



Community Attitudes toward Seeking Mental Health Services

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ABSTRACT

Background: Mental health can be affected by a complex interplay of individual, family, community, and structural factors at any given moment. Community-oriented mental health services are typically favored over hospital-based options because they minimize structural obstacles to seeking assistance, decrease social isolation, and lower the risk of human rights violations that can occur in hospital environments.

Objectives: A descriptive correlational was used in this study which aims to determine students' attitudes toward seeking mental health services, find out the association between students' age and attitudes toward seeking mental health services, and investigate the differences in the attitudes toward seeking mental health services between the groups of gender and marital status.

Methodology: The study was conducted through an online survey among university students across Iraq. A non-probability convenience sample of undergraduate and graduate students were recruited to participate in this study. Based on a margin of error of 5%, a confidence level of 95%, a population size of 82.000, and a response distribution of 50%, the recommended sample size will be 386. The final sample size is 400. The study instrument encompasses the students' sociodemographic sheet (age, gender, marital status) and the Community Attitudes toward Seeking Mental Health Services. Data were analyzed using the statistical package for social sciences for windows, version (27).

Results: The study results displayed that the majority demonstrated a neutral attitude toward seeking mental health services ($n = 329$; 82.3%), followed by those who demonstrated a positive attitude ($n = 58$; 14.5%), and those who demonstrated a negative attitude ($n = 13$; 3.3%). There is a statistically significant correlation between students' age and their attitudes toward seeking mental health services ($r = .100$).

Conclusion: The study concluded that most of the study participants have neutral attitudes toward seeking mental health services, and that the older the students, the positive the attitudes toward seeking mental health services.

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INTRODUCTION

Mental health is a fundamental aspect of both personal existence and societal functioning (Ritchie et al., 2023). According to the World Health Organization (2021), mental health is an essential aspect of comprehensive health and well-being (Australian Institute of Health and Welfare, 2024). Mental health refers to a condition of psychological well-being that allows individuals to manage life's challenges, recognize their potential, engage in effective learning and work, and actively participate in their communities. It holds both inherent and practical significance and is essential to people's overall well-being (World Health Organization [WHO], 2025).

Any mental illness refers to a disorder that affects an individual's mental, behavioral, or emotional well-being. The effects of AMI can differ significantly, with some individuals experiencing no impairment, while others may face mild, moderate, or severe challenges, particularly those classified as having serious mental illness as outlined below (National Institute of Mental Health, 2024). When mental health is poor, it can detrimentally influence people's well-being, impair their work capabilities, and disrupt their connections with friends, family, and the community (Ritchie et al., 2023).

The National Study of Mental Health and Wellbeing (NSMHW) conducted between 2020 and 2022 reveals that 8.5 million Australians aged 16 to 85 have experienced a mental illness at some point, constituting 43% of the population. In the past year alone, 4.3 million individuals, or 22% of the population, reported having a mental illness (Australian Institute of Health and Welfare, 2024). Mental health can be affected by a complex interplay of individual, family, community, and structural factors at any given moment. While resilience is common among individuals, those who encounter adverse conditions, including poverty, violence, disability, and inequality, face an increased likelihood of developing mental health issues (WHO, 2025).

There has been a notable transition in the delivery of mental health services, moving from conventional hospital-centered treatment approaches to integrated, community-oriented services that are available for outpatient access (Wahlbeck et al., 2011). Community-oriented mental health services are typically favored over hospital-based options because they minimize structural obstacles to seeking assistance, decrease social isolation, and lower the risk of human rights violations that can occur in hospital environments (Thorncroft & Tansella, 2003).

According to reports from the World Health Organization and the European Commission (EC, 2005), the provision of community-based services has the potential to diminish the stigma associated with mental health issues by shifting away from the traditional and stereotypical language of "insane asylums." A significant body of research has highlighted the insufficient and underuse of mental health services worldwide, a concerning observation considering the high rates of mental health disorders within these communities (Awaad et al., 2022; Seeman et al., 2016).

According to Fishbein and Ajzen (1975), an individual's intention to undertake a particular behavior is determined by their attitudes regarding that behavior and the prevailing subjective norms, as proposed in the Theory of Reasoned Action. This concept was further developed in Ajzen's (1985) Theory of Planned Behavior, which incorporated perceived behavioral control as an essential element influencing intentions.

Research indicates that a lag in seeking mental health help (SMHH) can disrupt educational progress, limit career opportunities, escalate financial costs, and is linked to elevated death rates when compared to the broader population. Individuals who pursue mental health support at an earlier stage tend to experience more favorable outcomes and greater mastery over their mental health issues (Badran et

al., 2025). A meta-analysis spanning from 1968 to 2008 revealed a troubling trend in help-seeking attitudes, which became progressively more negative over the examined timeframe (Mackenzie et al., 2014). Moore et al. (2024) revealed that the greatest barrier reported on the Barriers to Help Seeking Checklist (BHSC) was lack of time to seek services, followed by 47.6% for services not available during my free time.

According to research conducted by Gavrilovic, Schützwohl, Fazel, and Priebe (2005), three primary factors were found to have a strong correlation with the use of mental health services after experiencing trauma: increased psychopathological symptoms, the specific type and intensity of the traumatic event, and the female gender. Gavrilovic et al. (2005) highlighted the necessity of a more in-depth examination of trauma survivors' perceptions of mental health services in order to gain insights into how these attitudes influence their decisions to seek professional help. Generally, individuals' positive or negative perceptions of seeking mental health services significantly affect their intentions to obtain professional help and their actual engagement with healthcare services (Freitas-Murrell & Swift, 2015).

AIMS OF THE STUDY

The current study aims to:

1. Determine students' attitudes toward seeking mental health services,
2. Find out the association between students' age and attitudes toward seeking mental health services,
3. Investigate the differences in the attitudes toward seeking mental health services between the groups of gender and marital status.

METHODOLOGY

Study Design

A descriptive correlational was used in this study.

Study Setting

The study was conducted through an online survey among undergraduate university students across Iraq.

Sample and Sampling

A non-probability convenience sample of undergraduate and graduate students were recruited to participate in this study. Based on a margin of error of 5%, a confidence level of 95%, a population size of 82,000, and a response distribution of 50%, the recommended sample size will be 386. The final sample size is 400.

Study Instrument

The study instrument encompasses the students' sociodemographic sheet (age, gender, marital status) and the Inventory of Attitudes toward Seeking Mental Health Services Inventory which includes 24-item designed to measure an individual's attitudes towards seeking mental health services. The IASMH was developed in order to measure three factors labelled (i) psychological openness, (ii) help-seeking propensity and (iii) indifference to stigma. Psychological openness reflects the degree to which an individual is open to acknowledging the presence of a psychological problem and to seek professional care for such problem. Help-seeking propensity reflects one's willingness and perceived ability to seek help for psychological problems. Indifference to stigma refers to how concerned an individual would feel if significant others were to discover that they were receiving psychological care. Each factor is proposed to be measured via eight items and each item is measured using a 5-point Likert-scale ranging from 0 ('disagree') to 4 ('agree'). These attitudes were computed as the scores that range between 24-50 are considered negative, the scores that range between 51-75 are considered neutral, and the scores that range between 76-100 are considered positive.

Ethical Considerations

The study participants were informed that their participation in this study is voluntary. They were also

informed that the data obtained from this study would be securely maintained and will be for the scientific research only during the data collection, analysis, and publication phases.

Data Analyses

Data were analyzed using the statistical package for social sciences (SPSS) for windows, version (27). The descriptive statistical measures of frequency and percent were used. The central tendency measures of arithmetic mean and standard deviation (SD) were used. The inferential statistical measures of Pearson's correlation, Independent-sample T-Test, and one-way analysis of variance (ANOVA) were used.

Pilot Study

The student researcher conducted a pilot study among 20 students to determine the study instrument readability and the time required for answering all items. The study instrument items were readable, and the time required answering all items was 10-15-minutes. Those 20 students were excluded from the final study sample.

RESULTS

The age mean is 22.49 ± 3.11 ; the majority age 18-24-years ($n = 3339$; 84.75%), followed by those who age 25-31-years ($n = 537$; 13.25%), those who age 32-37-years ($n = 5$; 1.25%), and those who age 38-45-years ($n = 3$; 0.75%). Most are females ($n = 296$; 74.0%) compared to males ($n = 104$; 26.0%). Concerning marital status, the clear majority are not married ($n = 399$; 99.8%), followed by one who is married ($n = 1$; 0.3%). (Table 1)

The majority demonstrated a neutral attitude toward seeking mental health services ($n = 329$; 82.3%), followed by those who demonstrated a positive attitude ($n = 58$; 14.5%), and those who demonstrated a negative attitude ($n = 13$; 3.3%). (Figure 1)

There is a statistically significant correlation between students' age and their attitudes toward seeking mental health services ($r = .100$). (Table 2)

There is no a statistically significant difference in in students' attitudes toward seeking mental health services between gender groups. (Table 3)

There is no statistically significant difference in students' attitudes toward seeking mental health services among marital status groups. (Table 4).

DISCUSSION:

This descriptive correlational study aims mainly to determine students' attitudes toward seeking mental health services. The majority demonstrated a neutral attitude toward seeking mental health services, followed by those who demonstrated a positive attitude, and those who demonstrated a negative attitude. This finding goes parallel to that of Açıkgöz and Göl (2024) who concluded that The MHL and attitudes toward seeking psychological help of nursing students participating in the study were at a low level on the other hand, this finding contradicts that of Abdelmonaem et al. (2024) who stated that 95.2% of participants had a positive attitude. This finding reflects the poor, overall societal image concerning the mental health and mental illness. This finding contradicts that of Indicates that 95.2% of participants had a positive attitude towards seeking professional help. This finding is inconsistent with that obtained by Ibrahim and others (2019) who stated that the higher self-stigma and younger age were associated with negative mental help-seeking attitudes among students from low-income households. As self-stigma may be a barrier to actual mental help-seeking.

There was a statistically significant correlation between students' age and their attitudes toward seeking mental health services. This finding could be explained as that as individuals advance in age, they can go through as many life events and circumstances as possible. These life events and circumstances can constitute individuals' attitudes; particularly toward mental health seeking.

Ham et al. (2011) conducted a descriptive, exploratory study to describe the perceptions of community members, family members of patients with

mental illness and health workers in an urban setting in Vietnam about mental health and about appropriate help-seeking behavior, then to explore the relations between these perceptions. The study included 200 adults and focus group discussions (eight). The study results revealed that the perceptions of mental health and help-seeking behavior are influenced by a lack of knowledge and a mix of traditional and modern views. On the other hand, Clough (2019) stated that greater barriers to help-seeking, including lower mental health literacy and less favorable attitudes toward seeking help. Mackenzie et al. (2025) concluded that distressed older adults with lower MHL were more likely to have public stigma internalized as self-stigma, which then reduced their intentions to seek help.

There was no statistically significant difference in students' attitudes toward seeking mental health services between gender groups. This finding reflects that students; irrespective of their gender, have invariant attitudes toward mental health seeking. These attitudes could be constituted as an integral part of the societal culture; particularly the mental health literacy. This finding is incongruent with that of Tran et al. (2019) who concluded that females who held a less positive attitude toward mental health treatment had an average of 4.82 more days of poor mental health than those with a very positive attitude. In the same line, Naik et al. (2024) concluded that males had more positive attitude towards seeking professional psychological help than females

There was no statistically significant difference in students' attitudes toward seeking mental health services among marital status groups. This finding reflects that students; irrespective of their marital status, have invariant attitudes toward mental health seeking. These attitudes could be constituted as an integral part of societal culture; particularly the mental health literacy.

The researcher recommends that there is a need to initiate as much health education activities as possible to increase public's awareness of seeking

mental health services, and there is a need to incorporate health education materials about the mental health into the curricula of various levels of education.

The strengths of the current study lays in that it is the first that sheds the light on exploring community attitudes toward mental health services seeking in Iraq. The current study involved a number of limitations including using a self-reported tool for data collection and using a convenience sampling method.

CONCLUSIONS:

The researchers concluded that most of the study participants have neutral attitudes toward seeking mental health services, and that the older the students, the positive the attitudes toward seeking mental health services.

RECOMMENDATIONS:

The researcher recommends that there is a need to initiate as much health education activities as possible to increase public's awareness of seeking mental health services, and there is a need to incorporate health education materials about the mental health into the curricula of various levels of education.

Conflict of Interest: The researcher declares that there is no any conflict of interest.

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TABLES & FIGURES:

Table (1): Participants' sociodemographic characteristics (N = 400)

	Variable	Frequency	Percent
Age (Years)	18-24	339	84.75
	25-31	53	13.25
	32-37	5	1.25
	38-45	3	0.75
	Total	400	100.0
	Mean (SD)	22.49	3.11
Gender	Male	119	29.7
	Female	281	70.3
	Total	400	100.0
Marital status	Not married	356	89.0
	Married	32	8.0
	Divorced	8	2.0
	Widower	4	1.0
	Total	400	100.0

SD = Standard Deviation.

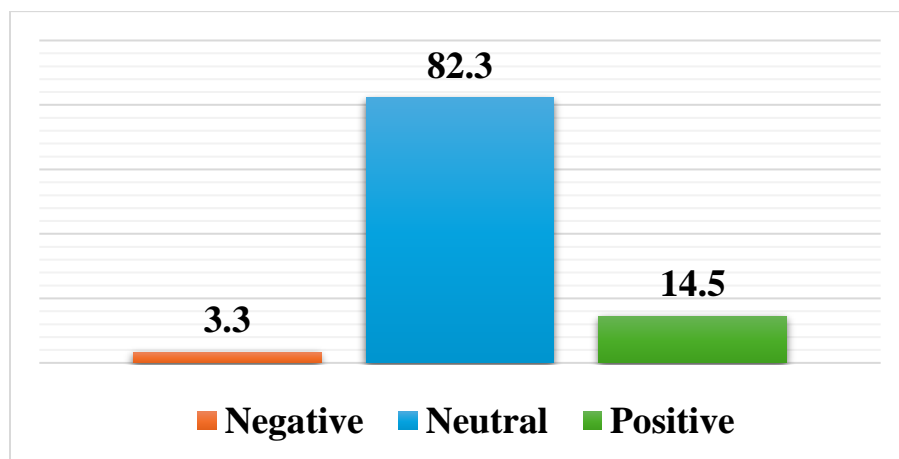


Figure (1): Direction of attitudes toward seeking mental health services

Table (2): Correlation between students' age and their attitudes toward seeking mental health services

	Age	Attitudes
Age	-	
Attitudes	.100*	-

* Correlation is significant at the 0.05 level (2-tailed).

Table (3): Gender-wise difference in students' attitudes toward seeking mental health services

		Independent Samples Test						
		Levene's Test for Equality of Variances		t-test for Equality of Means				
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference
Attitudes	Equal variances assumed	4.048	.045	.978	398	.329	1.01897	1.04184
	Equal variances not assumed			.88	153.94	.376	1.01897	1.14749

df.: Degree of freedom, F: F-Statistics, Sig: Significance, Std. Error Difference: Standard Error Difference.

Table (4): Difference in students' attitudes toward seeking mental health services among marital status groups

ANOVA					
Attitudes					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	18.818	1	18.818	.225	.636
Within Groups	33307.960	398	83.688		
Total	33326.778	399			

df.: Degree of freedom, F: F-Statistics, Sig: Significance.