

Psychological Distress, Mental Health Stigma and Help Seeking Behavior in University Students

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The purpose of this study is to explore the association among psychological distress, mental health stigma and help-seeking behavior in university students. For this purpose, a correlational cross-sectional study was designed. The study was conducted at three universities of Lahore i.e. Lahore College for Women University, Government College University, and Kinnaird College for Women, Lahore. In the current study, 100 males and 100 females, aged 20-25 ($M = 22.89$, $SD = 1.32$), were included. Data were collected using purposive sampling. Assessments were conducted using a self-constructed demographic sheet, the Kessler Psychological Distress Scale (K10), the Stigma Scale, and the Attitude Toward Seeking Professional Psychological Help—Short Version. Different statistical techniques were used to analyze the results through SPSS. The results showed a moderate positive relationship between psychological distress and stigma of mental health, and a negative association between stigma of mental health and help-seeking behavior. Female students reported higher psychological distress and greater stigma of mental health than male students. Moreover, day scholars have higher psychological distress and stigma of mental health as compared to students living in hostels. However, no gender based or residence-based differences were observed in help-seeking behavior. Multiple regression analysis revealed that psychological distress and stigma of mental health significantly predicted help-seeking behavior, accounting for 38.0% variance.

Keywords: psychological distress; mental health stigma; help-seeking behavior

Worldwide, mental health problems are growing concern among university students. Psychological distress, characterized by emotional suffering such as depression, anxiety and exhaustion, is common in university students. This may be due to various reasons such as financial difficulties, academic pressure, social expectations and personal challenges. Psychological distress often leads to significant emotional pain, and it interferes with daily functioning (Zhu et al., 2022)

Although there is an increased awareness regarding mental health issues, some students still hesitate to seek proper professional help due to stigma of mental health. Stigma is deeply rooted in negative societal attitudes, misconceptions as well as cultural beliefs about help-seeking behavior and mental health, which lead to self-blame, withdrawal, and delays in treatment (Mofatteh, 2021).

The fear of being labelled or judged often prevents individuals seeking timely support or help needed. Cultural factors like collectivism, gender norms and religious beliefs further increase the effect of stigma in South Asian contexts, including Pakistan (Hales, 2025). In South Asian contexts, including Pakistan, cultural dimensions such as collectivist values, gender norms, and certain religious beliefs further amplify the effects of stigma, reinforcing the silence and discouraging help-seeking behavior (Liu et al., 2022).

According to a study, levels of perceived stigma are linked to stigma of mental health and help-seeking behavior. These are inversely correlated (Rahmatpour et al., 2019). Research indicates that individuals experiencing greater distress tend to perceive more mental health stigma, which consequently reduces their likelihood of seeking psychological help. A study at King Saud University found that students with higher distress were more likely to encounter mental health stigma. Females and those from extreme income groups were more affected (Shim et al., 2022). Furthermore, stigma of mental health negatively correlates with help-seeking behavior. Those with greater stigma do not seek help even when needed, due to

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fears of being judged or labelled as ‘weak’ or concerns about confidentiality (Liu et al., 2022). Even among those aware of available help sources, formal help-seeking remains low due to personal, practical or cultural barriers (Browning et al., 2024).

Several theories, such as the Self-Determination Theory and Job-Demands-Resources (J-DR) model, have been used to understand psychological distress in students. These models highlight that unmet psychological needs and external demands contribute to psychological distress (Alfayez, & AlShehri, 2020). Research supports these findings, showing that persons with higher levels of psychological distress often face higher stigma of mental health and that initiatives like mental health literacy campaigns can help improve help-seeking intentions (Clement, et al., 2015). Despite the growing awareness of mental health issues among youth, stigma of mental health remains a key barrier to accessing mental health services.

Method

A sample comprising 100 males and 100 females, aged 20 to 25 ($M=22.89$, $SD = 1.32$), enrolled in the fifth, sixth, or seventh semester at LCWU, Lahore (Lahore College for Women University) GCU, Lahore (Government College University), and KC, Lahore (Kinnaird College for Women), was recruited using a convenient sampling technique. G Power software was used to calculate sample size. Students who were currently enrolled and between the ages of 20 and 25 met the inclusion criteria. Students with any psychological or physical problem were not excluded.

Assessment Measures

Kessler Psychological Distress Scale

Kessler et al. (2003) developed this scale comprising of 10 questions about emotional states, with a reliability 0.93. This scale is used to identify levels of distress. A five-point response pattern was used ranging from none of the time (1) to all the time (5). The K10 is widely used in clinical as well as research settings, due to its strong psychometric properties. Scale has demonstrated high internal consistency with a Cronbach’s alpha of 0.88.

The Stigma Scale

King et al. (2007) developed a 28-item Stigma scale to measure stigma of mental illnesses with a reliability .87. It concerns the experiences of people who have suffered from psychological distress and focuses on their feelings about that distress and particularly other people’s reactions to it. Each of the 28 items is scored 0 to 4 in the direction of greater stigma: questions marked with an A are scored 0 to 4 in the direction of agreement, while those marked D are scored 0 to 4 in the direction of disagreement. The scale shows alpha coefficient of .87.

Attitudes Toward Seeking Professional Psychological Help Scale

This scale is developed by Fischer and Farina (1995) to measure attitudes towards seeking psychological help. It consists of 10 items, rated on a 4-point Likert scale, ranging from 0 (disagree) to 3 (agree), evaluating people’s openness to seek psychological help. ATSPPH-SF was reported to have a unidimensional structure with α value of 0.56.

Procedure

The Board of Studies (BOS) and the Ethical Board of the University approved the objectives, procedure, and materials used in this study. The present research was conducted between January 2025 and June 2025. A sample of 200 university students was informed about the study, privacy and confidentiality of the information collected. After taking a

written informed consent demographic form, all research tools were administered to collect data.

Results

SPSS version 26.0 was used to analyze data. Demographic variables were calculated for Frequency and percentages. To find out the relation among different variables, Pearson product-moment correlation was employed. Linear and regression analyses were used to find out the predictors.

Table 1

Participants Socio-demographic characteristics

Demographics	Frequency (f)
Age	
20-25	200 (100%)
Gender	
Male	100 (50%)
Female	100 (50%)
Semester	
5 th	66 (33%)
6 th	64 (32%)
7 th	70 (35%)
Living Situation	
Day scholars	101 (50.5%)
Students living in hostels	99 (49.5%)

Table 2

Correlation Between Psychological Distress and Mental Health Stigma (N=200)

Variables	1	2	M	SD
Psychological Distress	-	.58**	28.04	9.06
Stigma about Mental Health	-	-	55.36	14.92

Note. ** $p < .01$

Table 3

Correlation Between Mental Health Stigma and Help-Seeking Behavior (N=200)

Variables	1	2	M	SD
Stigma about Mental Health	-	-.61**	55.36	14.92
Help Seeking Behavior	-	-	12.26	8.58

Note. ** $p < .01$

Table 2 shows significant positive association between psychological distress and stigma about mental health ($r = .58^{**}$, $p < .01$). Table 3 shows a significant negative association between stigma about mental health and behavior related to seeking help ($r = -.61^{**}$, $p < .01$).

Table 4

T-Test Comparing both Groups on all study variables (N=200)

Variable	Male n=100		Female n=100		<i>t</i> (198)	<i>p</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
Psychological Distress	26.07	9.23	30.01	8.50	-3.14	.002	-0.444
Stigma about mental health	52.87	15.69	57.86	13.74	-2.39	.018	-0.333
Help-Seeking behavior	12.31	8.23	12.22	8.98	0.07	.941	0.010

Note. * $p < .05$, ** $p < .01$

As presented in Table 4, a significant difference was found between males and females in psychological distress, with females reporting higher distress levels ($M = 30.01$, $SD = 8.50$) than males ($M = 26.07$, $SD = 9.23$), $t(198) = -3.14$, $p = .002$. Similarly, females scored significantly higher on stigma of mental health ($M = 57.86$, $SD = 13.74$) than males ($M = 52.87$, $SD = 15.69$), $t(198) = -2.39$, $p = .018$. No significant gender difference was found in help-seeking behavior ($p = .941$).

Table 5

T-Test Comparing both Groups: Day scholars and students living in hostels (N=200)

Variable	Day Scholars (n=101)		Students living in hostels (N=99)		<i>t</i> (198)	<i>p</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
Psychological Distress	29.34	9.40	26.70	8.54	2.08	.039	0.293
Stigma about mental health	57.67	14.66	53.01	14.87	2.23	.027	0.315
Help-Seeking behavior	11.71	8.68	12.82	8.50	-0.92	.360	-0.129

Note. * $p < .05$

The comparison of day scholars and students living in hostels is shown in Table 5. Compared to students living in hostels ($M = 26.70$, $SD = 8.54$), day scholars reported noticeable psychological distress ($M = 29.34$, $SD = 9.40$), $t(198) = 2.08$, $p = .039$. Furthermore, stigma scores were significantly higher for day scholars ($M = 57.67$, $SD = 14.66$) than for students living in hostels ($M = 53.01$, $SD = 14.87$) ($t(198) = 2.23$, $p = .027$). The two groups' help-seeking behaviors did not differ significantly ($p = .360$).

Table 6

Multiple Regression Analysis for Variables Predicting Help-Seeking Behavior (N=200)

Predictor	<i>B</i>	β	R^2	ΔR^2	<i>F</i>	95%CI	
						<i>LL</i>	<i>UL</i>
Constant	32.89		.38	.38	62.09	29.10	36.68
Psychological Distress	-0.14	-0.15				-0.27	-0.01
Stigma about mental health	-0.30	-0.52				-0.38	-0.22

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

To predict help-seeking behavior based on psychological distress and stigma about mental health, regression analysis was performed. Model explained 38% of the variance in help-seeking behavior (Adjusted $R^2 = .38$) and was statistically significant ($F(2, 197) = 62.09$, $p < .001$). Psychological distress ($\beta = -.15$, $p < .05$) and stigma of mental health ($\beta = -.52$, $p < .001$) were negative predictors of Help-seeking behavior.

Discussion

The results showed a moderate positive correlation between psychological distress and stigma of mental health and a moderate negative correlation between stigma of mental health and help-seeking behavior in university students. There were no significant gender differences found in help-seeking behavior; however, females reported higher psychological distress as well as greater stigma of mental health than males. Additionally, multiple regression analysis revealed that psychological distress and stigma of mental health significantly predicted help-seeking behavior.

These findings align with the results of Zhao et al. (2025). It was observed that individuals with higher psychological distress internalize stigma more strongly, which acts as a barrier to seek psychological help. Kim and Kim (2025) also revealed in their study that stigma of mental health greatly reduces the probability of accessing mental health services.

In terms of gender, the findings were supported by the previous research conducted by Graves et al. (2021), who found that females tend to experience higher psychological distress than males. The present study also revealed significant differences between day scholars and students living in hostels. Behera et al. (2021) found that students living away from home experience less psychological distress than day scholars. Preet Kamal and Bhat (2023) also reported that students who live with their families experience higher levels of stigma as compared to students living in hostels.

The findings of multiple regression analysis were consistent with the research by Dagani et al. (2023), highlighting the stigma of mental health plays an important role in seeking psychological help. Carvalho et al. (2024) similarly reported that students who experience higher psychological distress are often reluctant to seek psychological help.

It is concluded that psychological distress positively correlated with stigma of mental health and stigma of mental health negatively correlated with help-seeking behavior in university students. The results also showed psychological distress and stigma of mental health as negative predictors for help-seeking behavior. Additionally, female students reported higher psychological distress and increased experience of stigma of mental health, while no differences were found in help-seeking behavior across gender.

Furthermore, the findings of the present study underscore the importance of institutional-level interventions in addressing the interplay between psychological distress, stigma, and help-seeking behavior among university students. Universities serve as a critical environment where young individuals face significant academic pressure, social transitions, and identity challenges, all of which can contribute to heightened psychological distress. Eisenberg et al. (2022) highlighted that campus-based mental health awareness programs significantly reduce stigma and increase the likelihood of students seeking professional psychological support. Similarly, Vidourek et al. (2023) emphasized that when universities actively promote a culture of psychological openness and normalize help-seeking behavior, students are more likely to utilize available mental health services. These insights suggest that addressing stigma at the institutional level, through awareness campaigns, peer support programs, and accessible counseling services, may serve as a powerful mediating mechanism between psychological distress and help-seeking behavior. Therefore, university administrations and mental health professionals must collaborate to create supportive environments that not only reduce the stigma associated with mental health but also empower

students, regardless of gender or residential status, to proactively seek the psychological help they need.

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