

Research Progress on the Status-Quo, Influencing Factors and Intervention Strategies of Mental-Health-Help-Seeking Stigma among Nursing Students

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Abstract: Mental-health-help-seeking stigma is a significant psychosocial impediment to the use of mental health services. It primarily appears in the form of negative social judgements against people who require professional psychological support, and self-stigma that is developed by internalisation of such judgements. Over the past few years, foreign research has started to explore the topic of mental-health-help-seeking stigma among nursing students and its associations with help-seeking attitudes and intentions. However, there are still relatively few direct domestic studies aimed at nursing students. This paper systematically reviews the concept, influencing factors and destigmatisation intervention strategies of mental-health-help-seeking stigma, so as to provide references for improving the mental health cultivation system and optimising the uptake of mental health services for nursing students.

Keywords: Nursing Students; Mental-Health Help-Seeking; Stigma; Self-Stigma; Mental-Health Literacy; Nursing Education

1. Introduction

The mental health issues of the university students negatively impact on their adjustment in the academic setting, social life and career development. The nursing student is a major future professional in the healthcare system and the care of patients mental health is part of his or her work; this means that the quality of the clinical practice of the nurses will be directly determined by the level of mental health of the nursing students. Nevertheless, there was an evidence of the pooled prevalence of depressive symptoms (34.0) among the nursing students which indicates that the issue of mental health cannot be disregarded with regard to the group [1]. A systematic review and meta-analysis were carried out by Li et al. on the subject of randomised controlled studies related to the

promotion of mental health among nursing students and it also affirmed the need to keep the mental health of the nursing students during the training process of the nursing talents [2].

Nevertheless, the process of moving between psychological distress and active seeking of counselling or psychotherapy is complicated by personal thinking, social context and a variety of other factors. A systematic review conducted by Clement et al. revealed that mental health-related stigma has adverse effects on professional mental health help-seeking; internalised stigma, treatment-related stigma and information disclosure concerns can all be barriers to help-seeking behaviour [3]. Mental-health-help-seeking stigma is characterized as the attitude of people towards negative social judgment when they seek professional assistance like psychological counselling or psychotherapy, or internalization of such negative judgments resulting in self-devaluation and shame [4,5]. Ozcan Ozdemir et al. discovered that positive attitudes toward psychological help-seeking were inversely related to both self-stigma and perceived social stigma [6]. Abdelmonaem et al. also examined 228 intern nursing students and concluded that self-stigma had a negative correlation with the attitude towards seeking professional psychological help [7].

Currently, the research on help-seeking stigma in nursing students internationally has progressed beyond just the description of help-seeking attitudes to the analysis of stigma and its mechanisms of development. The majority of relevant studies in China are concerned with general college students, whereas direct studies concerning the mental-health-help-seeking stigma among nursing students themselves remain scarce. Thus, this paper reviews the status-quo, factors that affect it, and intervention strategies of help-seeking stigma, determines gaps in the research, and suggests future directions, in order to give evidence to mental health education and the encouragement of

professional mental health service utilisation by nursing students in China.

2. Conceptual Framework, Theoretical Basis and Measurement of Mental-Health-Help-Seeking Stigma

2.1 Concept of Mental-Health-Help-Seeking Stigma

Goffman is the first scholar to explain the concept of stigma in a sociological manner, and he believed that some features are given a negative interpretation within a particular social setting which makes it impossible to believe in the identity of a person [8]. On the basis of the sociology, Link and Phelan formulated their theory of stigma as a process whereby labelling and stereotyping are associated with separation, status loss and discrimination. The authors also note that the processes are not equal in power relations [9].

2.2 Commonly-Used Measurement Instruments for Mental-Health-Help-Seeking Stigma

Self-stigma of Seeking Help Scale (SSOSH) by Vogel et al. is an instrument that has been used to measure the stigma of help-seeking [4]. The 10-item scale was also found to be effective in terms of negative effects on self-worth, self-esteem and self-confidence in individuals who have sought psychological assistance with high levels of internal consistency, test-retest reliability and construct validity.

The Perceptions of Stigmatization by Others for Seeking Help Scale (PSOSH) was then developed by Vogel et al. and is made up of 5 items that measure the perception of how people think significant others will perceive their help-seeking behavior [10]. In contrast to SSOSH which is concerned with how I rate myself, PSOSH focuses on how other people are going to rate me.

Hao and Liang were based on the foreign instruments and they developed a revised scale of Stigma in seeking professional psychological help (SSPPH) with two dimensions (the public stigma and self-stigma) and 10 items [11]. It is well-reliable and valid among the Chinese students at colleges.

3. Research Status-Quo of Mental-Health-Help-Seeking Stigma among Nursing Students

3.1 Mental-Health-Help-Seeking Stigma is Widespread but Diverse in Nursing Students

The fact that the mental health issues are present does not automatically result in the real help-seeking behaviour. One of the key reasons why nursing students fail to visit a professional psychological services is stigma. Qutishat conducted a scoping review on the topic, which was published in 2018 and May 2025, about the issue of professional psychological help-seeking by nursing students, and found out that there were several factors such as stigma, lack of cognition, time limitations, culture, and low level of training among the nurses and the inability of the nurses to provide the needed mental health care to their students were the main impediments to seeking professional psychological help [12]. According to Xu et al., the average score of the professional help-seeking stigma in undergraduate nursing students was (25.44 ± 6.99) , whereas the help-seeking attitudes correlated negatively with the help-seeking stigma [13]. Liu et al. have interviewed 526 undergraduate nursing students who received an average of 25.09 ± 6.71 as the mean value of the stigma score and also discovered that there exists a negative correlation between the attitude towards help-seeking and the attitude towards the help-seeking itself [14]. Zhou et al. studied 588 intern nursing students and found a mean stigma score of (26.01 ± 6.58) ; self-efficacy was a statistically significant mediating factor between help-seeking stigma and help-seeking attitudes [15]. In a survey by Ozcan Özdemir et al. of 791 nursing students, they established that there was an association between both self-stigma and perceived social stigma with help-seeking attitudes [6]. Abdelmonaem et al. examined 228 intern nursing students and discovered that 39.5% of the participants had different levels of help-seeking stigma, and 60.5% did not exhibit any apparent stigma; 95.2% of the participants were generally positive towards professional psychological help-seeking [7]. As it is possible to observe, mental-health-help-seeking stigma is objectively present among nursing students but has individual variations. Further research on the characteristics of stigma in the region should also be conducted based on cultural background, educational level and clinical practice stages of the nursing students to determine high-risk groups.

3.2 Research Evolution: Social-Stigma Description to Self-Stigma, Help-Seeking Attitudes and Help-Seeking Intentions

Positive help-seeking attitude was negatively correlated with self-stigma and the social stigma, negative help-seeking attitudes were positively correlated with the two variables, according to Özcan Ozdemir et al. [6]. There was a more significant relationship between the positive attitude towards help-seeking and the presence of self-stigma as compared to the perceived social stigma. The results imply that it is possible that the negative assessments which are internalised can be especially applicable in the case of nursing students regarding their approach to professional psychological assistance. Alqhtani et al. also continued the research on the attitude and intentions of professionals and emotional intelligence among other factors related to them, and this led to a change of the correlation analysis to a mechanism analysis of the psychological help-seeking [16].

3.3 Lack of Longitudinal and Interventional Studies

The most recent research on the issue of help-seeking stigma in nursing students at home is conducted as cross-sectional questionnaire surveys, which involve a relationship between mental health literacy and positive psychological capital, help-seeking stigma and help-seeking attitudes [13,14]. The explanation of causal relations can be restricted to these studies. Over the past years, there has been a growing interest in the role of nursing educational environment in terms of stigma and intentions to seek help among foreign scholars. A cohort study was performed by Moxham et al. with traditional hospital-based placements of mental health and non-traditional recovery-oriented placements. It was determined that the clinical placement environment had great influence on the willingness of the nursing students to seek help; the students in the recovery-oriented positions were more likely to have higher levels of help-seeking intention and less stigmatising beliefs [17]. There is also a need of multicentre and large-sample longitudinal research in future to identify the emergence and internalisation and the process of the change of the help-seeking stigma within the students of nursing.

4. Factors Influencing Mental-Health-Help-

Seeking Stigma among Nursing Students

4.1 Demographic Characteristics and Personal Experience

One of the most researched demographic variables is gender. According to Abdelmonaem et al., male intern nursing students had more self-stigma than female students [7]. Özcan Özdemir et al. also showed that the help-seeking attitudes of nursing students could be explained by a combination of gender, age, self-stigma and perceived social stigma [6]. Such results can be explained by the differences in emotional expression, self-disclosure and expectations of social-role between genders. However, the majority of available researches are single-centre cross-sectional surveys and are influenced by cultural background; therefore gender and age cannot be considered as constant independent predictors of help-seeking stigma.

4.2 Mental-Health Literacy

The help-seeking behaviour of the nursing students is also a cognitive aspect which can be influenced by the mental health literacy. The process of mental health literacy could affect the choices to seek help because it determines how the students in the field of nursing perceive the presence of psychological problems and how they choose their ways to find professional help. Xu et al. discovered that the level of mental health literacy had a positive impact on the attitude towards help-seeking among the undergraduate nursing students, and stigma related to help-seeking was partially mediating between them [13]. It has been shown that the mental health literacy has not only direct effects on the cognition of help-seeking but also indirect effect on the attitude of help-seeking through the negative assessment of the professional psychological help-seeking. Help-seeking stigma can be reduced as one of the most important measures of improving mental health literacy.

4.3 Personal Psychological Resources

Help-seeking stigma can be overcome by the use of positive personal psychological resources. The authors have found that there is a negative relationship between help-seeking stigma and positive psychological capital, as well as a positive one between the attitudes of the students to seek help in the undergraduate nursing program [14]. Self-efficacy, hope, optimism, resilience and other forms of positive

psychological capital could allow the nursing students to make sense of their own distresses in an open manner and also not to deny themselves when they are seeking professional assistance. Apart with the positive psychological capital, self-esteem, self-efficacy, self-concealment, emotion regulation ability and psychological resilience can contribute to the development of help-seeking stigma, but it is not directly evidenced towards the nursing student population.

4.4 Sociocultural and Interpersonal Environmental Factors

There are evident sociocultural characteristics of the mental-health-help-seeking stigma. Zhu et al. discovered that culture, social propaganda, language and interpersonal communication and personal conditions play a role in the development of professional help-seeking stigma [18]. The scoping review by Qutishat also identified cultural barriers to nursing students accessing professional psychological services as a significant one [12]. In this case, it is important not to confine the explanation of the presence of the stigma of seeking help among the nursing students on their own thinking but take into consideration the family influence, peers, and the impact of the sociocultural factors towards the internalisation of stigma.

4.5 Nursing Education and Clinical Practice Environments

Nursing education is a nursing environment which can be used to influence the mental health perception of the nursing students and their own mental health condition as well as how they perceive the help-seeking process. The disease-oriented approach to mental health nursing training is more focused on the symptoms of the disease, its diagnosis and treatment, whereas the recovery-oriented approach to teaching in mental health nursing is more concerned with the subjectivity of patients, their experience of recovery and reintegration into society. According to Moxham et al., non-traditional clinical placements that are not traditional mental health placement would decrease various dimensions of the stigmatising beliefs and increase the intentions of the nursing students to seek help for their mental health issues [17]. As such, the nursing educational setting is an environmental factor that can be altered. It is possible to change the stereotype of the clinical

practice modes, create equal relations between the users of services in the recovery process and perform reflective learning to alter the perceptions about mental illness and psychological help-seeking.

5. Mental-Health-Help-Seeking Stigma among Nursing Students Intervention Strategies

5.1 Enhance Mental Health Literacy Education and Stigma Reduction Training

The lack of mental health awareness and the wrong impression on professional psychological services can lead to a lack of interest in nursing students in seeking help. Nursing education must also provide training in terms of mental health literacy, and it is because the attitude of nursing students towards the need to seek help as well as the stigma of such behaviour are positively related with the knowledge of the mental health literacy and partially mediate its impact [13]. Through this type of learning, the nursing students will be able to identify the typical mental health issues and comprehend the roles, signs, and access of counselling and psychotherapy, as well as eliminate the false beliefs that they have about the fact that the term help-seeking implies weakness or incompetence.

5.2 Apply Contact-Based Education to Minimize Stereotyped Perceptions of Mental Health Issues

Destigmatisation study of the mental health of nursing students is often done using contact-based education. It is based on the direct and balanced communication with the mentally ill people or survivors of the experience to break down the social distance between them because of unfamiliarity and stereotypes. Gu et al. incorporated role-play and the interaction with real patients in their routine psychiatric mental health nursing course among 343 nursing students [19]. The score of stigma of the nursing students towards individuals suffering from mental illness was reduced by (53.77 ± 15.11) after the intervention to (49.01 ± 14.06). It is important to mention that the design used in this study was a single group pre-post without the presence of a control group, which measured the level of stigma of the patients with mental illness, not the self-stigma of the nursing students who are seeking help. Thus, its findings can only be considered as an indirect proof of the

effectiveness of the contact-based education in helping to eliminate the stigma of help-seeking of the nursing students; further researches need to confirm it directly.

5.3 Optimize Recovery-Oriented Mental Health Clinical Practice Models

The possible results of Moxham et al. [17], which have been previously mentioned, indicate that recovery-focused clinical placements can provide a chance to deal with stigmatising beliefs and encourage nursing students to desire to seek psychological assistance. This gives direct evidence on how to enhance the cognition related to help-seeking by optimising the environment in which nurses are educated.

5.4 Leverage Peer Support and Foster a Supportive Help-Seeking Climate

Nursing students are provided with the support of their peers in the study and social interaction. Peer education is characterized by equality, high level of contact and high degree of acceptance. In a quasi-experimental research design, 95 undergraduate nursing students were used as participants in an experiment that concluded that when a peer education programme was applied, there was a significant change in the perception of mental illness among nursing students and a higher percentage of them would be willing to take up psychiatric nursing as a profession (the authors conclude that peer education can have positive impacts on the stigmatising attitudes towards the mentally ill) [20]. Wang et al. also discussed the issue of peer support as one of the approaches of the intervention aimed at stigma reduction related to mental health amongst the nursing students, which they believed could be achieved through discussion between the peers and learning together in the same environment of learning, which allows both parties to discuss issues regarding mental health, identify bias and develop empathy [21]. Thus, the peer education and peer support may become part of the broader destigmatisation interventions of the nursing students but it remains to be proven whether these interventions have a direct impact on decreasing the help-seeking self-stigma.

6. Conclusions and Future Perspectives

Stigma of Mental-Health-Help-Seeking is a significant psychosocial variable that influences professional psychological help-seeking among nursing students. Current domestic and

international literature indicate that there are different levels of stigma in the help-seeking behavior of nursing students, and self-stigma has a consistent negative association with professional help-seeking attitudes. The research focus has been slowly moving away from defining the level of stigma to studying social stigma, self-stigma and how it is associated with help-seeking attitudes and intentions. The impact of clinical education environment on stigma and help-seeking intentions have also been the subject of foreign prospective studies.

Nevertheless, there are still evident research gaps. Firstly, domestic studies focusing specifically on nursing students' help-seeking stigma are few; most are single-center cross-sectional surveys with inadequate representation in the sample size and limited ability to infer causality. Secondly, existing studies concentrate largely on help-seeking attitudes and intentions; few have followed up over a longer term to observe actual use of mental health services. Thirdly, most destigmatization interventions address public stigma towards patients with mental illness, and few randomized controlled trials have taken help-seeking self-stigma as the primary outcome indicator.

The further studies need to be made on the basis of the Chinese culture and education system in nursing. The help-seeking stigma should be elucidated by means of multicentre large-scale longitudinal research, which is aimed at determining the ways in which demographic variables, mental health literacy, positive psychological resources, sociocultural context and nursing education experience are related to the help-seeking stigma. It would also be important to examine multilevel intervention programs such as mental health literacy training, contact-based learning, scenario-based learning, peer-based support and recovery-focused clinical practice. Professional mental health services must be used to provide long-term outcomes assessment in order to give a chance to build the systems of mental health promotion and help-seeking-supports that can be applied to the students of nursing.

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