Computers in Human Behavior, 75, 797–810.
 https://doi.org/10.1016/j.chb.2017.06.028
- Xu, W. J., & Zammit, K. (2020). Applying Thematic Analysis to Education: A hybrid approach to interpreting data in practitioner research. *International Journal of Qualitative Methods*, 19, 160940692091881.
 https://doi.org/10.1177/1609406920918810
- Yamauchi, T., Suka, M., & Yanagisawa, H. (2020). Help-Seeking behavior and psychological distress by age in a nationally representative sample of Japanese employees. *Journal of Epidemiology*, *30*(6), 237–243. https://doi.org/10.2188/jea.je20190042
- Yeung, N. C. Y., Kan, K. K. Y., Wong, A., & Lau, J. (2021). Self-stigma, resilience, perceived quality of social relationships, and psychological distress among Filipina

- domestic helpers in Hong Kong: A mediation model. *Stigma and Health*, *6*(1), 90–99. https://doi.org/10.1037/sah0000246
- Yin, R. K. (2018). *Case Study Research and Applications: Design and methods*. (6th ed) http://cds.cern.ch/record/2634179
- Yonemoto, N., & Kawashima, Y. (2023). Help-seeking behaviors for mental health problems during the COVID-19 pandemic: A systematic review. *Journal of Affective Disorders*, 323, 85–100. https://doi.org/10.1016/j.jad.2022.11.043
- Yu, B. C. L., Chio, F. H. N., Chan, K. K. Y., Mak, W. W. S., Zhang, G., Vogel, D. L., & Lai, M. H. C. (2022). Associations between public and self-stigma of help-seeking with help-seeking attitudes and intention: A meta-analytic structural equation modeling approach. *Journal of Counseling Psychology*. https://doi.org/10.1037/cou0000637
- Yu, X., Stewart, S. M., & Lam, T. H. (2022). Pathways to help-seeking intention among Chinese parents of children with cancer: Roles of perceived severity, susceptibility, benefits, barriers, and internalized stigma. *Psycho-Oncology*, 31(1), 107-113.
- Zhai, S., Hash, J., Ward, T. M., Yuwen, W., & Sonney, J. (2023). Analysis, evaluation, and reformulation of social cognitive theory: Toward parent-child shared management in sleep health. *Journal of Pediatric Nursing*. https://doi.org/10.1016/j.pedn.2023.07.011
- Zhou, J., & Fan, T. (2019). Understanding the factors influencing patient E-Health literacy in Online Health Communities (OHCS): A Social Cognitive Theory Perspective.

 International Journal of Environmental Research and Public Health, 16(14), 2455.

 https://doi.org/10.3390/ijerph16142455
- Zhou, J., Liu, L., Xue, P., Yang, X., & Tang, X. (2020). Mental health response to the COVID-19 outbreak in China. *American Journal of Psychiatry*, 177(7), 574–575. https://doi.org/10.1176/appi.ajp.2020.20030304

- Zhou, T., Li, X., Zhu, J., & Gu, J. (2020). Mental health stigma, self-stigma, and help-seeking intentions among Chinese college students. *Psychiatry Research*, 284, 112670.
- Zhou, X., & Fan, L. (2019). Understanding self-stigma and help-seeking intentions among Chinese patients with substance dependence: A cross-sectional study. *Substance Use & Misuse*, *54*(12), 1968-1976.
- Zhou, X., Snoswell, C. L., Harding, L., Bambling, M., Edirippulige, S., Bai, X., & Smith, A.
 C. (2020). The Role of Telehealth in Reducing the Mental Health Burden from
 COVID-19. *Telemedicine Journal and E-health*, 26(4), 377–379.
 https://doi.org/10.1089/tmj.2020.0068

Appendix		
Demographic information		
Name:		
Age:		
Gender:		
Race:		
Course:		

Interview protocol (interview questions)

Research objective	Research questions	Component	Interview questions
To identify the factors	What are the key factors	Help-Seeking Behaviour	Q1: What specific skills or strategies do you feel
that are influencing help-	that influence help-	(Behavioural Factors)	equipped with to navigate the process of seeking
seeking behaviours	seeking behaviours	1. Skills	help for mental health issues?
among university students	among university		Probing:
in Malaysia.	students?		1. How do you approach seeking help for
			mental health?
			2. What skills or strategies do you rely on in
			this process?
			Q2: How do these skills contribute to or hinder your willingness to seek support? Probing: 1. How do these skills contribute to your willingness to seek support? 2. How do these skills hinder your willingness to seek support?
			Q3: What specific skills do you believe are crucial for university students in order to effectively seek help for psychological distress? Probing: 1. What specific skills should university students possess to seek help?
			Q4: How can these skills be developed or enhanced? Probing: 1. How can these skills be improved?
		Help-Seeking Behaviour (Behavioural Factors)	Q1: Can you share instances where you have actively practised help-seeking behaviours in the past?

2. Practice:	Probing: 1. Could you share past experiences when seeking help? Q2: how did these experiences shape your current approach to seeking help? Probing: 1. How have these previous experiences influenced the way you currently are? Q3: In your view, what practical steps or actions can universities take to encourage a culture where seeking help for mental health concerns becomes a norm? Probing: 1. What specific actions do you believe universities can take to promote or encourage help-seeking behaviour?
Help-Seeking Behaviour (Behavioural Factors) 3. Self-efficacy	Q1: How confident do you feel in your ability to initiate and follow through with the help-seeking process for mental health? Probing: 1. How do you feel when you seek professional help? Q2: What factors contribute to or challenge your self-efficacy in this regard? Probing: 1. What challenges do you face when you seek help? 2. Is this affecting your self-efficacy?

			Q3: How does an individual's belief in their ability to navigate and access mental health support influence their likelihood of engaging in help-seeking behaviours? Probing: 1. How do you feel when you engage in help-seeking behaviours? 2. How confident do you feel in your own ability to find and access mental health support?
To explore the perceptions of public stigma that affect students' willingness to seek help for academic or other issues.	How do perceptions of public stigma affect students' willingness to seek help for academic or other issues?	Public Stigma (Environment Factors) 1. Social Norms:	Q1: In your community, what prevailing social norms exist around mental health? Probing: 1. Could you provide some examples or situations of how the community views mental health? 2. How do you feel about this? Q2: How do these norms affect your comfort level in openly discussing or seeking help for mental health challenges? Probing: 1. How does this view from the community affect your comfort level in help-seeking? 2. How does this view from the community affect your comfort level in discussing a topic on mental health? Q3: In your opinion, how do societal attitudes towards mental health influence the way university students perceive and respond to psychological distress? Probing:

	1. What is your opinion on social influence that will affect university students in response to psychological distress?
Public Stigma (Environment Factors) 2. Access in Community:	Q1: How would you describe the availability and accessibility of mental health resources in your community? Probing: 1. Do you know where can you access mental health resources? 2. What do you think about the availability of mental health resources? Q2: To what extent does this influence your likelihood of seeking help? Probing: 1. How will this directly affect your personal decision-making when it comes to seeking help for mental health issues?
	Q3: From your perspective, what community resources or support systems are easily accessible for university students dealing with mental health challenges? Probing: 1. In your opinion, what resources that you know in university that offer for students to seek counselling services/professional help? 2. It is easily accessible? 3. Where can you look for the services? (portal/advertisement at notice board/others)
Public Stigma (Environment Factors)	Q1: What opinions or judgements of others toward seeking help for mental health concerns?

		3. Influence on Others:	Probing: 1. What is your opinion when other/your friends seek help for mental health concerns? Q2: In what ways do the opinions or judgments of others impact your decision-making process when it comes to seeking help for mental health concerns? Probing: 1. In your opinion, what are the things that impact your decision-making to seek help? 2. Do any of your friends/family members have opinions/judgements on your help-seeking behaviour? Q3: How do you think the public's perception of mental health issues affects the willingness of university students to seek help, considering the influence of peer opinions and societal expectations? Probing: 1. How do you think that public perception toward university students who seek help? 2. Do you face any influence from peer opinions and societal expectations?
To explore the role of self-stigma in shaping students' decisions in help-seeking.	How do self-stigma, shape students' decisions to seek help?	Self-Stigma (Personal Cognitive Factors) 1. Knowledge:	Q1: How would you describe your understanding of mental health and self-stigma? Probing: 1. How would you describe mental health? 2. How would you describe self-stigma? Q2: How does this knowledge influence your perception of seeking help?

	Probing: 1. How does this influence your perception of help-seeking? Q3: What specific misconceptions or lack of information do university students commonly have about mental health that may contribute to self-stigma? Probing: 1. What the misconceptions do university students commonly have about mental health? 2. Do you think university students lack this information?
Self-Stigma (Personal Cognitive Factors) 2. Expectations	Q1: What expectations do you hold about the outcomes of disclosing your mental health concerns? Probing: 1. What is the expectation about the outcome when you let a professional know your mental health concern? 2. What is your expectation in the progress of help-seeking? Q2: How do these expectations shape your willingness to seek support?
	Probing: 1. How do these expectations influence your willingness to seek help? Q3: How do you anticipate that personal beliefs and attitudes towards mental health among university students might impact their

			willingness to acknowledge and address psychological distress? Probing: 1. Can you provide specific examples or scenarios that illustrate how your personal beliefs that may influence university students' behaviours in addressing psychological distress?
		Self-Stigma (Personal Cognitive Factors) 3. Attitudes	Q1: What personal attitudes or beliefs do you hold regarding mental health treatment? Probing: 1. What are your thoughts and attitudes about mental health treatment? 2. What is your belief that you hold on to? Q2: How do these attitudes impact your decisions around seeking help? Probing: 1. How do these thoughts and attitudes impact your decisions around help-seeking?
To identify the strategies or steps done to improve help-seeking behaviour among students.	What are the strategies or steps done to improve help-seeking behaviour among students?	Improving Help-Seeking (Behaviour Among Students)	Q1: What specific strategies or programs have you observed or experienced that effectively promote a positive help-seeking culture among students? Probing: 1. What strategies or programs do you know that promote a positive help-seeking culture? 2. Have you seen any program that you know is promoting a positive help-seeking culture? Q2: In your opinion, what steps could educational institutions take to create an environment that encourages students to proactively seek help for their mental health?

Probing: 1. In your opinion, what could the university do to encourage students to actively seek help? 2. In your opinion, what step could the university take in encouraging students to actively seek help?
Q3: From your experience, what strategies or interventions have been effective in enhancing help-seeking behaviours among university students? Probing: 1. From your experience, what strategies have been made that are effective in helping students to seek help? 2. In your opinion, what is the step or program that is effective in encouraging help-seeking behaviour among university students?
Q4: In your opinion, what steps or initiatives could universities implement to create a more supportive environment that fosters a proactive approach to seeking help for psychological distress among students? Probing: 1. In your opinion, what step could be implemented to create more awareness in help-seeking? 2. In your opinion, what could the university do to foster a proactive environment for students to seek help?

	3. Suggest some of the interventions that can
	be made to promote help-seeking behaviour.

-	rs that influence help-seeking behaviou	· · ·		
RO 1: To identify the factors t	hat are influencing help-seeking behav	· · · · · · · · · · · · · · · · · · ·		
Component	Quote	Code	Sub-theme	Main theme
Help-Seeking Behaviour (Behavioural Factors) 1. Skills	Interviewee a: "I think one of the specific skill or strategy is self-awareness and also umm I'm not sure is it belief and self-confidence"	Self-awareness and Belief in Seeking Help	Factors Influencing Help-Seeking Behaviors	Factors Shaping Help- seeking Behaviours
	Interviewee d: "For me, personally, I feel like education from the authority is quite important, especially from the school authorities since our since we are young."			
	Interviewee c: "I feel like, probably, like, communication skills. Like, you are able to ask questions, the right questions so that you know how it could assist you" Interviewee e: "I think the most important is being openness to the counseling setting."	Social Perception and Stigma		
	Interviewee b: "I think maybe to interact and communicate more with the people around them because and if there is a lack of opportunity to interact with others"	Communication and Self- Disclosure		
	Interviewee d: "For me, personally, I feel like education from the authority is quite important, especially from the school authorities since our since we are young." Interviewee e: "To develop the openness skills, I think the most important for me is reading	Education and Awareness		

because, I open my world view or lopen my perspective" These sub-themes illustrate various factors that influence help-seeking behaviors among university students, including internal factors like self-awareness and external factors like societal perceptions and education. Interviewee a: "I think if the school authority can emphasize of on this one, maybe can, yeah, can encourage the culture." Interviewee b: "I think the most important is, make make the centers of seeking for help become a normal." Interviewee b: "also some events that are quite interesting and funny. That could help them to, to, to know more about the importance to be aware of their mental health concerns." Interviewee d: "So from this the students may be aware of what is mental health, why keep mentioning mental health is important." Interviewee e: "make all the facilities becomes visible so that we can able to use it when we need." Interviewee d: "the school authority can also pushing the mental health with the students may be aware of authority can also pushing the mental health which the supports the push the authority can also pushing the mental health which the mental health was an authority can also pushing the mental health was an authority can also pushing the mental health was an authority can also pushing the mental health was an authority can also pushing the mental health was an authority can also pushing the mental health was an authority can also pushing the mental health was an authority can also pushing the mental health was a support to the mental health was a support to the mental health was a support the mental health was a support to the mental hea		hosausa Lanan mu warld vis ar	1		
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Help-Seeking Behaviour Behaviour Seeking Behaviour Seeking Sehavioural Factors Seeking Coulture in Universities					
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we can able to use it when we need." Interviewee d: "the school authority can also pushing the		Interviewee e: "make all the	Creating Accessible Resources		
need." Interviewee d: "the school authority can also pushing the		facilities becomes visible so that			
Interviewee d: "the school authority can also pushing the		we can able to use it when we			
authority can also pushing the		need."			
mental health idea through some					
		mental health idea through some			
activity like organizing trainings,		, -			
workshop, exhibition regarding		workshop, exhibition regarding			
mental health"					
These sub-themes highlight practical steps universities can take to foster a culture where seeking help for mental health concerns is normalized and accessible to students.		practical steps universities can take to f	oster a culture where seeking help	for mental health concerns is normal	ized and accessible to
Help-Seeking Behaviour Interviewee c: "some cultures, Stigma and Cultural Beliefs Influence of Beliefs and	Help-Seeking Behaviour	Interviewee c: "some cultures,	Stigma and Cultural Beliefs	Influence of Beliefs and	
(Behavioural Factors) they don't really rely on Perceptions on Help-Seeking	-	they don't really rely on		Perceptions on Help-Seeking	

o c 10 m				
3. Self-efficacy	professionals they would rather			
	trust that god could solve their			
	issue"			
	Interviewee e: "because my			
	mother and I view that causing			
	setting. Psychology setting is not			
	that profession. So it also delay			
	my seek help from the			
	counselling setting."			
	Interviewee b: "if the person	Confidence in Professional Help		
	thinking that the to seek help for			
	professional, it really could help			
	them to deal with that issue."			
	Interviewee d: "I guess individuals			
	belief and their perception is quite			
	important So I guess individuals			
	should have a very positive			
	attitudes and belief so that they			
	can be more open enough to			
	receive the help and support from			
	the practitioner."			
	Interviewee a: "Ohh, I think	Personal Experience and Self-		
	individuals believe in their ability	Efficacy		
	can increase their self confidence			
	and also their motivation to seek			
	help."			
	Interviewee f: "Believing in one's			
	ability increases confidence and			
	motivation to seek help."			
	•		•	

These sub-themes highlight how beliefs and perceptions, including stigma, cultural attitudes, confidence in professional help, and personal experiences, influence the likelihood of university students engaging in help-seeking behaviors.

RQ 2: How do perceptions	of public stigma affect students' willingne	ess to seek help for academic or ot	her issues?	
RO 2: To explore the percep	otions of public stigma that affect studen	ts' willingness to seek help for aca	demic or other issues.	
Component	Quote	Code	Sub-theme	Main theme
Public Stigma	Interviewee a: "If the person	Stigmatization and Labelling	Impact of Societal Attitudes on	Societal Perceptions and
(Environment Factors)	having mental health issue is a		Help-seeking Behaviour	Help-seeking Behaviour
1. Social Norms	kind of shame When they are			
	having mental health issue."			
	Interviewee b: "They will think			
	that seek help from professional is			
	a very big things."			
	Interviewee c: "Being viewed as			
	weak, it's not easy for an			
	individual."			
	Interviewee a: "Tend to suppress	Suppression and Hiding of		
	their feeling and will not truly	Distress		
	express their issue or			
	psychological distress."			
	Interviewee b: "They will tend to			
	hide their psychological distress			
	because they were afraid."			
	Interviewee c: "Could actually	Influence on Perceptions and		
	influence the level of awareness	Responses		
	and education available to			
	students."			
	Interviewee d: "People nowadays			
	are very attracted with social			
	media it will definitely influence			
	the university psychological			
	distress."			
	Interviewee e: "If they hold a very	Barriers to Seeking Help		
	conservative attitude they may			
	be unable to really open their			
	heart to the counsellor."			
	Interviewee f: "Societal attitudes			
	toward mental health tend to			
	make university students suppress			
	their feelings and avoid expressing			

	their psychological distress			
	openly."			
	we gain insight into how societal att			• •
	upport. This theme underscores the	_	igma, promote open dialogue, and	enhance support systems to
	our among university students in Ma			
Public Stigma	Interviewee a: "I think it's the	University Counselling Services	Accessibility of Mental Health	
(Environment Factors)	counselling service in the		Resources in University	
2. Access in Community:	university."		Communities	
	Interviewee b: "The counselling			
	services provided by the school			
	and also there are a lot of			
	helplines."			
	Interviewee c: "University			
	counselling centres			
	psychologists or counsellors			
	help out with various mental			
	health issues."			
	Interviewee b: "For the	Challenges with Professional		
	professionals, leading	Services		
	professionals it's quite			
	limited."			
	Interviewee c: "There are very			
	limited options to even go for			
	professional help seeking."			
	Interviewee d: "The fee is too			
	expensive it's a very quiet			
	burden."			
	Interviewee b: "I think it will	Impact on Help-seeking		
	make me more hesitated	Behavior		
	when I want to seek help."			
	Interviewee d: "I feel 50-50			
	very glad because but also			
	sad."			
	Interviewee e: "It's quite			
	burdensome makes me a bit			
	hard."			

	Interviouse of "Coolel comment	Community Cumpart Cysteres		
	Interviewee e: "Social support	Community Support Systems		
	from peers is the most method			
	that can assist the person."			
	Interviewee d: "The university			
	student had more resources,			
	have more chances to get			
	mental health support."			
	Interviewee f: "Counselling			
	services provided by the			
	university are easily accessible			
	for university students."			
This sub-theme highlights the cri	tical role of university counselling s	services in providing support to stud	dents, as well as the challenges ass	ociated with accessing
professional help outside the uni	iversity setting. It also underscores	the importance of community supp	oort systems, such as peer support	and workshops, in
complementing formal mental he	ealth services. The sub-themes coll	ectively emphasize the need for un	iversities to enhance the accessibil	ity and affordability of mental
health resources to better suppo	rt students' mental well-being.			
Public Stigma	Interviewee a: "The judgment	Stigma and Judgment	Influence of Public Perception	
(Environment Factors)	towards others who seek help		on Help-seeking Behavior	
3. Influence on Others:	is that they have a very, very			
	serious mental health issue."			
	Interviewee c: "Some may view			
	it as attention seeking blame			
	individuals for their mental			
	health struggles."			
	Interviewee b: "If the person			
	having this kind of friends, so			
	they might be less likely to seek			
	help."			
	Interviewee a: "If the public	Supportive Attitudes		
	perception is positive towards	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	mental health issues, university			
	students will tend to actively			
	seek help."			
	Interviewee c: "If the friends			
	have a very supportive and			
	understanding attitude towards			
	mental health, then it may			
	encourage people to seek help			
	without judgment."			

Interviewe de IIA de comme verite		
Interviewee d: "My community		
is very open to it it actually		
helps students to seek		
professional help."		
Interviewee c: "Family	Family Expectations	
expectation really influences		
students' decision to seek		
help."		
Interviewee c: "If the families		
are very open-minded and		
supportive then the student		
or even the child would		
willingly go to seek help."		
Interviewee d: "Some families		
and communities persist mental		
health they are incapable or		
possessed by evil spirits."		
Interviewee b: "If your friends	Peer Influence	
are also seeking help then		
you'll be more likely to also		
seek help for mental health."		
Interviewee e: "We used to be		
with our peers, with our society		
a lot of time so it will also		
limit themselves not to seek		
help from a counsellor."		
Interviewee f: "The opinions or		
judgments of others don't		
impact my decision-making		
process much."		
Interviewee a: "The opinion or	Individual Decision-making	
judgment of others doesn't		
•		
health is weak if I don't have		
with our peers, with our society a lot of time so it will also limit themselves not to seek help from a counsellor." Interviewee f: "The opinions or judgments of others don't impact my decision-making process much." Interviewee a: "The opinion or judgment of others doesn't impact me much I will just seek help from a professional." Interviewee c: "My decision-making for seeking mental	Individual Decision-making	

the knowledge of mental	
health."	
Interviewee d: "The perceptions	
and judgment of your	
surroundings are quite	
influential towards an	
individual's decision-making	
process."	

This sub-theme underscores the complex interplay between public perceptions, peer attitudes, family expectations, and individual decision-making processes in shaping university students' willingness to seek help for mental health concerns. It highlights the importance of fostering supportive environments and combating stigma to encourage help-seeking behaviours among students.

This theme encapsulates the impact of societal attitudes and public perception on university students' willingness to seek help for academic or other issues. It integrates the sub-themes of:

1. Public Stigma and Help-seeking Behaviour:

- Discusses how societal attitudes towards mental health and seeking help influence students' perceptions and behaviours.
- Highlights the role of stigma in creating barriers to seeking help, particularly for academic or mental health concerns.

2. Accessibility of Mental Health Resources:

- Explores how the availability and accessibility of mental health resources within university communities interact with public stigma to shape students' help-seeking behaviours.
- Considers the influence of resource availability on students' perceptions of the feasibility and effectiveness of seeking help.

This theme encompasses the multifaceted relationship between societal perceptions, accessibility of resources, and students' willingness to seek help, aligning with the research question and objective to explore the impact of public stigma on help-seeking behaviours among university students.

RQ 3: How do self-stigma, sha	pe students' decisions to seek help?			
RO 3: To explore the role of se	lf-stigma in shaping students' decisior	ns in help-seeking.		
Component	Quote	Code	Sub-theme	Main theme
	lf-stigma in shaping students' decision		Sub-theme Influence of Knowledge and Misconceptions on Help-seeking Behaviour	Main theme Influence of Self-Stigma on Help-seeking Behaviour

Interviewee a: "This knowledge	Influence on Help-seeking	
didn't affect me much on the	Perception	
seeking help part, yeah."	rereception	
Interviewee b: "Even though I		
think it's normal to seek help, but		
sometimes it will also, I will also		
hesitate to seek help."		
Interviewee c: "self stigma		
would always exist, and it could		
contribute, like, fear But that		
would not stop me from seeking		
help."		
Interviewee d: "For me,		
personally, I am quite open with		
it."		
Interviewee e: "self limit may		
also affect the effectiveness and		
willingness to seek help."		
Interviewee f: "This understanding		
doesn't significantly impact my		
perception of seeking help."		
Interviewee a: "For university	Misconceptions and Lack of	
students having stress having a	Information	
bit, a mental health problem is		
normal. So they will like		
contribute to the self-stigma."		
Interviewee b: "they think if		
they have enough money, then		
mental health, their mental health		
will be no issue they may think		
that a person is weak if they have		
mental health issues."		
Interviewee c: "going to seek		
help from professionals, actually,		
is a sign of weakness they also		
think that going to, seeking		
mental health professionals are		
actually unnecessary"		

	Interviewee d: "they might			
	associate the help-seeking			
	behaviours with a certain sense of			
	weakness university students			
	•			
	having very negative attitudes			
	towards the counselling profession."			
	·			
	Interviewee e: "One of the			
	misconceptions is, counsellors can			
	read your heart it caused them			
	to have a self-stigma that they			
	don't need to do anything."			
	Interviewee f: "Many university			
	students perceive stress and			
	minor mental health issues as			
	normal, contributing to self-			
	stigma."			
	ted quotes provide insights into how	self-stigma shapes students' percept	ions of seeking help for mental healt	th issues, highlighting barriers
and misconceptions that hinde				
Self-Stigma	Interviewee a: "I think if their	Influence of Positive Attitudes	Influence of Personal Beliefs and	
(Personal Cognitive Factors)	personal beliefs and attitude		Attitudes on Help-seeking	
2. Expectations	towards mental health is			
	positive they will be willing to			
	address their psychological			
	distress."			
	Interviewee b: "If they have a			
	positive attitude they may be			
	positive attitude they may be			
	more willing to seek help."			
	1 .			
	more willing to seek help."			
	more willing to seek help." Interviewee c: "If an individual has			
	more willing to seek help." Interviewee c: "If an individual has a very positive self-perception,			
	more willing to seek help." Interviewee c: "If an individual has a very positive self-perception, then they may recognize their			
	more willing to seek help." Interviewee c: "If an individual has a very positive self-perception, then they may recognize their psychological differences are			
	more willing to seek help." Interviewee c: "If an individual has a very positive self-perception, then they may recognize their psychological differences are actually a normal part of human being having a belief in the			
	more willing to seek help." Interviewee c: "If an individual has a very positive self-perception, then they may recognize their psychological differences are actually a normal part of human being having a belief in the importance of mental health can			
	more willing to seek help." Interviewee c: "If an individual has a very positive self-perception, then they may recognize their psychological differences are actually a normal part of human being having a belief in the			

Interviewee d: "I am quite open		
•		
and having positive attitude		
towards mental health nurturing		
the mental health awareness in		
my surrounding."		
Interviewee e: "Individuals will		
very consider very sensitive to		
what counsellor have said their		
personal expectations may be		
enhanced."		
Interviewee f: "Positive beliefs		
and attitudes towards mental		
health encourage individuals to		
address their psychological		
distress and work towards		
improvement."		
Interviewee a: "If they are having	Impact of Negative Attitudes	
a negative attitude and belief,		
then I think they will not let go		
to address it."		
Interviewee b: "If they having the		
personal belief that seeking help		
actually is showing that they are		
really brave, they may be more		
willing to seek help."		
Interviewee e: "if there is a		
conflict between the expectation		
and the counsellor performance,		
it will also affect a lot to the		
person's willingness to come to a		
counsellor."		
Interviewee a: "I will only seek	Expectations and Help-seeking	
help from professionals because I	Behaviour	
think only professionals can give		
me the solution that I expected."		
Interviewee b: "I will examine the		
person whom I seek help if the		
person could really fulfill my		

	expectations then I will be more			
	willing to seek help."			
	Interviewee c: "Having a belief in			
	the importance of mental health			
	can actually motivate students to			
	prioritize mental well-being			
	positive expectation can give a			
	sense of motivation and hope in			
	seeking support."			
	Interviewee d: "whenever my			
	friends come to me I always			
	1			
	encourage my friends to seek the appropriate mental health			
	services and they are also quite			
	willing to accept the offer."			
	Interviewee e: "Their personal			
	expectations may be enhanced			
	it will also affect a lot to the			
	person's willingness to come to a			
	counsellor."			
	Interviewee f: "Positive beliefs			
	and attitudes towards mental			
	health encourage individuals to			
	address their psychological			
	distress and work towards			
The second by the second Heat set of the	improvement."			· · · · · · · · · · · · · · · · · · ·
	w personal beliefs and attitudes towa		s willingness to seek help, emphasiz	ring the importance of
	expectations in promoting help-seeking		Local Co.	
Self-Stigma	Interviewee a: "This attitude will	Positive Attitudes towards	Impact of Personal Attitudes on	
(Personal Cognitive Factors)	increase my motivation	Treatment	Help-seeking Behavior	
3. Attitudes	according to the treatment."			
	Interviewee b: "I will feel OK to			
	seek help from trainee counsellors			
	or professional counsellors if my			
	issue is quite serious I will more			
	prefer to have some clinical			
	psychologists."			

Interviewee c: "If I hold very positive beliefs about the effectiveness of mental health treatment, it actually makes me look forward to having the mental health treatment." Interviewee d: "It always motivates me and encourages me to seek help reinforcing my thought to get help from the professionals instead of my	
effectiveness of mental health treatment, it actually makes me look forward to having the mental health treatment." Interviewee d: "It always motivates me and encourages me to seek help reinforcing my thought to get help from the professionals instead of my	
treatment, it actually makes me look forward to having the mental health treatment." Interviewee d: "It always motivates me and encourages me to seek help reinforcing my thought to get help from the professionals instead of my	
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motivates me and encourages me to seek help reinforcing my thought to get help from the professionals instead of my	
to seek help reinforcing my thought to get help from the professionals instead of my	
thought to get help from the professionals instead of my	
professionals instead of my	
peers."	
Interviewee e: "Actually, it makes	
me willing always willing to go	
to seek for help when I needed."	
Interviewee f: "These attitudes	
motivate me to actively seek help	
and increase my dedication to	
treatment."	
Interviewee b: "if my issue is Influence of Treatment	
quite serious I will more prefer Preferences	
to have some clinical	
psychologists."	
Interviewee c: "if I have a	
preference I may talk to the	
therapies or practitioners who	
align with the approach so that	
the therapies can work with me."	ļ
Interviewee d: "seeking help	
from certified licensed counsellors	
or practitioners, they are actually	
helping you to facilitate, to	
formulate or organize your own	
personal thoughts, your own core	
belief."	
Interviewee e: "If I didn't try, then I wouldn't know the results so	

that I always willing to go to seek		
for help when I needed."		

These sub-themes highlight how positive attitudes towards mental health treatment, preferences for specific types of treatment, and a willingness to try different interventions impact students' decisions regarding seeking help, underscoring the importance of personalized and effective approaches to treatment in promoting help-seeking behaviours.

This theme encompasses the impact of self-stigma, influenced by knowledge, misconceptions, and personal beliefs, on students' decisions to seek help.

This theme suggests that self-stigma, shaped by knowledge, misconceptions, and personal attitudes, significantly influences students' willingness to seek help for mental health concerns.

RQ 4: What are the strategies	or steps done to improve help-seeking	g behaviour among students?		
RO 4: To identify the strategies	or steps done to improve help-seekir	ng behaviour among students.		
Component	Quote	Code	Sub-theme	Main theme
Improving Help-Seeking (Behaviour Among Students)	Interviewee a: "The program like that let others know the importance of seeking help and also like seeking help. Not means that you are weak." Interviewee f: "Programs that emphasize the importance of seeking help and expose the notion that seeking help is a sign of weakness have been effective."	Education and Awareness	Promotion of Positive Help- Seeking Culture	Enhancing Help-Seeking Ecosystem
	Interviewee b: "The love exhibitioncould improve their awareness to know more about their mental health." Interviewee d: "Our student department affairputting a lot of efforts to promote mental health services, to promote mental health resources towards the students by organizing a lot of events, a lot of exhibitions."	Campus Events and Workshops	Institutional Support and Initiatives	
	Interviewee c: "Counselling services on campuscould help student to access or see their counsellors at any time." Interviewee e: "Promoting the one of the technique into the daily lifeAnd the second one is, they may need to always enhance the importance of seeking help."	Accessibility of Counselling Services		
	Interviewee a: "The educational institution can like include the seek help in the syllabus, since primary school."	Integration into Education System		

Interviewee f: "Educational		
institutions could integrate help-		
seeking into the curriculum		
starting from primary school."		
Interviewee c: "Promote a	Peer and Community Support	Encouragement and Supportive
supportive campus		Environment
culturecreate a safe space for		
open conversations about mental		
health and encouraging peer		
support."		
Interviewee d: "Quality of the		
educatorsalso important to		
improve this kind of help seeking		
behaviours among the students."		
Interviewee c: "Collaborate with	Collaboration and Early	
community resourcesimplement	Intervention	
early intervention programs."		
Interviewee e: "Promote the		
counselling and promoting the		
mental healthlook seriously to		
their mental health."		
 Quote from Interviewee a:	Establishment of Dedicated	Institutional Infrastructure and
"University can like set up a	Support Centres	Services
special departmentmake sure		
the department is like having a		
large number of members."		
Quote from Interviewee f:		
"Universities could establish		
dedicated departments or support		
centres for students seeking		
help."		

These sub-themes and themes represent the strategies and steps identified by the interviewees to improve help-seeking behavior among students, aligned with the research question and objective.

This theme encompasses various facets of promoting a positive help-seeking culture, institutional support and initiatives, encouragement within a supportive environment, and the establishment of robust institutional infrastructure and services. It reflects a comprehensive approach to improving help-seeking behavior among students by addressing multiple dimensions of support and intervention.



UNIVERSITI TUNKU ABDUL RAHMAN

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Re: U/SERC/78-199/2024

13 January 2024

Dr Pung Pit Wan Head, Department of Psychology and Counselling Faculty of Arts and Social Science Universiti Tunku Abdul Rahman Jalan Universiti, Bandar Baru Barat 31900 Kampar, Perak.

Dear Dr Pung,

Ethical Approval For Research Project/Protocol

We refer to the application for ethical approval for your students' research project from Bachelor of Social Science (Honours) Guidance and Counselling programme enrolled in course UAPC3083. We are pleased to inform you that the application has been approved under Expedited Review.

The details of the research projects are as follows:

No	Research Title	Student's Name	Supervisor's Name	Approval Validity
1.	Parenting Style's Influence on Young Adults' Upbringing	Felicia		
2.	Exploring Empathy in Counselling: UTAR Counsellors' Perspectives in Addressing Clients' Concerns	Loh Kar Mon		
3.	Self-esteem, Intrinsic Motivation, Extrinsic Motivation, and Its Relationship on Academic Performance Among Malaysian Undergraduate Students	Melissa	Pn Anisah Zainab Binti Musa	13 January 2024 – 12 January 2025
4.	Understanding Public Stigma and Self-stigma on University Students' Psychological Distress in Influencing Help-seeking Behaviour	Soh Yung Ling		

The conduct of this research is subject to the following:

- (1) The participants' informed consent be obtained prior to the commencement of the research;
- (2) Confidentiality of participants' personal data must be maintained; and
- (3) Compliance with procedures set out in related policies of UTAR such as the UTAR Research Ethics and Code of Conduct, Code of Practice for Research Involving Humans and other related policies/guidelines.
- (4) Written consent be obtained from the institution(s)/company(ies) in which the physical or/and online survey will be carried out, prior to the commencement of the research.

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Should the students collect personal data of participants in their studies, please have the participants sign the attached Personal Data Protection Statement for records.

Thank you.

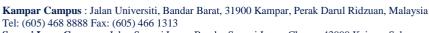
Yours sincerely,

Professor Ts Dr Faidz bin Abd Rahman

Chairman

UTAR Scientific and Ethical Review Committee

c.c Dean, Faculty of Arts and Social Science Director, Institute of Postgraduate Studies and Research



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Universiti Tunku Abdul Rahman						
Form Title: Supervisor's Comments on Originality Report Generated by Turnitin						
for Submission of Final Year Project Report (for Undergraduate Programmes)						
Form Number: FM-IAD-005	Rev No.: 0	Effective Date: 01/10/2013	Page No.: 1of 1			



FACULTY OF ARTS AND SOCIAL SCIENCE

UNIVERSITI TUNKU ABDUL RAHMAN	OI <u>/////</u>	IS IN ID SOCIAL SCIENCE			
Full Name(s) of	Soh Yun	Ling			
Candidate(s)	Son Tun Zing				
ID Number(s)	2107226	2107226			
Programme / Course	Bacheloi	elor of Social Science (Honours) Guidance and Counselling			
Title of Final Year Project		anding public stigma and self-stigma on university students' gical distress in influencing help seeking behaviours			
Similarity		Supervisor's Comments (Compulsory if parameters of originality exceeds the limits approved by UTAR)			
Overall similarity index: 3					
Similarity by source Internet Sources: 1					
Number of individual sources more than 3% similarity:					
(i) Overall similarity index(ii) Matching of individual(iii) Matching texts in continuous	is 20% an sources lis nuous bloc	sted must be less than 3% each, and			
Note Supervisor/Candidate(s) i Faculty/Institute	s/are requi	red to provide softcopy of full set of the originality report to			
Based on the above results, I h Year Project Report submitted		are that I am satisfied with the originality of the Final dent(s) as named above.			
Signature of Supervisor		Signature of Co-Supervisor			
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Date:		Date:			

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Student Paper

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Form Number : FM-IAD-004	Rev No: 0	Effective Date: 21 June 2011	Page No: 1 of 1

FACULTY OF ARTS AND SOCIAL SCIENCE UNIVERSITI TUNKU ABDUL RAHMAN				
Date:18/4/2024				
SUBMISSION OF FINAL YEAR PROJECT				
It is hereby certified that <u>Soh Yun Ling</u> (ID No.: <u>2107226</u>) has completed this final year project titled " <u>Understanding public stigma and self-stigma on university students' psychological distress in influencing help seeking behaviours</u> " under the supervision of <u>Ms Nur Shakila Binti Ibharim</u> (Supervisor) from the Department of Psychology and counselling, Faculty of Arts and Social Science.				
I understand that University will upload softcopy of my final year project in pdf format into UTAR Institutional Repository, which may be made accessible to UTAR community and public.				
Yours truly,				
Name: Soh Yun Ling				

Action Plan of UAPC3093 Project Paper II

Supervisee	Soh Yun Ling		
Supervisor	Ms Nur Shakila Binti Ibharim		

Task Description	Date	Supervisee's Signature	Supervisor's Signature	Supervisor's Remarks	Next Appointment Date/Time
Methodology					
Submit Chapter 3: Methodology Amend Chapter 3: Methodology					
Results & Findings					
Submit Chapter 4: Results					
Amend Chapter 4: Results					
Discussion & Conclusion					
Submit Chapter 5: Discussion Amend Chapter 5: Discussion					
Abstract					
Turnitin Submission				Generate similarity rate from Turnitin.com	
Amendment					
Submission of final draft			·	Submission of hardcopy and documents	
Oral Presentation					

Notes:

- 1. Deadline for submission cannot be changed, mark deduction is as per faculty standard.
- 2. Supervisees are to take the active role to make appointments with their supervisors.
- 3. Both supervisors and supervisees should keep a copy of this action plan.
- 4. This Action Plan should be attached as an appendix in Project Paper 2.

		Code	Sub-theme	Theme
Me	Hi good evening Ching Yi.			
CY	Hi, good evening.			
Me	Ok. Thank you for your participation in this interview session. My title for this research project is understanding public stigma and self stigma on university student psychological distress in influencing help seeking behavior. I will brief you about the inform consent first before we proceed into our interview question.			
CY	Ok			
Me	This interview session will last approximately 20 minutes to 40 minutes and this session will be audio recorded using electronic device and you only access by me and my supervisor. If you feel uncomfortable or is any questions that is sensitive to you, feel free to stop me and if you want to a quit this interview session, you can do it or anytime that you feel comfortable with. If you have any question about your participations, you can contact me or my supervisor Pn Shakila.			
CY	Ok			
Me	We will start our interview session.			
CY	Ok			
Me	There is four part of for our interview sessions. The first part is help seeking behavior, is about behavioral factors. The research objective of this first part is to identify the factors that are influencing help seeking behavior among universities students. The first question is what specific skills or strategy do you feel equipped with to navigate the process of seeking help for mental health issue?			
CY	Umm. I think one of the specific skill or strategy is self awareness and also umm I I'm not sure is it belief and self confidence is under specific skill or strategy but I think this is also quite important to like continue the process of seeking help.			
Me	OK, based on your answers for question one, how do these skills contribute to or hinder your willingness to seek support?			

CY	Umm, I think for self awareness it help in aware on own		
	issue. So can carry out following step like seeking help and		
	it and also for the self confidence and belief on on the		
	profession can like increase the motivate in seeking help		
	because because I believe I can overcome the issue so		
	that I will more motivate to seeking help. Yeah.		
Me	ok understand. So what specific skills do you believe are		
	crucial for universities students in order to effectively seek		
	help for psychological distress?		
CY	Umm I think is self awareness.		
Me	Ok. So based on your answer for Question 3, how can		
	these skills be developed or enhanced?		
CY	Maybe is the university can like organise some workshop		
	related to increase student self awareness. Yeah. And		
	then the workshop need to like more creative or more fun		
	to attract the the students to participate. Yeah.		
Me	Ok. Can you share some of the instances where you have		
	actively practice help seeking behavior in the past?		
CY	Uh, in the past, I think is in last month. Yeah. When I have		
	emotion breakdown due to some stress or and also some		
	unhelpful thought. Yeah. So at the time I had seek help		
	from umm, one of the practicum counseling students in		
	Utar. Yeah.		
Me	So, uh, how did this experience shape your current		
	approach to seeking help?		
CY	I quite satisfy for the experience and I also get support		
	from that experience. Get some knowledge and some skill		
	that can help me to overcome my issue. So I think seeking		
	help really can help me in my issue because they're		
	provide me support and also provide some strategy to		
	overcome my issue, yeah.		
Me	Ok. So in your view, what practical steps or actions can		
	university takes to encourage a culture where seeking		
	help for mental health concerns become a norm?		
CY	Umm, I think, but I think university can try to emphasize		
	on like seeking help. No, not means you are weak because		
	I think. Most of the person have one of the thought is that		
	seeking help means that I'm not strong. Seeking help will		

	give others know that I'm week. Yeah. So I think if the		
	school or the university can emphasize of on this one,		
	maybe can, yeah, can encourage the culture.		
Me	Ok. How confident do you feel in your ability to initiate		
1410	and follow through with the help seeking process for		
	mental health?		
CY	Umm. If if want to rate, I think it's 70 to 80%, yeah.		
Me	Ok. So what are the factors contribute to or challenge		
	challenge yourself efficacy in this regard?		
CY	Umm, I think it's because of the past experience that the		
	past experience is quite OK for me, so I think I have the		
	ability to follow through the the the process, yeah.		
Me	How does an individuals believe in their ability to navigate		
	and access mental health support that influence their		
	likelihood of engaging in help seeking behavior.		
CY	Ohh, I think individuals believe in their ability can increase		
	their self confidence and also their motivation to seek		
	help? Yeah.		
Me	Thank you for your answer for the first part of our		
	interview session, we will go to our second part. It's		
	related to public stigma. That is environment factor. For		
	this part, the research objective is to explore the		
	perceptions of public stigma that affect students		
	willingness to seek help for academic or other issues. The		
	first question is, in your community, what prevailing social		
	norm exists around mental health?		
CY	Umm, I think the social norm is like a exist around the		
	mental health is like if the person having mental health		
	issue is a kind of shame. And also in will become a label		
	for the person forever or for a long time, not only the		
	person and also yeah family members also will be label		
	yeah. When, when they are having mental health		
	issue.		
Me	ok, based on your answer for question one, how do these		
	norms affect your comfort level in openly discussing or		
	seeking help for mental health challenges?		
CY	Umm. I think this not affect me, like I will avoid to discuss		
	about mental health related things with the older		

			Т
	generation or or I will just like seek help from professional		
	and then I will not seek help from them because like not		
	not useful for myself.		
Me	OK, so in your opinion, how do societal attitudes towards		
	mental health influence the way university student		
	perceive, and response to psychological distress?		
CY	I think this attitude, this societal attitude, caused the		
	universities students tend to suppress their feeling and		
	will not like truly express their issue or psychological		
	distress that they face.		
Me	Ok. How would you describe the availability and		
	accessibility of mental health resources in your		
	community?		
CY	Uh, I think in my community now is become more of a		
	availability and also accessibility become more, yeah.		
Me	OK, to what extent does this influence your likelihood of		
	seeking help?		
CY	Yes, yes. So when I need a then and I can get in, uh,		
	shorter time. So yeah, yes.		
Me	Ok. From your perspective, what Community, resources or		
	support system are easily accessible for university		
	students dealing with their mental health challenges.		
CY	Umm, I think it's the counselling service in the university.		
Me	Ok. What opinions or judgement of others towards		
	seeking help for mental health concerns?		
CY	Umm, I think the judgment towards other who selects		
	seeking help is that a person who seek help for mental		
	health concern is like having a very, very serious mental		
	health issue. So they need to, uh, seek help. So if not that		
	serious, then no need to seek help. And then this kind of		
	person need to like avoid to avoid interact with them and		
	then need to far away from the person who like seek help		
	for mental health concern.		
	In what ways do the opinion or judgment of others impact		
	your decision making process when it comes to seeking		
	help for mental health concern?		
	Umm, I think the the opinion or judgment, others		
	opinion or judgment didn't like impact much for me		

	Lancard and the second of the		
	because I'm the person who more who more concerned		
	on my healthy, no matter my physical, healthy or my		
	mental healthy. Yeah. So I. So I just like we're not impact		
	by them, but I will just seek help from professional, yeah.		
Me	Ok. How do you think the public's perception of mental		
	health issue affect the willingness of universities students		
	to seek help considering the influence of peer opinions		
	and societal expectation?		
CY	Umm. I think if the public perception is positive towards		
	the mental health issue, the university students will tend		
	to actively seek help will like willing to openly discuss and		
	discuss about the mental health issue and then they can		
	give support to each other like share their experience and		
	then share the way they are. The way how they overcome		
	if the but if the public perception is negative toward		
	mental health issue, I think the students will tend to like		
	suppress themselves and then avoid to having discussion		
	on their mental health problems yeah.		
Me	Ok. Thank you for your answer for second part of our		
	interview, we will move to our third part is about our self		
	stigma is personal cognitive factors. This part, our		
	research objective is to explore the role of self stigma in		
	shaping students decision in help seeking. The first		
	question how would you describe your understanding of		
	mental health and self stigma?		
CY	Umm, mental health, I think it's like mental well being,		
	like, include the emotional, psychological and social and		
	then for self stigma, I think it's individual have like a		
	negative feeling or stereotype about self and then this		
	caused the like negative attitude, yeah.		
Me	ok, based on your understanding for question one, how		
	does this knowledge influence your perception of seeking		
	help?		
CY	I think actually I I didn't. like this, This knowledge didn't		
"	affect me much on the like on seeking help part, yeah.		
Me	OK, so uh, what are the specific misconception or lack of		
1410	information to university students commonly have about		
	mental health that may contribute to self stigma?		
	mental health that may continuate to sen stigma!		

C) /	MARINE STATE OF THE STATE OF TH		
CY	Maybe it's like a. For, university students having stress		
	having a bit, a mental mental health problem is normal. So		
	they will like contribute. It will contribute to the self		
	stigma, I think.		
Me	Ok. What expectation do you hold about the outcome of		
	disclosing your mental health concern?		
CY	Expectation. I think it's like get solution to overcome or		
	reduce my concern. Yeah, my expectation.		
Me	ok, based on your answer for question one, how do this		
	expectation shape your willingness to seek support?		
CY	Ohh. I umm. I will like only seek help from professional		
	because I think only professional can give me the solution		
	that I expected. Yeah, I I expect.		
Me	Ok. How do you anticipate that personal beliefs and		
	attitudes towards mental health among universities,		
	students, might impact their willingness to acknowledge		
	and address their psychological distress.		
CY	I think if their their personal believe and attitude towards		
	the mental health is positive and then they will be willing		
	to address their psychological distress. And then work on		
	it and then they were like, become better, have better		
	mental health and also have better life. If there are having		
	a negative attitude and belief, then I think they will not let		
	go to a they will not go to address it and then won't work		
	on it, yeah.		
Me	ok, So what are the personal attitudes or belief do you		
	hold regarding mental health treatment?		
CY	I think I believe mental health treatment will help me to		
	better my mental health and also better my life and my		
	suffering feeling will decrease. Yeah, because of having		
	the treatment.		
Me	ok, so how do these attitudes impact your decision		
	around seeking help?		
CY	This attitude that affect me is like I will become more		
	active and then more willing to seek help and will increase		
	my motivation in work according to the treatment. Yeah.		
Me	Ok. Thank you for your answer and participation in our		
	third part. We will move to our last part of our interview		
	aa parti ite itiii illote to dai last part of dai lilterview		

	session is about improving help seeking behavior among		
	students, so the research objectives of this part is to		
	identify the strategy or step done to improve help seeking		
	behavior among students. The first question is what		
	specific strategy or program have you observed or		
	experienced that effectively promote a positive help		
	seeking culture among students.		
CY	Umm. The program like that let other know the		
	importance of seeking help and also like seeking help. Not		
	means that you are weak yeah.		
Me	ok, in your opinion, what step could educational		
	institution take to create an environment that encourage		
	students to proactively seek help for their mental health?		
CY	I think the educational institution can like include the seek		
	help in the syllabus, since primary school and then like		
	every category also include like primary school, secondary		
	school and then a in. Also, university, yeah.		
Me	, , , , , , , , , , , , , , , , , , , ,		
	have been effective in enhancing help seeking behavior		
	among university students?		
CY	strategy or intervention. I think it's like workshop and or		
	talk, yeah.		
Me	, , , , , ,		
	universities implement to create a more supportive		
	environment that foster a proactive approach to seeking		
	help for psychological distress among students?		
CY	Umm, I think the university can like set up a special special		
	department for those who need a help seeking, or who		
	who want to seek help and then make sure that		
	department can provide professional treatment or		
	professional help to the students. And also. And make		
	sure the department is like having a large number of		
	member like that have that no difference language		
	different knowledge so can help a lot of people that will		
	need help and maybe University School university also can		
	like provide training to those member in this department		
	yeah.		

Me	Me ok thank you for your participation in this interview	
	session is has come to an end, so if you have any	
	questions or if you have any enquiries you can contact me	
	or contact my supervisor. Thank you very much.	
CY	CY OK. Thank you.	

		Code	Sub-theme	Theme
Me	Good afternoon, TJ.			
TJ	good afternoon.			
Me	ok. before we start our session, I will brief you a little			
	about a little bit about this research and inform consent.			
TJ	OK.			
Me	The title of my uh research is understanding public stigma			
	and self stigma on university students, psychological			
	distress and influencing help seeking behavior. This			
	interview session will last approximately 20 to 40 minutes			
	and this session will be audio recording and transcription			
	and analysis will be done, and will only access by me, and			
	my supervisor. Is that OK for you?			
TJ	Yeah, sure.			
Me	If you feel uncomfortable to answer some of the			
	questions, you can stop me at the moment and you can			
	stop the interview if you feel really uncomfortable with it.			
TJ	OK.			
Me	Umm. We will start our interview session. Uh for the first			
	research objective is to identify the factors that are			
	influencing help seeking behavior among universities			
	students. So they are 4 components in this interview, we			
	will start with the first part help seeking behavior. The first			
	question is what specific skills or strategy do you feel			
	equipped with to navigate the process of seeking help for			
TI	mental health issue?			
TJ	Umm. I I think first they could be self awareness. Umm,			
	because a person that need to be self aware of their issue			
Me	so they could know whether they need help from others. OK, OK, so how do you think this skills contribute to or			
ivie	hinder your willingness to seek support?			
TJ	I think if I have been a clear self awareness that I'm having			
"	a mental health issue now, so maybe it will help me to if I			
	self aware that. I really need support from others, then it			
	could contribute for me to to to, to, to seek help from			
	others. How it hinder me? I think umm. Sometimes.			
	Maybe because I think. OK, now I'm having self awareness			
	and I know what I'm what issue I'm having, so maybe I			
L	and third what in what issue thi having, so maybe i	l	1	

	could settle it by myself rather than do seek to to find		
	others to help me.		
Me	OK, So what specific skill do you believe are crucial for		
	university students in order to effectively seek help for		
	psychological distress?		
TJ	Umm.		
Me	Like what are the specific skills? Or should universities		
	students uh possess in order to seek help?		
TJ	Umm. The self disclose because like when you're having		
	some psychological distress sometimes. Oh, oh, based on		
	my opinion, a lot of people, they tend to suppress their,		
	their their distress and tend to like show their		
	positive image to others. So if they think that ohh, maybe		
	the things that make them feel distressed is something		
	that they think it is quite negative. So they would they		
	may not do disclose to to others, so the to seek help		
	because the process to seek help need to disclose their		
	issue. So I think the self disclose should be a very		
	important skill that very important for university student		
	to seek help. So if they having this, this this skill, and they		
	may having high uh more high probability to seek help.		
Me	OK, so as you mentioned, there's self disclosure is quite		
	important. So how can this skill be developed or enhance?		
TJ	Umm. I think maybe to interact and communicate more		
	with the people around them because and if there is lack		
	of opportunity to interact with others, then the person		
	may be more as a isolate themselves because they they		
	are not really interact with others so they are not getting a		
	lot of support from others so they will tend to isolate		
	themselves and not willing to disclose themselves. So if		
	they having more chance to communicate with others		
	having more interaction with the people around them, so		
	maybe they could ohh in the processed interacting. They		
	are also expressing themselves, so I think it's somehow		
	will help them to improve their self disclosed skill.		
Me	OK, OK. Understand. So can you share the instances where		
	you have actively practice help seeking behavior in the		
	past?		

TJ	umm. I think could be. during. During. Uh, I think during		
	my university. Ah, period. Umm, normally. I will seek help		
	on the academic part? Umm. Ohh yeah OK, so I think, uh,		
	I practice more help seeking behaviors during my tertiary		
	education. For example, when I facing some assignments		
	issue then I will seek help with my from my course mate		
	from my friends. But I would but during my secondary		
	school and during my primary school. I'm not really doing		
	this. Ohh yeah, during the time I I more to depends on		
	myself to settle the the academic part. But during the		
	tertiary I will be be more active to seek help about my		
	academic and also and secondly also. As during my		
	tertiary education, I also had been approached more		
	about the counseling. So when I learning about this, I also		
	think it is quite effective. So it also like what do you want		
	me to sometimes to seek help from my from my senior		
	during their paratical? Or with my course mate when they		
	are doing sessions. So I would attend their sessions to		
	seek help to deal with my issue.		
Me	I'm glad that you are always practicing help seeking		
	behavior in your tertiary education. ok, how did this		
	experiences shape your current approach to seeking help?		
TJ	Umm. I think. eh. OK, so Previously, I will having a concept		
	that if I ask someone to help me, maybe I am troubling		
	the person or maybe the person will think that I'm		
	incompetence because I always seek help. But for now,		
	along along uh, along the tertiary education until now, I		
	think when I seek help from them, I really could get some		
	suggestions and and also. and also some very good		
	solutions for them and also they are not showing they are		
	not showing that they are not showing that they think I'm		
	incompetent. or I'm troubling them, so I think it has		
	influenced me to be more brave to to seek help with when		
	I need.		
Me	OK, OK. So, uh, in your view, what practical steps or		
	actions can university takes to encourage a culture where		
	seeking help for mental health concerns become a norm?		

TJ	I think is to conduct some some program um, for example,		
	the um the talk regarding to. Umm. Regarding about the		
	mental health awareness and also some workshop to		
	include the interesting activities to help them do to to		
	know more about actually having mental health concern		
	are really normal. Ohh and also some some events that is		
	quite. Interesting and funny. That could help them to, to,		
	to know more about the the the importance to be		
	aware of their mental health concerns.		
Me	OK, OK. So how confident do you feel in your ability to		
	initiate and follow through with the help seeking process		
	for mental health?		
TJ	umm I think so far. until now for my experience I think. I'm		
	I could follow through the process quite well when the		
	trainee counsellor give me some homework. I could also		
	practice it and and also I think it is quite effective. Oh uh,		
	the the the techniques, the skills that provide me		
	provide to me to help me to deal with my issue is quite		
	effective. And also I able to follow what they are, what		
	they are, what they are suggesting to me. So I think		
	overall until now, the professional help for me, I think it's		
	quite effective.		
Me	Hmm. OK, OK. So what factors contribute to or challenge		
	your self efficacy in this regard?		
TJ	I think. Is the time management because it will adjust the		
	time to to to to attend the session. So sometimes during		
	the. maybe during. week 10 starting from week 9, week		
	10, Week 11, then it will be quite busy for the mid term		
	and also some assignment submission and also		
	presentations. So at that time I also need to like adjust the		
	time to attend the session. So for this I think it is quite		
	challenging or as well to to to finish the homework so. I		
	think for this when I'm quite busy on the on the academic		
	part. There are sometimes I will think I would like to skip		
	for the session.		
Me	OK, so how does an individual believes in their ability to		
	navigate and access mental health support influence their		
	likelihood of engaging in help seeking behavior?		

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depression when the person they look like not really normal, they may be the person having depression. So,		they will think that when a child uh, having some having		
normal, they may be the person having depression. So,				
umm thou will thou will. So when thou see compathing				
		umm, they will they will. So when they see something,		
that's not normal, they will directly thinking that the		, ,		
person having a depression. So I think for the Community		person having a depression. So I think for the Community		

	they are not really having a clear concept about the		
	mental health disorder and also and also the mental		
	health. So they will. So they will think that if they do seek		
	some mental health support from others, meaning that		
	they are having mental health disorder. But but it is not		
	like even though you having a small issue having a maybe		
	just a academic stress or some relationship issue, you		
	could also seek help from the professional. Umm, it is		
	quite normal, but they will think that seek help from		
	professional is a very big things. Uh, if you having mental		
	health disorder, then you would seek help. So I think the		
	the community that they are looking at the mental health		
N 4 0	as a quite a big things, yeah.		
Me	OK, so based on your answer how do these norms affect		
	your comfort level in openly discussing or seeking help for		
	mental health challenges?		
TJ	Umm. I think. I thing, I will uh uh, I think I think for this I		
	will also seek help from seek help for my mental		
	health. But I may not disclose to others that I'm actually		
	seeking help about my mental health.		
Me	In your opinion, how to societal attitudes towards mental		
	health influence the way universities student perceive and		
<u></u>	response to psychological distress?		
TJ	Umm. I think if if the university students are in the always		
	receiving the societal attitudes is mental health is a umm		
	the person is seeking mental health when they really		
	having a serious issue or they are having a lot of stigma		
	about mental health, then the person, even though they		
	think they are not OK having a psychological distress.		
Me	Yeah. Just get their friends view. Know that they have, like		
	mental health disorders. That is quite a serious problem.		
TJ	Yeah. So maybe they will tend to hide their psychological		
	distress because they were afraid that their friends were		
	saying some negative things to them.		
Me	OK, so how would you describe the availability and		
	accessibility of mental health resources in your		
	community?		

TJ	Umm. I think. The accessibility and availability. for now. I		
	think for for utar for utar it's a for utar it has a free		
	counseling services for students. Uh, but I what I heard, I		
	haven't really tried yet, but what I heard from others is		
	the the, the, the counselling service from DSA is not quite		
	effective, but I'm not really having tried it, not really have		
	tried with it and secondly utar also having some		
	counseling students during their practicum to provide free		
	service to them. So for this, actually they a lot of student		
	could access to these resources, but just concerns on the		
	effectiveness because the students are still practicing. So		
	maybe some of maybe some of the student could not		
	really get the help they want and if to seek some really		
	professional having license then I think. For what I think it		
	is quite a limited. The resources is quite limited, like a lot		
	of professionals, they are having a very pack schedule, so		
	need to include new client it is quite difficult for them. So I		
	think the available, the available resources, is more on the		
	the, the, the trainee counselor or the practicum students		
	then they allow, then they allowed resources about this.		
	But for the professionals, leading professionals one then I		
	think it's quite needed.		
Me	OK, OK. So based on the answers you've given just now, to		
	what extent does this influence your likelihood of seeking		
	help.		
TJ	Umm. I think, yeah, I think it will make me to be more		
	hesitated when I want to seek help, because if before I		
	choose the practicum students to seek help from them I		
	will, umm, I will. I would think more and more again		
	before I really attend their session, because I will also		
	afraid that. Umm, I couldn't really get effective, effective		
	interventions for from there and to seek professional help.		
	Umm. I will think that. Sometimes I think, I think that. And		
	because I need to wait for them until they have a they		
	have a schedule for me, but maybe until the time I already		
	settle my things.		

Me	OK, so from your perspective, what Community resources		
	or support system are easily accessible for universities		
	students dealing with mental health challenges?		
TJ	Umm, I think it's the counseling services provided by the		
	school and also there are a lot of uh helpline and and I		
	think now nowadays on the social media there are also a		
	lot of people promoting their counseling services so is the		
	so I think mostly is the counselling services from school or		
	from social media.		
Me	Ok. What opinions or judgment of others towards seeking		
	help for mental health concerns?		
TJ	Umm, one things I think is the person is weak, so the		
	person need to seek help for mental health concerns. Will		
	think that the person actually is thinking too much, so the		
	person having mental health so the person need to seek		
	help. Umm. Umm. And I also heard some positive one is		
	uh, actually the person is quite brave because now		
	nowadays the society still having a lot of stigma towards		
	mental health concerns but the person still be brave to		
	seek help. And also the person be brave to. To really, uh,		
	to really deal with the issue, they have it.		
Me	Ok. So in what ways do the opinion or judgment of others		
	impact your decision making process when it come to		
	seeking help for mental health concern?		
TJ	Umm. Yeah. OK, before I decide to seek help, I will. I will		
	analyze my issue first. I will try to think that this issue if I is		
	there that I could deal with my deal by myself or I really		
	need to seek help from the counseling service to seek		
	help or to seek help for my mental health concerns or		
	actually I could deal with it by myself. And secondly, when		
	I, uh, when I if I really decide I want to seek help then.		
	Then I will. I will try not to let others know. Uh, I'm		
	seeking help.		
Me	Umm, lastly, how do you think the public's perception of		
	mental health issue affects the willingness of universities		
	students to seek help considering the influence of peer		
	opinions and societal expectations?		

TJ	Umm. I think. I think if if they're having a lot of peers that		
	thinking that thinking the, uh, uh, like some some people		
	may make a joke about mental health issues. So, uh, if the		
	person having this kind of friends, so they might be. They		
	might be this less likely to seek help because because they		
	are not really getting support from others when they want		
	to decide to seek help. But I also experience about that.		
	um, me and my friends also also decide to experience		
	our practicum seniors session. So actually this will this will		
	motivate others to attend the session. If your friends are		
	also a seeking help of a about the mental health issue, like		
	if you heard that your friends are also seeking help, then		
	then you'll be more able more likely to also take help		
	about mental health.		
Me	ok, thank you for your answering for the Part 2, let's go to		
	the part 3 of our interview session is about our self		
	stigma. The research objective is to explore the role of self		
	stigma in shaping students decision in help seeking. So the		
	first question is, how would you describe your		
	understanding of mental health and self stigma?		
TJ	Umm, I think. Mental health. Is is. Is a thing that everyone		
	need to be aware of and also is a very important things		
	because in our life you have face different challenges and		
	also difficulties. And when we having these challenges it it		
	is normal that it will affect our our mental health affect		
	what how how we think about the situations and there		
	will be a lot of thoughts come into our minds negative and		
	also positive. So everything will affect our mental health.		
	So ohh, I think the the life we are living it affect our health		
	mental health positively or negatively. So mental health is		
	a thing that really in our life that we need to be to be		
	aware of and for self stigma. I think is. When we receive a		
	lot of stigma about mental health from from surrounding,		
	like like seeking mental health. Uh, like if you're having		
	mental health issue then because I think it too much		
	because we are weak. So if you receive this message and		
	we. And we combine it with our in our thought. Then		
	when, maybe when, When I considering to seek help,		

then the thoughts will pop up. Ohi, maybe I just thinking too much so I having this issue so I think that is self stigma. Me So how does this knowledge influence your perception of seeking help? TJ Umm, because I think mental health is a thing that need to be concerned. It need to be cautions, so I will umm I will think that seek help is normal and is a things that need to do if I really face some issue. But also I received some stigma from the surroundings and it had turned into my self stigma. So even though I think it is normal to seek help, but sometimes it will also, I will also hesitate to seek help. Me Ok, what are the specific misconception or lack of information do universities students commonly have about mental health that may contribute to self stigma? TJ Umm. One thing is. Un, some people, they may think to. Mental health. Ohl. Maybe, maybe they think in the self stigma? TJ Umm. One thing is. Un, some people, they may think to. Mental health. Will be will be, will be no issue so. Umm. I think it is where a tender to the hearing, because they will think money can settle a lot of difficulties and could make a make a life make a life, make their life be be easy, be relax. So by having money, then mental health, this is not really. Because umm money may settle of things, but not everything can be settled by money. Ohl and also. Umm. And also they may think that a person is a uh uh. If they having mental health issue So. Umm. Umm. But I think it is not really. Because umm money may settle of things, but not everything can be settled by money. Ohl and also. Umm. And also they may think that a person is a uh uh. If they having mental health issues because they are weak, so they myght having that so, So when they think so, when they face some difficulties. Yeah. Me Umm. Ok. Oh, So what expectation do you hold about the outcome of disclosing your mental health concerns? TJ My expectation is when I disclosed my mental health concerns, the person could really could really understand		than the thoughts will non up. Ohb. maybe Livet thinking		
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outcome of disclosing your mental health concerns? TJ My expectation is when I disclosed my mental health	Me	Umm. Ok. Oh, So what expectation do you hold about the		
TJ My expectation is when I disclosed my mental health				
	TJ			
		concerns, the person could really. could really understand		

	me and and provide and provide help to me and also to		
	help me to explore more about my mental health concern,		
	because sometimes umm I think my mean they have		
	concern is like this, this this but maybe explore deeper is		
	having different. Uh, different different causes. So my		
	expectation is to uh, to be added to get understanding		
	and to to to explore more and also to to get effective		
	intervention.		
Me	OK, so uh, how do this expectations shape your		
	willingness to seek support?		
TJ	Umm. So I will examine the person whom I seek help. to		
	know that, uh, Is the person really could fulfill my		
	expectations if I'm not having much information about the		
	person, or I think the person will not fulfill my expectation		
	that I will not be willing to seek help from the person. But		
	if I think that the person that could really help me, then I		
	will be more willing to seek help.		
Me	OK, so how do you anticipate that personal beliefs and		
	attitudes towards mental health among university		
	students might impact their willingness to acknowledge		
	and address psychological distress.		
TJ	Umm. In my personal belief, oh ok. Umm. Uh, I think if. If		
	they having a positive attitude, if they think that if they go		
	to seek help, they could really get the help, then they may		
	be more willing to seek help in. If they having the personal		
	belief that. That umm. They are seeking help actually is		
	showing that they are really brave. They they may be		
	more willing to seek help.		
Me	So what personal attitudes or belief do you hold regarding		
	mental health treatment?		
TJ	I think mental treatment, uh should be adding that is		
	really a tailored to, umm what, for example, I'm in the		
	client, so the mental help for me should be really tailored		
	on on uh, based on my uh pair with my issue. And also my		
	needs. So it could be. Ohh it could be having to do with		
	my issue more effectively so I think it is a flexible and also		
	the most important thing is really could help the client.		

Me	So, based on your answer. How do this attitudes impact		
	your decision around seeking help?		
TJ	Umm. I think that if I, uh, if I feel that my issue is, uh, is		
	not that serious, like maybe just having relationship issue		
	or having academic stress anxiety then umm and then		
	maybe I will, I will. I will be more. I will feel OK. To		
	seek help from trainee counselors or professional		
	counselors. And because I think for this from from them I		
	could also receive some effective when they have		
	treatment. But if I think my my issue is quite serious, like		
	maybe having a probability to be so when the health		
	disorder so I will tend I think I will more prefer to have		
	some clinical psychologists to to have some mental health		
	treatment that is more there will be more effective for the		
	disorder.		
Me	ok, thank you for your answer, we will you move to our		
	last part of this interview session, is about improving		
	health seeking behavior among students. The research		
	objective is to identify the strategy or step done to		
	improve help seeking behavior among students. So the		
	first question is what specific strategies or program have		
	you observed or experience that effectively promote a		
	positive help seeking culture amongst students?		
TJ	Umm. I think is the. Uh, uh. The the the love		
	exhibition that conducted by by by. By who, By the well		
	being society of utar I think, I'm not sure, but just the		
	event that that. But that about uh, let others to ask umm		
	ask others to be, be more aware of of their mental health.		
	So I think this kind of events could could help them do, uh,		
	could improve their awareness to know more about their mental health and also there are then. And also I think.		
	The the atmosphere of the events could also boost boost their motivation to to seek and to seek mental health		
	support during the event, and if and when they getting a		
	lot a lot of a lot of info about mental health from the		
	event. So they may be More. Feel feel more comfortable.		
	More OK to seek our help about their mental health.		
	wiore on to seek our neip about their mental health.		

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	Ok. In your opinion, what step could educational		
	institution take to create an environment that encourage		
	students to proactively seek help for their mental health?		
TJ I	I think. I think firstly is to is to. Uh, do more events about		
	mental health. Uh. Secondly, they could also, uh, they		
С	could also ask the ask the students to fill up their, fill up		
t	the questionnaire about their recent mental health. So if		
t	the education institution they had detected some		
S	students the result of the students, they may need need		
S	some support so they could contact to the students. So		
t	the the. The contact, during the contact could also. Could		
a	also persuade the students if they need help, they could		
s	seek some some mental health support. So it could also		
n	maybe could motivate the students to to to seek help. Uh,		
У	yeah.		
Me S	So from your experience, what strategies or intervention		
h	have been effective in enhancing help seeking behavior		
а	among universities students?		
TJ s	some intervention. Maybe to post some positive, uh,		
þ	positive things about mental health on social media.		
l	Umm. By some things that I seek by something like umm		
t	to self care about to, to to self care yourself. Ohh it's		
n	normal to to to seek help. Some some message about		
t	these positive things about mental health post on the		
S	social media and and I think a lot of people there are umm		
e	easy be influenced by the social media. So if there are a		
le	lot of things about this on the social media, so the so		
n	might influence the university students to ah to be more		
	likely to seek help.		
	In your opinion, what steps or initiative could universities		
	implement to create a more supportive environment that		
f	foster a proactive approach to seek help for psychological		
	distress among students?		
	Maybe to, Maybe to to to have A to have a a corner. That		
	ohhh that filled up with a lot of positive phrases. Be be		
	some having some having some help seeking support		
	resources, having some resources there and also a lot of		
l n	positive phrases. there and also allow the students to		

	leave some positive comments to to encourage others on		
	the corner in the in the corner. So so when the when the		
	students passed by the corner, they may get some positive		
	things from the corner and they will feel more, be more		
	OK to seek help about their psychological distress.		
Me	Ok thank you for your answers and participation in this		
	interview sessions. We have come to an end. Uh, really		
	appreciate this. If you have any questions, do not hesitate		
	to contact me or my supervisor, Miss Shakila.		
TJ	Ok.		
Me	Ok. Thank you very much.		
TJ	Thank you.		

		Code	Sub-theme	Theme
Me	Okay. So hi, Karmon. Good evening.			
KM	Hi, good evening.			
Me	Thank you for your time to join my interview session. So			
	before we start, I will brief you about the informed			
	consent.			
KM	Okay			
Me	So the title of my research is Understanding Public Stigma			
	and Self Stigma on University Students' psychological			
	distress in influencing help seeking behaviour. So my			
	research objective is to identify the factors that are			
	influencing help seeking behaviour among university			
	student in Malaysia and to explore the perception of			
	public stigma that affects students' willingness to seek			
	help for academic or other issue and also to explore the			
	role of self stigma in shaping students' decision in help			
	seeking. Lastly, to identify the strategy and the step does			
140.4	to improve help seeking behaviour among students.			
KM	Okay			
Me	Before we start, do you know, what is stigma?			
KM	Yes.			
Me	Okay. Thank you very much. Stigma is like a negative			
	labelling on others.			
KM	Yeah.			
Me	Okay. So for the informed consent, this interview session			
1/0.4	will last, like, approximately 40 to 60 minutes.			
KM	Yep. Okay.			
Me	This session will be audio recorded, using laptop, and we'll			
1/0.4	do the, transcription and analysis. Is that okay for you?			
KM	Yeah.			
Me	Okay. You have the right to, decline to participate or			
	withdraw from this, interview session, like, anytime you			
	want. So there will be no consequences of, like,			
	withdrawing or during the interview session. So if you feel			
	uncomfortable or the question is sensitive to you, you, can			
	stop me, and then you can let me know.			
KM	Okay.			

Me	Okay. So, this interview, sessions, the recording will be		
	viewed by me and my supervisor only and we will discuss		
	about, what I can do with the research.		
KM	Sure.		
Me	K. So if you're okay with this inform consent and agree,		
	you can, sign over here.		
KM	Okay.		
Me	So are you ready for our interview session?		
KM	Yes.		
Me	K. Our interview will be, in 4 parts. According to the part,		
	each part we have a a few questions to answer. If you're		
	ready, then we will start our interview session now.		
KM	Okay. I'm ready.		
Me	Okay. The first question, what specific skills or strategy do		
	you feel equipped with to navigate the process of seeking		
	help for mental health issue?		
KM	What skill ah		
Me	Skills or strategy.		
KM	Do you have the probing questions?		
Me	Okay. So, how do you approach, seeking help for mental		
	health issue?		
KM	I feel like if I were the person with mental health issue, I		
	would ask information from others first. Then only I would		
	go to the mental health or a counselor or clinical		
	psychologist. But mostly, I wouldn't go there if I have no		
	issue lah.		
Me	Okay. Okay. So what is the skills or strategy do you rely on		
1410	in this process?		
KM	Skills and strategy.		
Me	Yeah.		
KM	Skills and strategies. Probably skills.		
Me	Oh, yeah.		
KM	Oh, yeah. Probably skills is, like, the information given.		
Me	Okay. Okay. So you will look for the informations before		
1410	you, direct yourself to seek help.		
KM	Yeah.		
IZIVI	reun.		

Me	Okay. So related to, your answers, how do these skills		
IVIC	contribute or to hinder your willingness to seek support?		
KM	Hinder is what?		
Me	Like stopping you?		
	• .		
KM	I think could be the other people's perception because		
	mostly in the country or more of a Asian culture, people		
	who view mental health as a very bad things, they they		
	don't perceive, like, mental health thing as mental health		
	illness. So if there were anything that could stop me from		
	going would be my parents or their perception, like, telling		
	me, like, oh, you must be crazy. That's why you need to go		
24	to the counseling session like that.		
Me	Okay. I understand. So what do you think we have as a		
	specific skill do you believe are crucial for university		
	students in order to effectively seek help for psychological		
1/0.4	distress?		
KM	Can you repeat?		
Me	Like, what specific skills, should university student process		
140.0	to seek help?		
KM	Provide us the information for, information high or some		
	issue when they have issue. Let me think ah.		
Me	Okay.		
KM	I feel like, probably, like, communication skills. Like, you		
	are able to ask questions, the right questions so that you		
	know how it could assist you. But then at the same time,		
	you have to have self awareness, like, knowing your		
	strength and weakness so that you could guide guide that		
	person to ask for help, and then what areas do they need		
	to work on.		
Me	Okay. So based on this, skills that you have mentioned,		
	how can these skills be developed or enhanced? Like,		
140.0	increase awareness.		
KM	Uh-uh. So for example, like, self awareness. Right?		
Me	Mhmm. Yeah.		
KM	Okay. I feel like for self awareness, they can do self		
	reflection. Like, maybe spend time on reflecting their		
	thoughts, feelings, and actions. Or maybe they can get		
	some feedback from other people so that they know their		

own behavior Or like feedback from friends family			
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•			
It's okay.			
Where was I?			
Oh, just so you mentioned that you, have some of the,			
thoughts and feelings that is not really, good and negative			
thoughts, and then you feel that you wanted to go to see			
your counsellor?			
Yes. And then, this kind of unhelpful thoughts actually			
kind of, make it worse for me, like, especially when I have			
anxiety. So it it became worse when those unhelpful			
thoughts came to my mind. So I would go to the			
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identify my thoughts, behavior, and also feelings.			
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current approach to seek help?			
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something about yourself to increase your own ability to,			
to function. And then also, like, I feel like those stigma is			
not really true where they say that, people who go for			
mental health are crazy or dangerous or attention seeking.			
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	just, you know, needed help, and to an extent where they		
	can't have their they can't they they are not able to		
	function as a human being function. You get what I mean?		
Me	Yeah. I can see that you can overcome the stigma that you		
	seek help.		
KM	Yeah.		
Me	Yeah. So, in your view, like, what are the practical step or		
	action can the university take to encourage a culture		
	where seeking help for mental health concerns become a		
	norm?		
KM	Probably they could do a lot of events about mental		
	health because not a lot of people know about, like,		
	mainly those people, like, students know about, like, what		
	depression, anxiety. They wouldn't know about something		
	called, like, low self esteem or even, low body image or		
	stress level chronic stress level that they can't control. So I		
	feel like if the school or university could do an event or		
	,		
	even talk shows about it, So that it could gain it could		
	spread awareness for the students. At the same time, like		
	like, some of the universities, they will put, like, a booth or		
	self self esteem, then the students could, like, measure		
	about the psychometric test, and then they would know		
	about their self esteem, and then they would know what		
	to do about it. Mhmm.		
Me	Okay. So, how confident do you feel in your ability to		
	initiate and follow through with the health seeking		
	process for mental health?		
KM	Help seeking process for mental health. How confident am		
	1?		
Me	Yeah. Like, how do you feel when you seek professional		
	help?		
KM	To be honest, when at first, when I go for the mental		
	health, I was actually not that confident. I could say, like,		
	65 to 70%. Because, like, when I go to the mental health,		
	like, seeking for mental health help, I was thinking, like,		
	the techniques that is being taught is, like, being taught in		
	,		
	my classes. So I was, like, I don't have confidence about it		
	with the things that might work. And then and then I feel		

			I
	like in order to be more confident to help with the process		
	for mental health, they should do more research because,		
	we can't just blindly just go into the counseling session		
	sometimes. We need to understand more about the		
	mental health, and then we need to find the right		
	professional so that we will feel comfortable and feel safe.		
Me	Okay. Okay. So understand your feeling. So what is the		
	factors that contribute or challenge your self efficacy in		
	this regards?		
KM	Do you mind repeating the questions?		
Me	Okay. So, what challenges, like, do you face when you seek		
	help?		
KM	Okay. What challenges do I face? Mhmm. Probably, like,		
	the challenges that I face is, like, trying to explain to		
	people about why I seek help. It's not easy because, those		
	people who are not going through the same thing as you,		
	they will think differently. And, also, there are a lot of,		
	stigma. So every time if I would say that I'm seeing a		
	mental health, then they would judge a person. So,		
	normally, I would just keep quiet. And then some of the		
	other than that would be the the therapy cost because it's		
	not cheap. It's quite expensive if you wanna go out to look		
	for a therapy session.		
Me	Okay. So is this, affecting your self efficacy?		
KM	The affecting my self efficacy is the challenge that I talk		
	about. Right?		
Me	Yes.		
KM	I could say yes because, like, I feel overwhelmed because		
	because, like, those stigmas that they put, I would		
	remember it, like, in my mind. So I would, like, doubt		
	myself. Like, should I should I really seek help or try just		
	handle it my own self? And then because of there is,		
	misunderstanding of mental health, so I would my		
	confidence will go lower because in Asian culture, they		
	don't believe in mental health. Right? So they kind of look		
	down on those people who work in mental health. So I		
	would be scared to go to a counseling session. And at the		
	same time, because going for a counseling session or even		

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	mental health, it actually takes a lot of time. And		
	sometimes as a person who have went who had went to		
	the counseling session before, I would always had doubts		
	that maybe I would not improve in my situation. So, yeah.		
Me	Yeah. I see that you have faced, like, a great challenges in		
	this help seeking process and affecting those self efficacy		
	also.		
KM	Mhmm.		
Me	Alright. How does an individual believes in their ability to		
	navigate and access mental health support influence their		
	likelihood of engaging in help seeking behavior?		
KM	Are those are individual beliefs? How does an individual		
	beliefs, right, affect your mental health and help seeking		
	behavior?		
Me	Yeah. Yeah.		
KM	Okay. So if I would say in the culture and religious		
	perspective, actually, some cultures, they don't really rely		
	on professionals. And the religion. I don't really want to		
	mention some religions, but then those who are very		
	religious, they would rather trust that, yeah, god could		
	solve their issue instead of, instead of, you know,		
	approaching the professional help. And then and so I		
	could say that it has a very significant impact. Another		
	thing would be their negative beliefs about mental health.		
	So, like, some of the people I know, they would say that		
	seeking and mental health are for those who are weak. So		
	they are very ashamed to to even seek help from the		
	professional. And then and then that's why they are so		
	reluctant to reach out for support because they are feeling		
	kind of shame to even go to, sessions or even psychiatrists		
	or any sort of different thing. And then, also, like, those		
	people, like, for those who had a positive view of stigma,		
	then, positive view of professional mental health, then		
	they would, like, seek for the professional help by, like, by		
	viewing it as a social support that could that could help		
	them to have a mindset that people actually understand		
	them and also very supportive. While at the same time		
	also, like, they would believe that the effectiveness of		

	mental health treatments can actually impact their		
	behavior. And that's why they would more they would		
	more inclined to seek professional help in that sense.		
Me	Okay. So thank you for answering the first first part of our		
IVIC	interview session. So I will move to the second part of our		
	interview.		
KM	Okay.		
Me	This this part is, relate more related to the environment		
ivie	•		
	factors of the stigma. So, in your community, what		
1/ 0 /	prevailing social norm exist around mental health?		
KM	In my community, what prevailing? What prevailing what		
2.4	are?		
Me	Prevailing social norm exist around mental health.		
KM	Around mental health. In my community, I could say that		
	it's it's the It's the open discussion. Let me think ah, social		
	norms. Probably is the silence and avoidance. Like, mental		
	health issues has been viewed as a problematic issue. So		
	they most of them, they don't feel comfortable to even		
	had an open discussion. And then, like, some		
	communities, like, in my communities, they may		
	emphasize self reliance and independence, which it could		
	cause them to to not seek help and support for their		
	mental health concerns. And at the same time also, like,		
	just now, like I mentioned, cultural or even religious		
	beliefs actually can influence individuals for, like, yeah, a		
	definitive healing practices over seeking professional		
	mental health. Yeah.		
Me	Okay. Okay. So, how do this norm affect your comfort level		
	in openly discussing or seeking help for mental health		
	challenges, like as you mentioned just now.		
KM	Okay. For a comfort level, I feel like most people who who		
	are not dare to seek help because they, how do this norm		
	affect the seek help. Okay. I feel like they will be very		
	afraid to to even seek help because of the stigma and in		
	being shamed by others and being told as, problematic		
	problematic behavior. Also, like, just now I mentioned that		
	being view as weak, it's not easy for an individual. That's		
	why they would hinder their comfort level in reaching out		
	Okay. Okay. So, how do this norm affect your comfort level in openly discussing or seeking help for mental health challenges, like as you mentioned just now. Okay. For a comfort level, I feel like most people who who are not dare to seek help because they, how do this norm affect the seek help. Okay. I feel like they will be very afraid to to even seek help because of the stigma and in being shamed by others and being told as, problematic problematic behavior. Also, like, just now I mentioned that being view as weak, it's not easy for an individual. That's		

	I		
	for support. And then if the individual has has a very		
	limited awareness or understanding of mental health		
	issues, actually, individuals may feel very uncomfortable		
	to even discuss their struggles because they might worry		
	that, like, being misunderstood or taken not taken		
	seriously. So mostly people would avoid mental health		
	professional health. Yeah.		
Me	So those of the stigma, like, negative labelling, they		
	already affect their comfort level to discuss their mental		
	health issue and seek health.		
KM	Mhmm.		
Me	So in your opinion, how do societal attitude towards		
	mental health influence the way university student		
	perceive and response to psychological distress?		
KM	Sorry. Can you repeat the question again?		
Me	So, in your opinion, like, how do this, like, societal attitude		
	towards the mental health issue influence the way		
	university student perceive and response to the		
	psychological distress.		
KM	Mhmm. How do societal view mental health issue? Okay.		
	Attitude. Okay. Probably, I would say that if, okay, I'm		
	gonna put a very positive and negative aspect.		
Me	Okay.		
KM	So if the societal attitudes are towards mental health are		
	are, like, good and then not to say good, probably kind		
	and in nonjudgmental, they could actually influence the		
	level of awareness and education available to students. So		
	if mental health is openly discussed and and everyone		
	understood what mental health is, The students are more		
	likely to, like, have an interest in psychological well-being,		
	and then they would literally go their way out to even		
	seek resources to enhance their mental health. And then		
	for the, so if the societal has a lot of availability and		
	accessibility of mental health, actually, it can bring an		
	impact for the students' perception and interest in		
	psychological well-being. Like, the resources could be, like,		
	counseling sessions, support groups, and that could make		
	the students more likely to engage with them. But if I feel		

	like I've say this a lot of time. If the societal attitude are		
	very judgmental, and they don't understand what those		
	students are feeling. Then students may reluctant to even		
	engage in psychological interest because they feel like		
	they are being judged or labeled negatively. That's why		
	they don't have the courage to or probably I should say,		
	having the fear to even pursue or seeking help.		
Me	So the societies have, like, a great influence and impact on		
	the students to looking for help?		
KM	Yes.		
Me	Okay. So how would you describe the availability and		
	accessibility of mental health resources in your		
	community?		
KM	In my community?		
Me	Yeah.		
KM	Let me think ah, Accessibility in my community. I feel like		
	the in my community, especially, like, in Ipoh, I could say,		
	in Malaysia. Actually, there are quite a challenges in		
	assessing mental health services because it is very limited		
	and sometimes are quite long distances to even travel. So		
	one of the example I could give is, like, for example, like, in		
	Ipoh right now, we only have, like I mean, like, those who		
	are very good. It's, like, got 2 clinical psychologists and a		
	few more counsellors. And it's actually quite limited		
	because one is the amount of people who work in the		
	mental health services are very limited. 2nd is the income		
	and, the socioeconomic factors I could say because		
	because one of my friend, they would like to seek for		
	mental health services in marriage therapy, I think, couple		
	therapy. So they actually had challenges in assessing		
	affordable and quality mental health care because one		
	hour based on their information or resources that they		
	found through online, couple therapy for 1 hour is 3		
	hundred and 10, which they find it is very expensive to an		
	extent they will go broke. And then at the same time		
	would be because our population or I could say that our		
	population are quite less and quite small compared to		
	western countries, or even China. I could say China, Japan,		

	and other more. So I felt like since our community are		
	very small, so we have very limited options to even go for		
	professional help seeking. Yeah.		
Me	Understand. So the lack of availability of, like, mental		
	health professionals, and the price is quite expensive that		
	will influence, like, influence the community to really go		
	and seek help.		
KM	Yeah.		
Me	Yeah. So to what extent does this influence your likely		
	hope to seek help?		
KM	To what extent let me think about it. To what extent? If if		
	if there what extent actually, if I if I had all the resources		
	that we get and and there are convenience and even		
	affordability. I will literally go out my way to even seek for		
	mental health, especially, when it comes to, like like,		
	convenience, you know, like, the mental health resources		
	from my location are not that far. So I would find it very		
	convenient for me to even seek like, literally, reduces my		
	transportation issue or even time constraint. So I will		
	literally go and seek help. It would be much preferable if		
	they are such thing as as, like, insurance coverage that		
	could help out so that so that the services are affordable		
	or covered by insurance so that it could reduce the		
	financial barriers.		
Me	So they seems like they are a lot of factors that will		
IVIC	influence the likelihood of the community to seek help.		
KM	Yep.		
Me	From your perspective, like, what is the community		
IVIC	resources or support system that are easily accessible for		
	university students that dealing with mental health		
	challenges.		
KM	What community and resources for university students? I		
IXIVI	could say that I could say that probably university		
	counseling centers that could offer, like, confidential		
	counseling centers that could offer, like, confidential counseling sessions for student. For example, like,		
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	psychologists or counselors that they could help out with		
	various mental health issues. The second one would be,		
	mental health workshops or even programs. Like		

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	university can organize workshops or stress management		
	program or mindfulness so that the students are able to		
	use it as a tools to help them to navigate their mental		
	well-being. Also gain some valuable information. And then		
	some universities actually have peer support group that		
	actually provide the safe space for students to share their		
	experience. Other than that, I feel like online mental		
	health would be very helpful for online mental health		
	resources. I mean, could be very helpful for our students		
	as well. Like self help self self help, guides. So that they		
	could, like, assess at any time and provide additional		
	information and support.		
Me	So what is the opinion or judgment of others towards		
	seeking help for mental health concerns?		
KM	Mental health concern. Right?		
Me	Yeah.		
KM	My opinion towards mental health concern would be, can		
	I put a positive and negative opinion as well?		
Me	Yeah. Okay.		
KM	Okay. So if the opinion is okay, like, it's very supportive,		
	then, you know, individuals may be very supportive and		
	has a perception towards, mental health concerns. So		
	they understand, like, the importance of overall well-being		
	and also, like, recognize the importance of seeking help.		
	But if those who had, negative opinions and even		
	judgment, Some opinions I could mention is, like, some		
	people are actually lack of or as is I should say limited		
	knowledge or understanding of specific mental health		
	conditions. So it may lead to misconception and even		
	judgment. So for example, would be, like, if an individual		
	comment or even share about something, like, they are		
	suicidal. Some may view it as attention seeking. So it is		
	considered a judgment from others. And then some, they		
	can, have the tendency to blame the individuals for their		
	mental health struggles. Then they will assume that they		
	could overcome their challenges if they could have tried		
	harder or even, like, if you didn't give up, then you could		
	have, you know, get better.		

Me	Yeah. So, based on your opinion or judgment, like, in what		
	ways does this, like, impact your decision making process		
	when it comes to seeking help for mental health		
	concerns?		
KM	My decision, In what ways impact my decision making in		
	mental health? Probably probably if it if it is linked with		
	the above, like, what I've mentioned, like, they will blame		
	the individuals and lack of understanding, then I would		
	say that my decision making for seeking mental health are		
	actually quite weak, because I might hesitate to seek		
	mental health because I don't know how others would		
	perceive me. And I'm not sure what are the negative		
	consequences of seeking help. That is if I don't have the		
	knowledge of of mental health. And then and if I really		
	have to listen to what other people stigmatize them, then		
	I will probably feel a sense of shame, and then I would		
	judge myself as as a person who didn't try hard enough to		
	even help myself. Yeah.		
Me	Yeah. So, like, negative opinions or negative judgment		
	from others will impact your decision making when you		
	come to looking for help.		
KM	Yes. Yeah.		
Me	How do you think the public perception of mental health		
	issue will affect the willingness of university students to		
	seek help, considering the influence of peers' opinions		
	and societal expectation.		
KM	Does it consider family as well?		
Me	Yeah. Like, pure opinions or, like, society expectation from		
	the society.		
KM	Okay. I feel like for the friends influence, If the friends		
	have a very supportive and understanding attitude		
	towards the mental health, then it may encourage, like,		
	people to seek help without judgment or even rejection		
	because you know that your friends are supporting you by		
	your side to go for the mental health seeking field. But		
	then if your friends are those who, like, very discourage of		
	seeking help, then the individual may have challenges to,		
	you know, even go for the mental health aspect. Well, for		

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	the family expectation, I could say that I could say that it		
	really influence students decision into seek help. Because		
	if the families is very open minded, very supportive, and		
	and values, like, their own self, like, mental well-being,		
	then then the student or even the child would willingly go		
	to seek help. But if there is, like, stigma and pressurized to		
	certain expectation, then the student will be will will be,		
	at a state where they they are afraid of disappointing their		
	family or even facing negative consequences from their		
	family. As societal expectations will be I could say that		
	most of the society, they expect more of students being		
	able to perform well in their economics and career goals.		
	So, actually, in order to perceive it in another way, it		
	actually helps student to help student to seek professional		
	help, but if the societal expectation on achievement and,		
	view that seeking help is a sign of weakness, then those		
	students or individuals may resist to even go to the mental		
	health support.		
Me	So negative expectations will influence negative thoughts		
	about seeking help.		
KM	Yes.		
Me	So, thank you very much for the second part of,		
	participations in our interview sessions. So we'll move to		
	the 3rd part.		
KM	Okay.		
Me	Okay. So how would you describe your understanding of		
	mental health and self stigma?		
KM	And self stigma. In, like, one word or a sentence?		
Me	Can be in one word, or can be in a sentence.		
KM	Okay. I feel like mental health are based on individuals		
	well-being. It's like how individuals think, how individuals		
	feel or behave, and then how it affects, like, how they		
	handle their stress and make choices in their lives. So		
	actually mental health, it's very important for overall well-		
	being, I could say. And for stigma, I can say that, I would say self stigma. Self stigma could actually refer to our own		
	acceptance towards stereotypes or even the negative		
	acceptance towards stereotypes or even the negative		

	,		
	beliefs about mental health. So, actually, how we think		
	how we think or how what attitude or judgment that we		
	portray through our self actually could influence our		
	feelings and thoughts. And then we, as a human being, we		
	might think that we are not worthy to even, seek for		
	mental health sometimes.		
Me	Okay. Based on what you are sharing just now, like, how		
	does this knowledge influence your perception of helps of		
	seeking help?		
KM	How does this influence me seeking help? I think that, I		
	could say that if if we have internalized stigma, then it is a		
	barrier for us to seek help. But for for me, I have a		
	different perspective would be would be will be stigma.		
	Will always be around, but but we have to sometimes		
	worry about ourselves first because our well-being is very		
	important. And and, of course, it of course, self stigma		
	would always exist, and it could contribute, like, fear. Like,		
	I may worry about how seeking help will be viewed by		
	friends, family, or even society, you know, which can be		
	very discourage. But that would not stop me from, you		
	know, seeking help.		
Me	Yeah. I'm glad to hear that. So what specific		
	misconception or lack of information do university		
	students commonly have about mental health that may		
	contribute to, self stigma?		
KM	So it's like misconception. University students have that		
	contribute to mental health.		
Me	Oh, about mental health stigma.		
KM	Sorry. What specific misconception? I could say that based		
	on my experience, I heard from a lot of students that		
	going to, go seeking help from from professionals,		
	actually, is a sign of weakness. They they viewed it as		
	someone who are weak. That's why they need to see		
	counseling session and need help, and they feel like they		
	are kind of useless because they can't They feel that they		
	felt that, they can't control their own thoughts while while		
	they are supposed to do that. And then, oh, also, like, the		

	crazy part or unstable part. So they would view it as or I, I		
	should say that after a person get a diagnosis from a		
	counseling session, then they may think that it's crazy or		
	unstable because they are being labeled as that. So they		
	have a very miss, they have a misconception about		
	diagnosis actually. Like those people who had diagnosis		
	are crazy or unstable. And then at the same time, they		
	also think that going to, seeking a mental health		
	professionals are actually unnecessary because they think		
	that they could handle themselves. Yep.		
Me	So this, misconception or lack of understanding about,		
	diagnosis may affect their seeking help behavior a lot and		
	contribute to stigmatize.		
KM	Yes.		
Me	What expectation do you hold about the outcome of		
	disclosing your mental health concerns?		
KM	Wow. What expectation? I actually expect people would		
	understand those people who are going through going		
	through, I should say going through some things in their		
	life that they are, I could say that those people who are		
	going through in their life actually are going through a lot,		
	and sometimes they see, mental health professionals are		
	actually to an extent where they can't handle it anymore.		
	So I feel like, having a nonjudgmental and empathetic		
	response actually could help those people. And then at		
	the same time, you could, make them feel more safer,		
	safer and also knowing that it is a supportive		
	environment, supportive friend or I could say environment		
	where peep you can openly discuss about your experience		
	without fear of being judged or even stigmatized. And		
	then as a person who disclose their issue, sometimes you		
	just want people to listen to you. You don't, listen to you,		
	feel validated, and also, like, understanding understood		
	when I disclose my mental health concerns. Sometimes		
	it's not about giving advice. It's just more like listening to		
	our experience. Oh, and then, the most important part, of		
	course, confidentiality.		

Me	Okay. Understand. So how do this, like, expectation shape		
IVIC	your willingness to seek support? Willingness to seek		
	support.		
KM	I would say that my expectation in in willingness		
	willingness to seek support is that when I have the		
	expectation of confidentiality, like, nonjudgmental,		
	Actually, it creates a sense of safetiness and also, like,		
	•		
	support. And these expectations actually can make me		
	feel more comfortable and willing to open up about my		
	mental health concerns because I know that I'm being		
	heard and understood. And then second would be is that		
	if I expect a nonjudgmental and empathetic response,		
	actually, it might help reducing the stigma associated with		
	mental health concerns. So it's like when you when you		
	believe that your concerns will be accepted by others,		
	then it will actually make you more willing to seek		
	support. And I could say that positive expectation actually		
	can give a sense of motivation and hope in seeking		
	support.		
Me	Okay. So how do you anticipate that personal belief and		
	attitudes towards, mental health among university		
	students might impact their willingness to acknowledge		
	and address the psychological distress?		
KM	How do I anticipate? It's about students. Right?		
Me	Yeah. University students.		
KM	Okay. I could say that I could say that if the students who		
	has a personal who has a very strong self acceptance and		
	understanding can actually, like, from influence the their		
	willingness. Because if an individual has a very positive		
	self perception, then they may recognize, like, their		
	psychological differences are actually a normal part of		
	human being. So they may be more open to seek support.		
	And and then I feel like, having a belief in importance of		
	mental health can actually motivate students to prioritize		
	mental well-being, psychological well-being, and seek		
	support. Yeah.		

Me	Interesting. So, what personal attitudes or belief do you		
IVIC	hold regarding mental health, treatment?		
KM	Regarding mental health treatment. What personal beliefs		
KIVI			
	and attitude? I could say that my personal beliefs and		
	attitudes are are based on my personal growth and self		
	reliance. That means, like, I would prioritize self help self		
	help. That's why I would go for mental health treatment		
	or even, like, having the needs or not needs. Having the		
	thoughts of even, like, managing mental health could		
	actually help me. So I would literally go for mental health		
	treatment. And, also, like, sometimes when you go for		
	mental health treatment, they will provide medication or		
	even other interventions that may be very beneficial for		
	improving mental well-being and then, like, managing		
	mental health conditions. And I could say that in terms of		
	mental health treatment, sometimes it may work, some		
	interventions may work for the for the client or		
	individuals, some may not. So, actually, it is depend it		
	depends on the approach being used in mental health		
	treatment because every person had their own		
	preference, such as, like, mindfulness or any alternative		
	therapies. So some may work and some may don't, some		
	might not work. It depends on individuals actually.		
Me	Mhmm. About your personal attitudes or belief that you		
	share just now, like, how do this attitude impact your		
	decision around seeking help?		
KM	Impact my decision. Alright. How does this impact my		
	decision? I could say that if I am open, like, knowing that		
	mental health treatment may or may not work		
	sometimes, like interventions. I may try other things		
	instead of just giving up giving up on seeking support from		
	the professionals. And and if if I have a preference or I		
	may talk to the therapies or practitioners who align with		
	the approach so that, so that so that the therapies can		
	work with me and also, like, at the same time, they could		
	try, like, the types of treatment that resonate with me and		
	my beliefs. At the same time, also align with my value.		
	And then if I hold a very positive beliefs about the		

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	effectiveness of mental health treatment, it actually		
	makes me look forward to to having the mental health		
	treatment and knowing that it will progress slowly, but the		
	improvement will be made progressively.		
Me	Okay. Thank you for answering for the third part of our		
	interview. So we'll move on to our last part of our		
	interview session.		
KM	Okay.		
Me	Okay. It's, related about the improving behavior among		
	students to seek help. K? So, what specific strategy or		
	program have you observed or experienced that		
	effectively promote a positive help seeking culture among		
	students?		
KM	What specific strategy are Okay. I could say that based on		
	my observation that brings that brings a positive outcome		
	for students would be would be one of the workshops		
	that I have attend, what is that called? Mindfulness.		
	Where a lot of students, not only counselling students,		
	would join, but then there are many, like, random		
	students that I have never met before. They would join		
	and then knowing and they would try to understand the		
	importance of mental health and they will literally learn to		
	enhance the, no. I could say that apply the technique to		
	themselves when they are going through their own issues.		
	So, actually, if the mental health promoting mental health		
	awareness are could actually encourage students to seek		
	support. And then what I could say is probably not a		
	program. Probably, like, counselling services on campus.		
	Actually, there are a lot of students they would go to see		
	the counsellor or mental health professionals to an extent		
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	where they are waiting list, it's full. I feel like this one		
	could help student to access or see their counsellors at		
	any time so that it could help them in their mental health		
	being mental health.		
Me	Yeah. I'm glad that, universities have, like, organized some		
	of the program to improve the awareness of the students		
	to understand more on mental health issues.		
KM	Yes.		

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Me	So in your opinion, what steps could educational		
	institutions take to create an environment that encourage		
	students to proactively seek help for their mental health.		
KM	For the mental health plan. What step ah, I in my opinion,		
	I think they can they can actually promote a supportive		
	campus culture, which let the, let the institutions, like,		
	staff or faculties or even lecturers to promote, like,		
	empathy and understanding towards the students so that		
	it may create a safe space for open conversations about		
	mental health and encouraging, like, peer support that		
	may may may fix a supportive campus culture. And then		
	since just now I mentioned that there's a long waiting list,		
	probably, they could enhance, like, the access to mental		
	health services. Like, it could include having on, having		
	more counsellors in the campus or offering virtual or		
	online counselling sessions, off campus so that it could		
	help the students, improve in their mental health. At the		
	same time, also, like, it is easily accessible for them. Yeah.		
Me	So the most importantly that they, the university have to		
	improve the professional, the number of the professional		
	availability available for the students to encourage their		
	help seeking behavior.		
KM	Yes.		
Me	Yeah. So from experience, what strategy or interventions		
	have been effective in enhancing health seeking behavior		
	among university students.		
KM	Effective and encouraging. Mental health seeking		
	behavior. Right?		
Me	Yes.		
KM	Okay. From my experience, I could say that what in the		
	intervention. I could say that mental health screening and		
	assessment could actually help identify individuals who		
	may be experiencing mental health difficulties. And if the		
	students who who had taken some assessment, then they		
	they are more prone to or more encouraged to seek		
	appropriate support so that they could help themselves.		
	At the same time, I could say that another intervention		
	will be mental health awareness campaign. Like I		

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	mentioned earlier, would be, like, setting up the booth so		
	that it, they could increase their knowledge about mental		
	health and also promote, like, help seeking behaviors. So		
	that it could encourage, like, students to seek for mental		
	health, and it could include, like, public service		
	announcement or social media campaigns. Yeah.		
Me	Yeah. I'm glad that they have some of the strategy and in		
	interventions that have been effective.		
KM	Mhmm.		
Me	Okay. So, in your opinion, what steps or initiative could		
	university implement to create a more supportive		
	environment that foster proactive approach to seeking		
	help for psychological distress among students.		
KM	Psychological stress among students. In my opinion, what		
	steps should the university do? I could say that they could		
	collaborate with community resources. Like Wait. Wait. I		
	mean, like, they could implement early intervention		
	programs. Like, by identifying the students at risk of		
	psychological distress or experience stress so that it could,		
	like, provide proactive outreach and also, like, targeted		
	interventions to support students before their mental		
	health concerns escalate. At the same time, I felt that they		
	could actually collaborate with community resources. That		
	means by forging, yeah, partnerships with local mental		
	health organizations. It could be NGOs or any mental		
	health organizations. So that it could expand expand the		
	range of available support services. For example, like,		
	referrals so that, it could, like, share resources to ensure		
	students have access and make sure that they have a		
	comprehensive care.		
Me	Yeah. So, enhancing time and the health understanding,		
	and the steps that university could do, like, to enhance		
	this health seeking behaviours and overcome the stigma		
	towards the students is very important. So it had comes to		
	an end for our interview session. Thank you very much for		
	your participation.		
KM	Welcome.		
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Me	So if you have any, inquiries or have any, questions, you		
	can ask me or you can ask my supervisor, Pn Shakila.		
KM	Okay. Sure.		
Me	Okay. Thank you very much.		
KM	Welcome.		

		Code	Sub-theme	Theme
Me	Hello, Jiaye.			
JY	Hi, Yun Ling.			
Me	Okay. Good evening. Before we start our session, I will brief you a little bit about this, research and inform consent.			
JY	Yeah. Sure			
Me	K. The title of this research is understanding public stigma and self stigma on university students' psychological distress in influencing help seeking behavior. Do you know what is stigma?			
JY	I guess. Yeah.			
Me	Okay. Stigma is like like, negative social labels.			
JY	Okay. Yeah.			
Me	Okay. So I I brief you about the info consent.			
JY	Yep. Okay.			
Me	So, my research objective is to identify the factors that influencing help seeking behavior among university student in Malaysia, and also to explore the perception of public sigma that affects students willingness to seek help for academic or other issue. Other than that, to conduct this research also to explore the role of self stigma in shaping students' decision in help seeking. Lastly, to identify the strategy, the step done to improve the help seeking behavior among students.			
JY	Alright.			
Me	So the most importantly, the purpose of this research. K. I will brief you about the duration. So this interview session will last approximately, 40 to 60 minutes, and then the interview will be conducted physically or based on participant preference. So, most importantly, this session will be audio recorded using Microsoft Team.			
JY	Sure.			
Me	Is it okay for you?			
JY	Sure. Go ahead.			
Me	So you have right to decline to participate and withdraw from this, research, like, once, like, participation has begun or you feel, like, uncomfortable, you have the right			

	to terminate or withdraw from the sessions or interview			
	anytime.			
JY	Alright.			
Me	Okay. There will be no, consequences for declining or			
IVIC	withdrawing from participating in this research. So as you			
	can see there, this, interview session will be record			
	recorded. And so we'll be keep private and confidential. I			
	will not share with, third party. Only me and my			
	supervisor.			
JY	Sure.			
Me	If you have any questions about this, research study, you			
	feel free to email me or my supervisor, Pn Shakila. Yeah.			
	So you can read through this informed consent, and if you			
	agree you can sign over here.			
JY	Alright. I'll send you afterwards.			
Me	Is it okay? Okay. Thank you very much. So when you are			
	ready, then we will begin our interview session.			
JY	Alright. Let's start.			
Me	Okay. The first question I will be asking you about, what			
	specific skills or strategy do you feel equipped with to			
	navigate the process of seeking help for mental health			
	issue?			
JY	For me personally, I feel like the awareness and			
	knowledge is quite important. Because without the			
	awareness, as well as the knowledge towards the mental			
	health, you won't voluntarily to seek the help. Right? So			
	for me, awareness, if you have the one awareness that,			
	mental health is important, and then mental health will			
	give a lot of effects towards other aspect of your life. Then			
	it will encourage you and motivate you to seek help from			
	the professionals, especially like counselors and etc. So,			
	yeah, I guess awareness and knowledge towards the			
	mental health is quite important. Yeah.			
Me	Okay. Okay. Awareness. Okay. I will proceed to a second			
	questions. How do these skills contribute to or hinder			
	your willingness to seek support?			
JY	For me, since I have a very strong awareness towards			
	mental health, especially the the effects of the			
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	professional, mental health practitioner towards our		
	mental well-being. So since I have already, occupied with		
	the awareness, so it motivates me to seek help from the		
	professionals, mental health practitioner. So me		
	personally, I have seen and worked with my counselor a		
	few years, since a few years until now. Yeah. So I think the		
	awareness is very important in this case.		
Me	Okay. Okay. So what specific skill do you believe are crucial		
	for university students in order to effectively seek help for		
	psychological distress.		
JY	Okay. So, like I mentioned just now. I for me, I perceive		
	that awareness is really important. So as without		
	awareness, right, I don't think the students will go looking		
	the mental health supports from any practitioners		
	without, without their conscious awareness. So I think		
	awareness is very important, and it helped the student		
	also be aware and be alert of their mental health status if		
	they feel they are not capable to cope with some things. If		
	they're aware, it will encourage them to voluntarily and		
	then be active proactive enough to seeking help from the		
	practitioner.		
Me	So I believe, awareness is very important help seeking		
	behaviours		
JY	Yes. Yes. So if without the, awareness, right, I think		
	probably you won't you won't go seek and eat health. You		
	just wait. You just sit there and wait. It will you you just sit		
	there and pray for everything. So I think the awareness is		
	quite important.		
Me	Okay. So how can this skill be developed or enhanced?		
JY	For me, personally, I feel like education from the authority		
	is quite important, especially from the school authorities		
	since our since we are young. I mean like for example the		
	school authority if they keep pushing or keep highlighting		
	the needs and the importance of mental health in our		
	educations, then the students will be aware, oh I see I		
	have to take care of the, my mental health. And then this		
	will help the students to look into their mental health		
	status and be aware of that. So without the school		

	pushing that idea, I don't think the students will look into		
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	it and even without their kid pushing the idea of mental		
	health, the students will still having the discrimination,		
	prejudice, or even the stigma, like you mentioned just		
	now, the stigma towards the mental health field in the		
	society. So it will influence the our willingness, volunteer		
	willingness of student to seek mental health I guess. So I		
	think education is quite important and also the the		
	education from the school authority or as well as the		
	education from the parent as well. So I guess parent also		
	an important influence towards the children. So if the		
	parents have this awareness whereby a mental health is		
	important for their children, then they should pass on the		
	awareness to their children, and their children should take		
	care of their mental health as well. So I think education for		
	the authority as well as the education for the parents are		
	important. Okay.		
Me	Okay. Can you share some of the instances where you		
	have actively practice help seeking behaviour in the past?		
JY	Sure. Like I mentioned just now, I I did I did cooperate with		
	my counsellor since my foundation study until now. So I		
	am currently a year 3 semester student, so roughly I have		
	worked with my counsellor about 3 years already and now		
	we are still having consistently our sessions for my		
	personal issue so I guess the process is still going on and		
	we are quite cooperative and and it also provide me a lot		
	of supports so I guess it helped me a lot. I mean		
Me	Okay. Good to hear that. So how does this experiences		
	shape your current approach to seeking help?		
JY	Alright. So basically, I mean, I guess because I have worked		
	with my counselor a few years already so we have our		
	trust and then we have our cooperation there. So it		
	helped me to very trust on my I believe on my counselor's		
	ability to in charge of my case. So it will always encourage		
	me and motivates me to find or seek the help from my		
	counselor since we have worked for 3 years, right.		
	Actually, in the process of this 3 years, in the middle of the		

	3 years, we have actually terminated a few sessions. But		
	then every time once a new issue popping up that I feel		
	like I am not capable to cope with it, I will always drop a		
	message to my counselor through Microsoft team and		
	then have an appointment with my counselor so that we		
	can talk about a new issue. So along this journey, seeking		
	help journey, I have seek I have voluntarily seek help with		
	my counselors quite a few times, I guess. So it it really		
	motivates me to, like, keep going on, keep my help		
	seeking behavior so that it help to take care of my mental		
	health.		
Me	Okay. So in your view, what practical step or actions can		
	university takes to encourage a culture where seeking		
	help for mental health concerns become a norm?		
JY	I guess education. Just now I I have mentioned education		
	is quite important, so that through education, so I are		
	learning what is mental health, why mental health is		
	important, what is the influence of mental health towards		
	our life. So that from this the students may be aware of		
	what is mental health, why keep mentioning mental		
	health is important. And then other than education the		
	school authority can also pushing the mental health idea		
	through some activity like organizing trainings, workshop,		
	exhibition regarding mental health so that the students		
	are aware of that. So for example I am aware that our		
	university department they are actually planning to		
	organize mental health not really not really directly linked		
	with the mental health, but it's something some		
	exhibition that will be held in our university next month I		
	mean in March. I guess these exhibitions help a lot		
	because it create awareness and then for the students to		
	participate in the event so that they're aware of why		
	mental health is important. And they also invited a lot of		
	expert from outside to, enhance and give a lot of exposure		
	to the students. I guess this is a very good opportunity for		
	us to enhance the awareness among students.		
Me	Yeah. I am glad that the university have take some of the		
	actions in enhancing this		1

JY	Yes. Yes.		
Me	K. So how confident do you feel in your ability to initiate		
	and follow through with the help seeking process for		
	mental health?		
JY	I guess, I think I am quite confident with my counsellor, I		
	guess. Because, I work I cooperate with my counselor a		
	few years already. So there is a trust, I believe in the		
	counsellor's ability and she know me very well. So that's		
	why it made me to always seeking the help from my		
	counsellors. Since I mentioned just now, I actually in		
	during the process we had terminated a lot of sessions but		
	once I have a new issue popping out then I will go back to		
	find my counsellors to seek for another new solutions and		
	insight for that. So I guess it's the I am confident enough		
	in help seeking behaviour for my mental health.		
Me	Seems like this past few years make this rapport and trust.		
JY	Yes. The rapport and the trust is very important. I guess it		
	motivates me and it make me feel more comfortable		
	enough and confident to work with my counsellors for		
	this.		
Me	Okay. So what is the factor contribute to or challenge your		
	self efficacy in this regard?		
JY	Could you further explain it?		
Me	Okay. Can so, like, what challenges do you face when you,		
	seek help?		
JY	Alright. So the very biggest challenge that I faced is that,		
	currently I am a full time student so I am very busy with		
	my assignments and classes. So it does actually make me I		
	am not free to really make sometimes I'm not free to		
	make an appointment with my counsellor because my		
	counsellor also have appointments with other clients as		
	well. So we have to really discuss in order to achieve a		
	mutual agreement for the appointment time slot because,		
	like, for example, previously, I have I should have I should		
	have sessions with my counsellor on a weekly basis, but		
	unfortunately we are both not free and not available at		
	that period. So weekly basis sessions become biweekly, so		
	it will become a challenge for Me lah, I guess.		

Me	So is this challenge affecting yourself efficacy?		
JY	I think yes because I need the session to in order to		
''	process myself. The because the counsellors are there to		
	help me to facilitate my thoughts, to listen to me, help me		
	to organize and structure my thoughts in a very structure		
	and proper way. So without the guidance and help from		
	my counsellors, I will feel panic. I am not confident in, not		
	confident enough up with my self efficacy in building my		
	life at that time. So actually, when I got to know that I we		
	are not free for the sessions, So we have to postpone it or		
	reschedule it. So it means that it delayed the period that I		
	getting the mental health and mental supports from my		
	counsellor. So if somehow it will affect my self efficacy in		
Me	some way, I guess. Yeah. So seems like this, is quite a big challenge for you.		
JY	Yeah.		
Me	Okay. How does an individual's belief in their ability to		
	navigate and access mental health support, influence their		
137	likelihood of engaging in help seeking behavior?		
JY	I guess individuals belief and their perception is quite		
	important. Like I mentioned just now, like awareness. So I		
	guess individuals' belief and perceptions is somehow		
	linked with the awareness. If they don't have the		
	awareness, they don't have the belief of valuing mental		
	health, the importance of mental health. So I guess it will		
	be hindering their willingness and voluntariness to seek		
	help. Actually, seek help from the mental health		
	practitioner. So I guess individuals should have a very		
	positive attitudes and belief so that they can be more		
	open enough to receive the help and support from the		
2.6	practitioner.		
Me	Okay. So we will go to the next part of our interview		
n.	session.		
JY	Sure.		
Me	So our next part is about, environment factor. So in your		
	community, what prevailing social norm exist around		
	mental health?		
JY	Okay. Let me think. Yeah.		

Me	Okay.		
JY	So for me personally, I'm glad that actually, within my		
	environment, within my surrounding and community, they		
	are quite open for mental health ideals and the help		
	seeking behaviour because whenever they meet with		
	someone who are abnormal, They are not they are facing		
	some crisis in their life or even they are facing someone		
	who are experiencing crisis or even, they are not able to		
	they saw someone who are not able to cope with their life		
	journey, they will always refer the persons to a counsellor		
	or even a mental health practitioner. So I guess in within		
	my community, within my environment, they are very		
	open, generous, and valuing the mental health support.		
Me	Okay. Seems like your community is quite open to this		
	help seeking behavior.		
JY	Yes.		
Me	Okay. So how do these norms affect your comfort level in		
	openly discussing or seeking help for mental health		
11/	challenge?		
JY	Interesting questions. Because, like I mentioned just now,		
	as, the people around me are very open and very willing		
	to accept the idea and the they are very value the		
	importance of mental health and mental supports from		
	the practitioner. So this is one of the reason that I studied		
	in counselling because my family, they are quite open,		
	they are quite, they are quite valuing this field, especially		
	my elder brother. That's why he very encouraged me to,		
	choose the pathway in mental health pathway. And they		
	also helped me to, helped me to like, voluntarily of seek		
	help from the, counsellors. Yeah. Because previously, we		
	actually experienced some negative experiences during		
	our secondary school because during our secondary		
	school time, the counsellor in our secondary school are		
	not even a a certified registered licensed counsellor and		
	and during that period students are resistant to meet with		
	counsellors. They're whenever they talk about		
	counsellors, they have a very negative attitudes, negative		

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	stigma to our counsellors. But when we grow older, we		
	realize that, okay, actually a licensed counsellor should not		
	be that way. So that's why we are striving to be in that		
	way. That's why my community, my persons around me,		
	they are affecting that affect affecting me very much in		
	seeking help and even pro pursuing my career in mental		
	health. Did I answer did did I answer your questions?		
Me	Yeah. Seems like before this, you have, shift your negative		
	thoughts about health seeking behavior.		
JY	Yes.		
Me	Okay. So in your opinion, how do societal attitudes		
	towards mental health influence the way university		
	student perceive and response to the psychological		
	distress?		
JY	I guess it is. The societal influence is quite impactful		
	because people nowadays are very, attracting with the		
	social media. So I guess the social influence had generally		
	shifting to our social media, our no. Our online life. That's		
	why, whenever everything that we saw in social media		
	posting and so on, it always give a very big impact to our		
	life, especially university students. So I guess I guess So		
	whenever they saw a lot of posting, a lot of cases cases in		
	social media, it will definitely influence the university		
	psychological distress. So I guess media should be		
	responsible and should be open enough to promote help		
Me	seeking behavior among university students. Yeah. Seems like the social media have a great impacts on		
ivie	influencing this.		
JY	Yes.		
Me	Okay. How will you describe the availability and		
'''	accessibility of mental health resources in your		
	community?		
JY	For me, honestly, I feel 50 50. At first I feel that I'm I'm		
	very glad because I get to access to into the counselling		
	services free because our university, they are providing		
	counselling services to the students in a very, without		
	paying. So it's just, free services provided to the students.		
	So it is very friendly for the students because we are not		
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	working yet. So we no need to pay the fees to the		
	counsellors just for the sessions and so on. So I think this		
	is a very impactful services to the students and this helped		
	the students a lot. They're no need to worry about their		
	financial ability and so on. So this is a very convenient		
	access and availability of mental health services and		
	resources for students. And at the same time, I also feel		
	like, me personally, I feel like I am quite sad well looking in		
	the larger perspective whereby the community outside,		
	they have to pay a very high amount in order to get the		
	counselling services, especially the public. So for example,		
	recently my elder brother there, she he is actually		
	planning to seek, counselling support from counsellors		
	and so on. But what make my brother hesitant and		
	reluctant is that the fee is too expensive in certain sense.		
	And actually it is quite because you have to consistently,		
	participate in the counselling session, so you have to pay		
	every time whenever you enter the session. So it's a very		
	quiet burden for those who are working, and as well as		
	those quiet needs. So I guess this is quite still, a lot of		
	room needed to be improved in our country.		
Me	Okay. Seems like the university have some free access and		
	opportunity to seek help. Okay. To what extent does this		
	influence your likelihood of seeking help?		
JY	Because my university is providing the free services, so		
	since I'm still in within my study, so it make me give me a		
	talk like, why don't I go to seek help from counsellors and		
	why don't I just experience it because it's free. It is free.		
	Once I graduate from my university, I am no longer eligible		
	to enjoy these free services from my university. Like my		
	elder brother always regret about that because my elder		
	brother also had the free services provided by the by his		
	university as well. As well as my brother actually is a		
	scholarship recipient and his, scholarship provider, they		
	also provides mental health free mental health services,		
	but that day those days, the mental health awareness are		
	not so much enough now nowadays. So my elder brothers		
	are very regretful because he can't enjoy the free services		

	Ula colore con la considera accordante la consecuencia de forca		
	like what we have right now. So I guess this kind of free		
	services is really impacting our decision in our willingness		
	and voluntary just to seek help from the practitioner, I		
	guess.		
Me	Seems like we have to grab the opportunity to enjoy these		
	free services.		
JY	Yeah. Otherwise, it could be expensive in in certain sense.		
	But, actually, I have one of my hometown friend who are		
	in Johor. Actually, he also did go for mental health services		
	from outside, from the public. And he got offer. He got the		
	offer whereby 1 hour session should be 60 ringgit, but		
	because of the offer my my friend only pay for 35 ringgit		
	for 1 hour session. I guess it is about very good		
	opportunity for the students to enjoy this kind of benefits		
	in it.		
Me	Understand. It's very good. So from your perspective,		
	what community resources or support system are easily		
	accessible for university students dealing with mental		
	health challenges?		
JY	Okay. For this question, I suddenly to think of that. My		
	university also provide a very good opportunity in which it		
	allow my university allows the practicum student from the		
	counselling students to do to provide the mental health		
	services for the university student in a very in, in free		
	basis. With this with this, the universities the university		
	student had more resources, have more chances to get		
	mental health support from the, I shouldn't say expert		
	because the practicum students are still students in		
	practising in counselling, but at least they get some sort of		
	support from someone who are quite experts and		
	experience in mental health field and in counselling. So I		
	could say that not only they're able to get the services		
	from the Student Department AFfairs, DSA, but they also		
	can choose to go for the practicum students, which is free		
	as well. And also they are able to get the services from the		
	our counselling department in FAS UCCC, whereby there		
	are counsellors and clinical psychologists available in that		

	department. So the university students have quite a lot of		
	choices to get the help from them. Yeah.		
Me	Yeah. Seems like your university have a lot of easily		
IVIC	accessible, sources for to support this help seeking		
	behavior among university students who have challenges		
	in mental health distress.		
JY	Yes. And actually based on my feedback from my		
"	counselor and there is actually an increasing trend		
	whereby our university students, not only from the FAS		
	students, but also other faculty students like faculty of		
	business, faculty of science. They are actually started to be		
	aware of this kind of services are actually available in		
	order to provide mental health service and mental health		
	support to them. And they are actually quite, open to it.		
	And there is an increasing increasing demand and supply		
	in our university, I guess.		
Me	It's a very good opportunity to have this kind of, easily		
	accessed resources.		
JY	Yes.		
Me	Okay. What opinion or judgement of others towards		
	seeking help for mental health concern?		
JY	For me, personally, right, for my opinion. Right?		
Me	Mhmm.		
JY	Alright. So for what opinion and judgement of others?		
	Could you further explain it?		
Me	So, like, what is your opinion when others, your friends		
	seek help for mental health concerns?		
JY	Okay. I am quite glad whenever my friend told me that		
	they are willing to seek help from the counselling from the		
	counsellors and any other related mental health		
	professionals because I could see that they actually have		
	the initiative to help themselves in order to take care of		
	themselves because I I perceive that counselling is not		
	only for the persons who are in need only. Like, for		
	example, the persons who are having distress and so on,		
	but sometimes the normal persons are also have to		
	regularly to sit into the counselling services because they		
	have because counselling actually provide a lot of, copying		

	mechanism and it helped to, formulate and organize your		
	thoughts as well. So I guess it's a very good opportunity to		
	refresh yourself in certain sense. So I am quite happy		
	whenever my friends told me, oh, Jiaye. Actually, I'm		
	planning to see this counsellor. What advice you can give		
	me? That I I would say, I go ahead. Go ahead. It is good for		
	you that you have the initiative to seek help from the		
	professional. Yeah.		
Me	Okay. So in what ways do the opinions or judgement of		
	others will impact your decision making process when it		
	comes to seeking help for mental health concerns.		
JY	Okay. Means that, the perception for others impact my		
	decision making process, is it? Alright, so basically, I think,		
	the judgement and opinion from others is quite		
	important. Like I mentioned earlier on, my community, my		
	environment, or people surrounding, they are actually		
	quite open and having a positive attitude towards mental		
	health services and mental health field. That's why it		
	actually motivates me to seek help from the mental health		
	professions and even choose my career pathway in mental		
	health services. And, yeah, I think the perceptions and		
	judgment of your surround from your surroundings is		
	quite influence, impactful towards an individual decision		
	making process.		
Me	So how do you think the public's perception of mental		
	health issue will affect the willingness of university		
	students to seek help, like, considering the influence of		
	peers opinions, and societal expectations as you		
	mentioned.		
JY	In a very positive way, it will be like what I mentioned to		
	you. My community are very open to it. But somehow,		
	during my classes and sharing of my classmates and so on,		
	I actually realized that some other families, some other		
	communities, they are quite, having, I should say,		
	prejudice and negative stigma towards mental health		
	services and so on. Because sometimes they persist		
	mental health, People who have mental disorder or		
	mental health concerns, they are they are incapable of		
L		L	

	during of their life or even they are possessed by the evil		
	spirits and so on, I guess. So I think the public perception		
	still need to be improved in certain sense so that so that it		
	will actually help the university students to be voluntary		
	and open enough to stick for the mental health services.		
Me	Okay. Understand. So, after this, we will move to the next		
	part of our interview sessions. So it's about the personal		
	cognitive factors. So how would you describe your		
	understanding of mental health and self stigma?		
JY	So I guess here comes with 2 questions. Right? One is for		
	mental health and then another one is self stigma. Right?		
Me	Mhmm. Yes.		
JY	Alright. So for mental health, I guess it is referring to the		
	mental well-being of a persons, whereby it reflects the		
	psychological well-being of a person's, like, the the		
	person's emotions, the person's thoughts, whereby it's		
	more like, you know, hierarchical, a circle a cycle influence		
	whereby our thoughts, emotions, and behavior will be		
	influencing each other. So I guess mental health is quite		
	important in certain sense. And then another one is self		
	stigma. So self stigma, I guess, is referring to the negative		
	attitudes towards our personal, our individual. So		
	sometimes, like, for example, I can see that there are still		
	a lot of university students that are struggling to seek for		
	mental health for themselves because of their self stigma.		
	Because they personally they personally view it as weak if		
	they seek mental help from the professionals. So I guess		
	that is kind of self stigma towards themselves. So, yeah, I		
	so that's why I guess self stigma, it could be a barrier or		
	challenge for university students in order to to get support		
	from the mental health practitioners.		
Me	Okay. Understand. So how does this knowledge influence		
	your perception of seeking help?		
JY	So basically, like, what I mentioned just now, the self		
	stigma part. So I guess I did reflect on myself. I don't have		
	this kind of self stigma because of my community. They		
	are quite open. That's why they're influencing or they're		
	passing the positive attitude towards the the positive		

	attitudes regarding the mental health view towards me.		
	That's why I am having a very open and positive attitudes		
	towards mental health. That's why it helped me and it		
	reinforced my help seeking behavior in certain sense. But		
	somehow for certain people, they are very reluctant		
	because of the self stigma or even the public stigma that		
	existed in our society. So yeah. But for me, personally, I		
	am quite open with it.		
Me	So understanding about, mental health and self stigma,		
	and this knowledge is very important that we influence		
	your percept perception to seek help.		
JY	Yes. It will some sort somehow it will it will influence your		
	awareness towards your mental health, I guess.		
Me	Okay. So what is the specific misconception or lack of		
	informations do the university students commonly have		
	about mental health that may contribute to self stigma.		
JY	I see. So like I mentioned just now, there might feel with		
	there might view help seeking behavior, or they might		
	associate the help seeking behavior with certain sense of		
	weakness because they view it as, if I if I seek help from		
	the counsellor, I am weak, I am sick, I am not able to cope		
	with my life, Then they might feel ashamed of it. That's		
	why the societal stigma or their self stigma will impact		
	their help seeking behaviour. And also another one will be		
	they are having negative details towards the counselling		
	profession as well. Like I mentioned earlier, quite a lot of		
	university students they are experiencing negative		
	experience during their secondary school life in the with		
	their counsellors in secondary school because quite a lot		
	of counsellors in secondary school, they are not even a		
	certified registered licensed counsellor under Lambaga		
	Counsellor Malaysia. That's why they can't they fail to		
	practice the appropriate counselling services within the		
	code of ethics under the LKM. That's why the P and C, are		
	not being practiced. That's why the university students		
	having a very, having very negative attitudes towards		
	counselling profession due to their negative experience		
	that they have from their secondary school.		

Me :	So they are have some of the misconception about the		
	negative influences during the early age.		
	Yes. I could say so.		
	,		
	Okay. So what expectation do you hold about the		
	outcome of disclosing your mental health concerns?		
	Means that, once I disclose my mental health conditions		
	to mental health professions, what what expectation that I		
-	have towards them, is it?		
	Mhmm. Yes.		
	Okay. So honestly, previously okay. So previously, I ex I was		
	expecting my counsellor to solve my problems whenever I		
	went up the problems towards my counsellors. That was		
	my initial expectation towards the counsellor when I		
	didn't have much, understanding towards what is		
	counselling. That's why I always relying on the counsellor		
	to gain a lot of resources, to get a lot of advices from the		
	counsellor. But, when the times go by, I've realized that,		
	actually the counsellors are actually being there to listen		
	to your problems, are there to help you to facilitate or		
	organize your thoughts and emotions in a very structured		
	and organized way so that you can see your thoughts,		
,	your emotion, and behaviour in a very structured way.		
'	Yeah. So previously, I was expecting the counsellors to		
!	stop my problem. But now I am expecting my counsellor		
1	to, being there for me to listen to my problems, to listen		
;	and help me to organize my thoughts in a very structured		
,	way so that I could see my thoughts, emotion, and		
	behaviours in a very pure, organization. Because I was in		
1	the state of very confusing because I am being filled up		
,	with a lot of the thoughts. I couldn't see the pathway or		
1	the direction clearly. That's why counsellors are there to		
	help me to organize my thoughts. Yeah.		
Me	Okay. So it's, very good sharing. So how does how do this		
	expectation shape your willingness to seek support?		
JY	It impacts a lot because whenever the problems or any		
	issue raise up, I feel like I am I am not alone. I am not that		
	helpless or hopeless because, once I recognize the needs		
;	and the importance of help seeking behaviour, and I		

	recognize the importance of counsellors being there to		
	listen my problems, then I won't be so alone or lonely in		
	facing the problem because I could get a lot of support		
	from my counsellors so that they are actually providing a		
	lot of support. And they are being there to help me, to		
	accompany me so that I could overcome the situations		
	more carefully, I guess. Yeah.		
Me	Seems like you have a lot of positive outcome		
	expectations from your counsellors. They make you, like,		
	have the business to seek support from the your		
	counsellor?		
JY	Yes.		
Me	How do you anticipate the that personal belief and		
	attitudes towards mental health among universities to this		
	might impact their willingness to acknowledge and		
	address their psychological distress.		
JY	Can you further explain it? I'm so sorry.		
Me	Mhmm. So, like, can you provide some of the specific		
	example or scenarios that illustrate how your personal		
	belief that may influence university students' behaviour in		
	addressing the psychological distress.		
JY	Means that my personal belief, is it? Towards the		
	university students.		
Me	Yes.		
JY	Okay. So. Alright. So, from my sharing just now, I guess you		
	you can know that you can see that actually I am quite		
	open and having positive attitude towards mental health		
	as well as the help seeking behaviour. And whenever my		
	friends comes to me, they need a lot of support and need		
	a lot of listener and so on. Previously, I will be there to		
	listen to them, but actually, I feel like it will be better they		
	seek help from the professionals, especially those certified		
	and licensed mental health practitioners. That's why		
	afterwards, I always encourage my friends to seek the		
	appropriate mental health services from the licensed and		
	registered mental health practitioners. And I am quite		
	open with it, and they are also quite willing to accept the		
	the offer as well. That's why I guess, me personally myself		
	and and do trem that a triff i guess, the personally myself		

	actually also influencing my surroundings, my friends, my		
	peers to actually nurture the mental health awareness in		
	my surrounding.		
Me	Understand. So what personal attitudes or belief do you		
	hold regarding your mental health treatment?		
JY	I have a very positive belief and attitudes towards mental		
	health treatment because I always feel I always feel those		
	mental health practitioners are very professional expert		
	and experienced enough to deal with a lot of mental		
	health concerns and issues and even disorders. They are		
	very experienced in it and even they are quite open. They		
	are practising non judgmental. They are practising		
	empathy, congruence, and so on. So no matter what		
	problem you have, what issue you have, you just throw it		
	out to your counsellors. You just throw it out to		
	practitioners. They will listen to it no matter no matter		
	who you are, no matter what have you did, what have you		
	done in the past, and so on, I guess yeah. I am having very		
	positive attitudes towards the mental health treatment, I		
	guess.		
Me	So how does these attitudes impact your decision around		
	seeking help?		
JY	Like, I will always share with you, it always motivates me		
	and encourage me to seek help from the those practice		
	those those professionals and even actually it it keep		
	reinforcing my thought to get help from the professionals		
	instead of get help from my peers because my peers, they		
	are actually, they are individuals. They are human beings,		
	and they can't run away of providing their advisers, their		
	personal belief, and so on towards me. But sometimes I		
	found it overwhelming if they are actually hard selling or		
	pushing their personal assumptions or belief towards		
	myself. So that's why I feel like seeking help from a		
	certified licensed counselors or practitioners, they are		
	actually helping you to facilitate, to formulate or organize		
	your own personal thoughts, your own core belief. So		
	from there itself, it help you to realize that, okay, actually		
	who are you? Who you are? What is your core belief?		
	The are jear time jear are. That is jear core belief.		

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	What is your worldview? And so on. From that itself, it		
	helps you to discover who you are in certain sense.		
Me	So I can see that throughout our interview sessions, you		
	have quite a positive attitudes towards the help seeking		
	behavior.		
JY	Yes. I am very open with it.		
Me	Okay. So we will move on to our last part of our interview		
	session.		
JY	Alright.		
Me	Okay. What's what specific strategy or program have you		
	observed or experienced that effectively promote a		
	positive health seeking culture among students?		
JY	Mhmm. I have a lot of experiences of programs that I did		
	attend before, especially during my study. So for example,		
	like last 2 weeks, I did attend a crisis workshop, whereby,		
	it was a program that invited 4 master intern students to		
	sit in the sit into the workshop and share a lot of of their		
	career experiences and dealing with different different		
	clients, how they're handling the crisis, and even they are		
	teaching they were teaching us how to use those		
	exploratory tools, like in NutCard, OakCard,		
	PersonalitaCard, and even sand tray Therapy to help us to		
	explore the clients or even provide intervention with the		
	clients. So from there, it's actually really broadened up my		
	perspective towards counseling field because, along my		
	study I keep doubting myself. Am I suitable in this field?		
	Am I suitable in counseling field or even am I, am I capable		
	in help seeking professions? So from the program itself, it		
	actually motivate me and also motivate all of us to		
	actually valuing counselling and mental health field. And		
	also, like I mentioned earlier, I realized that actually our,		
	DSA, our student department affair, they are actually		
	putting a lot of efforts to promote mental health services,		
	to promote mental health resources towards the students		
	by organizing a lot of events, a lot of exhibitions, so that		
	the students are aware of. So I guess all of these kind of		
	exposure towards the students are very helpful to		
	increase and enhance the awareness as well as the mental		

	health seeking behavior in in terms of the students'		
	perspective.		
Me	e Seems like your university have put a lot of efforts in		
	promoting this positive help seeking behavior among the		
	student.		
JY	Yes.		
Me	e K. So, in your opinion, what step could educational		
	institution takes to create an environment that encourage		
	students to proactively seek help for their mental health.		
JY	Like, I always keep mentioning whereby the educational		
	authority, they have to organize event. They have to,		
	lastly, greatly emphasize on the awareness of mental		
	health. But at the same time, I also feel like, not only the,		
	it is not only the responsibility of the school authority, but		
	also those educators such as the teachers, the lecturers		
	and the tutors. If let's say the lecturers or tutors, they are		
	having negative attitudes, negative stigma or negative		
	prejudice, discrimination towards mental health field, they		
	will actually unconsciously passing those ideas, those		
	beliefs towards the student indirectly in their teaching. So		
	if let's say the lecturer having positive attitudes, they are		
	encouraging, they are they are quite supportive for their		
	students to seek mental health, then the students will get		
	influenced to voluntarily having the this kind of help		
	seeking behaviour so that they are aware that they need		
	that services. So I guess not only through education, but		
	also the quality of the educators are also important to to		
	improve this kind of help seeking behavior among the		
	students. And also the parent as well. same goes with the		
	idea same goes with the educators that I shared to you.		
	The parents also have educate their children regarding the		
	awareness and, positive attitude towards mental health.		
	Otherwise, the students will not have this kind of		
	awareness towards their mental health. Yeah.		
Me	5, 1 1 1 5, 1 1 1 5, 1 1 1 1 1 1 1 1 1 1		
	very important to proactively, let the university students		
	to seek health for their mental health distress.		

Me	Mhmm. Okay. So from your experience, what strategies or		
IVIC	intervention have been effective in enhancing health		
	seeking behaviour among university students?		
JY	I guess the the free services provided from the practicum		
]]]	counselling students, whereby it increase a lot of increase		
	· · · · · · · · · · · · · · · · · · ·		
	a lot of chances for the students to experience what is		
	counselling. Because some of the students they are		
	actually having negative attitudes, or even they are quite		
	afraid of to attend the counselling services in DSA because		
	they feel like there is a power distance Between them and		
	the counsellors in the DSA because of the. Power distance		
	like I guess, But from the practicum services, the		
	practicum students are also still students. So the the		
	power distance are not that big. So that the gap between		
	the counsellor the training counsellor as well as the		
	student is not as big as what the student experiencing		
	during with the counsellor from DSA. So I guess this is a		
	very effective ways to promote the help seeking behaviour		
	among university students.		
Me	This is great to hear that that the practicum students		
	have, like, lowered down the gap to promote the		
	effectiveness to you know, you see these students to seek		
	help because it's more predictable to their issues.		
JY	Yes.		
Me	Okay. So in your opinion, what step or initiative could		
	university implement to create a more supportive		
	environment that foster a proactive approach to seeking		
	help for psychological distress among students.		
JY	Alright. So I guess from my sharing just now, you you can		
	realize that actually my university putting a lot of efforts in		
	organizing events or even providing the free services to		
	the students through DSA, practicum students as well as		
	very cheap UCCC counseling services also available in the		
	FAS. But I guess they are actually putting a lot of efforts		
	into it, but I guess they have to take initiative and take the		
	steps in order to educate or enhance the awareness		
	among the educators in the lecturers as well as the tutor		
	as well. Because like I mentioned just now, if the lecturers		

		I	I
	and the tutors are not having positive attitude towards		
	the mental health profession, they are actually passing the		
	negative stigma that, that, that they have towards the		
	student. So this is quite reinforcing the existing negative		
	stigma that we have towards the mental health		
	profession. So once they educate the lecturers to the		
	lecturers to be open towards the mental health field, so		
	that they can also take the opportunity to spread the		
	awareness during their classes, so that the students are		
	aware of that. So I think educating the lecturers and tutors		
	regarding this matter is very important.		
Me	Yeah. So we can see that promoting the awareness and		
	education from parents and educational institution is very		
	important to, foster the, help seeking behavior amongst		
	amongst students.		
JY	Yes.		
Me	So it has come to an end to our interview sessions. Thank		
	you very much for your cooperation and your answers.		
JY	Yeah. K.		
Me	Thank you very much. If you have any, queries or any,		
	questions, you can further discuss with me and also my		
	supervisor, Pn Shakila.		
JY	Sure. I'm so sorry if I talking too much.		
Me	No. It's okay. So thank you very much for your time and to		
	participate in this interview session.		
JY	Sure. I hope it helps you for your FYP as well. Alright.		
Me	Okay. Thank you very much.		

		Code	Sub-theme	Theme
Me	Hello, Helen. Good good evening. Welcome to my			
	interview session.			
Н	Hello.			
Me	k. So I will brief you about the informed consent first			
	before we start.			
Н	Okay.			
Me	So for my, title of research is understanding public stigma			
	and self stigma on university students' psychological			
	distress in influencing help seeking behavior. So, this			
	interview session will last approximately 40 to 60 minutes			
	and will be audio recorded using a laptop. Is it okay for			
	you?			
Н	Yes. I'm okay with that.			
Me	So, you have the right to, decline to participate or			
	withdraw any time from this research. I, in the middle of			
	interview session, if you feel that the question is, sensitive			
	to you, you can stop me immediately or you want to quit			
	this interview session also Okay			
Н	Okay.			
Me	And so, there will be no consequences of declining or			
	withdrawing your participants, participations in this,			
	interview session. Yeah. So if any things, you want to ask			
	about or you have a doubt of curiosity, you can, ask me or			
	ask my supervisor, Pn Shakila. So if you are ready, again, I			
	will, start my interview sessions.			
Н	I'm ready.			
Me	K. So, my research objective of this project paper is to			
	identify the factors that are influencing health seeking			
	behavior among university student in Malaysia, And then			
	also to explore the perception of public stigma that affects			
	students' willingness to seek help for academic or other			
	issues. Also, to explore the role of self stigma in shaping			
	students' decision in help seeking. And lastly, to identify			
	the strategy and step done to improve help seeking			
	behaviour among students. Okay. So, do you know, what is			
-	stigma?			
Н	I'm not sure about stigma. Is it cause stereotype like that?			

Me	Yeah. Stigma is like negative labelling on others.	
Н	Okay. I see.	
Me	So our our interview session will have, 4 part. We will start	
	from the first part. Okay?	
Н	Okay.	
Me	So for the first question, what specific skills or strategy do	
	you feel equipped with to navigate the process of seeking	
	help for mental health issues?	
Н	What, could you repeat one more time the questions?	
Me	What specific skills or strategy do you feel it could be to	
	navigate get the process of seeking help for mental health	
	issue?	
Н	Like, you mean what things makes me want to go to seek	
	for help from counselling?	
Me	Yes.	
Н	I think it's because the time I was this I was very stressed	
	from study my academic study. This is one of the reason.	
	And the second reason is I got bullied from my primary	
	school and from my cousins. So this caused me a bit, a bit	
	depressed in my environment.	
Me	Okay. Okay. So, how do these skills contribute or to hinder	
<u></u>	your willingness to seek support?	
Н	You mean the skills is the?	
Me	just now you meant, just now you mentioned for the first	
	question, there's skills that you equipped to let you, go to	
	help seeking.	
Н	Oh, okay. I think it's because, I have watched some	
	psychological related books at that time. And then I it feels like I want to help myself from not be from from,	
	avoiding this abuse anymore. And then there's one one of	
	my friends, she also encouraged me encouraged me to	
	seek for help from counselling. So I asked my mother to	
	take me to the counselling.	
Me	I'm glad that you have equipped some of the skills like,	
1410	reading, extra reading and social support that make you	
	wanted to seek help.	
Н	Thanks.	
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Me	So, what specific skills do you believe are crucial for		
IVIC	university students in order to effectively seek help for		
	psychological distress?		
Н	For me, I think in university, the most important is, the		
' '	way of openness to the counselling setting. Because, there		
	are still there are still a lot of students, they, having some		
	stereotype through the counselling or through the how to		
	say The psychiatrist. Because they may think that, they		
	may influenced by their families, members, or any other		
	source of information. They feels like, be seeking help		
	from counselling or seeking help from psychiatric is one of		
	the, is one of the abnormal behaviour. Like, for my		
	mother, my mother in the past also not thinks that, I need		
	to go to counselling. And because she think that if I go to		
	counselling, I go to seek for psychiatric or I take the		
	medicines, I will be judged by others, being being, being		
	abnormal, I can say. So, I think the most important is being		
	openness to the counseling setting. The others is, seek for		
	more information about about counselling setting to		
	understand that there's some professional cause exiting		
	that could help us.		
Me	I'm glad that you have overcome these, barriers and some		
	of the negative thoughts and feelings that makes you,		
	influence your help seeking behavior.		
Н	Yes.		
Me	So how can, these skills be developed or enhanced?		
Н	To develop the openess skills, I think the most important		
	for me is reading because, I open my world view or I open		
	my perspective to the counselling to the psychology. It's		
	due to their reading it's due to my habit of reading. And		
	the second one, I think to develop is, being not		
	judgemental. I say that don't be don't be too fast to make,		
	decisions or make a judgement to any other things.		
	Because if we just, if we just simply follows other		
	perspective or we just simply, make decision, makes		
	judgement to one perspective, it may influence us that		
	not be not go to the right direction for me lah and the		
	other is try to practice ourselves not to not not judge to		

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	anything before we understand the whole situations so		
	that we could have more critical thinking to any situation,		
	to any, behaviors And so that we can understand that, so		
	that we can understand that being go to counseling, I		
	think maybe it's because, I think that it could help me. Not		
	because of anybody for us. Not because they I think I'm		
	being sick or any other things. Yeah.		
Me	I'm glad to hear that. So extra reading, as as important		
	skills to be developed to able to enhance this help seeking		
	behavior. So, they are understanding more have more		
	understanding about this help seeking behavior is		
	important.		
Н	Yes.		
Me	Can you share instances where you have actively practiced		
	help seeking behavior in the past?		
Н	In the past, I think it's about form 5. I think it's about form		
	5, and I'm going I'm how to say, I'm facing SPM. And		
	because that day the time I was very frustrated to my		
	result. And also, there is a teacher. There was a teacher,		
	he always judge me, judge my result, and always keep bias		
	to me. And actually, he did bias to all girls because she		
	thought no. He he thought that, girls is not good at math		
	and also once I get a bad result from my mathematics in		
	the how to say? In the trials, he he's I think it's not like		
	scold, but it's just make me feels embrace in the whole		
	class because he he say it out in the whole class. So it		
	makes me feel embrace. At that time, I have breakdowns		
	and there's a teacher there was a teacher. She saw me		
	break down at the staircase. So she bring me to		
	counselling. And after she bring me to counselling, she,		
	the counsellor talked to my mother. And then after they		
	talk with after they make a discussions and I also asked my		
	mother bring me brought me to seek for the private		
	counselling setting because my friend also told me that,		
	she think that I need to seek help from counsellor. So		
	because of that, I, I agree with, my mother agree with my		
	opinions, and she brought me to a private setting.		

Me Okay. Thank you for your sharing about your experiences. So how this how did this experience, like, shape your current approach to seeking help? H I think for the first is being break emotionally breakdown is not an embarrassed. The first is, I think is being how to say? you are having a bad, or you are not doing well in certain area. Actually, it's not embarrassing and actually it's just normal because maybe you didn't get that skill. You didn't get that method. The other one is being emotionally breakdown is also normal for everyone because, you you can release your stress once you cry or once you break down your emotion. Of course, there is still some skill that can help us to maintain to give a right direction to to release our emotions. But if we really have an emotionally breakdown, it's very normal for everyone. So I think, throughout this incident and throughout the whole counselling sessions, I know more about myself in afraid afraid of the authorities, I can say. And also my emotion in, afraid of being judged. And so I can say that after, so I can say that seeking for help actually is a very, is	
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after, so I can say that seeking for help actually is a very, is	
a very helpful way to bring you understand more about	
not only yourself and also understand more about your	
situations and so you also can learn a lot throughout this	
whole whole process. So I think it shapes me to be not	
afraid. I can say, like, for the main aims, I think is not afraid	
to being embraced or being judged by others.	
Me Yeah. It's good to to hear you overcome those, negative	
situations, like, negative comment about you, feeling	
embraced to seek help so you can overcome these issues.	
And then you, after these experiences, you try to, seek	
help when you needed.	
H Yes. I think that's a very big, overcome of the obstacle for	
me.	
Me Okay. So, in your view, what practical steps or actions can	
university takes to encourage a culture where seeking	
help for mental health concerns becomes a norm.	
H For me, it's it's first, the university should always being	
like, always make it as a normal. For example, for example,	

	at my school, they will always promote counselling		
	service. They will always promote the always mention		
	that, seeking counselling is not is not meaning that you		
	are abnormal or stuff. It's just a normal that, maybe		
	sometime we cannot able to handle the stress. So we		
	need to seek for help. I think the most important is, make		
	make the centers of seeking for help become a normal.		
	And second one is, not only I think it's not only school, but		
	also, like, for example, our, our student community, I for		
	example I forgot the name. SRC. Is it?		
Me	Yes.		
Н	Yeah. SRC. They also need to make us, I I forgot, like,		
	leaders or make us the, present representative to		
	Representative. Yes. Representative to guide us to know		
	about to get us to know more about that. What facility or		
	what kind of what facility in our university would have, for		
	example, like the, DSA counselling, for example, the any		
	other resources that are nearby our school that can help		
	us to seek for help. So, so that students can be able to		
	feels like, oh, seeking for help is normal things. Student		
	can able to, not feeling embarrassed or not feelings that		
	weird when they need help. And because of that, the		
	students will feels like they are they can be they they just		
	they just able to seek for help when they are need. Not on		
	not until the student has, any serious situation happen		
	then so they need to seek for help. So I think the most		
	important is, make all the things as a normal and make all		
	the facilities becomes visible so that we can able to use it		
	when we need.		
Me	Understand. So, promotion is quite, important to increase		
	the awareness for help seeking behavior among university		
	students.		
Н	Yes.		
Me	So how confident do you feel in your ability to initiate and		
	follow through with the health seeking process from the		
	health?		
Н	For me, I am I think I quite confident for myself after I		
	having after I have that, experience before after I seeking		

	,		,
	for help. I think for me, I first, I have I found, ways to seek		
	for help. For example, it's like the, for example, if for mild		
	mild situation, I may seek help from my friends, and after		
	they come to my mother. And if it comes to, of of course, I		
	will try to solve it by myself. But if not, then I will start to		
	soon start to seek help from my friends, my mothers, and		
	after my mother, and then, mother or lecturers. And then		
	if there's any things that I think I couldn't hold it, then I		
	would try to seek help for counsellors or any other		
	professionals too. Because for me, I think, of course, I I		
	may have some shy to to strangers that this this is my		
	personal issue. But I I would know that, this is a needed		
	process to me because, I need help. So I so once I, try to		
	do so I have to try to seek help.		
Me	Okay. Can I know what factors, contribute to or challenge		
	your self efficacy in this regards?		
Н	Could you rephrase it? I'm not very understand.		
Me	Okay. Like, what challenges do you face when you seek		
	help?		
Н	What challenges do I face when I seek help? If for in the		
	past, I think one of the challenges is my judgemenal. The		
	judgemental from my mother and also myself because, in		
	the past, my mother always think that eating medicines or		
	seeking help from psychiatrist or is is abnormal and is,		
	embrace the families. And so that I also feel, if I really seek		
	help from any professionals, it may makes my families		
	embrace embrace lah. But, the challenge to me actually,		
	my mother have tried my mother has I've also tried to let		
	me go to counselling in when I was very small. But maybe		
	at that time, the the setting the the place is not that		
	professional. So it gave it gave my mother some bad		
	experience. So then my mother used to think that, like,		
	that kind of counselling is not work. That kind of		
	counselling is not professional. And because of these too,		
	my mother is not willing to brings me when I was small,		
	when I was not able to go by myself. But after, my mother		
	saw the professional counsellor which, from which one of		
	that is from my school, the the licensed counsellor from		

	from my high school. And she guide my mind how to find		
	a professional counselling setting. And 1 by 1, then we can		
	found that they're actually is not bad for us. So the first		
	thing I think is the view to the things like how you view		
	the, how you view, how how your perspective and how		
	you view the things is one of the challenge.		
Me	I'm so glad that your even though your parents also,		
	changed the perspective of, this, help seeking behavior.		
Н	Yeah. So I think experience is important for everyone like		
	because if you got the bad experience in the past, then it		
	may influence you not able to make any change one more		
	time because of that bad experience.		
Me	Okay. So, through these challenges that you face, is this		
	affecting your self efficacy?		
Н	I think, yes, in the past. But, I but currently, I think it's no.		
	Because in the past I myself I think, it will influence my		
	thoughts to the professionals professions and also		
	influence myself that thinks that, oh, maybe I unable to be		
	good or maybe I may able to be that, unable to get help.		
	But, go once I go to the setting, once I get the because I		
	get the counselling, I it change it actually changed a lot		
	from my view. And also, it's at the first is unconsciously,		
	shift my thoughts and unconsciously shift my view to		
	causing setting and also influence my I think also influence		
	the ways that I think of actually the challenge for me is not		
	that is not that how to say it's not that big to my self		
	efficacy. Am I, am I answering the right way? I'm not sure.		
Me	Yeah. Yeah. Yeah. Don't worry about that. So, how does an		
	individual's belief in their ability to navigate and access		
	mental health support influence their likelihood to		
	engaging in help seeking behaviors?		
Н	I think the belief of an individual is very important		
	because, people will have different different perspective		
	view to the psychological psychology setting. And, also,		
	the belief of them to the psychology setting, will also		
	influence their behavior, influence their actions. For		
	example, like me, in the past, if I view because I view that,		
	the because my mother and I view that causing setting.		

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	Psychology setting is not that profession. So it also delay		
	my how to say? Delay my time or delay the the time that I		
	seek help from the counselling setting. So the belief, I		
	could say one one's belief is very important in influencing		
	them. Whether seek help from psychology setting or		
	influencing them, whether seek help from psychology		
	setting or not.		
Me	So the belief, individuals belief is very important, will		
	influence how they view, like, going to see help.		
Н	Yes.		
Me	So, thank you for your participation in the first part of the		
	interview. So we will go to the second part. It's about the,		
	environment factor. In your community, what prevailing		
	social norm exist around mental health?		
Н	What is prevailing social norm?		
Me	Oh, it's like, some of the example, like, how the		
	community view mental health issues.		
Н	Oh, so, maybe you repeat one more time. I I have I have it		
	the answer I mean, the question.		
Me	Okay. So, in your community, what prevailing social norm		
	exist around, mental health?		
Н	The the first thing is the judgment. The the how to say?		
	The judgement to the psychology psychologicals issue.		
	Like, they thinks that if you get depression that you are		
	abnormal. The things that, if they if they found that you		
	are anxiety, you are eating, eating medicines, that's		
	related to the mental health. They will think that you are		
	you are you are abnormal and they may stay away from		
	you or they may chitchat to you beside behind your		
	behind your back. Chitchatting, is it? I called I think I I		
	called chitchat. Gossip you.		
Me	Hold back on you.		
Н	Yeah. Hold back on you. And then, the second one is the I	 	
	think, it's because the traditional culture. Because,		
	traditional culture in in in traditions, we used to think that,		
	for example, in my in my family background because I'm		
	Buddhism or Taoism, they would think that if you are, like,		
	being depression, anxiety, that you will, you may have		

	some of the symptoms. They will consider this symptom		
	as you are being, you are being disturbed by the other		
	ghosts or any others, bad things from them. So they may		
	not choose to bring you to professions setting is that they		
	will bring you to their how to say? The temple. Seek help		
	from the, the person that hold the person that can help		
	that, profession in the religion place. I'm not sure. I forgot		
	the name. Or or I can say in Chinese, like, the name. Yeah.		
Me	Yeah. Okay. No problem.		
Н	Okay. It's quite a new experience. And I hear this yeah.		
	First time hearing this. Yeah. Because, I was grow in I		
	could say I was grow in a very a very special environment		
	which, I live very near around the temple. So I can see a		
	lot of I can I have seen a lot of peoples, They may bring		
	their children or may bring their, their, how to say, their		
	part their family members to seek help. Of course, I I		
	I understand that they are very they are really like to help		
	their how to say? the family's members. And some of		
	them maybe is really able to how to say? They they may		
	really able to get well from after they after they seek help		
	in that place. But some of them are still unable to release		
	themselves And in that case, they are really need to seek		
	for help. But at the current situation, nobody can help		
	them. So I can feel that they may feel very hopeless and		
	they may feel very unable to being understand by others.		
Me	Yeah. So they didn't understand the situation behind, like,		
	mental health issues. The things that they are possessing		
	by some of the evil spirit or some of the spirit.		
Н	In the religion place, I cannot say anything because this is		
	the person your personal religious. For me is if if you will		
	after you seek help from the religion place, it didn't get		
	well. And I think it's the time to use consider bringing your		
	family members to counselling setting. Maybe if you don't		
	like to let them get medicine, I think as well. But first, I		
	think first of all, you maybe you need to bring them to		
	counselling setting first instead of, you like you bring them		
	to a lot of places. Just want to let the evil thing come out		
	from them. But after you seek a lot of place then you have		

	valuatill cannot able to help them. Then it makes valuery		
	you still cannot able to, help them. Then it makes you very		
	how to say? It makes the client very frustrated. It makes		
	the person very frustrated and suffer.		
Me	So understanding the mental health, like, situation is quite		
	important nowadays. Yeah. Must have some of the		
	knowledge about, like, or or where to see how or some of		
	the informations about mental health. Mhmm. Mhmm.		
Н	You're asking question?		
Me	No no, I am paraphrasing. Yeah.		
Н	Yeah. Okay.		
Me	So how do these, norms affect your comfort level in		
	openly discussing or seeking help for mental health		
	challenges?		
Н	Actually, the my mother were afraid to judge by others.		
	Because at that time, I was for my experiences at the		
	time, I was actually, I was a bit, how to say, unable to get		
	info from outside I'm not sure if I'm going to be able to get		
	informed from outside places, the environment. So it		
	didn't harm me a lot because I'm already frustrated from		
	my mental health issue. How can I, see the how can I		
	experience the environmental things? But for my mother, I		
	can see she handling a lot of judgement or I think a lot of		
	press press, from the family members because at the time		
	when she handling me, it is quite suffering to her also.		
	And at that time, there's a lot of peoples, I think, not		
	laugh at her but it's still things that, there's still things that		
	aiyor why you need to be like that to your children? Why		
	your children not that, not not that good to you? And my		
	mother's and then they will say that, why you want to		
	take care of her that much? And my mother cannot say		
	anything. So for me, it's like that.		
Me	So this not only affect the situation of individual, also		
	affect the situation for, like, the family members.		
Н	It's the family members who are take care of the person.		
Me	So, in your opinion, how do societal attitudes towards		
	mental health influence the way university student		
	perceive and response to psychological distress.		
Н	How social attitude to mental health?		

	there's not there's not more that didn't have, a lot of		
	counselling settings. Because in the past for me, when I		
	want to go to the seek for the counselling how counsellor		
	help actually, I need to drive for 1 to 2 hours to go to only		
	go to the counselling setting. It's quite far from my home.		
	So, so this also become one of the factors that influence		
	my my my participations to the counselling.		
Me	Okay. So you have to go very far to seek help. It's not		
	really, available around your community.		
Н	Yes.		
Me	So, to what extent does this, like, influence your likelihood		
	to seeking help?		
Н	Like, for the first three time, I still very, very high high		
	participations. But after come to the 4th, the 5th, the 6th,		
	it started makes me a bit, makes me a bit hard because,		
	like, my mother also have her stuff to do. At that time, she		
	need to fetch me to seek to go to the counselling setting.		
	And that's not only the burdens, also because the the		
	cost, the fuel cost, the the transportation cost, and also		
	the counselling cost, the cost the fees counselling fees is		
	also high, quite high. So, like the more I go to the		
	counselling and the more things, the more moneys I have		
	to pay, I have to bring it, it's quite burdens. So actually, I		
	couldn't say that I finished the whole counselling sessions		
	but I finished, like, I've I actually finished in in after I feel		
	I'm good, but I didn't get came back go to there to		
	terminate the sessions. I just finished it myself.		
Me	Because the counselling center is, quite far, so you have to		
	bear some of the, like, financials.		
Н	Yes.		
Me	Okay. Understand. So, from your perspective, what		
	community resources or or support system are easily		
	accessible for university students dealing with mental		
	health challenges?		
Н	What? I think the first is the social support from from		
	peers. The social support from peers is the most the most		
	the most the most method that can help that can assist		
	the person who are suffering from any any issues or any		
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	problems in their daily life. And the second is the lectures.		
	Maybe they, but some of them may feel like lecture is very		
	and are very unkind. So for some of them maybe is the		
	counselling setting in the university. So I think the most		
	two thing is that because, if student are far from home for		
	their family members, they may unable to get the		
	immediate help from them.		
Me	Okay. Understand. Okay. So, what what opinion or		
	judgment of others towards seeking help for mental		
	health concerns?		
Н	You mean example?		
Me	Yeah. Like, do you know, like, what is your opinion of, like,		
	your others or friends, like, or family members have, like,		
	their opinion or their judgment about seeking health for		
	mental health concerns?		
Н	There is one sentence I remember until now for my		
	mother that, but it's in Chinese. So I think I need to		
	translate like to say that if you eat medicines then you		
	unable then you will not able to become normal people		
	and you have you will have to eat for a whole lifetime.		
	And then, so why do you want to eat medicines? Why do		
	you want to go to psychiatrist. The things that I remember		
	the most is this. And the second one is the second one is,		
	like, my my personal experience, I think, is not I heard		
	from I think it's I forgot the real situation now, but I		
	remember is I I'm not sure it's solved for any Internet or		
	anywhere is that there's someone say that, if you actually,		
	the person who say that they are depressed or they are		
	having depressions, anxiety, and even though they are		
	seeking help, they already have the have the have the		
	diagnosis. There's still some of them say that you are just		
	let me find the word. You are just. You are just		
	pretentious. Like, you are just you are just say only, but		
	actually you don't have. Do you have this kind of		
	judgment?		
Me	So, through this, like, opinion or judgement from others, is		
	it, like, impact your decision making process when it		
	comes to seeking help for mental health concerns?		

Н	Yes. Because my mother actually did influence me a lot at		
	first because, the past my mother was very, I will not say		
	very strong. Very hard. Very harsh. But she will try to, but		
	she actually did things that is not effective. And also, I		
	have a lot of bad emotion, not bad emotion. I have a lot of		
	negative emotions. I have a lot of emotionally breakdown		
	and also a lot of dangerous, dangerous behavior. I would		
	like to say suicidal behavior and suicidal thoughts. But at		
	that time, my mother, my mother is until the incidence of		
	the counsellor from my school. Then she then she's after		
	that willing to bring me ma. But in the past, I have		
	challenging behaviour I would say. My mother still not not		
	that want to bring me again to the to the counselling		
	setting because of the first experience is not that good.		
Me	So some of the negative opinion or negative judgement		
	will influence your negative emotions also.		
Н	Also influence the time that I seek out for counsellor.		
Me	So how do you think the public's perception of mental		
	health issue will affect the willingness of students to seek		
	help, considering the influence of, like, peer opinions or		
	societal expectations.		
Н	I would say it's, like, 80% to the influence will be, like, 80%		
	to people because, we used to be with our peers, be with		
	our society and be with them a lot of time. So if you		
	unable to get any other opinions or resource in from the		
	outside world, for example, like Internet or maybe some		
	of them their Internet will still remain the same like that		
	because due to due to the preference of the looking of the		
	video Internet. So they may unable to get another		
	opinion, get another info outside others from their peers,		
	their societies. And so it shaped, their social attitude. It		
	shapes their, their perspective. So it will also limit		
	themselves not to seek help from counsellor.		
Me	So, thank you for your participation in this part 2, and		
	then we'll move to, part 3 of our interview session. Okay.		
	Part 3 is more about the, personal cognitive factors. So the		
	first question is, how would you describe your		
	understanding of mental health and self stigma?		

Н	How I view myself?		
Me	Yeah. How how, what is your understanding of, like,		
	mental health And also, self stigma.		
Н	Okay. Understood. So for for me, mental health is mental		
	health is our psychological health is in is first. It's like our		
	emotions, our problem solving, our ways to cope with		
	stress, cope with the accident or cope with the sudden		
	situations. And it's how the ability that we cope with this		
	thing. And for self stigma is this for me, it's like self		
	limitations. Like, because I don't, we will still have some		
	self limitations to, our ability to our personality. We we		
	may think that we are not that good, not that able to do		
	things, or not that courage to seek for help. So I think, like,		
	so this is kind kind of self limitation to our self.		
Me	So, based on your understanding about this, like, how		
	does this knowledge influence your perception of seeking		
	help?		
Н	Because, some people may have a great ability in handling		
	the stress, handling their handling their anxiety or their,		
	like their negative emotions. But some of them, they may		
	unable to very well to regulate the emotion, regulate the		
	stress. So this may become one of the factors influencing		
	their willingness to seek help. The second one is the self		
	limit. They may they may think that, their, even though I		
	come to the even though I seek for help, I still cannot able		
	to be better or be healthier. So this may also affect the		
	effective of the effective and willingness to seek help. Yeah.		
Me	Understand. What specific misconception or lack of		
ivie	information do university students commonly have about		
	mental health that may contribute to self stigma.		
Н	Contribute to self stigma. Let me think. Let me think.		
Me	Okay. No worries. Take your time.		
Н	Could you repeat the question one more time?		
Me	Okay. What specific misconception or lack of informations		
IVIC	do university students commonly have about mental		
	health that may contribute to self stigma.		
	nearth that may contribute to sen stigma.		

Н	I think the one of the misconception is, counselor can read		
	your heart And and be and leading them that they and		
	they leading them have a very high high expectation to		
	the counsellor and they may rely a lot to counsellor and		
	not rely on themselves. So it caused them have a self		
	stigma that, oh, I don't need to do anything. So I just tell it		
	to counsellor and the counsellor will help me solve my		
	problem. So I think one of the misconception is this.		
Me	Okay. Understand. So, like, what expectations do you hold		
	about the outcome of disclosing your mental health		
	concerns?		
Н	What, what influence my, it's my willingness to disclosing		
	my mental of concerns?		
Me	What is your expectations about the outcome? Like, when		
	you disclose your mental health concerns towards the		
	professionals, like, what expectations do you have about		
	the outcome?		
Н	B if from my if if b as a council if b as a client, actually, the		
	first is I would like to I would like them understand my		
	situation. It's not 100% you have to understand my		
	situation but first of all is, I think it's not judged by		
	situations like you are able to you are able to know that,		
	oh, my current situation is like that but you won't judge		
	me or you won't say anything. You just hear hear me		
	because sometime for me, I just need someone to hear		
	and then after hearing, the person is not judging me and		
	the person can able to get me to help me to find out the		
	find out my self answers, find out the way that how can I		
	cope with my current situations? So for me is the		
	important is my expectation is understanding and non		
Ma	judgmental.		
Me	So how do this expectation shape your willingness to seek support?		
Н	How, I can say it quite influence me because, okay,		
	because the time that I decide not to go to the counselling		
	setting anymore. One of the reason is also because that I		
	feels like the counsellor is quite because at the time is		
	MCO. So we are doing online and because of the online, I		
	ivico. So we are doing offiline and because of the online, it		

	maybe is I'm quite sensitive. I found that the counsellor is		
	quite tired and she unable to unable to understand what I		
	have talk before. So I feels a bit not comfortable and and		
	after I reflect all my situation, current situation and she		
	also say that, I feel she feels like I'm not I have more stable		
	than before. And so on so that I think I don't need to		
	continue. So because of that, I feels like, it it will affect me		
	a lot because, I maybe it's for me is I'm quite sensitive. So I		
	can sense that, maybe you are really listening to me or		
	not.		
Me	Because you you hold your, value and belief about the		
	understanding about your situations and and also non		
	judgmental.		
Н	Yes.		
Me	Yeah. So, how do you anticipate that, personal beliefs and		
	attitudes towards mental health among university		
	students might impact their willingness to acknowledge		
	and address their psychological distress.		
Н	Could you repeat one more time the the first part?		
Me	Okay. How do you anticipate that personal beliefs and		
	attitudes towards, mental health among university		
	students might impact their willingness to acknowledge		
	and address the psychological distress.		
Н	I feels like it will impact a lot because, the they have their		
	own expectation in the counselling setting, in the		
	counselling, so I I think they is very sensitive. Like for me, I		
	think individuals will very they're very, how the things is		
	very important to them because, if they willing come to		
	counselling that means that they really need someone to		
	help them. So they will they will think the counsellor is		
	important. It's very important to them and very, consider		
	very and very sensitive to what counsellor have said. So,		
	the personal their personal belief, not personal the the		
	personal expectations may be enhanced or may be feels		
	like, oh, may be have a conflict between the counsellors.		
	And if they have a, if there is a conflict between the		
	expectation and the counsellor performance, it will also		

	affect a lot to the person's willingness to come to		
	counselor.		
Me	So their personal belief of how they view this		
ivie	psychological distress is very important and affect their		
	health seeking behaviors.		
Н	Yes.		
Me	So what personal attitudes or belief do you hold regarding		
ivie	mental health treatment?		
Н	Personal belief and attitudes attitudes. My belief is, if I		
	come, then I try. Like, how, how can I know the result if I		
	didn't try? My personal belief and attitude to the		
	treatment is like that.		
N/10	So how do these attitudes, impact your decisions about		
Me	around seeking help?		
Н	Actually, it makes me, it makes me willing to it makes me		
	influence my willingness to seek out loud because, I		
	always told that, if I didn't try, then I would I wouldn't		
	know the I wouldn't know the results so that I always		
	willing to go to seek for help when I needed.		
Me	So we will move to our last part of our interview sessions.		
IVIC	Okay. What specific strategy or program have you		
	observed or experienced that effectively promote the		
	positive health seeking culture among students.		
Н	Meditations? Like, in my secondary school, we will have a		
''	short meditations every time after the time break and		
	after the time break before the class started. So, our		
	school, the whole school will will will will give an		
	audios in our class and every class need to do the		
	meditation like 2 minutes every time before we start the		
	class. And it's quite it quite how to say? It's also, like,		
	makes me know more about the counselling and also		
	makes me want to learn more about the counselling.		
Me	It's quite good that your school have this kind of activities		
	and program for you.		
Н	Yes. I also very appreciate it.		
Me	So, in your opinion, what steps could, educational		
	institutions take to create an environment that encourage		
	students to, proactively seek help for their mental health?		
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Н	I think can, like, promoting the one of the technique into		
	the daily life. For example, the my secondary school have		
	did I that have said just now. They they may able to find		
	they're able to like choose, pick one of the skills that are		
	able to implement to the school life and so that for		
	students who they may think, feel they may feel is interest		
	and they may feel like to want to willing themselves to		
	know more about the counselling. And the second one is,		
	they may need to always always, how to say? Enhance the		
	importance of seeking help so that students know how to		
	seek help and, like, they may need to because my school,		
	they will have counselling. Not counselling. I think it's		
	yeah. Counselling course. Counselling classes, every week		
	once. And they will taught us how to seek for help. They		
	will taught us how to, being not mindful but it's like being		
	calm in any sudden situations and this also influenced		
	myself to influence my thought to the counselling view.		
Me	I can see that your school is taking a lot of initiative to		
	enhance this help seeking behaviors about the mental		
	health issues.		
Н	Yes.		
Me	So from your experience, what strategies or intervention		
	have been effective in enhancing help seeking behavior		
	among university students?		
Н	What strategy? I think I'm not sure it's right or wrong, but		
	for me, it's free of charge. Yeah. For me, it's free of charge		
	because, because some students may feels not willing to		
	go to seek help from counsellor because they may feel like		
	it's expensive. And also for me, I have experienced that		
	the counselling fee counselling fee is really, really		
	expensive in private setting. Like 200 to 300 a sessions. So,		
	yeah, it's really really expensive to me. So for me, it's free		
	of charge.		
Me	So free service is quite important to encourage this self		
	seeking behavior.		
Н	Yes, or even like you lower down the price to have some		
	like, workshops for students or like some voluntary service		
1	to maybe 2 to 3 sessions to help to help the short issue, to		
	to		

	help the not like they're not very serious severe issue is		
	also can enhance the student willingness for me.		
Me	Understand. So in your opinion, what steps or initiative		
	could universities implement to create a more supportive		
	environment that foster a proactive approach to seeking		
	help for psychological distress among students.		
Н	Promote the I think for me, is still promoting promoting		
	the counseling and promoting the mental health. The		
	important of the mental health. So, that student can		
	understand that the important to seek help and can able		
	to look seriously to their mental health.		
Me	So, university need to promote the services provided?		
Н	I think not only promote services provided. It's like		
	promote the importance to seeking help. Like, promote,		
	the important of pay attention to our mental health is also		
	important.		
Me	Understand. So, that's that's, the end of our interview		
	session. Thank you for your time.		
Н	Okay. Thank you.		
Me	Thank you very much.		

		Code	Sub-theme	Theme
Me	Hi good evening Ying Yi.			
YY	Hi, good evening.			
Me	Ok. Thank you for your participation in this interview session. My title for this research project is understanding public stigma and self stigma on university student psychological distress in influencing help seeking behavior. I will brief you about the inform consent first before we proceed into our interview question.			
YY	Ok			
Me	This interview session will last approximately 20 minutes to 40 minutes and this session will be audio recorded using electronic device and you only access by me and my supervisor. If you feel uncomfortable or is any questions that is sensitive to you, feel free to stop me and if you want to a quit this interview session, you can do it or anytime that you feel comfortable with. If you have any question about your participations, you can contact me or my supervisor Pn Shakila.			
YY	Ok			
Me	We will start our interview session.			
YY	Ok			
Me	There is four part of for our interview sessions. The first part is help seeking behavior, is about behavioral factors. The research objective of this first part is to identify the factors that are influencing help seeking behavior among universities students. The first question is what specific skills or strategy do you feel equipped with to navigate the process of seeking help for mental health issue?			
YY	Umm. I believe self-awareness is crucial, along with having confidence in oneself and the professionals providing help. These factors motivate me to seek assistance when needed.			
Me	OK, based on your answers for question one, how do these skills contribute to or hinder your willingness to seek support?			
YY	Umm, Self-awareness helps me recognize my issues, while confidence motivates me to seek help without hesitation.			

Me	ok understand. So what specific skills do you believe are	
	crucial for universities students in order to effectively seek	
	help for psychological distress?	
YY	Umm Self-awareness is key.	
Me	Ok. So based on your answer for Question 3, how can	
	these skills be developed or enhanced?	
YY	Universities can organize workshops to increase students'	
	self-awareness, making them more engaging and	
	enjoyable to attract participation.	
Me	Ok. Can you share some of the instances where you have	
	actively practice help seeking behavior in the past?	
YY	Last month, I sought help from a counseling student at	
	UTAR when experiencing emotional breakdowns because	
	of high level of stress when doing fyp.	
Me	So, uh, how did this experience shape your current	
	approach to seeking help?	
YY	It provided me with support, knowledge, and strategies to	
	overcome my issues, reinforcing the effectiveness of	
	seeking help.	
Me	Ok. So in your view, what practical steps or actions can	
	university takes to encourage a culture where seeking	
	help for mental health concerns become a norm?	
YY	Emphasizing that seeking help is not a sign of weakness	
	but a proactive step towards well-being.	
Me	Ok. How confident do you feel in your ability to initiate	
	and follow through with the help seeking process for	
	mental health?	
YY	I'd rate it around 70 to 80%.	
Me	Ok. So what are the factors contribute to or challenge	
	challenge yourself efficacy in this regard?	
YY	Positive past experiences contribute to my confidence.	
Me	How does an individuals believe in their ability to navigate	
	and access mental health support that influence their	
	likelihood of engaging in help seeking behavior.	
YY	Believing in one's ability increases confidence and	
	motivation to seek help.	
Me	Thank you for your answer for the first part of our	
	interview session, we will go to our second part. It's	

	related to public stigma. That is environment factor. For		
	this part, the research objective is to explore the		
	perceptions of public stigma that affect students		
	willingness to seek help for academic or other issues. The		
	first question is, in your community, what prevailing social		
	norm exists around mental health?		
YY	The prevailing social norm around mental health in my		
	community is often one of stigma. People with mental		
	health issues are often viewed with shame, and there's a		
	tendency for them and their families to be labelled.		
Me	ok, based on your answer for question one, how do these		
	norms affect your comfort level in openly discussing or		
	seeking help for mental health challenges?		
YY	Personally, these norms don't significantly impact me.		
	However, I tend to avoid discussing mental health issues		
	with older generations and prefer seeking help from		
	professionals rather than seeking support from others.		
Me	OK, so in your opinion, how do societal attitudes towards		
	mental health influence the way university student		
	perceive, and response to psychological distress?		
YY	Societal attitudes toward mental health tend to make		
	university students suppress their feelings and avoid		
	expressing their psychological distress openly.		
Me	Ok. How would you describe the availability and		
	accessibility of mental health resources in your		
	community?		
YY	Mental health resources have become more available and		
	accessible in my community.		
Me	OK, to what extent does this influence your likelihood of		
	seeking help?		
YY	The increased availability and accessibility of mental		
	health resources make it easier for me to seek help when		
	needed.		
Me	Ok. From your perspective, what Community, resources or		
	support system are easily accessible for university		
	students dealing with their mental health challenges.		

YY	Counseling services provided by the university are easily		
	accessible for university students dealing with mental		
	health challenges.		
Me	Ok. What opinions or judgement of others towards		
	seeking help for mental health concerns?		
YY	Others often perceive seeking help for mental health		
	concerns as indicative of a very serious issue. There's a		
	tendency to believe that seeking help is only necessary for		
	severe mental health problems.		
Me	In what ways do the opinion or judgment of others impact		
	your decision making process when it comes to seeking		
	help for mental health concern?		
YY	The opinions or judgments of others don't impact my		
	decision-making process much. I prioritize my health, both		
	physical and mental, and seek help from professionals as		
	needed.		
Me	Ok. How do you think the public's perception of mental		
	health issue affect the willingness of universities students		
	to seek help considering the influence of peer opinions		
	and societal expectation?		
YY	A positive public perception of mental health issues		
	encourages university students to actively seek help and		
	openly discuss their mental health challenges. Conversely,		
	a negative public perception may lead students to		
	suppress their issues and avoid seeking help.		
Me	Ok. Thank you for your answer for second part of our		
	interview, we will move to our third part is about our self		
	stigma is personal cognitive factors. This part, our		
	research objective is to explore the role of self stigma in		
	shaping students decision in help seeking. The first		
	question how would you describe your understanding of		
	mental health and self stigma?		
YY	Mental health encompasses emotional, psychological, and		
	social well-being. Self-stigma, on the other hand, involves		
	individuals having negative feelings or stereotypes about		
	themselves, leading to a negative attitude.		

Me	ok, based on your understanding for question one, how does this knowledge influence your perception of seeking help?		
YY	This understanding doesn't significantly impact my perception of seeking help.		
Me	OK, so uh, what are the specific misconception or lack of information to university students commonly have about mental health that may contribute to self stigma?		
YY	Many university students perceive stress and minor mental health issues as normal, contributing to self-stigma.		
Ме	Ok. What expectation do you hold about the outcome of disclosing your mental health concern?		
YY	I expect to find solutions to overcome or reduce my concerns.		
Me	ok, based on your answer for question one, how do this expectation shape your willingness to seek support?		
YY	I prefer seeking help from professionals as I believe they can provide the solutions I expect.		
Me	Ok. How do you anticipate that personal beliefs and attitudes towards mental health among universities, students, might impact their willingness to acknowledge and address their psychological distress.		
YY	Positive beliefs and attitudes towards mental health encourage individuals to address their psychological distress and work towards improvement. Conversely, negative attitudes may hinder individuals from addressing their issues.		
Me	ok, So what are the personal attitudes or belief do you hold regarding mental health treatment?		
YY	I believe mental health treatment can improve my well- being and decrease my suffering.		
Ме	ok, so how do these attitudes impact your decision around seeking help?		
YY	These attitudes motivate me to actively seek help and increase my dedication to treatment.		
Me	Ok. Thank you for your answer and participation in our third part. We will move to our last part of our interview		

	T		1
	session is about improving help seeking behavior among		
	students, so the research objectives of this part is to		
	identify the strategy or step done to improve help seeking		
	behavior among students. The first question is what		
	specific strategy or program have you observed or		
	experienced that effectively promote a positive help		
	seeking culture among students.		
YY	Programs that emphasize the importance of seeking help		
	and expose the notion that seeking help is a sign of		
	weakness have been effective.		
Me	ok, in your opinion, what step could educational		
	institution take to create an environment that encourage		
	students to proactively seek help for their mental health?		
YY	Educational institutions could integrate help-seeking into		
	the curriculum starting from primary school and ensure		
	comprehensive coverage across all levels of education,		
	including primary, secondary, and university.		
Me	Ok. From your experience, what strategies or intervention		
	have been effective in enhancing help seeking behavior		
	among university students?		
YY	Workshops and talks focusing on mental health awareness		
	and the importance of seeking help have been effective in		
	enhancing help-seeking behavior among university		
	students.		
Me	ok, in your opinion, what steps or initiative could		
	universities implement to create a more supportive		
	environment that foster a proactive approach to seeking		
	help for psychological distress among students?		
YY	Universities could establish dedicated departments or		
	support centers for students seeking help, ensuring they		
	offer professional treatment and support. These		
	departments should have a diverse team capable of		
	addressing various needs and may benefit from ongoing		
	training.		
Me	ok thank you for your participation in this interview		
	session is has come to an end, so if you have any		
	questions or if you have any enquiries you can contact me		
	or contact my supervisor. Thank you very much.		
L	1		

YY OK. Thank you.

Interview Questions Validation Sheet

Name of Researcher	:	Soh Yun Ling					
Degree Enrolled	:	Bachelor of Social Sciences (Hons) Guidance and Counselling					
Research Title	:	Understanding Public Stigma and Self-Stigma On University					
		Students' Psyc	chological	Distress in In	fluencing Help Seek	ing	
		Behaviours					
Evaluator :		Ms. Anisah Za	inab Binti	Musa			
Date Evaluated	:						
Degree of Evaluator	:	PhD in Guidance and Counselling					
Signature of Evaluato	or :	Anisah					
Rating: Number of Y	es marks						
16 – 18	Very Sa	atisfactory		10 – 12	Fair		
13 – 15	Satisfa	ctory		9 >	Needs Re-Valida	ation	
To the evaluator: Cho	eck the ned	cessary docume	ents and ti	ck the colum	ns which fit your ev	aluation	of the
item.		,			,		
		. Item	S			Yes	No
A. Constructio				1			
 		ons are short and can easily be understood by the participants.					
		s are appropriate to the topic. s allow storytelling or narration of experiences.					
				on of experie	nces.		
		roughness of Questions					
		open-ended.					
		s are positively stated.					
+		r-up questions are included. ons are deductively arranged. They give highest priority to lation questions than opinion questions.					
		stated clear/p					
	· ·	ns can be more					
	•	ns are not more	than 10 i	tems for eve	ry research		
que	estion.						
Pomarks:							
Remarks:							