



ATTITUDE, SUBJECTIVE NORM, AND PERCEIVED BEHAVIORAL CONTROL AS
PREDICTORS OF THE INTENTION OF MENTAL HEALTH SEEKING AMONG
UNDERGRADUATE STUDENTS

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ATT, SN, PBC AS PREDICTORS OF MENTAL HEALTH SEEKING INTENTION

Attitude, Subjective Norm, and Perceived Behavioural Control as Predictors of The Intention
of Mental Health Seeking among Undergraduate Students

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
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DECLARATION

We declare that the material contained in this paper is the end result of our own work and that due acknowledgement has been given in the bibliography and references to ALL sources be they printed, electronic or personal.

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APPROVAL FORM

This research paper attached hereto, entitled “Attitude, Subjective Norm, and Perceived Behavioural Control as Predictors of The Intention of Mental Health Seeking among Undergraduate Students”, prepared and submitted by Lean Ying Tong, Low Lee Sang, and Ronald Cheam Jun Xian in partial fulfilment of the requirements for the Bachelor of Social Science (Hons) Psychology is hereby accepted.

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Abstract

Although undergraduate students commonly face psychological and emotional difficulties, they often have a poor intention to seek mental health care. The present study aims to study the predictive effects of attitude, subjective norm, perceived behavioural control, and help-seeking intention among undergraduate students. The study was conducted using purposive sampling, and a cross-sectional research study. Questionnaire were distributed through Qualtrics link and QR code. A total of 230 responses were obtained for this study, however only 181 responses remained in final data analyses after data cleaning. The inclusion criteria for participants in this study were i) undergraduate student, ii) aged 18 and above, and iii) Malaysian. The current findings showed that attitude and perceived behavioural control significantly and positively predict help-seeking intention among undergraduate students, except subjective norm did not significantly predict. Effective interventions should be developed based on these significant predictors to foster a supportive environment among undergraduate students that encourages proactive mental health-seeking intentions. For example, awareness campaigns can spread information about available resources and promote positive attitudes toward seeking help.

Keywords: attitude, subjective norm, perceived behavioural control, undergraduate student, Theory of Planned Behaviour

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List of Abbreviations

PBC	Perceived Behavioural Control
TPB	Theory of Planned Behaviour

Chapter 1

Introduction

Background of Study

In recent years, there has been a growing concern about the escalating rates of mental health issues globally (Fusar-Poli et al., 2020; Nochaiwong et al., 2021). The World Health Organization (WHO) defines mental health as a state of overall well-being in which an individual recognizes their capabilities to manage life stressors and function productively to contribute to their community (Fusar-Poli et al., 2020). In 2019, approximately 970 million individuals worldwide suffered from mental health problems. The data presented here indicates that one in eight individuals in the world is affected by mental health in their lifetime (Kestel et al., 2022). According to the World Health Organization (WHO), depression currently ranks third in the global burden of disease and is expected to rank first by 2023 (Maung et al., 2023).

Undoubtedly, university life presents students with exciting and challenging experiences. Enrolling in a university provides students with the opportunity to make new friends, establish fresh networks, develop an independent personal life, and advance in their chosen careers (Daudi et al., 2022). However, the challenges of university life may jeopardize the psychosocial well-being of undergraduate students (Porru et al., 2022) as they are forced to deal with a variety of stressful circumstances. The stressors faced by undergraduate students primarily stem from making independent decisions about their lives and studies, meeting assignment deadlines (Kwon et al., 2018), separating from family members (Othman et al., 2019), establishing and maintaining personal relationships, facing financial distress (Kandasamy et al., 2020), and adapting to new ways of learning (Campbell et al., 2022). Consequently, these stressors put undergraduate students at a higher risk of experiencing mental health problems (Auerbach et al., 2018). The current situation is quite alarming as

Askari et al. (2022) have found that young adults between the ages of 18 and 25 have a higher incidence of any mental disorder (29.4%), compared to individuals aged 26–49 years (25.0%) and those aged 50 and older (14.1%). The high prevalence of mental health problems among undergraduate students results in both immediate and lasting consequences, such as poor academic performance (Agnafors et al., 2020), heightened alcohol consumption, and increased smoking (Mitrou et al., 2023), withdrawal from university (Sheldon et al., 2021), increased self-harm behaviours (Mason, 2023), suicidal ideation, and suicide (Hassan et al., 2018).

Seeking help from a professional proved to be an effective way for students to manage mental health problems; however, it was not the preferred option for students (Pumpuang et al., 2018). Despite an elevated prevalence of mental health problems in undergraduate students, their willingness to seek psychological help was relatively low (Chandrasekara, 2016). Ample evidence indicated that students rarely utilized psychological support services, even when they could not cope and resolve challenges (Topkaya et al., 2017). Study found that one in four undergraduate students experienced mental health problems, but only 40% of them sought help from professionals (Pumpuang et al., 2018). Empirical studies (Pumpuang et al., 2018; Winter et al., 2017) have identified factors that influence students' decisions to seek help, including stigma, negative attitudes toward seeking help from professionals, mental health literacy, and a lack of financial resource. Consequently, this resulted in a mental health treatment gap, where the number of individuals diagnosed with mental health problems exceeded those who received treatment. This treatment gap persisted despite the increasing evidence supporting the effectiveness of mental health treatments (Adams et al., 2022).

It is crucial to study the predictors of mental health-seeking intention among undergraduate students as it helps to identify the reasons behind the refusal to seek

professional mental health support. The predictor of attitude, subjective norms, and perceived behavioural control help to identify the reason and obstacles for low mental health-seeking intentions when seeking adequate treatment have been proven to be highly effective in battling mental health. According to the Theory of Planned Behaviour (TPB), behavioural intention is determined by three factors, such as attitudes, subjective norms, and perceived behavioural control (Ajzen, 1991). These components are supposed to influence an individual's intention to act, which in turn influences their actual behaviour (Aldalaykeh et al., 2019). TPB has been widely employed to predict and explain help-seeking intentions (Adams et al., 2022; Tomczyk et al., 2020; Zorrilla et al., 2019). It provides insight into the factors that influence intentions and behaviours in seeking mental health assistance. For example, when undergraduate students possess a positive attitude toward a behaviour, believe that others will also find that behaviour acceptable, and perceive control over that behaviour, they are more likely to form higher intentions of seeking psychological help. Previous study has emphasized that TPB was particularly valuable in comprehending mental health problems, the help seeking process, and designing interventions to foster changes in mental health behaviour (Tomczyk, 2020).

Attitudes toward behaviour refer to an individual's evaluation of a particular behaviour and the expected positive and negative outcomes. Positive attitudes toward seeking mental health services contribute to higher intention to seek help (Lee & Shin, 2020). If undergraduate students perceive seeking help positively, believing that it can lead to positive outcomes such as improved well-being and coping, they are more likely to form the intention to seek assistance when faced with mental health problems. Attitudes toward seeking professional help can be influenced by a variety of factors such as gender (Yu et al., 2015), age (Coppens et al., 2013), educational level (Roškar et al., 2017); sociological and cultural factors such as culture prejudice (Waldmann et al., 2019), mental health literacy (Clough et

al., 2018); self-stigma (Amarasuriya et al., 2018), knowledge about the role of health professionals (Lynch et al., 2016), and personality traits (Perenc & Radochoński, 2016).

Subjective norms refer to the perceived expectations or pressure from significant others to engage in a particular behaviour. Significant others are those individuals highly valued in one's life, such as friends, family, and romantic partners. Undergraduate students were less likely to seek help from professionals when significant others disapprove of it (Lee & Shin, 2020). The approval or disapproval of significant others can significantly influence whether undergraduate students are inclined to express an intention to seek help from mental health professionals (Tomczyk et al., 2020).

Perceived behavioural control is characterized by the perceived ease or difficulty associated with performing a particular behaviour. When undergraduate students perceived a high level of control over the process of seeking help, they were more likely to carry out their intentions (Lee & Shin, 2020). Conversely, if students perceive low control, such as facing barriers like time constraints, financial limitations, or a lack of access to mental health services, their intention to seek professional help might diminish (Bohon et al., 2016).

Problem Statement

According to Azhar et al. (2023), there was a significant increase in the prevalence of mental health issues among undergraduate students between 2011 and 2016. The reported rate increased from 10% in 2011 to 20% in 2016. The statistical data revealed that a significant proportion of undergraduate students experience mental health problems upon their enrolment at a university. Generally, depression, anxiety, and stress are the most widespread among undergraduate student populations (Fauzi et al., 2021). A study conducted by Daudi et al. (2022) revealed that the rates of moderate to extremely severe depression, anxiety, and stress among undergraduate students were 53.9%, 66.2%, and 44.6%,

respectively. In summary, these articles indicate that undergraduate students tend to experience mental health problems as a result of various stressful circumstances.

Consequently, our attention has drawn to concentrate on the undergraduate students.

Despite the growing need for mental health support, past studies have found that less than half of students with mental health problems actively seek help from professionals such as psychologists, counsellors, or general practitioner (Marsh & Wilcoxon, 2015). When undergraduate students are in trouble, they are more likely to solve their psychosocial problems primarily through their own efforts (Brown, 2018). As a result, untreated mental health problems have become a significant global health concern. This is because many undergraduate students often refrain to utilize mental health care services, even when the services are available within the campus community (Yu et al., 2015). Underutilized of mental health service not only directly affects students' lives and academic performance but also imposes significant economic and social burdens (Kim et al., 2020). In order to reduce the gap between mental health problems and treatment, it is important for us to understand the barriers that decrease the intention of undergraduate students from seeking help.

In addition, it's important to emphasize that there exists a scarcity of study, primarily due to the utilization of diverse study designs across various studies, which in fact can contribute to significant methodological complexities. Several studies have been conducted to examine the psychological variables, such as attitudes, subjective norms, and perceived behavioural control, that impact individuals' intentions to utilize mental health services (Zhang & Li, 2020; Zorrilla et al., 2019). By addressing the methodological differences and increasing consistency in study designs, it is possible to enhance the resilience of the total set of comprehension.

According to Ajen (1991), the theory of planned behaviour (TPB) is a model that uses the concepts of attitudes, social norms, perceived behavioural control, and intentions to

understand and predict behaviour. TPB has been extensively used to explain and predict behaviour across diverse domains. Its utility covers a wide range of areas, such as physical activity, drug use, recycling practices, consumer behaviour, and cancer symptoms detection (Ajzen, 2020). However, study is scarce on the factors influencing the intention of mental health seeking in Asian nations, while comparatively more studies have been undertaken on this topic in Western countries (Bohon et al., 2016; Li et al., 2018, Tomczyk et al., 2020, Zorrilla et al., 2019). Hence, it is crucial for us to investigate the influence of TPB on the utilization of mental health services within Malaysia undergraduate students in order to gain a deeper comprehension of how this theory can effectively predict the intention of seeking mental health help among these students' population.

According to Hammer et al. (2018), subjective norm was the factor with the greatest impact in positively determining the intention to seek mental health services. By contrast, some researchers have argued that subjective norm was not a strong predictor of mental health seeking (Chang & Huang., 2020; Li et al., 2018). Furthermore, Shea et al. (2019) discovered that perceived behavioural control was a significant predictor of undergraduate students' intentions to seek mental health services, whereas attitude did not predict the intention of seeking mental health seeking. Despite the discrepancy in the findings, it is imperative to conduct the current study to investigate the predicted significance of different variables on mental health seeking among undergraduate students.

In summary, the current study aims to employ a descriptive quantitative method to examine the predictors of mental health-seeking intentions among undergraduate students by utilizing the theory of planned behaviour (TPB).

Research Question

Q1: Do attitude, subjective norm, and perceived behavioural control positively predict help-seeking intention among undergraduate students?

Research Objective

1. To study the predictive effects of attitude, subjective norm, perceived behavioural control and help-seeking intention among undergraduate students.

Hypotheses

H₁: Attitude positively predicts help-seeking intention among undergraduate students.

H₂: Subjective norm positively predicts help-seeking intention among undergraduate students.

H₃: Perceived behavioural control positively predicts help-seeking intention among undergraduate students.

Significance of Study***Theoretical Significance***

The theoretical significance of this study is based in its application of the Theory of Planned Behaviour (TPB) to the setting of mental health seeking among undergraduate students. The current study will provide a systematic lens through which to analyse and grasp the underlying drivers of students' intends to seek mental health care by establishing the analysis in the TPB framework. According to Ajzen (1991), the theory suggests that behaviour is planned and so predicts purposeful behaviour. An individual's attitude towards the behaviour, subjective norm, and perceived behavioural control all impact behavioural intentions. Intention, which indicates a person's willingness to engage in a specific

behaviour. Therefore, this study is crucial to implement since it explains the context on how undergraduate students' intention of seeking mental health may change.

The current study is important to fill in the knowledge gap by providing a theoretical foundation for predicting undergraduate students' intents. The current study not limited on the mental health difficulties but mainly focuses on the intention of undergraduate students to seeking mental health help. It also provides insight into the predicted influence on undergraduate students' willingness to act, which contributes to more complete knowledge of the elements that drive help-seeking behaviour. As mental health issue become more common in academic settings, understanding the theoretical foundation through the lens of TPB not only enriches discussion in academia but also informs the development of specific strategies to promote better mental health among undergraduate students. This study will help to fill the gap on focused tactics that improve accessibility and remove obstacles to undergraduate students' mental health care.

This study also helps contribute significantly to future study subject to the research databases, sample data, research methodology, and study limitations. Currently there is limited study applied TPB to predict intention of seeking mental health service in Malaysia context, Therefore, the current study will contribute to the current literature by investigating the predictive variables. It typically helps the researchers reach new heights in their study of mental health and TPB among undergraduate students. Therefore, employing TPB is critical to ensuring that the current study improves theoretical knowledge and provides practical insights for establishing targeted treatments aimed at increasing beneficial mental health behaviours among undergraduate students in Malaysia.

Practical Significance

The present study aims to examine the predictors, which are attitude, subjective norm, and perceived behavioural control on the intention of mental health seeking among

undergraduate students. The study's findings may give significant insights for universities, healthcare practitioners, and mental health support centres, providing a greater knowledge of undergraduate students' intent to seek mental health assistance. The findings can be used by these organizations to improve their support mechanisms and initiatives, fostering a more favourable circumstances for mental health and well-being among undergraduate students. Currently, the majority of undergraduate students have large rates of mental health issues, and the rate of students who receiving mental health services are low. Therefore, the current study is essential as the findings provides a comprehensive understanding of the predictors influencing mental health-seeking intentions among undergraduate students.

This knowledge is crucial for informing universities about the unique needs of their student population and facilitating the development of support services in the future. Counselling programs and awareness campaigns are few examples of support services can provide by universities to undergraduate students. The study also aims to bridge the gap between students who are experiencing mental health issues and those who are receiving critical professional mental health treatments. This will thereby improve students' wellbeing, foster a more encouraging learning atmosphere, and help address the widespread problem of untreated mental health issues. Therefore, this study is significant in that it examines all undergraduate students and aids future study in discovering the intention of mental health seeking.

Conceptual Definitions

Attitude

Attitude, within the context of mental health seeking, corresponds to the overall evaluation and emotional reaction of an individual towards seeking mental health support. This consists of the perceived benefits and limitations, views on the beliefs of mental health

services, and the emotional significance linked with the act of seeking help for mental health problems (Waters et al., 2022).

Subjective Norm

Subjective norms are linked to the individual's perception of the social pressures, norms, and expectations that surround the behaviour of seeking mental health support among undergraduate students. The concept applies to an individual's subjective interpretation of the approval or disapproval from significant others, such as peers, family, and societal influences, about the act of seeking mental health support (Juilerat et al., 2023).

Perceived Behavioural Control

Perceived behavioural control is an individual's subjective assessment of their capacity to effectively initiate and maintain the behaviour of actively seeking mental health support. This idea is made up of the subjective perception of the ease or difficulty associated with accessing mental health services, the existence of external barriers, and the individual's self-assurance in their capacity to deal with potential obstacles in seeking help (Hagger et al., 2020).

Intention of Mental Health Seeking

The intention of mental health seeking describes an individual's explicit willingness and deliberate actions to actively seek out and engage in behaviours that are targeted at gaining help for their mental health. The statement indicates the conscious decision and dedication to actively address issues related to mental health, recognizing the significance of getting support from professionals or utilizing the resources available for mental health (Adams et al., 2022).

Operational Definitions

Attitude, Subjective Norm, and Perceived Behavioural Control

In order to assess attitude, subjective norm, and perceived behavioural control, Ajzen (2006) and Francis et al. (2004) developed a manual on the Theory of Planned Behaviour (TPB) questionnaire. The scale consists of a total of 14 items with a 7-point Likert scale, which range from 1 for “good” to 7 for “bad”. The higher the scores, the stronger one’s attitudes, subjective norms, and perceived behavioural control to seek help.

Intention of Mental Health Seeking

To measure the intention of individuals to seek help from mental health professionals such as psychologists, clinical social workers, counsellors, and psychiatrists, Hammer and Spiker (2018) created the Mental Help Seeking Intention Scale, often known as MHSIS. It consists of 3 items on a 7-point Likert scale, which range from 1 for “very unlikely” to 7 for “very likely”. A higher score suggests that the individual is more likely to seek help.

Chapter 2

Literature Review

Conceptualizing on Attitude

The Theory of Planned Behaviour (TPB) utilizes an expectancy-value framework to explain the development of an individual's attitude toward a behaviour. Specifically, the attitude toward the behaviour, also known as behavioural beliefs, are influenced by readily accessible beliefs about the anticipated outcomes of the behaviour (Ajzen, 2020). McEachan et al. (2016) proposed that attitude is composed of two component which reflect the more general construct. For example, experiential attitudes (affective; feelings) and instrumental attitudes (knowledge; function) are seen as components contributing to the overall attitude toward the behaviour. Experiential attitude refers to an individual's emotional or affective feelings toward a particular behaviour. On the other hand, instrumental attitude pertains to an individual's assessment or evaluation of the outcomes associated with that behaviour (Wan et al., 2017). According to Ajzen (2020), the behavioural beliefs represent a person's personal probability that engaging in a particular behaviour will result in a specific outcome (instrumental attitude) or offer a particular experience (experiential attitude). Study has indicated that experiential attitudes, in comparison to instrumental attitudes, demonstrated a stronger association with intentions and actual behaviour (Conner, 2020).

According to Bond (2022), behavioural beliefs represent the positive or negative attitude toward a specific behaviour and are shaped by the evaluation of outcomes or attributes. In other word, if an individual strongly believes that positive and valued outcomes will result from engaging in a specific behaviour, they will hold a positive attitude toward that behaviour. Conversely, if someone strongly believes that negative and undesirable outcomes will result from the behaviour, their attitude toward the behaviour will be negative (Conner, 2020). It in turn influences the individuals' intention on mental health seeking. For

instance, if individuals perceive that seeking help from professional is advantageous (behavioural belief) and can effectively address their mental health issues (evaluation of outcome), their intention to seek mental health help would be higher (Bond, 2022).

Conceptualizing on Subjective Norm

According to Ajzen (1991), subjective norm is one of the variables. The variable contains the inclusion of normative attitudes and individual motivators that drive engagement in a specific behaviour (Bohon et al., 2016). Subjective norms pertain to the perceptions of others regarding behaviour and the extent to which these perceptions influence an individual's decision to engage in specific behaviours. Subjective norms can be defined as the thoughts that individuals express regarding the level of support and agreement they anticipate from their social network, including family and friends, towards a specific behaviour (Ajzen, 2020). According to Auerbach et al. (2018), the concept of norm relates to a dynamic process wherein it establishes the anticipated standard of behaviour within a certain society. Failure to adhere to these group standards may result in disapproval from others. In the present situation, it is reasonable that individuals may become more aware of the complex dynamics between personal beliefs and societal factors. This awareness can offer significant contributions to the development of interventions that seek to improve actions by targeting subjective normative judgements. The extent to which an individual perceives themselves as psychologically belonging to a specific group also influences its impact (Campbell et al., 2022).

This concept assumes that individuals have a tendency conform to the perceived social standards and expectations of individuals who have significance in their lives (Shea et al., 2019). The subjective norm component also takes into consideration the individual's willingness to obedience to these perceived societal constraints. The influence of significant

others' judgments is a critical factor in the establishment of subjective norms, as individuals tend to respond to the expectations of individuals they hold in appreciation and esteem (Chang & Huang., 2020). Moreover, the effectiveness of subjective norms depends upon the perceived influence of referent persons or groups in shaping social norms. The degree of pressure experienced by individuals can vary based on their perception of the significance of others' viewpoints. Furthermore, the complicated nature of subjective norms is heightened by cultural influences, social norms, and contextual variables, providing them dynamic and contingent upon the specific setting (Ma et al., 2020).

Conceptualizing on Perceived Behavioural Control

Perceived behavioural control (PBC) is based on an individual's judgment of how simple or difficult is it for them to have a specific behaviour (Banerjee & Ho, 2019). PBC is a psychological concept that plays a major role in shaping one's behaviour within the context of the Theory of Planned Behaviour (TPB). According to Bohon (2022), PBC can be composed into control beliefs and perceived power. Control beliefs are perception of power and influence over resources and opportunities associated with a particular behaviour (Fishbein & Ajzen, 2011). Generally, if an individual believes that he or she has sufficient resources, knowledge, and ability to perform a certain behaviour, the more likely it is that he or she will perform that behaviour. According to Ajzen (1991), the more resources an individual has and the fewer obstacles he or she faces, the greater the PBC of someone to performing a behaviour.

Moreover, previous study suggests that PBC has shown some similarities with Bandura's self-efficacy (Bohon, 2022). As they are all about a person's perceived ability to perform a particular behaviour. According to Bandura (1994), self-efficacy is a person's belief in his or her ability to behave and it is also reflecting a person's confidence to control

his or her behaviour. Previous study also emphasized that PBC is assessed through confidence items, which measure an individual's confidence in engaging in a behaviour and their confidence in whether they have control over performing the behaviour (Ajzen, 2002a). In general, when people are aware that they are receiving appropriate resources, it tends to make people feel good about themselves and enhance their sense of behavioural control. In contrast, a lack of resources or receiving negative feedback during past experiences tends to make people feel less confident and have less control over their behaviour.

Recent evidence also suggests that the implementation of a behaviour is affected by several factors such as past experience, the presence of resources, and the capacity to manage behavioural obstacles (Ajzen, 2020; Hardin-Fanning & Ricks, 2016; Rauch & Hulsink, 2015). The availability of these facilitators can determine the true level of behavioural control individuals possess. Prior study indicates that this dimension recognizes that many behaviours are controlled to some extent by choice (Rauch & Hulsink, 2015).

Conceptualizing on Intention of Mental Health Seeking

According to the Theory of Planned Behavior (TPB), an individual's intention to engage in a specific behavior is a central factor. It serves as an immediate and powerful predictor of whether or not the behavior will actually be performed (Webb & Sheeran, 2006). Furthermore, intention is described as a motivational factor influencing behavior. It indicates the degree of effort and willingness that individuals will put forth to carry out the behavior. As a general principle, if an individual has a strong intention to perform a certain behavior, it is more likely that they indeed carried out that behavior (Ajzen, 1991).

In line with the psychological aspects of the help-seeking process, intention is formed in a thoughtful process in which feasibility and desirability are assessed and the pros and cons are weighed (Schreiber et al., 2009). This viewpoint is further reinforced by Tomczyk et al.

(2020) who claimed that intention is a representation of willingness since it is a deliberate plan to disclose mental health issues to other parties, with help-seeking aligning instrumentally with personal values. The significance of the relationship between low intention of mental health seeking and the future use of mental health services is highlighted by study suggesting that these low intentions act as substantial barriers to seeking professional help for psychological distress (Wilson et al., 2011). Notably, individuals not undergoing treatment for psychological distress symptoms are often those reporting the lowest intentions to seek help from a mental health professional and the highest intentions to refrain from seeking help altogether for their condition (Thomas et al., 2014).

Attitude and Intention of Mental Health Seeking

Previous studies have demonstrated that attitudes positively predict a person's intention to seek help (Bohon et al., 2016; Hammer et al., 2018; Pheko et al., 2013; Rüsç et al., 2011). This is further supported by Adams et al. (2022) who found that out of 39 studies investigating predictors of mental health help-seeking intentions, attitude was identified as a significant predictor in 35 studies, constituting 90% of the overall studies. The more positive an individual's attitude, the stronger their intention to perform the behaviour (Seyfi et al., 2013). Specifically, undergraduate students with a positive attitude toward seeking professional psychological help had a higher intention to seek help when faced with mental health problems (Aulia et al., 2023). According to earlier study, students who employed 'seeking social support and avoidance stress coping strategies' were more inclined to perceive seeking psychological help positively, while those who employed 'keep to self-strategies' were more likely to perceive seeking psychological help negatively (Yelpaze & Ceyhan, 2020). Therefore, mental health professionals might focus on changing university students' attitudes about seeking mental health treatment to raise awareness and demonstrate the

benefits of mental health services, thereby increasing the utilization of mental health services (Aldalaykeh et al., 2019).

Empirical studies (Aldalaykeh et al., 2019; Bohon et al., 2016; Pheko et al., 2013) conducted in Western settings revealed that undergraduate students had more favorable attitudes toward seeking psychological support. For instance, study carried out in the United States (Bohon et al., 2016) and Jordan (Aldalaykeh et al., 2019) showed that most undergraduate students had positive attitudes towards mental health seeking. It is aligned with the study from Ghana (Andoh-Arthur et al., 2015), and Ethiopia (Alemu, 2014), which revealed that the majority of students expressed a high preference for receiving psychological help, thereby increasing their intention to seek help. The consistent findings regarding positive attitudes toward seeking psychological help can be explained by cultural perspectives. Individualist cultures tend to encourage individuals to be independent, autonomous, and different from others, prioritizing their own goals over the interests of groups, which makes them more likely to have favourable attitudes about getting psychological help, consequently increasing the intention of mental health seeking (Wang & Lau, 2015).

Previous study has found that an individual's attitude and intention on mental health seeking is mediated by his or her beliefs and evaluation of outcome about a specific behavior (Heath et al., 2016). According to Hammer et al. (2018), individuals who believe in the effectiveness of mental health services tend to have more favorable attitudes toward psychologist professionals. This is further supported by Pheko et al., (2013), which revealed that individuals who perceive mental health treatment as beneficial have a higher intention to seek help from professional psychologists. Conversely, those who view mental health treatment as a worthless endeavor demonstrate a low intention to seek help from professionals. Thus, the evaluation of potential benefits and the desire to improve the quality

of life through treatment are significant factors influencing the intention to seek professional help. However, a study indicated that there was no correlation between the perceived benefits of professional help-seeking and the intention to seek help. These findings suggest that cognitive factors, such as the evaluation of treatment benefits, may be less crucial than emotional acceptance of help-seeking in predicting the intention to seek mental health assistance (Mojtabai et al., 2016).

Nevertheless, the literature on attitudes and intention on mental health seeking is less consistent. Mesidor and Sly (2014) argued that attitude was a weak predictor of students' intention to seek mental health services. The unexpected nature of this result is explained by suggesting that most students already held positive attitudes toward mental health services. Consequently, these students did not perceive attitude as a significant factor influencing their intentions to seek help. Similar findings were reported by Eisenberg et al. (2012), who examined 1,263 untreated students in the United States and found that 65% of them expressed low stigma and positive attitudes toward seeking mental health. Specifically, a significant number of these students perceived seeking mental health as acceptable and beneficial but did not intend to seek help. This is due to the reason that undergraduate students doubted the severity of their concerns, preferred to manage the issues independently, believed that their distress was a typical aspect of the college experience, or indicated that they did not have the time to seek professional help.

Previous study has examined the nature of attitudes towards help-seeking behaviour; however, there has been a lack of emphasis on exploring the relationship between attitudes, intentions, and the actual behaviour of seeking help (Mesidor & Sly, 2014). Therefore, this study aims to explore the predictive effect of attitudes on the intention of mental health seeking among undergraduate students in Malaysia to fill the literature gap.

Subjective Norms and Intention of Mental Health Seeking

Several studies have indicated that subjective norm performs a significant role in influencing individuals' intention to seek mental health support (Askari et al., 2022; Clough et al., 2018; Hammer et al., 2018; Porru et al., 2022; Roberts, 2023; Shea et al., 2019; Zorrilla et al., 2019). Previous studies conducted by Roberts (2023) provides evidence supporting the notion that subjective norms serve a ranked third in terms of strengths in predicting individuals' intention to seek mental health support. Advances in mental health stigma reduction efforts contribute to the nuanced role of subjective norms. As societal attitudes toward mental health evolve, individuals may feel less constrained by social norms and more empowered to make decisions based on personal beliefs and attitudes (Corrigan et al., 2014). This discovery is in conformity with and substantiated by previous studies conducted by Askari et al. (2022), Clough et al. (2018), and Shea et al. (2019). Regarding mental health assistance, it is predicted that the subjective norm will assume a greater significance due to the widespread stigma associated with mental illness in Eastern culture.

The study conducted by Wang et al. (2023) revealed that subjective norm was a substantial predictor of individuals' intention to seek help. This influence was observed both directly and indirectly, as subjective norms affected attitude and perceived behavioural control, which in turn influenced help-seeking intention. It has been proposed that subjective norms could possess greater significance in Eastern or other collectivistic cultures compared to individualistic societies due to the emphasis placed on interpersonal interaction. The responses provided by most participants may have been influenced by the cultural environment, specifically the stigma associated with mental health concerns in Chinese society. The presence of social desirability bias may result in individuals expressing a propensity to seek help that conforms to cultural norms, even if this tendency does not necessarily translate into concrete actions. The predictive efficacy of behavioural intention

and subjective norm may have been weakened by the significant impact of cultural influences. According to Lee and Shin (2020), the influence of social pressure is significant in shaping individuals' inclination towards seeking mental health support among collectivistic societies.

According to Bohon et al. (2016), an additional study has indicated that subjective norms resulted as the second most significant predictor influencing the intention of undergraduate students to seek mental health support. The influence of significant individuals, such as family and friends, can have an essential part in shaping the behaviour of students, eventually affecting their inclination to seek mental health support. According to a study conducted by Stunden et al. (2020), students frequently engage in interactions with their peers, consequently, it is seen that their behaviour is often exposed to influence from their friends. Ahn and Kahlor (2019) pointed out that subjective norms have the potential to have a considerable influence on individuals' intentions to seek mental health support, despite the impact of social pressure. Therefore, those with stronger subjective norms may experience an impact on their inclination to engage in obtaining mental health support.

However, previous studies have indicated that subjective norms have not been found to be a significant predictor of individuals' intentions to seek mental health services (Adam et al., 2022). According to a previous investigation conducted by Adam et al. (2012), it was found that subjective norms were not a significant predictor of undergraduate students' intention to seek mental health support. This limitation arises from the study's utilisation of a narrow set of two questions to evaluate subjective standards, specifically pertaining to inquiries about family and friends, which can be considered overly broad in nature. This finding suggests that the lack of influence of subjective norms on the intention of undergraduates to seek mental health support may be attributed to the limited number of external factors that can potentially change or diminish the association between subjective

norms and the intention to seek mental health support (Adam et al., 2022). Therefore, this study aims to examine the influential role of subjective norm on the intention of mental health seeking among undergraduate students.

Perceived Behavioural Control and Intention of Mental Health Seeking

Previous study has shown that perceived behavioural control (PBC) was the primary predictor of someone's intention for seek mental health care (Adams et al., 2021; Mak & Davis, 2013). This is also supported by Bohon et al. (2016) who found that stronger PBC predicts a higher intention to mental health seeking. Ajzen (2020) indicates that the likelihood that the intention will be carried out increases with the degree of control the person has over their behaviour. Generally, individuals who think they have the resources, abilities, and autonomy to manage their mental health difficulties are more likely to seek professional help. A previous study found that factors that positively correlated with intention included expense, accessibility to therapy, and difficulty making appointments (Bohon et al., 2016). Therefore, policy institutions and universities may focus on removing these obstacles to increase undergraduate students' perceived behavioural control, and so increase students' intention to seek mental health care.

Studies always show that higher levels of PBC over mental health-seeking behaviours are associated with increased intentions to seek help. However, whether and the extent to which PBC determines the intention of mental health seeking is controversial. Previous studies have found that PBC did not directly predict intention (Li et al., 2018). The finding reveals that PBC do significantly predicted utilization, suggesting that they directly influence the use of mental health services. This finding, however, is supported by Ajzen (1991) concept that PBC can also be a direct predictor of behaviour.

Moreover, Aldalaykeh et al. (2019) also argued that PBC placed second in terms of predictive strength when compared to attitude and subjective norms for the intention of seeking mental health care. This study has found that PBC is influenced by the availability and accessibility of mental health services and someone's control over the decision to seek mental health help. Bohon et al. (2016) also indicate that the factors that affect students' intention include their circumstances which are beyond the control of the university (unavailability, exhaustion, greater pressure to treatment).

The role of PBC in the intention of mental health seeking is less certain and poorly understood. A study by Tomczyk et al. (2020) suggests that the function of ability as PBC and obstacles to help-seeking requires additional investigation. Recent evidence has shown that PBC has an internal differentiation between self-efficacy and controllability, where controllability was shown as a weak predictor of help-seeking intentions. Therefore, this study aims to discuss the role of PBC on the intention of mental health seeking among undergraduate students.

Theoretical Framework

The Theory of Planned Behaviour (TPB), proposed by Ajzen (1991), is a conceptual framework developed to anticipate and describe human behaviour within certain contexts. The Theory of Planned Behaviour (Ajzen, 1991) can be employed to examine the characteristics of human social behaviour. The Theory of Planned Behaviour is widely recognized as a conceptual framework that facilitates the assessment of human behaviours and actions by considering their perspective, decision-making variables, and the contextual environment (Chandrasekara, 2016).

Ajzen (1991) included several variables, including attitude towards the behaviour, subjective norm, perceived behavioural control, behavioural intention, and behaviour, in the

conceptualization of this theory. Attitude serves as an essential factor in an individual's positive perception towards a particular behaviour. Furthermore, the subjective norm refers to the mixture of perceived expectations from important individuals and societal pressure to engage in a particular behaviour. Moreover, the construct of perceived behavioural control pertains to an individual's subjective assessment of their capability to engage in a particular behaviour (Hagger et al., 2020). According to the Theory of Planned Behaviour (TPB), the likelihood of individuals engaging in a specific behaviour is positively influenced by their receptive attitude towards that behaviour. When an individual perceives that their significant others have certain expectations regarding their engagement in a particular behaviour, it leads to an enhancement of their intentions. Moreover, the level of intention is likely to be expanded when an individual displays a strong belief in their capacity and competence to effectively execute the desired behaviour (Ajzen, 1991).

Ajzen (2020) posits that behaviour is dependent upon intention, which, in turn, is determined by attitude, subjective norm, and perceived behavioural control. While TPB posits that intention is the predominant determinant of behaviour, it embraces that perceived behavioural control may also have an influence on an individual's behaviour. This implies that perceived behavioural control has both an intangible impact on an individual's intention and an immediate effect on their behaviour. The Theory of Planned Behaviour (TPB) posits that attitudes, subjective norms, and perceived behavioural control convey an apparent and inherent influence on an individual's intention and subsequent behaviour. The main purpose of this study is to investigate the predictive outcomes of attitudes, subjective norms, perceived behavioural control, and intention on mental health seeking among undergraduate students. To accomplish this aim, the study will apply the Theory of Planned Behaviour as the theoretical framework.

Conceptual Framework

Attitude, subjective norm, and perceived behavioural control were serves a as a predictor to predict intention to seek mental health. In the present study, attitude, subjective norm, and perceived behavioural control hypothesized as the positive predictors to intention to seeking mental health among undergraduate students. According to Theory of Planned Behaviour (TPB), individuals are more inclined to seek mental health care if they have more positive attitude, more subjective norm, and more perceived behavioural control (Ajzen, 1991).

TPB has been widely endorsed and utilized in several studies relating to mental health such as depression (Bohon et al., 2016; Hussain & Alhabash, 2020; Tomczyk et al., 2020). Therefore, TPB is beneficial in the present study as it offers a theoretical framework for examining the predictors that influencing undergraduate students' intention to seek help for their mental health.

First, attitude implies one's positive or negative evaluation of getting involved in a specific behaviour. In the context of seeking mental health, it is the student's evaluation when requesting mental health assistance. Students' attitudes towards obtaining mental health services may be impacted by variables such as perceived advantage (increased well-being and reduced stress) and perceived obstacles (stigma and time restriction). For example, an individual may believe that getting mental health services will help him or her cope with stress. The person may see mental health services positively and consider them to be an important resource for understanding their difficulties. In the context of TPB, the likelihood of individual engaging in the behaviour of seeking mental health is higher. The attitude was proven to strongly predict the intention of seeking mental health (Bohon et al., 2016; Tomczyk et al., 2020). Therefore, in the present study, attitude is hypothesized to predict positively on intention of mental health seeking among undergraduate students.

Secondly, the subjective norm is associated with perceived social pressure or acceptance or disapproval of relevant behaviour by significant others (friends, and family). Perceptions of whether significant others support or discourage getting mental health services can have a major influence on an undergraduate student's willingness to seek help. For instance, an individual feels supported and encouraged by his or her friends about how mental health service can positively impact their lives, it is reducing stigma and fostering the individual intention to seek mental health support. There was a significant relationship between positive subjective norm and intention of mental health seeking (Lee & Shin, 2020; Shi & Hall, 2021). Therefore, in this study, it was hypothesized that subjective norm would have a positive predictive effect on mental health seeking intention among undergraduate students.

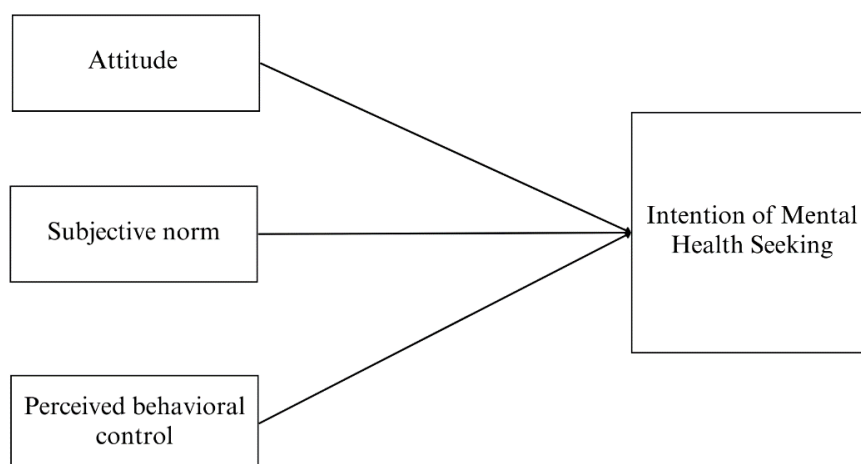
Thirdly, perceived behavioural control on intention to seek mental health care is defined as the individual's perception of the simplicity or difficulty of completing the behaviour. Access to mental health treatments and the feeling of control over one's mental health are all factors that might impact an undergraduate student's perceived behavioural control. For example, the university gives detailed instructions on how to prepare and schedule a counselling session appointment. Understanding the process may increase student's confidence and simplicity. According to TPB, this contributing to a positive perception of behavioural control, which increase their willingness to perform specific behaviour. Previous study had found that perceived behavioural control positively predicts the intention of mental health seeking (Adams et al., 2022; Bohon et al., 2016). Thus, we hypothesised that perceived behavioural control would positively predict undergraduate students' intention to seek mental health care.

Lastly, behaviour intention is the student's decided readiness and willingness to participate in the behaviour of seeking mental health help. According to TPB, the interaction

of attitude, subjective norm, and perceived behavioural control influences intention (Ajzen, 1991). Therefore, several studies found that a good attitude, supportive subjective norms, and a high perceived behavioural control are all likely to lead to a larger intention to seek mental health (Lee and Shin 2020; Mak & Davis, 2013).

Furthermore, past study by Adam et al. (2022) have found that attitude and perceived behavioural control are often significant predictors of help-seeking intentions. In addition, a previous study by Tomczyk et al. (2020) discovered that attitude and subjective norm were strongly predicted to the intents of seeking mental health. This implies that TPB provides a trustworthy framework to investigating help-seeking behaviour for mental health problems. This is supported with Bond's (2022) study, which suggested that the TPB has been used to predict various health behaviours and has a higher predictive value in explaining health-related behaviours. Therefore, current study aims to examine the predictive roles of attitude, subjective norm, and perceived behavioural control toward the intention of mental health seeking among undergraduate students with the application of TPB.

Figure 2.1 Conceptual Framework



Chapter 3

Methodology

Research Design

This study was a cross-sectional and descriptive study that sought to analyse the predictive significance of attitude, subjective norm, perceived behavioural control, and intention on mental health seeking among undergraduate students. Kesmodel (2018) defined a cross-sectional study as the acquisition of data at a certain moment in time. Furthermore, this research design enabled researchers to collect a substantial amount of data on various variables simultaneously. These variables encompassed respondents' comprehensive evaluation, emotional response, perception of social pressures, norms, and expectations, as well as their intention to seek mental health support. In addition, this approach was comparatively efficient and cost-effective to perform. It commonly involved the use of self-report questionnaires to gather data, allowing researchers to collect a substantial amount of information in a more accessible and affordable manner (Setia, 2016; Vega et al., 2021). Given the short time available for data collection, it will be beneficial to accelerate the process of this investigation (Setia, 2016; Wang & Cheng, 2020).

This study focused on the relationship among phenomena at a fixed point in time. Therefore, descriptive research was selected for the current study. According to Creswell and Creswell (2018), a quantitative research approach focuses on collecting numerical data or descriptive statistics by using descriptive studies and surveys. The current study gathered descriptive data on respondents' attitudes, subjective norms, perceived behavioural control, and intention to seek mental health services. This was performed using a self-administered survey to test the hypotheses. The quantitative research approach facilitated efficient study conduct by enabling researchers to effectively identify necessary participants through the use

of the Internet. The present study recruited participants who met specific criteria through a social media platform, which is Facebook.

Sampling Method

The current study applied a non-probability sampling technique. It is a method of selecting participants that does not include random selection. Instead, it mostly relies on the subjective assessment of the researchers (Sharma, 2017). The selection of non-probability sampling was based on the unavailability of a sampling frame (Vehovar et al., 2016). Specifically, the present study, which targeted undergraduate students, did not have a sampling frame accessible. Moreover, it was impractical to create a sample frame. Therefore, the essential prerequisites for probability sampling were absent.

Purposive sampling is a non-probability sampling technique used in this study. This sampling strategy entailed the selection of the sample according to the research team's determination of the inclusion criteria (Hiebl, 2023). To be more precise, the present study contained few inclusion criteria for selecting participants such as (1) undergraduate student (2) aged 18 and above and (3) Malaysian. The selected sample group had to meet the requirements; therefore, the sampling method was purposeful and targeted. In addition, several empirical studies have utilized purposive sampling to collect data from undergraduate students (Gulliver et al., 2022; Lee & Ho, 2021). This method was considered more convenient as only individuals who met the researchers' predetermined inclusion criteria were recruited (Kim et al., 2021).

The current investigation employed an online survey due to its high efficiency, reduced time and personnel requirements, and convenience, while still being able to obtain a substantial sample size (Kim et al., 2021). The sample's location was not restricted to a

specific public environment, such as another university, that is generally accessible. The circumstances made it impractical to carry out at a traditional paper-based poll.

Consequently, an online survey was utilized to gather data. The chosen approach involved distributing a URL hyperlink to the intended sample via popular social networking platform which is through Facebook groups.

Sample Size

The study applied G*Power version 3.1.9.7 to compute the necessary sample size. This software assisted in estimating the least amount of data required to achieve a statistically significant power. The computing software G*Power was developed by Erdfelder et al (1996). The formula for calculating the effect size (f^2), which measures the strength of the relationship between independent and dependent variables, was $f^2 = \frac{R^2}{1-R^2}$. The input parameters of the G*Power program consisted of four components: effect magnitude, statistical power, error probability (alpha), , and number of predictors.

The effect size of each predictor was computed using the formula $f^2 = \frac{R^2}{1-R^2}$, where R represented the correlation coefficient. The total effect size was obtained by averaging the effect sizes of all three predictors (refer to Appendix B, p. 82). The average effect size was 0.15, with a 0.05 likelihood of committing a type I error (alpha error) and a statistical power of 0.95. The three predictors are attitude, subjective norm, and perceived behaviour control, with correlation coefficients of 0.37, 0.31, and 0.39, respectively. The G*Power calculation yields a minimum required sample size of 119 participants (refer to Appendix C, p.89).

Participants

The target participants consisted of male and female Malaysia university who were presently committed in their pursuit of a bachelor's degree. The inclusion criteria of this study had some main factors such as being an undergraduate student and is Malaysian. However, individuals who did not match the specific requirements for inclusion, such as being under the age of 18 and not a Malaysian, were not included in the present study. The participants were also required to provide their agreement for the utilization of their data in the study. This study had recruited a total of 181 Malaysian undergraduate students. The respondents' ages range from 19 to 27 years old ($M = 22.1$, $SD = 1.14$). There were 33 males and 148 females. Among the participants, 172 were Chinese, 3 were Malay, 3 were Indian, and 3 from other races.

Location

The survey for this study was conducted in Malaysia by using Qualtrics and disseminated online. The questionnaires were widely dispersed by sending Qualtrics link or QR code through social networking platform which is Facebook groups. The present study leveraged online survey to reach out to undergraduate students all around Malaysia to expand the sample size within the allocated period, making it more convenient to recruit undergraduate students who met the study's requirements. Prior to data analysis, the data were correctly filtered using Statistical Package for Social Science (SPSS) Software 23.

Instruments

Theory of Planned Behaviour (TPB) Questionnaire

The TPB Questionnaire was created based on the manual and protocol by Ajzen (2006) and Francis et al. (2004). TPB Questionnaire specifically assessed three elements of

TPB which are attitude, subjective norm, and perceived behavioural control. The scale consisted of a total of 14 items and consisted of four subscales which were attitude (items 1, 6, 9, and 11), subjective norm (items 2, 5, 8, and 10), perceived behavioural control (items 4, 7, 13, and 14) and intention (item 3, and 11).

TPB Questionnaire was assessed with a 7-point Likert scale with a direct measurement range from 1 for “good” to 7 for “bad”. In addition, the TPB Questionnaire also used several types of items, such as instrumental items (ranging from 1 for “useless” to 7 for “useful”), and experiential items (ranging from 1 for “comfortable” to 7 for “uncomfortable”). The scale included items such as “I want to speak with a primary health care provide about my mental health” and “Taking the required steps to seek mental health support is under my control”. Higher scores indicated greater attitudes, subjective norms, and perceived behavioural control to seek help.

The Cronbach’s alpha score for attitude was .73, subjective norm was .68, and perceived behavioural control was .66 which indicated a good reliability (refer to Appendix D, p.90). However, the intention subscale of the instrument was not counted in the result part of this study. Several studies have included an additional scale to measure the intention dimension in a specific manner (Aldalaykeh et al., 2019; Bohon et al., 2016).

Mental Health Seeking Intention Scale (MHSIS)

In the present study, MHSIS by Hammer and Spiker (2018) was examined to determine respondents’ intention to seek help from a mental health expert (psychiatrist, clinical social worker, psychologist, and counsellor) when they had a mental health problem. The scale included three items, each assessed on a 7-point Likert scale, from 1 for “Very Unlikely” to 7 for “Very Likely”. The scale interpretation of the greater the score, the greater the intention that an individual would seek mental health help. An example item from the scale was “If I had a mental health concern, I would intent to seek help from a mental health

professional”. In the current study, the internal consistency of MHSIS was determined to be Cronbach’s alpha ($\alpha = .91$) (refer to Appendix D, p.90). This alpha value indicated that the scale’s internal consistency was good.

Research Procedure

Before beginning the data collection procedure, an ethical clearance application was submitted to the UTAR Scientific and Ethical Review Committee (SERC) to obtain authorization to carry out this study. A survey instrument was created to collect quantitative data from participants. The sample method used in the current study was a non-probability sampling. The study recruited only undergraduate students to participate in the survey. The formula, $f^2 = \frac{R^2}{1-R^2}$ was applied to get the average effect sizes, and G*Power software was used to examine the sample size results.

The survey question included 17 items, and the online survey was created using “Qualtrics” to obtain participants’ responses. An online survey form was created, which will include informed consent, demographic questions, the Theory of Planned Behaviour Questionnaire, and the Mental Health Seeking Intention Scale (MHSIS) (refer to Appendix A, p.75).

Pilot Study

The survey of present study was conducted through a pilot test before it was implemented to evaluate its validity, reliability, and clarity. 45 respondents were enlisted for the pilot study, and “Qualtrics” was used to gather their data. However, only 32 respondents’ responses were valid for testing the reliability of the instruments due to incomplete responses of other. The survey included informed consent, demographic questions, the Theory of

Planned Behaviour Questionnaire, and the Mental Health Seeking Intention Scale (MHSIS).

The survey link was distributed through Facebook groups.

Actual Study

Following the pilot, the final survey was sent to the intended population using a purposive sampling method. The Qualtrics link was sent to participants in the same way as the pilot study was. When there was a sufficient sample size, the process of gathering respondents was suspended, and the data from “Qualtrics” were exported to IBM SPSS Statistics 27, computer software.

Data Analysis

Data Cleaning

The data cleaning procedure was an essential step for assuring the accuracy and reliability of the collected information. The current study received a total of 230 responses. Raw data were reviewed and filtered to discover any missing information, outliers, and inconsistencies. The remaining participants were those who met the study’s inclusion requirement, where they were currently undergraduate students in Malaysia’s universities.

Descriptive Statistics

Descriptive statistics on the participants’ demographics were presented using SPSS. The demographic data taken from participants included gender, race, age, nationality, whether they were undergraduate students, name of the university, and year of study. All of the percentages of these data were calculated, while the mean and standard deviation of age were also displayed.

In addition, descriptive statistics for the four variables, which were attitude, subjective norm, perceived behavioural control, and intention of mental health seeking, were calculated. The mean, standard deviation, maximum value, and minimum value, of the four variables were presented.

Normality Test

A normality test was used to verify whether sample data were collected from a normally distributed population (Ghasemi & Zahediasl, 2012). The main tests for the assessment of normality included skewness, kurtosis, histogram, quantile-quantile plot (Q-Q plot), and Kolmogorov Smirnov (K-S) test.

Histogram. A histogram represents an estimate of the probability distribution of a continuous variable. If the histogram is roughly bell-shaped and symmetrical to the mean, the data should be normally distributed. (Mishra et al., 2019).

Skewness and Kurtosis. Skewness is a measure of asymmetry of a normal distribution. Greater numbers of larger values are indicated by a negative skewness, while greater numbers of smaller values are indicated by a positive skewness. On the other hand, the peakedness of a distribution is measured by kurtosis. A more peaked distribution and heavier tails are indicated by positive kurtosis, whereas a flatter distribution and lighter tails are suggested by negative kurtosis (Mishra et al., 2019). As a general rule of thumb, both skewness and kurtosis value close to zero were considered excellent. However, according to George and Mallery (2010), skewness and kurtosis values in the range of -2 to +2 were typically seen as acceptable.

Quantile-quantile plot (Q-Q Plot). According to Das & Imon (2016), Q-Q plots is generated by plotting the quantities of the two datasets against each other on a scatterplot, such as quantiles of a distribution (observed) and quantiles of normal distribution (expected). A normal distribution of a data set is shown when observed data align closely with the expected data.

Kolmogorov-Smirnov Test (KS Test). KS Test was employed to assess the distributions of observations from two datasets. A non-significant result ($p > 0.05$) indicates that the sample distribution did not deviate substantially from a normal distribution.

Multiple Linear Regression (MLR)

In the present study, Multiple Linear Regression was utilized to measure the linear relationship between independent variables (such as attitude, subjective norm, and perceived behavioral control) and the outcome variable (intention of seeking mental health support). Seven main assumptions of multiple regression models were studied and tested, such as multivariate outliers, variable types, multicollinearity, independence of error, normality of residuals, normality of linearity, and homoscedasticity.

Multivariate Outliers. Multivariate outliers were detected by using Mahalanobis distance, Cook's distance, and the value of Centered Leverage. Mahalanobis distance measured the distance between a data point and the center of a distribution. Additionally, Cook's distance was used to identify influential outliers within a set of predictor variables. It considered both the observation's leverage and residual values, with larger values indicating larger Cook distances. According to general rule of thumb for Cook's Distance, values greater than one indicates an influential value (Boussiala, 2020). Furthermore, the Centred Leverage value measured the influences of the of outcome variable's observed value over its

predicted value. The Centered Leverage value fell within the 0 to 1 range, with a value of 0 signifying no influence exerted by the case, while a value of 1 implied complete influence. The calculation of the Centered Leverage value involved the formula $(2(p+1)/n)$, where 'p' denotes the number of predictors, and 'n' represents the sample size (Hoaglin & Welsh, 1978).

Variable Types. According to Kaliyadan and Kulkarni (2019), the predictors were expected to be quantitative so that the relationships can be identified. These variables were used to predict or explain variations in the outcome variable. Furthermore, the outcome variable was expected to be continuous.

Multicollinearity. Multicollinearity occurs when two or more predictor variables had a high correlation with one another in a regression model. Tolerance and variance inflation factor (VIF) were used to assess the presence of multicollinearity among the variables. According to Pallant (2007), the value of tolerance should not be less than .10, while value of the variance inflation factor (VIF) should not be greater than 10.

Independence of Error. The Durbin-Watson statistic was used to test the assumption of independence of errors. The statistic ranges from 0 to 3 (Reddy & Sarma, 2015). A value close to 2 suggested that the errors were independent and did not exhibit significant autocorrelation. Conversely, a Durbin-Watson value falling below 1 or exceeding 3 indicated a violation of the independence assumption. The assumption was considered met when the obtained value is close to 2 (Chen, 2016).

Normality of Residual, Linearity and Homoscedasticity. According to Osbourne and Waters (2002), the residuals remained consistent across distinct combinations of predictor variables. To assess the homogeneity of variances, a scatter plot of standardized

residuals was utilized. This assumption was deemed unviolated when the distribution of residuals was randomly scattered around the horizontal zero line.

Chapter 4

Result

Data Management

The present study performed data cleaning since it is an important error prevention step for ensuring the integrity of the dataset (Van Den Broeck et al., 2005). Past studies emphasized that data cleaning includes the removal of inconsistencies and errors to reduce inaccuracies and improve the representativeness of the collected data (Ridzuan and Zainon, 2019). Data cleaning included screening for data entry errors, blank responses, missing values, and straight-lining data. The raw data received from Qualtrics was converted as an SPSS SAV data file and all data were manually cross-checked and compared. There was a total of 230 responses received through the Qualtrics survey. However, some of the responses did not meet the criteria, including not completing the questionnaire, disagreeing with having their data to proceed, and those who are not undergraduate students in university Malaysia. After analysis, 49 respondents were removed, and total of 181 respondents remained in the study as they met the study's inclusion requirement.

Normality Assumption

In the present study, the normality assumption of the data was assessed through, skewness, histogram, and kurtosis values, Quantile-quantile plot, as well as the Kolmogorov-Smirnov test.

Histogram

In the present study, all histograms displayed amazing, good look bell-shaped curve, suggesting that the data follow a normally distributed (see Appendix E, p. 91). This result

indicated that there was an absence of violations and suggested that the histogram assumption testing was successfully met.

Skewness and Kurtosis

Table 4.1 revealed all skewness and kurtosis values fell within the acceptable range. Value of skewness and that fall within the acceptable range of ± 2 is considered acceptable (George and Mallery, 2010). Therefore, the present findings can report that the normality assumptions for both skewness and kurtosis was normally distributed.

Table 4.1

Skewness and Kurtosis

Variable	Skewness	Kurtosis
Attitude	-.169	-.503
Subjective Norm	-.188	-.410
Perceived Behavioural Control	-.103	-.389
Intention of Mental Health Seeking	-.324	-.236

Quantile-Quantile Plot

Furthermore, the normality assumption was also assessed through a Quantile-quantile plot (Q-Q Plot). The result of the Q-Q plots for every variable indicates that most of the points are located closely to the diagonal line, suggesting that the assumption of normality was met (see Appendix F, p. 93).

Kolmogorov-Smirnov Test

In addition, the Kolmogorov-Smirnov (K-S) test was performed to evaluate the data's assumed normalcy. According to Gupta et al., (2019), when the p -value is non-significant ($p < .05$) the data are acceptable and considered normally distributed. The p -values for variables attitude, subjective norm, and perceived behavioural control were higher than significance level ($p > .05$), which indicates a desirable result. However, the variable Mental

Health Seeking Intention Scale (MHSIS) showed a p -value smaller than the significance level ($p > .05$), indicating a violation of distribution. Thus, it can be concluded that the K-S test's normality assumption was not completely met.

Table 4.2

K-S Test

Variable	Sig.
Attitude	.064
Subjective Norm	.200
Perceived Behavioural Control	.200
Intention of Mental Health Seeking	.005

Summary for Assumptions of Normality

The study generally met the assumptions of normality as all the results of the normality test were satisfied except the K-S test for the intention of mental health seeking variable. Past studies have suggested that the K-S test has poor power because of its high sensitivity to extreme values (Peat & Barton, 2005; Thode, 2002). It has been indicated that the K-S test does not need to be seriously considered during normalcy testing. Therefore, the overall normality assumption can still be acceptable to meet for the majority of the variables of the study.

Descriptive Statistics

The final sample consisted of 181 undergraduate students in the universities in Malaysia, predominantly (81.8 %) female. The race composition was mostly Chinese (95%), with a smaller proportion of Malay, Indian, and other races. The age range of respondents ranges from 19 to 27 years old ($M = 22.1$, $SD = 1.14$). All of the participants identified themselves as Malaysian (100%).

According to Table 4.3, the mean score for the attitude variable in this study was 20.59. This indicates that 58.6% of respondents ($n = 106$) showed low attitude towards intention of mental health seeking, while 41.4% of respondents ($n = 75$) exhibited high attitude. Next, the mean score for subjective norm was 16.16, with 59.1% of respondents ($n = 107$) reporting low subjective norm, and 40.9% of respondents ($n = 74$) indicating high subjective norm. Furthermore, perceived behavioural control had a mean score of 19.39, with 61.3% of respondents ($n = 111$) reporting low perceived behavioural control, and 38.7% of respondents ($n = 70$) reporting high perceived behavioural control towards intention of mental health seeking. Finally, the mean score of the intention of mental health seeking was 14.19. The findings revealed that 61.9% of participants ($n = 112$) had low intention to seek mental health, while 38.1% of respondents ($n = 69$) had high intentions.

Table 4.3*Participant Frequency Distribution in Demographic and Main Variables*

	<i>n</i>	<i>%</i>	<i>M</i>	<i>SD</i>
Demographic Variables				
Sex				
Male	33	18.20		
Female	148	81.80		
Race				
Chinese	172	95.00		
Malay	3	1.70		
India	3	1.70		
Others	3	1.70		
Age			22.10	1.14
Malaysian				
Yes	180	100		
No	0	0		
Undergraduate student				
Yes	181	100		
No	0	0		
Main variables				
Attitude				
Low (< 21)	106	58.60	20.59	4.29
High (≥ 21)	75	41.40		

Table 4.3*Participant Frequency Distribution in Demographic and Main Variables (Continued)*

Subjective Norm			16.16	5.00
Low (< 17)	107	59.10		
High (\geq 17)	74	40.90		
Perceived Behavioural Control			19.39	4.47
Low (< 20)	111	61.30		
High (\geq 20)	70	38.70		
Intention of Mental Health Seeking			14.19	4.03
Low (< 15)	112	61.90		
High (\geq 15)	69	38.10		

Note. $N = 181$.**Assumption of Multiple Linear Regression (MLR)*****Multivariate Outliers***

The present study used Mahalanobis Distance (MD), Cook's Distance (CD), and Centered Leverage (CL) values to assess the multivariate outliers. A total of 5 cases exceeded the standard deviation of 2, indicating potential multivariate outliers (see Appendix G, p.95). According to the MD results, none of the instances went over the benchmark value of 15 (Barnett & Lewis, 1994). In contrast, the benchmark value of CD did not exceed 1, suggesting that there was the absence of multivariate outliers in the sample data (Cook & Weisberg, 1984). The range of CL values did not breach the benchmark of 0.044, which was obtained by the calculation of $2(3+1)/181$ (Dhakal, 2017). None of the cases violated the assumptions of MD, CD, and LD values, therefore, all cases could be retained.

Variable Types

In the present study, all variables were classified as continuous variables. It enabled the utilization of multiple linear regression analysis. This categorization ensures that the MLR assumptions of regression analysis were met as quantitative variables were used to predict the changes in the outcome variables. Additionally, this study was able to investigate

the relationship between the determinants and the outcome variables by utilising continuous variable (Berry, 1993).

Multicollinearity

Multicollinearity was tested in the present study to ensure the independence of predictors in multiple linear regression analysis. According to the study by Pallant (2020), the tolerance value should not fall below .10, and variance inflation factor (VIF) values should not exceed ten. Result indicated that multicollinearity is not observed in the present study (see Appendix H, p.100).

Independence of Errors

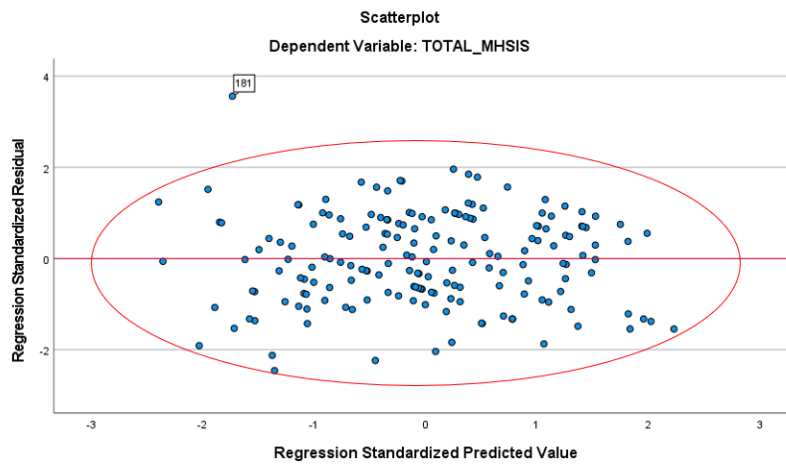
Additionally, the independence of errors was examined using the Durbin-Watson test. As suggested by Chen (2016), a value closer to two is considered the assumption met. The acceptable statistical range of Durbin-Watson was range from one to three (Reddy & Sarma, 2015). Result indicates that the Durbin-Watson value of 1.844 meets the assumption of error independence (see Appendix H, p.100). This value suggests that the errors in the regression model did not exhibit significant autocorrelation.

Normality of Residuals, Linearity, and Homoscedasticity

Furthermore, the normality of residuals, linearity, and homoscedasticity were also checked to ensure the validity of regression analysis assumptions. In Figure 4.1, the normality assumption was not violated, as the scatterplot shows that most of the residuals are randomly scattered around the horizontal zero line. However, a single outlier was observed, which requires further investigation, but it does not significantly impact the overall validity of the assumption.

Figure 4.1

Scatterplot Demonstrated the Normality of Residuals, Linearity, and Homoscedasticity



Multiple Linear Regression Analysis

Multiple regression analysis was implemented in the present study to examine whether the influence of attitude, subjective norm, and perceived behavioural control can significantly predict the intention of mental health seeking. All of the multiple linear regression assumptions have been met in the present study. The model was statistically significant as $F(3, 177) = 39.185, p < .001$, and there was a 38.90% variance (see Appendix H, p.100). According to Cohen (1988), the present study gained the R^2 value of .389, which is greater than .26 indicates a large effect size. Besides, result showed that perceived behavioural control ($\beta = .336, p = <.001$) was found to be the strongest predictor of the intention of mental health seeking, and followed by attitude ($\beta = .291, p = <.001$). However, subjective norm ($\beta = .108, p = .088$) emerged as non-significantly predictors of the intention of mental health seeking.

Summary of Findings

Based on Table 4.4, H1 and H3 were supported while H2 was not supported.

Table 4.4

Summary of the Findings

Hypothesis	Std. <i>B</i>	<i>p</i>	Decision
H1: Attitude positively predicts help-seeking intention among undergraduate students.	.291	< .001	Supported
H2: Subjective norm positively predicts help-seeking intention among undergraduate students.	.108	.088	Not supported
H3: Perceived behavioural control positively predicts help-seeking intention among undergraduate students.	.336	< .001	Supported

Chapter 5

Discussion

H1. Attitude positively predicts help-seeking intention among undergraduate students.

The present study showed that attitudes were positively and significantly predicted help-seeking intentions among undergraduate students. The results were consistent with the previous study (Aldalaykeh et al., 2019; Daudi et al., 2022; Mesidor & Sly, 2014; Yelpaze & Ceyhan, 2020). Individuals with more positive attitudes about seeking mental health services were more likely to receive psychological assistance than those with more negative attitudes about that behaviour. The positive attitudes implied that students perceived seeking psychological help as beneficial in dealing with psychosocial issues they encountered while studying at the university (Daudi et al., 2023). This aligned with past study whose demonstrated that attitude played a significant role and affected an individual's willingness to seek professional assistance when they perceived they were experiencing mental health issues (Aulia et al., 2023).

The variations in attitudes towards seeking psychological assistance can be explained by culture perspectives (Arora et al., 2016; Daudi et al., 2023). Empirical studies found that collectivist Asians tended to hold negative attitudes toward seeking psychological assistance (Dombou et al., 2023; Kim & Zane, 2016; Mohankumar, 2022) as they preferred to solve psychosocial issues independently, including suppressing distressing emotions related to particular psychosocial issues (Yu et al., 2015). This contradicted earlier research by Daudi et al. (2023), whose found that Tanzanian university students from collectivist backgrounds exhibited positive attitudes toward mental health seeking. This viewpoint was further supported by prior studies suggesting that collectivist individuals may perceive psychological help as a form of social support (Yakunina, 2011; Yelpaze & Ceyhan, 2020). Consequently,

they had more positive attitudes toward seeking psychological assistance, which in turn increased their intention to access mental health services (Yelpaze & Ceyhan, 2020).

Previous study demonstrated that undergraduate students with a more positive attitude toward seeking psychological assistance tended to trust in the competence of mental health service providers (Yelpaze & Ceyhan, 2019). Undergraduate students perceived these providers as experts with adequate professional training and practical experience gained from addressing various client issues. This was further supported by Aulia et al. (2023) whose demonstrated that the competence of psychological help providers was partly associated with their interactions with clients experiencing diverse problems on a daily basis. The finding was consistent with earlier research showing that undergraduate students who perceived psychological help providers as knowledgeable and skilled are more inclined to develop positive attitudes toward seeking psychological assistance (Figuroa et al., 2020).

H2. Subjective norm positively predicts help-seeking intention among undergraduate students.

Subjective norms are highly influential in determining individuals' intents and actions, especially when it comes to seeking mental health seeking. Conversely to the second hypothesis, the findings of the current research did not support the hypothesis that subjective norms have a positive impact on the intention to seek mental health support. In fact, subjective norms were found to be negative and not statistically significant predictors of this intention. This result deviates from prior studies (Adams et al., 2021; Aldalaykeh et al., 2019; Chang & Huang., 2020; Tomczyk et al., 2020) have emphasised the significant impact of subjective norms on altering individuals' attitudes and behaviours regarding obtaining mental health support.

The unforeseen outcome concerning subjective norms might be regarded from multiple perspectives. Firstly, it is conceivable that individuals in the study sample did not sense substantial social pressure or expectations when it came to seeking mental health care from their immediate social networks. The absence of perceived normative influence may have weakened the ability of subjective standards to accurately predict the intention to seek mental health care (La Barbera & Ajzen., 2020). According to Shea et al. (2019), cultural influences and social attitudes towards mental health can impact the importance and impact of subjective norms on individuals' behavioural intentions. In cultures characterised by a preference for indirect communication or a cultural taboo involving mental health, individuals may refrain from openly expressing their ideas or opinions related to mental health (Minson & Chen., 2022). Consequently, this might result in discrepancies between subjective norms and their actual behavioural intentions.

Moreover, the observed findings may have been influenced by methodological considerations. The present study's assessment of subjective norms may have failed to encompass the complete range of social influences and pressures experienced by individuals in relation to their behaviour of seeking mental health support. Despite the non-statistical significance in the results, it is imperative to recognise the complex relationship between subjective norms and other factors influencing individuals' intention to seek mental health services, including attitudes, perceived behavioural control, and felt necessity for treatment. The results obtained in the present study did not provide evidence to support of the hypothesised association between subjective norms and the intention to seek mental health support. However, they emphasise the necessity for additional research to clarify the complex factors that influence individuals' behaviours when seeking help in the field of mental health.

H3. Perceived behavioural control positively predicts help-seeking intention among undergraduate students.

The results also supported the third hypothesis indicating that perceived behavioural control positively predicted help-seeking intention among undergraduate students. This finding of the present study was consistent with previous research indicating that perceived behavioural control was the strongest predictor in determining mental health seeking intention (Aldalaykeh et al., 2019; Bohon et al., 2016; Mak & Davis, 2013; Wang et al., 2023). Specifically, undergraduate students who believed they possessed the necessary resources or capabilities to access mental health services were more likely to engage in this help-seeking behaviour (Mesidor & Sly, 2014). According to Ajzen's (1991) Theory of Planned Behaviour, the study suggested that perceived behavioural control not only predicted intentions but also influenced actual behaviours. This was further supported by Ajzen (2002b), who confirmed that a high degree of perceived control strengthened individuals' intentions to seek mental health service, leading to increased effort and persistence in seeking help from psychological professionals.

Past studies suggested that individuals were more likely to perform a behaviour when it was easy, rather than difficult to perform (Kidwell & Jewell, 2010). The ease of performing the behaviour could influence individuals' perceptions of their internal control over the behaviour. According to Aldalaykeh et al. (2019), the availability and accessibility of mental health services also had an impact on intention towards mental health seeking. Specifically, if mental health services were readily available, affordable, and free of stigma, individuals might have perceived seeking help as a relatively easy task (Tomczyk et al., 2020). In this case, individuals were more likely to believe they had control over seeking help. This

increased perceived control over help-seeking behaviour enhanced their intention to actually seek assistance when faced with mental health challenges (Kidwell & Jewell, 2010).

Implication

Theoretical Implication

This research leveraged the theory of planned behaviour to investigate the predictive importance of attitude, subjective norms, and perceived behavioural control in terms of the intention to seek aid among undergraduate students. Conversely, the findings of the study revealed that subjective norm did not emerge as an important predictor of help-seeking intention, which contrast with previous research (Hussain & Alhabash, 2021; Li et al., 2022; Song et al., 2019; Yee & Ryan, 2023). As a result of the inconsistency, it may provoke the attention of researchers who desire to examine the potential explanations or factors with further depth; this can serve as an unexpected contribution to the worldwide field of literature. Future researchers may extend the theory of planned behaviour through including further variables such as self-stigma and social support, to investigate additional factors that potentially impact an individual's intention to seek help. Furthermore, the results of the present investigation validated the existing theoretical literature, thereby offering a new point of reference for both society and the field of study. This study specifically examines the predictive value of seeking help intention in the Malaysian settings regarding with associations between three psychological variables: attitude, subjective norms, and perceived behavioural control. The theory of planned behaviour can be effectively applied for clarifying the factors influencing the development of help-seeking intention among undergraduate students in the Malaysian settings.

Practical Implication

The research's findings indicate that perceived behavioural control plays a significant factor in determining individuals' intention to seek mental health care. In addition, the results of the present study have the potential to provide policymakers with new perspectives, enabling them to develop a broader comprehension of the Malaysian settings. The current research has the potential to enhance public awareness and knowledge regarding the intention to seek mental health support on both the public and undergraduates. Hence, this can serve as an important tool for policymakers to generate innovative and beneficial ideas, as well as implement effective policies aimed at promoting greater participation of undergraduate students in mental health services. For example, such as policymakers can identifying the potential factors that can enhance the intention to seek mental health assistance, it is crucial in creating a supportive atmosphere. They can achieve this by establishing policies that diminish the social stigma and improve the accessibility of mental health services on university campuses. This phase holds significant importance in dealing with and reducing the increasing mental health issues encountered by undergraduate students, ultimately contributing to the persistence of behavioural intentions.

Moreover, the findings of the present research demonstrated that attitude existed as a important predictor. Consequently, mental health professionals have the potential to develop approaches aimed at fostering a desire to pursue mental health care, drawing upon this particular attitude. Practitioners of mental health may devise an implementation strategy to assist undergraduates in comprehending how they can effectively seek for mental health support. For instance, to destigmatize seeking assistance, they can organise a workshop, mental health activities, or awareness campaign. Through this approach, undergraduates can acquire comprehensive understanding of the significance of requesting mental health support

and foster acceptance of such services, thereby ultimately fortifying their intention to demonstrate appropriate behaviour. The initiative to cultivate and foster a favourable disposition towards obtaining psychological support resulted in a subsequent augmentation of individuals' intention to utilise mental health services (Yelpaze & Ceyhan, 2020). Moreover, the findings of the study revealed a significant and positive correlation between attitude and the intention to seek mental health services, underscoring the crucial significance of attitude in predicting individuals' intentions to seek assistance. Without an appropriate attitude, individuals would be reluctant to seek psychological care; thus, it may appear that attitude is the determining factor in whether individuals carry out their intention to seek mental health. In short, the sustainability of intention to pursue mental health assistance is dependent upon one's attitude.

Limitations of Study

The current study identified a number of limitations that need to be addressed in future. Firstly, the current study relied on self-report questionnaires to collect data, a method that is prone to response bias. Social desirability bias occurs when participants provide their answer in a way that they believe will be viewed favourably by others, rather than expressing their genuine thoughts, feelings, or behaviours. This is because individuals often have a higher desire to present themselves in a more favourable light and avoid appearing socially undesirable or deviant even if the survey is anonymous. As a result, they may modify their responses to align with societal norms or expectations. Consequently, there is a risk of overestimating socially desirable behaviours or attitudes while underestimating socially undesirable ones. Veselý and Klöckner (2020) have highlighted the multifaceted impact of socially desirable responding on research outcomes. For example, social desirability bias can

reduce the accuracy and reliability of the findings by increasing or decreasing mean scores, inflating, suppressing, and moderating correlations between variables.

The current study was conducted using a cross-sectional design. Cross-sectional design is cheaper and less time-consuming as it allows researchers to collect data from a large number of people simultaneously. However, the cross-sectional design could not establish the cause-effect relationship as responses were collected at only one point in time (Wang & Cheng, 2020). Environmental factors and personal experiences have the potential to cause changes over time in the variables of attitude, subjective norm, perceived behavioural control, and intention on mental health seeking. This design limited the ability to examine the predictive ability of three psychological variables and intention to predict actual behaviour. Hence, the cross-sectional design in the current study was utilized solely to assess the prevalence of a particular occurrence at a specific moment in time.

The survey results revealed an imbalance in the distribution of participants based on both gender and race. The findings indicated a significant overrepresentation of Chinese participants, comprising 95% of the sample. This was followed by Malay, Indian, and other racial groups, each representing only 1.7% of the participants. In addition, out of the total 181 undergraduate students surveyed in Malaysian universities, 148 were females whereas only 33 were males. It can introduce biases into the study results, impacting the generalizability and validity of the findings. For instance, the overrepresentation of Chinese participants may lead to an overemphasis on the perspectives and experiences of this particular racial group, potentially neglecting the unique challenges and perspectives of other racial groups. Similarly, the disproportionate gender representation may skew the results towards the experiences and attitudes of female students, while underrepresenting the viewpoints of male students.

Recommendations of Study

There are a few recommendations for future studies to address the limitations of the present study. Indirect questioning is recommended to reduce the social desirability bias. Indirect questioning is a projection technique that requires the participants to answer questions from the perspective of another person or group. It is typically used to ask participants to make predictions about what other people who are similar to them would think or do. In this case, the participants will project their own behaviour onto the other person or group, thus exposing their own attitude (Kwak et al., 2019). Fisher (1993) discovered that indirect questioning significantly increases the ratings of socially undesirable traits, suggesting that indirect questioning is an effective method for reducing social desirability bias. This indirect and impersonal approach would make respondents more willing to express their opinions and attitudes on sensitive issues. For example, participants were asked to consider how "members of their organization" would respond to certain scenarios, rather than being asked directly about their own behaviour (Ried et al., 2022). By using indirect methods, future researchers can minimize the influence of personal bias and social expectations and allow participants to provide more realistic answers from an impersonal perspective.

Future studies were suggested to use longitudinal study to understand how individuals change and develop over time. This is because longitudinal study involves following the same individual at multiple points in time, often spanning years or even decades (Caruana et al., 2015). Hence, researchers have the opportunity to determine changes over time in the attitudes, subjective norms, perceived behavioural control, and intention on mental health seeking among Malaysian undergraduate students. In addition, by measuring both predictor and outcome variables at multiple time points, researchers can examine how changes in one variable precede or predict changes in another.

In addition, future research could utilize stratified sampling techniques to address the disproportionate representation of different population groups, such as gender and race. This approach involves dividing the population into distinct subgroups or strata based on relevant characteristics and then independently sampling from each stratum (Howell et al., 2020). In this case, researchers can ensure that the sample accurately reflects the diversity of the population being studied. Stratified sampling techniques not only reduce sampling bias, but also enhances the precision of the findings.

Conclusion

In conclusion, the present research has offered valuable insights into the factors that can predict the tendency of undergraduate students to seek assistance from mental health facilities. The study revealed that attitude and perceived behaviours were excellent predictors of help-seeking intention among undergraduate students, while subjective norms did not have a significant impact. This research addresses a notable gap in the existing body of literature by investigating the associations among attitudes, perceived behavioural control, and subjective norms among undergraduate students. This research contributes to the increasing understanding on mental health help-seeking behaviours and offers valuable insights for creating effective interventions to improve the mental well-being of undergraduate students.

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<https://doi.org/10.1080/19325037.2019.1616014>

Appendices

Appendix A

Questionnaire



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Department of Psychology and Counselling
Faculty of Arts and Social Science Universiti Tunku Abdul Rahman

PERSONAL DATA PROTECTION NOTICE

Please be informed that in accordance with Personal Data Protection Act 2010 ("PDPA") which came into force on 15 November 2013, Universiti Tunku Abdul Rahman ("UTAR") is hereby bound to make notice and require consent in relation to collection, recording, storage, usage and retention of personal information.

Personal data refers to any information which may directly or indirectly identify a person which could include sensitive personal data and expression of opinion. Among others it includes:

- a) Name
- b) Identity card
- c) Place of Birth
- d) Address
- e) Education History
- f) Employment History
- g) Medical History
- h) Blood type
- i) Race
- j) Religion
- k) Photo
- l) Personal Information and Associated Research Data

2. The purposes for which your personal data may be used are inclusive but not limited to:

- a) For assessment of any application to UTAR
- b) For processing any benefits and services
- c) For communication purposes
- d) For advertorial and news
- e) For general administration and record purposes
- f) For enhancing the value of education
- g) For educational and related purposes consequential to UTAR
- h) For replying any responds to complaints and enquiries
- i) For the purpose of our corporate governance
- j) For the purposes of conducting research/ collaboration

3. Your personal data may be transferred and/or disclosed to third party and/or UTAR collaborative partners including but not limited to the respective and appointed outsourcing agents for purpose of fulfilling our obligations to you in respect of the purposes and all such

3. Your personal data may be transferred and/or disclosed to third party and/or UTAR collaborative partners including but not limited to the respective and appointed outsourcing agents for purpose of fulfilling our obligations to you in respect of the purposes and all such other purposes that are related to the purposes and also in providing integrated services, maintaining and storing records. Your data may be shared when required by laws and when disclosure is necessary to comply with applicable laws.

4. Any personal information retained by UTAR shall be destroyed and/or deleted in accordance with our retention policy applicable for us in the event such information is no longer required.

5. UTAR is committed in ensuring the confidentiality, protection, security and accuracy of your personal information made available to us and it has been our ongoing strict policy to ensure that your personal information is accurate, complete, not misleading and updated. UTAR would also ensure that your personal data shall not be used for political and commercial purposes.

Consent:

6. By submitting or providing your personal data to UTAR, you had consented and agreed for your personal data to be used in accordance to the terms and conditions in the Notice and our relevant policy.

7. If you do not consent or subsequently withdraw your consent to the processing and disclosure of your personal data, UTAR will not be able to fulfill our obligations or to contact you or to assist you in respect of the purposes and/or for any other purposes related to the purpose.

8. You may access and update your personal data by writing to us at EMAIL.

Ethical Approval Reference Number:

U/SERC/78-180/2024

Lean Ying Tong (lean2002562@1utar.my)

Low Lee Sang (leesang@1utar.my)

Ronald Cheam Jun Xian (ronaldcheam1212@1utar.my)

Acknowledgment of Notice

I have been notified and that I hereby understood, consented and agreed per UTAR above notice.

I disagree, my personal data will not be processed.

Q1 Gender

- Male
- Female

Q2 Race

- Chinese
- Malay
- India
- Others _____

Q3 Age

Q4 Malaysian?

- Yes
- No

Q5 Are you an undergraduate student?

- Yes
- No

Q6 Name of University (E.g. Universiti Tunku Abdul Rahman)

Q7 Course of Study (E.g. Psychology, Advertising, etc...)

Q8 Year of Study (E.g. Year 1, Year 2, etc...)

ADAPTED THEORY OF PLANNED BEHAVIOUR QUESTIONNAIRE FOR MENTAL HEALTH HELP-SEEKING

Instructions:

Please answer each question by circling the number that best describes your feelings. Some of the questions may appear similar, but they do address somewhat different issues.

Please consider yourself in the shoes of a person similar to you in age and circumstance who is feeling sad, empty, fearful and/or anxious.

A primary health care provider includes a general practitioner/family doctor, general practice nurse, community health worker or medical specialist.

Please read each question carefully.

Q1 Speaking with a primary health care provider about my mental health (feeling sad, empty, fearful and/or anxious) for me would be:

	1	2	3	4	5	6	7	
Good	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Bad

Q2 Most people who are important to me think that I should speak with a primary health care provider about mental health:

	1	2	3	4	5	6	7	
Strongly Disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly Agree

Q3 I want to speak with a primary health care provider about my mental health:

	1	2	3	4	5	6	7	
Strongly Disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly Agree

Q4 I am capable of taking the required action(s) to seek mental health support:

	1	2	3	4	5	6	7	
Strongly Disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly Agree

Q5 Most people who are important to me would speak with a primary health care provider about their mental health

	1	2	3	4	5	6	7	
Strongly Disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly Agree

Q6 Speaking with a primary health care provider about my mental health for me would be

	1	2	3	4	5	6	7	
Useless	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Useful

Q7 Taking the required steps to seek mental health support is under my control:

	1	2	3	4	5	6	7	
Absolutely Yes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Absolutely No

Q8 It is expected of me that I speak with a primary health care provider about my mental health

	1	2	3	4	5	6	7	
Strongly Disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly Agree

Q9 Speaking with a primary health care provider about my mental health for me would be:

	1	2	3	4	5	6	7	
Comfortable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Uncomfortable

Q10 I feel under social pressure to speak with a primary health care provider about my mental health:

	1	2	3	4	5	6	7	
Strongly Disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly Agree

Q11 Speaking with a primary health care provider about my mental health for me would be:

	1	2	3	4	5	6	7	
Harmful	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Beneficial

Q12 I intend to speak with a primary health care provider about my mental health:

	1	2	3	4	5	6	7	
Strongly Disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly Agree

Q13 It would be easy for me to speak with a primary health care provider about my mental health:

	1	2	3	4	5	6	7	
Strongly Disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly Agree

Q14 For me to speak with a primary health care provider about my mental health is:

	1	2	3	4	5	6	7	
Impossible	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Possible

Mental Help Seeking Intention Scale (MHSIS)

Instructions:

For the purposes of this survey, “mental health professionals” include psychologists, psychiatrists, clinical social workers, and counselors. Likewise, “mental health concerns” include issues ranging from personal difficulties (e.g., loss of a loved one) to mental illness (e.g., anxiety, depression). Please mark the box that best represents your opinion.

Q15 If I had a mental health concern, I would intend to seek help from a mental health professional.

	1	2	3	4	5	6	7	
Extremely Unlikely	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Extremely Likely

Q16 If I had a mental health concern, I would try to seek help from a mental health professional.

	1	2	3	4	5	6	7	
Definitely False	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Definitely True

Q17 If I had a mental health concern, I would plan to seek help from a mental health professional.

	1	2	3	4	5	6	7	
Strongly Disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly Agree

Appendix B

Calculation of Effect Size

Attitudes

$$f^2 = \frac{0.37^2}{1 - (0.37)^2} = 0.16$$

Table 2 Pairwise point-biserial and Pearson's correlations between components of the theory of planned behaviour (TPB), help-seeking intentions and help-seeking behaviour regarding professional help (psychologist, psychotherapist or psychiatrist) in a community sample of German adults with currently untreated depressive symptoms ($N=188$)

	1	2	3	4	5	6	7
1. TPB ^a attitudes towards treatment	1						
2. TPB subjective norms	.32***	1					
3. TPB perceived behavioural control (overall)	.19*	.15*	1				
4. TPB perceived behavioural control (self-efficacy)	.17*	.20*	.79***	1			
5. TPB perceived behavioural control (controllability)	.15	.07	.91***	.46**	1		
6. Intention to seek help	.37***	.39***	.19*	.25**	.10	1	
7. Help-seeking	.19*	.28***	.10	.17*	.03	.40***	1

^a TPB, theory of planned behaviour

* $p < .05$

** $p < .01$

*** $p < .001$

Tomczyk, S., Schomerus, G., Stolzenburg, S., Muehlan, H., & Schmidt, S. (2020). Ready, willing and able? An investigation of the Theory of Planned Behaviour in help-seeking for a community sample with current untreated depressive symptoms. *Prevention Science, 21*(6), 749–760. <https://doi.org/10.1007/s11121-020-01099-2>



Ready, Willing and Able? An Investigation of the Theory of Planned Behaviour in Help-Seeking for a Community Sample with Current Untreated Depressive Symptoms

S. Tomczyk¹ · G. Schomerus² · S. Stolzenburg³ · H. Muehlan¹ · S. Schmidt¹

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Abstract

Applying health behaviour change models, such as the theory of planned behaviour (TPB), to help-seeking for mental health problems can address the deficit in health care utilisation. However, previous studies largely focused on help-seeking intentions and not behaviour, which might be problematic due to the intention-behaviour gap. Hence, TPB and help-seeking were examined in a German community sample with current untreated depressive symptoms: 188 adults ($M_{age} = 50.34$; $SD = 16.19$; 70.7% female) participated in a baseline interview and survey measuring components of the TPB (attitudes, subjective norms and perceived behavioural control) and help-seeking intentions. They reported actual help-seeking from mental health professionals via telephone surveys 3 and 6 months later. To better understand the potential gap between help-seeking intentions and behaviour and to investigate the contributions of readiness, willingness and ability to seek help, two path models were constructed in accordance with the TPB controlling for covariates. Attitudes ($\beta = .24$), subjective norms ($\beta = .25$) and self-efficacy ($\beta = .15$) were significantly associated with intentions ($R^2 = 26\%$), which predicted help-seeking (Cox and Snell's pseudo- $R^2 = 23\%$); controllability did not predict help-seeking. In sum, the TPB provides a reliable framework to explore help-seeking behaviour for mental health problems. Based on these findings, prevention efforts should focus on readiness and willingness to seek help (e.g. foster positive attitudes and social support of treatment). However, the role of ability, operationalised as perceived behavioural control and (perceived) barriers to help-seeking, warrants further research, as self-efficacy but not controllability was associated with help-seeking.

Keywords Help-seeking · Theory of planned behaviour · Depression · Mental health · General population

Introduction

According to the World Health Organization, depression is one of the main health-related burdens of society. It currently

represents a major cause of non-fatal health loss worldwide (World Health Organization 2017). While seeking adequate treatment proves to be highly effective in battling depression (Cuijpers et al. 2013), a minority of people with depression actually seeks professional help. Therefore, numerous studies have investigated attitudinal and structural barriers to help-seeking (e.g. Clement et al. 2015; Gonzalez et al. 2005; Schnyder et al. 2017; Schomerus et al. 2009b). Attitudinal barriers refer to cognitive, emotional and motivational aspects, such as negative attitudes towards health services or mental illness stigma (Clement et al. 2015; Schnyder et al. 2017), whereas structural barriers comprise aspects such as low-socioeconomic status, financial costs of health services, cultural background (e.g. informal help-seeking is preferred over professional help in several Eastern cultures) and availability of mental health services (e.g. low density of services in rural areas) (Altweck et al. 2015; Mak and Davis 2014; Mo and Mak 2009; Sareen et al. 2007). To tackle the deficit in treatment utilisation, it is important to closely inspect the help-

Electronic supplementary material The online version of this article (<https://doi.org/10.1007/s11121-020-01099-2>) contains supplementary material, which is available to authorized users.

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Subjective Norms

$$f^2 = \frac{0.31^2}{1 - (0.31)^2} = 0.11$$

Table 2 Means, standard deviations, and correlations of the total scale scores

Measure	M	SD	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1. Attitudes	28.85	5.44	—	-.58***	-.15***	-.29***	.59***	.22***	.33***	.20***	-.17***	.05	.02	.16***	.38***	-.27***	.58***
2. Self-stigma	25.20	6.94		—	.36***	.44***	-.39***	-.38***	-.23***	-.17***	.09*	.11**	.13**	-.26***	-.18***	.30***	-.50***
3. Public stigma	8.48	4.22			—	.33***	-.09*	-.39***	.01	-.04	.06	.34***	.34***	-.14***	-.10*	.18***	-.18***
4. Anticipated risks	12.62	4.25				—	-.19***	-.25***	-.05	-.01	.03	.27***	.30***	-.17***	-.04	.13**	-.31***
5. Anticipated benefits	13.87	3.64					—	.23***	.25***	.20***	-.09*	.05	.01	.10*	.31***	-.11**	.47***
6. Social support	76.55	11.38						—	.15***	.12**	-.11**	-.37***	-.41***	.22***	.15***	-.18***	.23***
7. Predisposing-knowledge	—	—							—	.55***	-.28***	.18***	.19***	.14***	.25***	-.20***	.28***
8. Knowledge-frequency	—	—								—	-.25***	.18***	.15***	.11**	.26***	-.13**	.19***
9. Enabling-knowledge	—	—									—	-.02	.01	-.03	-.14**	.12**	-.16***
10. Psychological distress— symptoms	46.09	12.99										—	.82***	-.04	.07	.06	.10*
11. Psychological distress-severity	24.76	9.31											—	-.06	.09*	.03	.03
12. Perceived behavioural control	14.78	2.55												—	.15***	-.15***	.20***
13. Subjective norms	44.85	10.85													—	-.14**	.31***
14. Asian values	128.21	22.4														—	-.17***
15. Help-seeking intentions	55.55	18.2															—

Note. N = 611. *p < .05. **p < .01. ***p < .001.

Li, W., Denson, L. A., & Dorstyn, D. S. (2018). Understanding Australian university

students' mental health help-seeking: An empirical and theoretical investigation.

Australian Journal of Psychology, 70(1), 30-40.

<https://doi.org/10.1111/ajpy.12157>

Understanding Australian university students' mental health help-seeking: An empirical and theoretical investigation

Wenjing Li, Linley A. Denson, and Diana S. Dorstyn

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Abstract

Objective: To investigate correlates of Australian university students' help-seeking intentions and actual service usage, testing and extending new models based on the Theory of Planned Behaviour and the Behavioural Model of Health Services Use. **Method:** 611 Australian domestic students (209 males and 402 females, mean age = 21 years; $SD = 5.6$) completed standardised measures and commented on facilitators, barriers, benefits, and potential improvements to student mental health services. **Results:** A model based on Chinese university student data also fit the Australian data best. Bootstrapping revealed relationships between several predictors (knowledge concerning mental health and services, evaluated and perceived need, anticipated benefits, stigma concerns, and Asian values) and help-seeking intentions were significantly mediated by attitudes toward help-seeking and subjective norms. Logistic regression analysis identified predictors of service usage: help-seeking intentions, perceived behavioural control, gender, study major, knowledge of mental health, social support, income, self-rated mental health status, perceived need for help, and Asian values. **Conclusions:** Practitioners need to consider psycho-educational and marketing approaches to engage students, raise awareness of available services, increase understanding of mental illness and treatments, and reduce stigmatized attitudes.

Key words: behavioural model of health services use, help-seeking intention, service utilisation, tertiary education, theory of planned behaviour

What is already known about this topic

- Existing Australian research has identified predictors of mental health service use among young adults, however the findings may not generalise to university students.
- Australian university students need, but are reluctant to, utilise available services.
- Australian help-seeking research is rarely theoretically grounded.

Stressors associated with tertiary education (e.g., academic demands) render university students more vulnerable to mental health issues than other young adults, implying greater need for professional care (Cvetkovski, Reavley, & Jorm, 2012). Research on young Australians' mental health help-seeking may, therefore, not entirely generalise to students. Moreover, students are reluctant to seek professional help despite most universities offer free counselling services

What this topic adds

- Examines Australian students' formal help-seeking behaviour by integrating and applying two leading health psychology theories—the Theory of Planned Behaviour and Behavioural Model of Health Services Use.
- Empirical investigation and formal model testing of two distinct but separate constructs—help-seeking intentions and actual service usage—within the same large sample.
- Potential directions for increasing students' use of psychological services are provided.

(Thomas, Caputi, & Wilson, 2014). To improve their use of mental health services, it is important to explore this reluctance. Accordingly, we applied the Theory of Planned Behaviour (TPB; Ajzen, 1991) and the Behavioural Model of Health Services Use (Andersen, 1995) to examine the correlates of Australian university students' mental health help-seeking intentions and their actual use of mental health services.

The TPB has been demonstrated as an effective theoretical model for explaining health-related behaviours including help-seeking (Armitage & Conner, 2001; Li, Dorstyn, &

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Perceived Behaviour Control

$$f^2 = \frac{0.39^2}{1 - (0.39)^2} = 0.18$$

Table 3

Students Intercorrelation between Intentions, Psychological Distress, Attitudes, Subjective Norms, and Perceived Behavioral Control

Variable	1	2	3	4	5
1. Intentions	–	.21**	-.08	-.00	.39***
2. Psychological Distress		–	-.27***	-.29***	.15
3. Attitudes			–	.59***	.02
4. Subjective Norms				–	.10
5. Perceived Beh. Control					–

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

Mesidor, J. K., & Sly, K. F. (2014). Mental health help-seeking intentions among international and African American college students: An application of the theory of planned behavior. *Journal of International Students*, 4(2), 137-149.

Peer Reviewed Article

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Mental Health Help-Seeking Intentions Among International and African American College Students: An Application of the Theory of Planned Behavior

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Kaye F. Sly, PhD
Department of Psychology
Jackson State University (USA)

Abstract

This study examined the relationship between social-cognitive factors (e.g., attitudes, subjective norms, and perceived behavioral control), psychological distress, and help-seeking intentions for a sample of 111 international and African American college students. The results of this study showed that the Theory of Planned Behavior (TPB) variables (e.g., attitudes, subjective norms, and perceived behavioral control) accounted for 17.7 % of the variance in help-seeking intentions. The first hypothesis, which predicted that positive attitudes toward mental health services and perceived behavioral control would be significant predictors of the students' intentions to seek mental health services, was partially supported. Perceived behavioral control was the strongest predictor of help-seeking intentions. Contrary to our expectations, attitudes toward mental health services were not a significant predictor of mental health seeking intentions. The second hypothesis was not supported. There was no significant difference in mean intention scores for African American college students compared to international college students. These findings have implications for mental health service providers in terms of designing outreach mental health programs that would motivate these students to translate their help-seeking intentions into behaviors (e.g., seeking mental health services when they experience psychological distress).

Keywords: Mental health, help-seeking intention, international students, African American college students

There has been a significant increase in the number of international and African-American college students attending U.S. colleges and universities. Approximately 690,923 international college students were enrolled in colleges and universities in the 2009-2010 academic year, which constituted an increase of 3% for the academic year 2009-2010 (Institute of International Education, 2010). However, it should be noted that there was a decrease of 4.7% of international students enrolled in colleges and universities in Mississippi (the site of the current study) during the academic year of 2009-2010. The number of African-American students attending higher education in the U.S increased from 9% to 14% from 1978 to 2009 (U.S. Department of Education, National Center for Education Statistics, 2011).

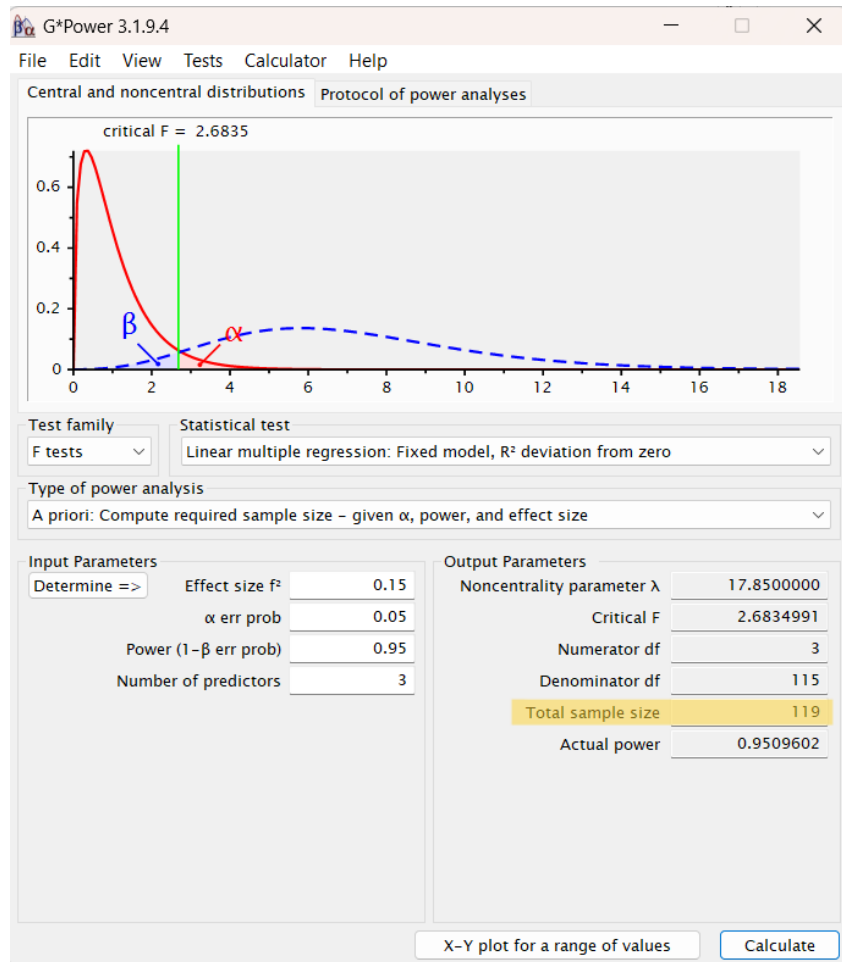
Few researchers have investigated mental health seeking intentions among international and African-American college students. The literature suggests that international and African American college students underutilize mental health services (Rosenthal & Wilson, 2008; Yargason, Linville,

Total Effect Size

$$f^2 = \frac{0.16 + 0.11 + 0.18}{3} = 0.15$$

Appendix C

G*Power



Appendix D

Reliability of Instrument in Actual Study

Attitudes

Reliability Statistics		
Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.728	.730	4

Subjective Norms

Reliability Statistics		
Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.680	.679	4

Perceived Behaviour Control

Reliability Statistics		
Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.662	.671	4

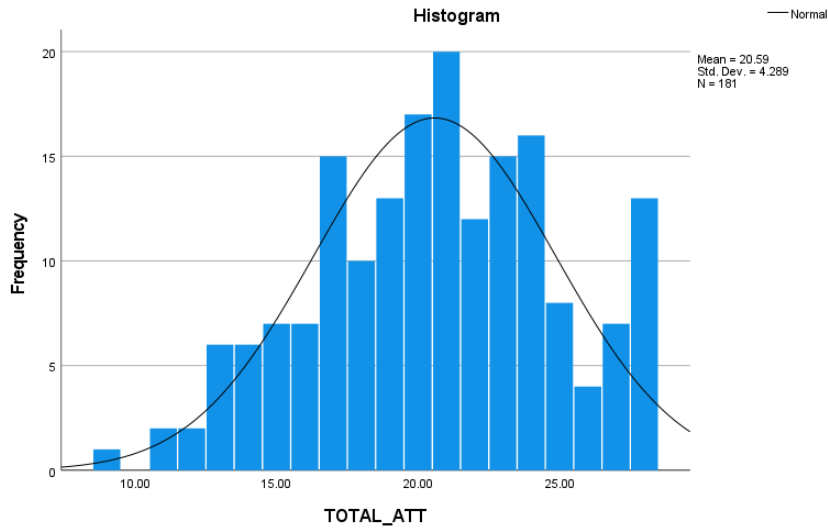
Intention of Mental Health Seeking

Reliability Statistics		
Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.906	.906	3

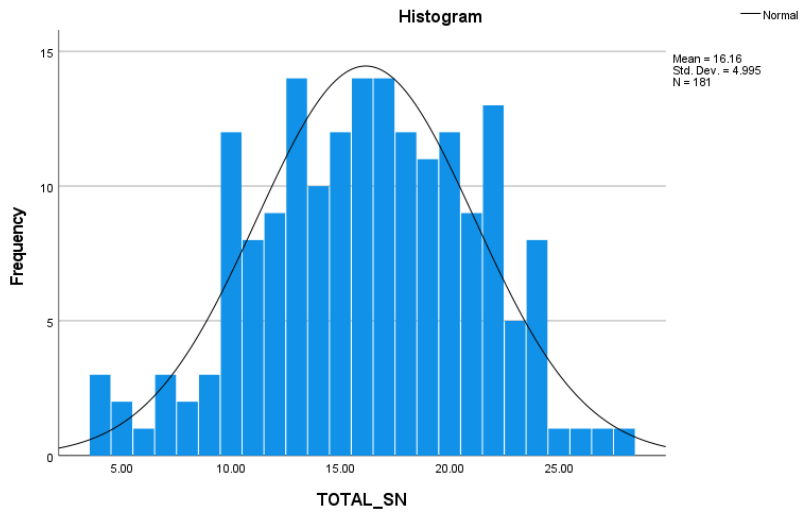
Appendix E

Histogram

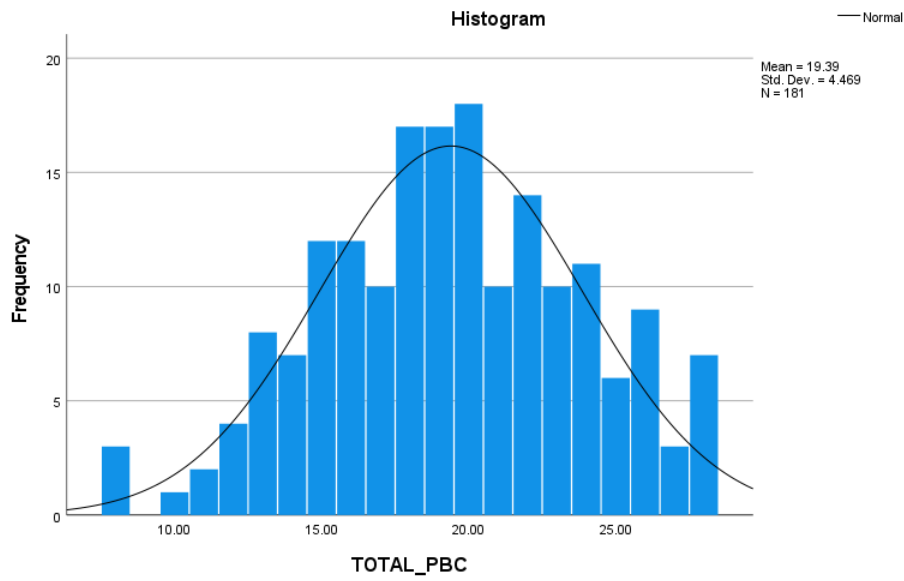
Attitude



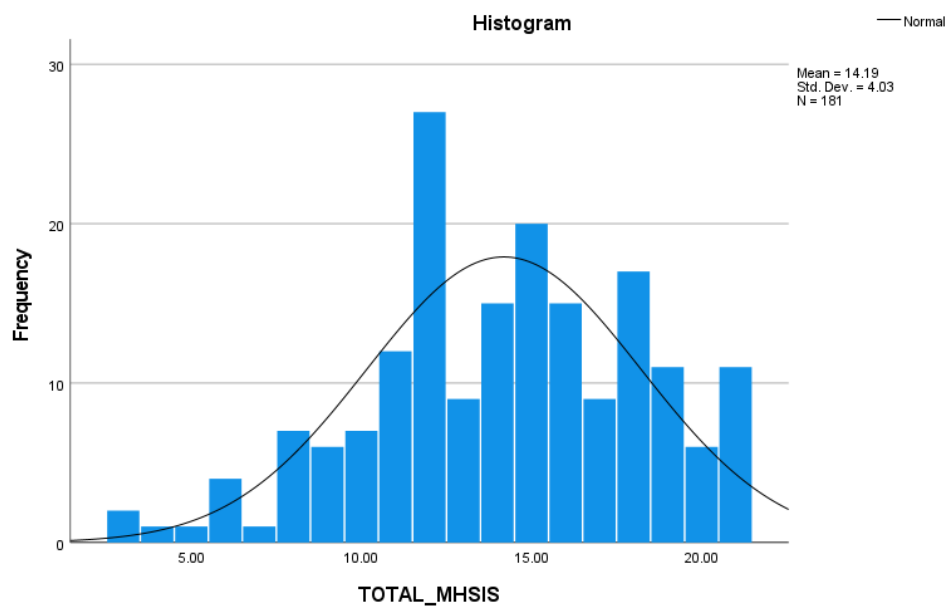
Subjective Norm



Perceived Behavioural Control



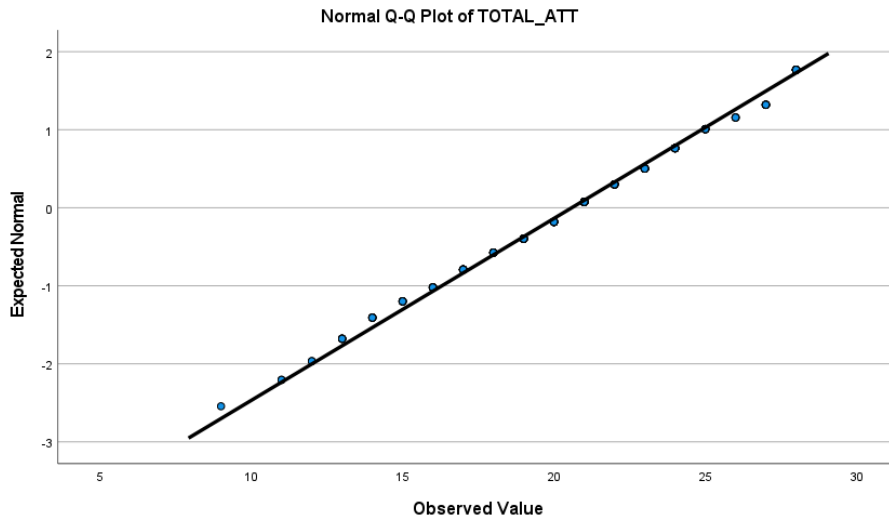
Intention of Mental Health Seeking



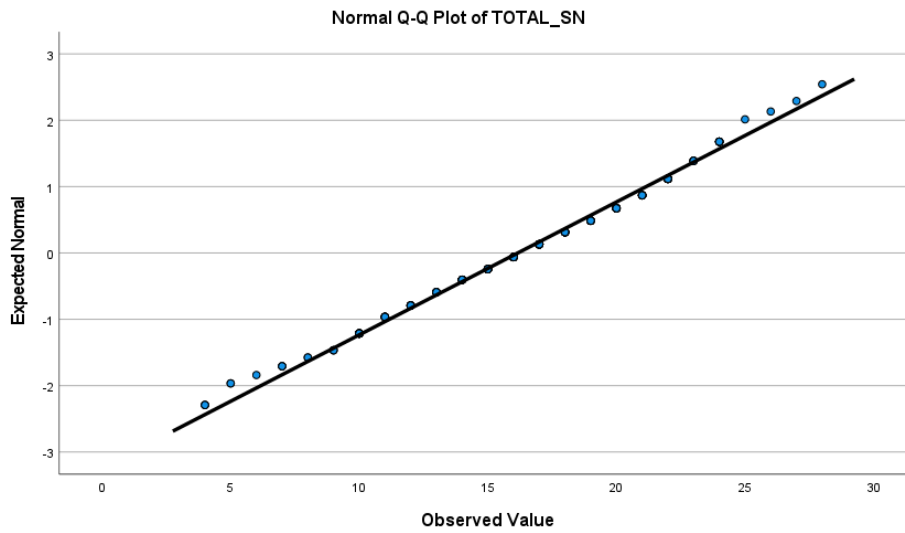
Appendix F

Q-Q Plot

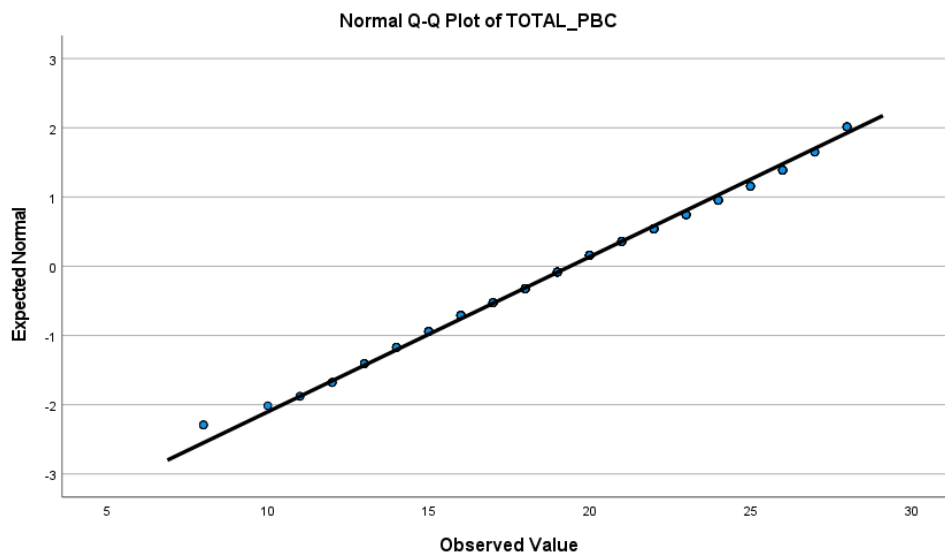
Attitude



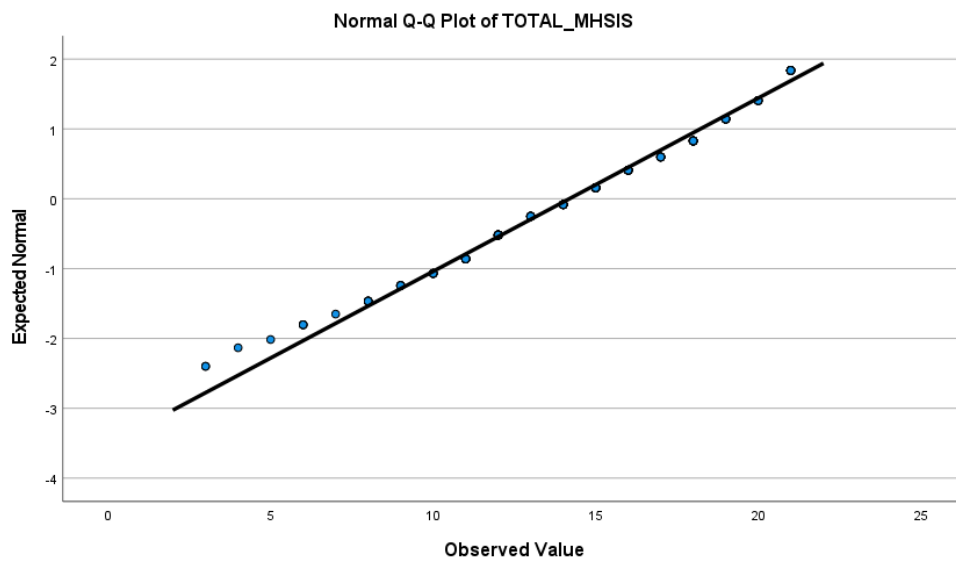
Subjective Norm



Perceived Behavioural Control



Intention of Mental Health Seeking



Appendix G

Multivariate Outliers Assumption Checking

Case Number	Mahalanobis Distance	Cook's Distance	Centered Leverage Value
1	3.67739	.01006	.02043
2	1.06609	.00115	.00592
3	.19354	.00075	.00108
4	9.93332	.01096	.05519
5	4.15229	.01438	.02307
6	5.76550	.01880	.03203
7	4.70718	.00202	.02615
8	2.72488	.01886	.01514
9	.11160	.00089	.00062
10	2.01079	.00260	.01117
11	1.38660	.00002	.00770
12	.98627	.00018	.00548
13	.94068	.00557	.00523
14	1.33390	.00029	.00741
15	3.17847	.00320	.01766
16	3.75691	.00623	.02087
17	2.72352	.00163	.01513
18	2.48637	.00044	.01381
19	8.49595	.05362	.04720
20	4.05688	.00028	.02254
21	6.05848	.00277	.03366
22	2.50732	.00618	.01393
23	3.35696	.01485	.01865
24	7.95966	.02118	.04422
25	1.05770	.00261	.00588
26	4.38595	.00571	.02437
27	1.83863	.00464	.01021
28	1.06478	.00241	.00592
29	1.70386	.00029	.00947
30	1.50645	.00494	.00837
31	2.34927	.00047	.01305
32	3.42935	.00499	.01905
33	1.05213	.00585	.00585

34	1.74265	.00293	.00968
35	1.06478	.00022	.00592
36	.20136	.00025	.00112
37	16.46879	.01829	.09149
38	2.22648	.00737	.01237
39	.56924	.00063	.00316
40	.56585	.00001	.00314
41	1.18672	.00207	.00659
42	1.40264	.00014	.00779
43	3.75741	.00049	.02087
44	2.94091	.00035	.01634
45	3.89662	.00363	.02165
46	5.65921	.00559	.03144
47	.12449	.00069	.00069
48	4.44286	.01766	.02468
49	1.50207	.00073	.00834
50	2.53611	.00065	.01409
51	1.05069	.00002	.00584
52	5.02962	.00525	.02794
53	.18846	.00165	.00105
54	1.72370	.00006	.00958
55	2.09892	.00455	.01166
56	1.06240	.00715	.00590
57	.73833	.00145	.00410
58	1.62768	.00320	.00904
59	1.11045	.00150	.00617
60	2.58346	.00906	.01435
61	1.26925	.00022	.00705
62	1.66881	.00475	.00927
63	5.78568	.00470	.03214
64	1.21537	.00179	.00675
65	.83582	.00748	.00464
66	1.24506	.00318	.00692
67	3.83734	.00615	.02132
68	.53296	.00212	.00296
69	.98909	.00120	.00549
70	4.65776	.00078	.02588
71	4.86260	.01226	.02701
72	1.85666	.00073	.01031
73	.19312	.00091	.00107

74	8.04268	.05776	.04468
75	2.06172	.00442	.01145
76	.46495	.00024	.00258
77	7.77934	.00394	.04322
78	.99041	.00346	.00550
79	6.88519	.00004	.03825
80	.97037	.00001	.00539
81	1.05069	.00221	.00584
82	1.61722	.00625	.00898
83	1.28950	.00274	.00716
84	1.24168	.00128	.00690
85	8.70216	.00291	.04835
86	4.59917	.00000	.02555
87	2.31861	.00646	.01288
88	4.02805	.00848	.02238
89	2.55472	.00099	.01419
90	4.71559	.00120	.02620
91	1.90621	.00030	.01059
92	3.38996	.01300	.01883
93	4.00997	.00226	.02228
94	1.72832	.00000	.00960
95	3.78485	.00979	.02103
96	4.77317	.05161	.02652
97	1.14807	.00855	.00638
98	4.07153	.01305	.02262
99	8.76057	.01418	.04867
100	4.94995	.00418	.02750
101	3.43536	.01540	.01909
102	4.24137	.00208	.02356
103	2.20438	.00110	.01225
104	16.04618	.03044	.08915
105	1.48297	.00126	.00824
106	1.07557	.00215	.00598
107	1.91914	.00230	.01066
108	1.07634	.00011	.00598
109	.42298	.01000	.00235
110	4.16067	.00945	.02311
111	3.03230	.00306	.01685
112	3.68128	.00622	.02045
113	.86295	.00003	.00479

114	5.58366	.03367	.03102
115	3.66350	.00624	.02035
116	1.51682	.00006	.00843
117	2.38036	.00000	.01322
118	1.56604	.00190	.00870
119	2.49220	.02270	.01385
120	1.47416	.00150	.00819
121	1.23498	.00250	.00686
122	.43765	.00050	.00243
123	5.28341	.01577	.02935
124	.50646	.00023	.00281
125	1.45704	.00191	.00809
126	6.71278	.03419	.03729
127	.72200	.00000	.00401
128	1.94739	.00066	.01082
129	4.43706	.01767	.02465
130	3.79329	.00355	.02107
131	.46495	.00077	.00258
132	2.41537	.00012	.01342
133	1.24506	.00262	.00692
134	1.97193	.00005	.01096
135	2.74833	.02081	.01527
136	1.44338	.00144	.00802
137	7.05873	.01057	.03922
138	5.40501	.02200	.03003
139	7.09263	.00194	.03940
140	1.50645	.00390	.00837
141	3.28113	.01096	.01823
142	2.48637	.00000	.01381
143	1.00871	.00699	.00560
144	2.33570	.00635	.01298
145	3.01070	.00288	.01673
146	3.36995	.02030	.01872
147	2.65682	.00601	.01476
148	.56767	.00002	.00315
149	3.52651	.00036	.01959
150	4.77673	.00692	.02654
151	1.52322	.00037	.00846
152	5.74517	.01771	.03192
153	6.99032	.02896	.03884

154	2.76017	.00127	.01533
155	7.06120	.00750	.03923
156	1.43274	.00078	.00796
157	6.90686	.00006	.03837
158	.55166	.00324	.00306
159	1.85641	.00078	.01031
160	3.57777	.00085	.01988
161	8.45627	.00566	.04698
162	.89277	.00261	.00496
163	.46263	.00173	.00257
164	.15577	.00046	.00087
165	1.28950	.00000	.00716
166	2.23943	.00005	.01244
167	.27005	.00167	.00150
168	1.69182	.00082	.00940
169	3.50684	.00655	.01948
170	.88168	.00271	.00490
171	2.21578	.00036	.01231
172	4.94915	.00742	.02750
173	1.56847	.00011	.00871
174	1.26954	.00566	.00705
175	.29080	.00007	.00162
176	3.47270	.00472	.01929
177	1.06255	.00101	.00590
178	.74636	.00053	.00415
179	18.96151	.11840	.10534
180	.72200	.00238	.00401
181	3.02160	.07404	.01679
	181	181	181

Appendix H

Multiple Linear Regression Analysis

Variance Inflation Factor (VIF) Values and Tolerance Values

Model	Coefficients ^a					Collinearity Statistics	
	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Tolerance	VIF
	B	Std. Error	Beta				
1 (Constant)	1.255	1.237		1.015	.312		
TOTAL_ATT	.274	.079	.291	3.452	.001	.476	2.099
TOTAL_SN	.087	.051	.108	1.714	.088	.849	1.178
TOTAL_PBC	.303	.076	.336	3.987	.000	.477	2.097

a. Dependent Variable: TOTAL_MHSIS

Durbin-Watson Test

Model	Model Summary ^b				
	R	R Square	Adjusted R Square	Std. Error of the Estimate	Durbin-Watson
1	.632 ^a	.399	.389	3.15047	1.844

a. Predictors: (Constant), TOTAL_PBC, TOTAL_SN, TOTAL_ATT

b. Dependent Variable: TOTAL_MHSIS

Regression Model

Model	ANOVA ^a					
		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1166.801	3	388.934	39.185	.000 ^b
	Residual	1756.812	177	9.925		
	Total	2923.613	180			

a. Dependent Variable: TOTAL_MHSIS

b. Predictors: (Constant), TOTAL_PBC, TOTAL_SN, TOTAL_ATT

Regression Coefficient

Model	Unstandardized Coefficients		Standardized Coefficients		t	Sig.	Collinearity Statistics	
	B	Std. Error	Beta				Tolerance	VIF
1 (Constant)	1.255	1.237			1.015	.312		
TOTAL_ATT	.274	.079	.291		3.452	.001	.476	2.099
TOTAL_SN	.087	.051	.108		1.714	.088	.849	1.178
TOTAL_PBC	.303	.076	.336		3.987	.000	.477	2.097

a. Dependent Variable: TOTAL_MHSIS

Appendix I

Ethical Approval Letter


UNIVERSITI TUNKU ABDUL RAHMAN DU012(A)

Wholly owned by UTAR Education Foundation Co. No. 578227-M

Re: U/SERC/78-180/2024

5 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) Psychology programme enrolled in course UAPZ3013. 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.	Attitude, Subjective Norm, and Perceived Behavioural Control as Predictors of the Intention of Mental Health Seeking Among Undergraduate Students	1. Lean Ying Tong 2. Low Lee Sang 3. Ronald Cheam Jun Xian	Dr Grace T'ng Soo Ting	5 January 2024 – 4 January 2025

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.



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

