

Help Seeking Attitudes and Willingness to Seek Psychological Help: Application of the Theory of Planned Behavior

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Abstract

Though there is a high level of mental health related difficulties among university students, only one third of them seek psychological help despite the evidence-based treatments for mental health problems. Therefore, this paper examines the help seeking attitudes towards psychological help services and willingness to seek psychological help based on the Theory of Planned Behavior (TPB). Attitudes, subjective norms, and behavioral control were measured using the Inventory of Attitudes toward Seeking Mental Health Services (IASMHS). Barriers for seeking psychological help were measured using Mental Health Service Utilization Questions (MHSUQ) whereas intention to seek psychological help was measured using the General Help Seeking Questionnaire – Vignette Version (GHSQ-V). 600 students were interviewed from three Sri Lankan state universities from January 2015 to March 2015. Results suggested that positive attitudes towards psychological help service positively associate with greater willingness to seek psychological help. Further, female students show a greater attitude seeking psychological help than male students. The most common barrier reported by students was that the fear of what relatives, friends might think. In contrast, students who follow psychology as a subject have a significantly higher level of positive attitude towards seeking psychological help than the students who do not follow. Findings suggest that mental health campaigns are required to focus their attention to change the negative attitudes towards mental health services among university students. Further, it highlights the importance of changing the public attitudes towards mental illnesses.

Keywords: Attitudes, Help Seeking, Theory of Planned Behavior.

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Introduction

Though there are evidence-based treatments for mental health problems (U.S. Department of Health and Human Services, 1999), many people do not seek help (Wright, Jorm, & Mackinnon, 2011; Clay, 2012). Despite higher prevalence of mental health problems among young people, they tend to seek psychological help slightly (Jorm, et al., 1997). On average 52–74% of people with mental disorders do not obtain treatment in Europe and the USA (Wittchen & Jacobi, 2005; Thornicroft, 2007). The literature on willingness to seek psychological help shows that intention to seek psychological help is significant. When the untreated duration is longer, it is associated with worse outcomes (Boonstra et al., 2012; Dell’Osso et al., 2013). Untreated psychological problems can increase the severity over time and may lead for suicidal thoughts (Wilson, Bushnell, & Caputi, 2011). University students represent the highest-risk population for mental health problems (Ryan et al., 2010). Bewick et al., (2008) discovered that 29% students are in a clinically significant level of psychological distress and 8% are in moderate to higher level. Mental health problems are more common among young people than adults (Zubrick, et al., 1995). The impact of a mental health problem on youth is very strong (Kosky & Hardy, 1992). When the education is affected due to mental health problem, life chances in adulthood can be negatively affected (Kessler et al., 1995).

Therefore, the present study focuses on factors affecting psychological help seeking behavior in Sri Lanka. This study is based on the theoretical guide of the theory of planned behavior (TPB; Ajzen, 1985, 1991) and the study tests whether the theory can be applied to explain the help seeking attitudes and actual behavior of the university students in Sri Lanka. It also explores the gender differences in psychological help seeking for their mental health difficulties. Literature on help seeking behavior shows that males less tend to seek psychological help than females. It is believed that males can more easily survive with psychological difficulties than women (Robertson, 2003).

Psychological Help seeking

This study defines the term ‘psychological help seeking’ as receiving all kinds of formal and informal health services. It includes all stages of the mental health receiving process, comprising initiation to engagement with mental health care to help seeking. Therefore, the term ‘psychological help seeking’ refers to any attempt to seek help for mental health problems from either formal support provided by professional counselors or informal support provided by friends and family members. The term ‘professional counselors’ refers to any individual with training and authorization to provide counseling, psychotherapy, or mental health services, such as psychologist, psychiatrist, social worker, mental health counselor (Mackenzie et al., 2004).

Help seeking process includes; awareness of the problem, help availability, willingness and disclosing the treatments (Rickwood et al. 2005). Awareness of the problem includes the capability to recognize symptoms, and identify having a problem, which require outside support for recovery. Further, Rickwood et al. (2005) states that after understanding the problem, the help seeker must be able to communicate it to others. Help availability includes the sources of help availability as well as the accessibility to the help. Help seeker must have a proper understanding about where and how he/she can

get the support. Willingness and disclosing the treatments need include that the help-seeker must be ready and able to reveal the inner state to seek help from outside.

Psychological Help seeking Barriers

Numerous studies have conducted to investigate the key barriers for help seeking. Fear of stigmatization, lack of knowledge about psychological help process, lack of money, not believing the practitioner, and feeling that the practitioner does not have cultural knowledge are main barriers prevents seeking psychological help (Sanders-Thompson et al., 2004). Guillver et al. (2010) published a literature review on help seeking barriers, reviewing 15 qualitative and 7 quantitative studies. The purpose of this review was to identify young people's experiences of help seeking for depression. The key barriers identified are stigmatizing attitudes towards mental health consumers and shame, poor mental health literacy, self-dependence, lack of trust on help sources and hopelessness. However, one of the most significant factors in help seeking was having the capability to understand the symptoms of a mental health difficulty and communicate it with others (Gulliver, Griffiths, & Christensen, 2010).

Stigmatizing attitudes is the most frequently reported barrier to seeking psychological help. Public and self-stigmatizing attitudes create shame, which delay the identification of the problem and help seeking. Young people are unable to identify and differentiate the normal level of difficulties and the threshold level of stress, which they need to seek help. Even though young people are aware of their problems they tend to change their definition of what is 'normal' and what is not normal and need to seek help. Another important factor for help seeking prevention is that preference to trust on themselves, rather than seeking outside help for their problems. Young people think that seeking help from outside may be seen as an indicator for their weakness or incapability to deal with their own problems that they face. Lack of trust on possible source of help and hopelessness are few other main barriers for seeking help among young people.

According to Stefl & Proseri, (1985) there are six main barriers; accessibility, affordability, availability, and acceptability of psychological services and decision making and help seeking behaviors. Barriers relating to accessibility may include transportation. Affordability barriers may include time and cost. Availability may include the knowledge about the existing services and how to find them. Acceptability associate fears of obtaining the services (Stefl & Proseri, 1985). Emotional and practical issues are too considered as barriers for psychological help seeking for mental health problems. Unwillingness to talk about private things with strangers, cost, and time may discuss as barriers for seeking help (Mohr, et al., 2006). The other most frequently cited barriers to seeking mental health services include time, cost, and insurance coverage (Dearing, Maddux, & Tangney, 2005). According to the previous studies, individuals' previous experiences of help seeking make significant influence on help seeking behavior. If the previous experience is positive the influence on help seeking too is positive. This may include better mental health literacy and knowledge on services that they have.

Theory of Planned Behavior as a help-seeking model

Ajzen's Theory of Planned Behavior (TPB) is a general model of human behavior. The

theory explains that one's behavior is influenced by the intention to engage and attitudes toward the behavior, perceived social norms, and perceived control over the behavior (Ajzen, 1985). Attitude towards behavior is defined as individual evaluation of the particular behavior and expected positive and negative outcomes (behavioral beliefs). Subjective norm includes that the social influences to engage or not to engage in a given behavior (normative beliefs). Perceived control is defined as capability to accomplish a given behavior based on beliefs about influences that may enable or disable its performance (control beliefs). Intention to perform a behavior is defined as one's drive to do a behavior (Ajzen, 1985, 1991; Ajzen & Fishbein, 1980).

The TPB had been used in more than 1000 independent studies and overall results have supported the theory (Ajzen, 2011)¹. Fife-Schaw et al. (2007), state that control belief (social context) is more significant and influential on attitudes formation towards one's behavior than behavioral beliefs and normative beliefs. Conner et al., (1998) applied the TPB to understand drug compliance in a psychiatric population and they explored that treatment intention is influenced by behavioral, normative and control beliefs. The validity of the theory has confirmed by numerous research (Trafimow et al., 2002; Hagger et al., 2002; Armitage & Conner, 2000; Armitage & Conner, 2001; Fishbein & Ajzen, 2009).

Study overview and hypotheses

The above literature review supports the TPB. However, it is necessary to have additional research on treatment seeking for psychological problems in specific samples. Therefore, the present study tested the application of the TPB to assess the attitudes and psychological help seeking behavior in a university student population in Sri Lanka. Based on the literature review and TPB, two hypotheses were constructed to explore the psychological help seeking as follows.

H1: Positive attitudes towards psychological help service and behavioral control would be positively associated with greater intention to seek psychological help.

H2: Female students show a greater attitudes and intention to seek psychological help than male students.

The main principle of TPB is that each behavior is determined by an individual's intention to perform the particular behavior: "Changes in behavior-specific beliefs are found to produce corresponding changes in attitudes, subjective norms and perceived behavioral control, and that these changes, in turn influence intentions and actions" (Fishbein, & Ajzen, 2005, p. 30). Intention is determined by three factors; individuals' attitudes toward the behavior (*attitudes*), their perception of others' beliefs regarding the behavior (*subjective norms*), and their beliefs about their own control over the behavior (*perceived control*).

¹ <http://www.webcitation.org/5x.CtDJalM> Accessed on 20.12.2015

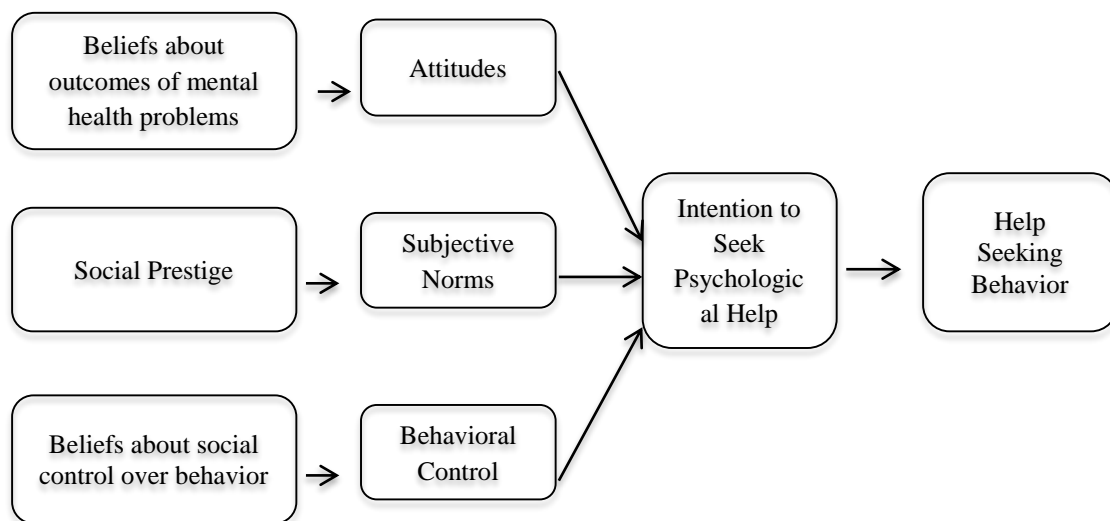


Figure 1: Study Overview based on the TPB

Participants and methods

Participants

Data were collected from six hundred undergraduate students from three state universities in Sri Lanka using convenience-sampling method. The data was collected between the periods of May 2014 to August 2014. There are three major different socioeconomic segments in the country. They are urban, rural and estate. Students from these three different socioeconomic segments were included to represent the student population in the country. They are urban (n=205, 34.2%), rural (n=348, 58%), and estate (n=47, 7.8%). The basic background data of the study population is as follows; Gender: Male 52.3%, and 47.7% of female. Ethnicity: Sinhala 85.2%, Tamil 7.8%, Moor 7.0%. Religion: Buddhist 78.7%, Hindu 7.2%, Muslims 7.0%, Catholic 5.0%, Christian 2.2%. Marital status: married 32.7% unmarried 65.3%, other 2.0%.

Measures

Attitudes, Subjective Norms and Behavioral control

Attitudes, Subjective Norms and Behavioral control of variables of TPB were measured using the Inventory of Attitudes toward Seeking Mental Health Services (IASMHS: Mackenzie et al., 2004). The IASMHS (Mackenzie et al., 2004) has been developed based on the Attitudes Toward Seeking Professional Psychological Help Scale (ATSPPHS), developed by Fischer and Turner (1970). This IASMHS scale consists of 24 items measured on a likert scale ranging from 0 to 4 (0 = disagree, 4 = agree). It consists three internally consistent subscales, psychological openness, help-seeking propensity and indifference to stigma, which measure attitudes, subjective norms and behavioral control of TPB. The psychological openness subscale measures the individuals' knowledge about having a psychological problem and possibility to seek professional psychological help. The help-seeking propensity subscale measures the

individuals' willingness and ability to seek psychological help. The indifference to stigma subscale measures the individuals' concern about others acceptance if others happen to know that he/she is receiving professional help for psychological problems.

Barriers for seeking Psychological help

Perceived barriers for seeking psychological help were measured using Mental Health Service Utilization Questions (MHSUQ) developed by Stefl & Prospero (1985). A list of barriers for psychological help seeking was provided asking participants to rate each difficulty for seeking psychological help. Since Stefl and Prospero (1985) first introduced the hypotheses of Affordability, Accessibility, Acceptability, and Availability of psychological services utilization, several studies have used these barriers to understand the psychological help seeking (Dearing, Maddux, & Tangney, 2005; McCarthy, Pfohl, & Bruno, 2010; Vogel, Wester, & Larson, 2007). Barriers were classified in terms of type and integrated items such as 'Not knowing services are available' (Availability), 'Fear of being looked down on' (Acceptability), and 'Cost of services' (Affordability). Furthermore, in the list of barriers, category called 'Other' was given asking participants to specify if they have any other barrier for psychological help seeking. The three-point scale was given to rate the barriers, 1 = a significant barrier, 2 = somewhat of a barrier, and 3 = Not a barrier.

Intention to seek psychological help

Intention to seek psychological help was measured using the General Help Seeking Questionnaire – Vignette Version (GHSQ-V; Wilson, Rickwood, Bushnell, Caputi, & Thomas, 2011). The GHSQ-V involves with vignettes to explain mental health problems based on the Diagnostic and Statistical Manual for Mental Disorders, Fourth Edition Text Revision (DSM-IV-TR; APA, 2000). Participants were asked to rate the likelihood they would seek psychological help from different sources to measure general help-seeking intentions for mental health problems. Different help seeking sources were intimate partner, friend, parent, other relative, mental health professional, family doctor and teacher. 'Phone help line' which was in the GHSQ-V as help seeking source took out and added other sources called 'teacher' as Phone help line' is not familiar in Sri Lanka and teachers play a role in counseling. Item 'mental health professional' was used to evaluate psychological help-seeking intentions of the participants. Participants rated their intentions to seek help on seven-point Likert scales ranging from 1 = extremely unlikely to 7 = extremely likely. Help-seeking intention with higher scores indicate higher intention to seek help.

Results

Reliability and Validity of Scales

Cronbach's Alpha Coefficient was analyzed to check the reliability of the scale used in the study. According to De Vellis (2003), *Cronbach's Alpha Coefficient* of a scale should be above .7 for valid measurement. The *Cronbach's Alpha Coefficient* of the four scales used in this study, attitudes towards seeking help, subjective norms, behavioral control and intention to seek psychological help are approximately greater than 0.7 (Table

01). The values of the coefficient of all the scales are above the optimal level of the reliability. It indicates that each of variables used in the study has internal reliability.

Confirmatory factor analysis was conducted to check the validity of each variable used in the study. For an optimal model fit, the values of Goodness of Fit Index (*GFI*), *Adjusted Goodness of Fit Index (AGFI)*, *The Comparative Fit Index (CFI)*, and the *Tucker-Lewis Coefficient (TLI)* should be above .9. The value of *Root Mean Square Error of Approximation (RMSEA)* should be less than .05, and χ^2/df should be less than 4.5. The results in the Table 1 show that all the values are above the threshold level indicating that the adopted model better represents the data.

Table 1: The Reliability Test and Model fit

Variables	Cronbach's Alpha	χ^2/df	RMSEA	GFI	AGFI	CFI	TLI
Attitudes	0.712	3.045	0.054	0.872	0.940	0.931	0.981
Subjective Norms	0.690	2.412	0.052	0.906	0.920	0.902	0.935
Behavioural Control	0.723	3.071	0.041	0.945	0.935	0.946	0.907
Intention	0.762	1.642	0.053	0.891	0.880	0.921	0.915

Pearson's correlation analysis was conducted to see the relationship between attitude, subjective norm, behavioral control, and intention to seek psychological help. According to Briggs and Cheek (1986), recommend optimal range for the inter-item correlations should be between .2 and .4. Inter-item correlations of the study are above of optimal level of reliability. Results indicate that all the variables are significantly correlated.

Structural Equation Models (SEM)

Structural Equation Modeling (SEM) was conducted using AMOS to test the hypothesis and to determine the influence of attitudes, subjective norm, and behavioral control on intentions to seek psychological help. The standardized estimates of the variables of the Theory of Planned Behavior are given in the Figure.2. The estimates of the entire model fit are significant in all the cases. This indicates the sensitivity of index to sample size and deviations from model requirement. The model has given an excellent fit to the data with all indicators exceeding recommended levels for acceptable model fit (Yoshioka & Misawa, 2013). *CMIN/DF* (Minimum Discrepancy) =2.649, *GFI* (Goodness of Fit Index)=0.947, *AGFI* (Adjusted Goodness of Fit Index)=0.873, *RMR* (Root Mean square Residual) =0.257, *CFI* (the Comparative Fit Index)=0.903, *IFE* (Incremental Fit Index)= 0.941, *TLI* (the Tucker-Lewis Coefficient) = 0.917, *RMSEA* (Root Mean Square Error of Approximation) = 0.045. According to the values given in the model, the model indicates a good fit to the data. SEM was conducted to test the first hypothesis that 'positive attitudes towards psychological help service and behavioral control would be positively associated with greater intention to seek psychological help'. The hypothesis treats the intention to seek psychological help as the dependent variable while attitudes, subjective norms, and behavioral control as the independent variables. Figure 2 displays the standardized estimates of the variables of the Theory of Planned Behavior.

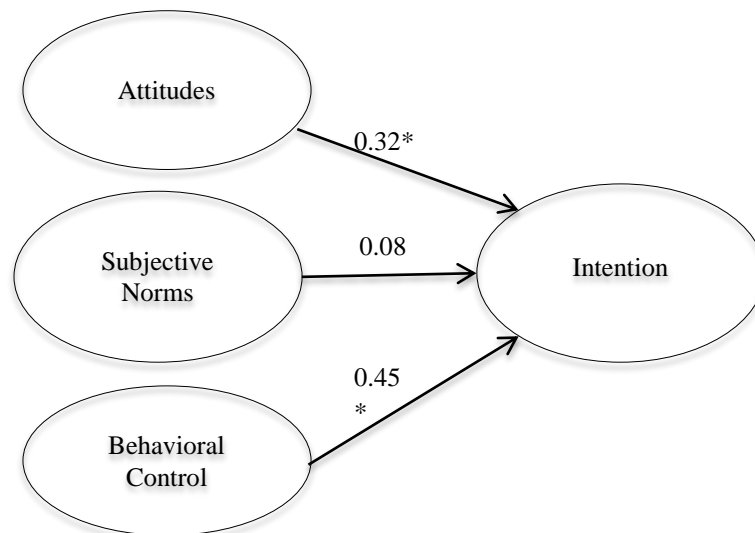


Figure 2: Standardized Estimates of the variables of the Theory of Planned Behavior

The values of standardized estimates for the paths from attitudes toward intention to seeking psychological help is significant, $b= 0.32, p<. 00$. However, path from subjective norms towards intentions to seeking psychological help is not significant, $b= 0.08, p<. 00$, whereas the path from behavioral control to towards intention to seeking psychological help is significant, $b= 0.45, p<. 00$.

An independent-samples t-test

An independent-samples t-test was performed to test the second hypothesis that ‘the female students would be having greater attitudes to seek psychological help than male students’. Association of male group ($N=302$) with seeking psychological help for health problems was numerically smaller $M=2.52 (SD=1.65)$ than the female group ($N = 298$), $M=3.14 (SD=2.31)$. As shown in Table 2, female and male distributions were sufficiently normal for the purpose of conducting a t-test. Consistency of variances was calculated and satisfied via Levene’s F test, $F(576)= 69, P= .000$. The independent-samples t-test was associated with a statistically significant effect, $t (583) = 5.45, P =.000$. Therefore, female students exhibit a greater attitude to seek psychological help than male students do.

Table 2: An Independent Sample t-test by Gender

Variables	Male		Female		t	p
	M	SD	M	SD		
Attitudes	3.67	1.60	4.13	2.01	5.70	0.014
Subjective Norms	4.01	1.40	5.15	1.48	3.46	0.000
Behavioural control	2.31	0.85	2.64	0.95	5.47	0.003
Intention	2.86	0.84	3.18	1.04	2.64	0.006

Discussion

The TPB is very important in understanding the psychological help seeking behavior of university students. The variables of TPB predict the help seeking behavior. The study was conducted with a random sample of 600 students in three state universities in Sri Lanka. This research study provides an understanding about attitudes, subjective norms, and behavioral control towards intention to seek psychological help for mental health problems among university students in Sri Lanka. This study mainly examines the relationship between mental illness stigma and willingness to seek psychological help of the study population. It further investigates the factors influence on psychological help seeking behaviour of students. This will recommend health policy makers and university authority to improve student counselling and psychological support services and academic programs accordingly. Because, mental illness stigma reduction may increase the willingness to seek psychological help.

Further, this study investigates the gender differences of psychological help seeking on mental health problems. The second hypothesis was tested to identify whether female students show greater attitudes to seek psychological help than male students. According to the outcomes of the study this hypothesis is statistically significant, where female students demonstrated greater positive attitudes than male students towards seeking psychological help. This finding consists with the previous studies (Aromaa et al., 2011; Ten et al., 2010; Rickwood et al., 2005). Moller-Leimkuhler (2002), have done a research on help seeking behavior among males and females on depression and found a similar results that females tend to seek help for depression than males (Moller-Leimkuhler, 2002). Numerous factors influence on these differences in attitudes of males and females. These differences may be due to the socialization processes of males and females in Sri Lanka. Traditionally males are socialized as a strong character and females are socialized as a dependent character on males. This may influence on the help seeking behavior too. Society accepts when females seek help from others whereas the society feels that the male is incapable with solving their own problems when they seek help from outside. It means males' self-esteem is greater than females' self-esteem given through the socialization process. Riska and Ettore (1999) have done a study on mental distress and coping strategies by gender and they found that some men refuse treatments due to self-esteem.

Difference of attitudes towards psychological help seeking among male and female students may be the due to different thinking pattern and their behavior. Male students think that having problems in university life is normal and it is a part of their life. Further, they think that seeking help from outside for their own problems is not worthy. They think that if they seek help from outside it may be a sign of their weaknesses. Therefore, they think that they themselves need to solve their own problems. On the other hand, men are tending to hide their own pains and try to manage by themselves than females (O'Loughlin, et al., 2011). As shown above, there is a variance between male and female students in relation to intention to seek psychological help for mental health problems and female students show a greater intention to seek psychological help than male students. Even though, there is a variance among such groups (male and female), the TPB still can use to determine the prediction of psychological help seeking behavior. These outcomes suggest the students' attitudes, subjective norms, and behavioral control towards

psychological help seeking may predict their intentions to seek psychological help.

It is important to aware about the barriers for seeking psychological help to recognize why people reluctant to seek psychological help for mental health difficulties. This understanding makes it easy to address the future mental health programs in more effective and efficient manner. Then the mental health programs can be delivered with more acceptable and accessible manner to individuals. These findings on psychological help seeking barriers help to develop public mental health learning programs for students where awareness about mental health can be delivered. This study focus on different barriers for seeking psychological help with especial focus on mental illness stigma and how mental illness stigma influence on psychological help seeking behavior of university students. The results of this study may help to expansion the use of services for psychological assistance among people who need such help by improving mental health knowledge through educational programs among university students. The most common barrier reported by students was that the fear of what relatives, friends might think (80.1%). The next most frequently endorsed barrier was the cost of services (72.6%). More than 50% students said that they are unaware about where the services are located. These findings indicate that the direct concerns about being stigmatized. It shows the possibility of influencing for psychological help seeking for mental health difficulties.

When it was cross tabulated by the subject area of students it was discovered that students those who follow psychology as a subject have significantly higher level of positive attitudes towards psychological help seeking than the student who follow other subjects. It shows that university students experiences mental health difficulties during their study period. Mainly, male students who study other than psychology reluctant to seek psychological help compared to their counterparts. It indicates that having knowledge on psychology may lead for positive attitudes towards seeking psychological help. Therefore, it is recommended to promote knowledge on mental health among students.

References

- Ajzen, I. (1985). From intentions to actions: A theory of planned behavior . In I. J. Beckmann, *Action Control: From Cognition to Behavior* (pp. p.11-39). Berlin, Germany: Springer-Verlag.
- Ajzen, I. (2011). *he theory of planned behavior: a bibliography*. Amherst: MA: Department of Psychology, University of Massachusetts.
- Ajzen, I. (1991). The theory of planned behavior. *Organizational Behavior and Human Decision Processes* , 50, 179-211.
- Ajzen, I., & Fishbein, M. (1980). *Understanding attitudes and predicting social behavior*. NewJersey: NewJersey.
- Armitage, C., & Conner, M. (2001). Efficacy of the theory of planned behaviour: A meta-analytic review. *British Journal of Social Psychology* , 40, 471–499.

Aromaa, E., Tolvanen, A., Tuulari, J., & Wahlbeck, K. (2011). Predictors of stigmatizing attitudes towards people with mental disorders in a general population in Finland. *Nordic Journal of Psychiatry*, 65, 125–132.

Boonstra, N., Klaassen, R., Sytema, S., Marshall, M., De Haan, L., Wunderink, L., et al. (2012). Duration of untreated psychosis and negative symptoms: a systematic review and meta-analysis of individual patient data. *Schizophrenia Research*, 142, p.12-19.

Clay, R. (2012). Beyond psychotherapy. *Monitor on Psychology*, 43, p.46-50.

Conner, M., Black, K., & Stratton, P. (1998). Understanding drug compliance in a psychiatric population: an application of the Theory of Planned Behaviour. *Psychology, Health & Medicine*, 3, 337–344.

Cornally, N., & McCarthy, G. (2011). Help-seeking behavior: A concept analysis. *International Journal of Nursing Practice*, 17, p.280-288.

Dearing, R., Maddux, J., & Tangney, J. (2005). Predictors of psychological help seeking in clinical and counseling psychology graduate students. *Professional Psychology: Research and Practice*, 36 (3), 323–329.

Dell’Osso, B., Glick, I., Baldwin, D., & Altamura, A. (2013). Can long-term outcomes be improved by shortening the duration of untreated illness in psychiatric disorders: a conceptual framework. *Psychopathology*, 14, p.14-21.

Fife-Schaw, C., Sheeran, P., & Norman, P. (2007). Simulating behaviour change interventions based on the theory of planned behaviour: Impacts on intention and action. *British Journal of Social Psychology*, 46, 43-68.

Fishbein, M., & Ajzen, I. (2009). *Predicting and changing behaviour: The Reasoned Action Approach*. Hove: Psychology Press.

Gulliver, A., Griffiths, K., & Christensen, H. (2010). Perceived barriers and facilitators to mental health help-seeking in young people: a systematic review. *BMC Psychiatry Open Access*.

Hagger, M., Chatzisarantis, N., & Biddle, S. (2002). A meta-analytic review of the theories of reasoned action and planned behaviour in physical activity: Predictive validity and the contribution of additional variables. *Journal of Sport and Exercise Psychology*, 24 (1), 3–32.

Jorm, A., Korten, A., Jacomb, P., Christensen, H., Rogers, B., & Pollitt, P. (1997). Mental health literacy: A survey of the public’s ability to recognise mental disorders and their beliefs about the effectiveness of treatment. *Medical Journal of Australia*, 166, 182-186.

Kessler, R., Burglund, P., Bruce, M., Koch, R., Laska, E., & Leaf, P. (2001). The prevalence and correlates of untreated serious mental illness. *Health Services Research*, 36, 987-1007.

Kessler, R., Foster, C., Saunders, W., & Stan, P. (1995). Social consequences of psychiatric disorders: Educational attainment. *American Journal of Psychiatry*, 152, 1026-1032.

Kosky, R., & Hardy, J. (1992). Mental health: Is early intervention the key? *Medical Journal of Australia*, 256, 147-148.

Mackenzie, C., Knox, V., Gekoski, W., & Macaulay, H. (2004). An adaptation and extension of the Attitudes Toward Seeking Professional Psychological Help Scale. *Journal of Applied Social Psychology*, 34, p.2410-2435.

McCarthy, J., Pfohl, A., & Bruno, M. (2010). Help seeking among counseling trainees: An exploratory study. *Journal of Counseling Research and Practice*, 1 (1), 53-63.

Mohr, D., Hart, S., Howard, I., Julian, L., Vella, L., Catledge, C., et al. (2006). Barriers to psychotherapy in depressed and non-depressed primary care patients. *Annals of Behavioral Medicine*, 32(3), p.254-258.

Moller-Leimkuhler, A. (2002). Barriers to help-seeking by men: A review of sociocultural and clinical literature with particular reference to depression. *Journal of Affective Disorders*, 71, 1-9.

O'Loughlin, R., Duberstein, P., Veazie, P., Bell, R., Rochlen, A., Fernandez, Y., et al. (2011). Role of gender-linked norm of toughness in the decision to engage in treatment for depression. *Psychiatric Services*, 62, 740-746.

Rickwood, D., Deane, F., Wilson, C., & Ciarrochi, J. (2005). Young people's help-seeking for mental health problems. *Australian e-Journal for the Advancement of Mental Health*, 4, pp.1-34.

Riska, E., & Ettore, E. (1999). Mental distress: Gender aspects of symptoms and coping. *Acta Oncology*, 38, 757-761.

Robertson, S. (2003). Men managing health. *Men's Health Journal*, 2, 111-113.

Sanders-Thompson, V., Brazile, A., & Akbar, M. (2004). African American's perceptions of psychotherapy and psychotherapists. *Professional Psychology: Research and Practice*, 35 (1), 19-26.

Stefl, M., & Prospero, D. (1985). Barriers to mental health service utilization. *Community Mental Health Journal*, 21(3), 167-178. , 21(3), p.167-178.

Ten, H., de Graaf, R., Ormel, J., Vilagut, G., Kovess, V., & Alonso, J. (2010). Investigators. Are attitudes towards mental health help-seeking associated with service

use? Results from the European Study of Epidemiology of Mental Disorders. *Social Psychiatry and Psychiatric Epidemiology*, 45, 153-163.

Thornicroft, G. (2007). Most people with mental illness are not treated. *Lancet*, 370, p.807-808.

Trafimow, D., Sheeran, P., Conner, M., & Finlay, K. (2002). Is perceived behavioural control a multidimensional construct? Perceived difficulty and perceived control. *British Journal of Social Psychology*, 41, 101-121.

U.S. Department of Health and Human Services. (1999). *Mental Health: A Report of the Surgeon General*. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health.

Vogel, D., Wester, S., & Larson, L. (2007). Avoidance of counseling: Psychological factors that inhibit seeking help. *Journal of Counseling and Development*, 85, p.410-422.

Wilson, C., Bushnell, J., & Caputi, P. (2011). Early access and help seeking: Practice implications and new initiatives. *Early Intervention in Psychiatry*, 5 (1), P.34-39.

Wittchen, H., & Jacobi, J. (2005). Size and burden of mental disorders in Europe: a critical review and appraisal of 27 studies. *European Neuropsychopharmacology* 15, 357-376. , 15, p.375-376.

Wright, A., Jorm, A., & Mackinnon, A. (2011). Labeling of mental disorders and stigma in young people. *Social Science & Medicine*, 73, p. 498-506.

Yoshioka, K., & Misawa, R. (2013). Causal attribution of depression and the social distance caused by the stigma. *The Japanese Journal of Health Psychology*, 25, p.93-103.

Zubrick, S., Silburn, S., Garton, A., Burton, P., Dalby, R., Carlton, J., et al. (1995). *Western Australian Child Health Survey: Developing Health and Well-being in the Nineties*. Western Australia. : Institute for Child Health Research and ABS.