

Correlation between Mental Health Literacy Levels and Attitudes of Seeking Psychological Help of Health Services Vocational School Students: Descriptive Cross-sectional Research^{*,**}

Sağlık Hizmetleri Meslek Yüksekokulu Öğrencilerinin Ruh Sağlığı Okuryazarlığı Düzeyleri ve Psikolojik Yardım Arama Tutumları Arasındaki İlişkinin Belirlenmesi: Tanımlayıcı Kesitsel Araştırma^{*,**}

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ABSTRACT

The aim of this study is to find the correlation between mental health literacy and psychological help-seeking attitudes of Health Services Vocational School students and to determine the socio-demographic characteristics that affect mental health literacy. The research was realized in a descriptive form at a state university in Izmir between April and May 2022. Between the specified dates, 138 students who could be reached and volunteered participated in the research. Data were collected with a questionnaire that determines socio-demographic characteristics, "Mental Health Literacy Scale (MHLS)", and "Attitudes Toward Seeking Professional Psychological Help Scale-Short Form (ATSPPH-SF)". Data were evaluated by using "number, mean, percentage, independent sample t-test and one-way analysis of variance (ANOVA)" tests in SPSS 25 program. The students' total MHLS score was 106.34 ± 14.09 and the mean ATSPPH-SF score was 15.57 ± 4.62 . While the level of knowledge about recognizing diseases and reaching professional help was found to be higher in women compared to men, "attitudes that facilitate seeking appropriate help for mental health-related diseases and attitudes towards mental health-related diseases" were found to be higher in men compared to women. A statistically significant positive correlation was found between MHLS and ATSPPH-SF. The MHL score of the students was found to be moderate and a positive relationship was found between MHLS and seeking psychological help.

Keywords: Student, Mental health literacy, Seeking psychological help

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ÖZ

Bu çalışmadaki amacımız Sağlık Hizmetleri Meslek Yüksekokulu öğrencilerinin ruh sağlığı okuryazarlığı ile psikolojik yardım arama tutumları arasındaki ilişkiyi ve ruh sağlığı okuryazarlığını etkileyen sosyo-demografik özellikleri belirlemektir. Araştırma, Nisan-Mayıs 2022 tarihleri arasında gerçekleştirildi. İzmir’de yer alan bir devlet üniversitesinde okuyan 138 öğrenci örneklemini oluşturmaktadır. Veriler sosyo-demografik özellikleri belirleyen anket formu, “Ruh Sağlığı Okuryazarlığı Ölçeği (RSOÖ)” ve “Psikolojik Yardım Aramaya İlişkin Tutum Ölçeği- Kısa formu PYAİTÖ-KF” ile toplanmıştır. Veriler, SPSS 25 programında “sayı, ortalama, yüzde, bağımsız örneklem t-testi ve tek yönlü varyans analizi (ANOVA)” testleri kullanılarak değerlendirilmiştir. Öğrencilerin RSOÖ toplam puanı 106.34 ± 14.09 ve PYAİTÖ-KF puan ortalaması 15.57 ± 4.62 olarak belirlenmiştir. 2. sınıfta okuyan öğrencilerde “Risk faktörlerine ve nedenlerine yönelik bilgi” 1. sınıflara oranla istatistiksel olarak daha yüksek düzeyde saptanmıştır. Kadınlarda “hastalıkları tanıyabilme ve profesyonel yardıma ulaşmaya yönelik bilgi düzeyi” erkeklere kıyasla daha yüksek puanda saptanırken erkeklerde “ruh sağlığı ile ilgili hastalıklara yönelik uygun yardım aramayı kolaylaştıran tutumlar ve ruh sağlığı ile ilgili hastalıklara yönelik tutumlar” kadınlara kıyasla daha yüksek düzeyde saptanmıştır. RSOÖ ile PYAİTÖ-KF arasında pozitif yönde istatistiksel açıdan anlamlı bir ilişki saptanmıştır. Öğrencilerin RSO puanı orta düzeyde saptanmış ve RSOÖ ile psikolojik yardım arama arasında pozitif bir ilişki saptanmıştır.

Anahtar Sözcükler: Öğrenci, Ruh sağlığı okuryazarlığı, Psikolojik yardım arama

INTRODUCTION

The term “mental health literacy” was first addressed in 1997 and defined as “knowledge and beliefs that help to recognize, manage or prevent mental disorders” (Marwood and Hearn 2019). Although the society has a lot of knowledge about other important health problems such as cancer and heart disease, the lack of knowledge about mental disorders has led to the emergence of this term (Jorm et al. 2006). Jorm et al. (1997) stated that “mental health literacy consists of the following components; (a) the ability to recognize certain disorders or different types of psychological distress; (b) knowledge and beliefs about risk factors and their causes; (c) knowledge and beliefs about self-help interventions; (d) knowledge and beliefs about available professional assistance; (e) attitudes that facilitate recognition and appropriate help seeking; and (f) knowledge of how to search for mental health information” (Jorm et al. 1997). Mental health literacy is a necessity for early recognition and intervention of mental disorders (Mehrotra, Nautiyal, and Raguram 2018). Mental health literacy consists of three interrelated concepts: “knowledge (mental illness knowledge and positive mental health)”, “attitude”, and “help-seeking activity”. Accordingly, mental health literacy is not only the primary indicator of mental health, but also contributes to improving one’s health (Munawar et al. 2020).

Studies have consistently shown that a significant proportion of individuals at high risk of suicide do not interact with mental health services (Hom and Stanley 2021). Limited health literacy has been associated with a variety of adverse health outcomes, such as increased rates of chronic disease, decrease in the use of health services, increased health care costs, and premature death (Crowe, Mullen, and Littlewood 2018). The low level of mental health literacy in general leads to under recognition of mental disorders, often delays in treatment, and people with mental health disorders not to have a good quality of life for years (Tay, Tay, and Klainin-Yobas 2018). Therefore, patients with insufficient health literacy may be at a risk as they may not understand the information well or receive less preventive

health care (Tonsing 2018). Raised mental health literacy can improve mental health, happiness and well-being worldwide. That’s why it’s also extremely important to know the causes and treatment of mental health conditions. Without this information, treatment will continue to be delayed and deprived for those who really need it (Tay et al. 2018).

Individuals with insufficient mental health literacy do not understand the true meaning of mental illness, cannot indicate risk factors, cannot recognize mental health symptoms, and have an inadequate ability to interpret psychiatric terms (Lee et al. 2020).

It is widely accepted that approximately 70% of mental disorders can be diagnosed before the age of 25 (Kutcher et al. 2016). While students who have just started university try to adapt to their new environment, make new friends and get used to living apart from their families, and fulfill the expected “success” task, students who are at the stage of graduation face certain levels of stress while doing their career planning studies (Aşçı et al. 2015). During this period, students are highly vulnerable to mental health problems as they are often responsible for their own decisions and lives for the first time and deal with academic stress (Kim, Yu, and Kim 2020). In a study conducted with university students in Turkey, according to the Brief Symptom Inventory score average, the most common symptoms were depression, anxiety, and negative sign of self (Özel, Türkleş, and Erdoğan 2020). As a result of their study with nursing students, Hacıoğlu et al. determined that approximately half of the students are at risk for mental health problems (Hacıoğlu, Tedisk, and Yaralı 2019). According to another study conducted with university students, depression symptoms were found in 15.1% of the students (Önal and Hisar 2018). Yıldırım et al. found the prevalence of depressive symptoms in university students to be 32.8% (Yıldırım et al. 2018). In a study conducted with associate degree students, 35.4% of the students were found to have depression symptoms (Şentürk and Okur 2020). To effectively address youth mental health, it is essential that youth mental health interventions be-

come the focal point. It has been reported that without a good mental health literacy base, young people will not be ready to successfully transition into adulthood and beyond (Kutcher et al. 2016). In the literature, it has been stated that university students do not have sufficient mental health literacy skills to be able to recognize mental health problems and receive professional help when necessary (Gorczyński et al. 2017). Mental health literacy plays a critical role in the help-seeking process (Bu et al. 2020).

Young people's reluctance to seek professional help for mental health problems poses a challenge for effective early intervention approaches (Shahwan et al. 2020). Fear of stigma and embarrassment, insufficient mental health literacy, and factors related to self-confidence are the most common barriers to seeking help. Insufficient help seeking from professionals can result in suicide attempt and self-harming behavior, which complicates the situation (Marwood et al. 2018). Having knowledge about mental health problems and help resources is among the factors that affect young people's seeking help (Almanasef 2021). Help-seeking has been defined as "the behavior of actively seeking help from other people". Help resources are classified as "formal (such as those with a professional degree in a related field)" and "informal (such as parents or other family members)" (Almanasef 2021). The help-seeking model is a dynamic four-stage process: (1) recognizing a problem, (2) expressing the problem to others, (3) identifying appropriate and accessible sources of help, and (4) seeking professional help (Bu et al. 2020). Despite the findings showing higher levels of mental health problems among university students, the rate of utilization of mental health services in this population is relatively low (Clough et al. 2019). Recent findings show that increased mental health knowledge and reduced stigma are two key components to facilitate help-seeking behaviors and early diagnosis of mental disorders (Kutcher et al. 2016). When the low level of mental health literacy in adolescents is combined with an ineffective help-seeking attitude, mental well-being may decrease. Although it is important to seek help to reduce and prevent future risky behaviors, adolescents often neglect to seek help from professionals for mental health problems (Thai, Vu, and Bui 2020). In a study conducted with Norwegian adolescents, it was stated that mental health literacy was positively related to mental well-being (Bjørnsen et al. 2019).

In the literature, no study has been found about the students of Vocational School of Health Services in this field. It is thought that the results of the research will be a guide for the precautions that can be taken for students as well as providing information on the field.

The purpose of this study is to determine the relationship between health services vocational school students' mental health literacy and their attitudes towards seeking psychological help, as well as the socio-demographic characteristics that affect mental health literacy. In line with this purpose, the mental health literacy of students will be examined according to variables such as:

a. Gender

b. Grade level

c. Mother's education level

d. Father's education level

e. Perception of financial status, to determine whether there are differences based on these variables.

MATERIAL and METHODS

Objective

This research was aimed to determine the relationship between mental health literacy and psychological help seeking attitudes of Health Services Vocational School students and to determine socio-demographic characteristics that may affect students' mental health literacy.

Research Design

This study was designed using a correlational survey model and was conducted with students enrolled at İzmir Demokrasi University's Health Services Vocational School between April and May 2022. The research adhered to the principles outlined in the Declaration of Helsinki.

Population and Sample

The universe of the research consisted of 196 students studying at the İzmir Demokrasi University Health Services Vocational School in the 2021-2022 academic year. No sampling method was used in the study. The research was completed with 138 volunteer students who could be reached and agreed to participate in the study.

Data Collection Tools

Data were collected with a questionnaire that determines socio-demographic characteristics, "Mental Health Literacy Scale (MHLS)", and "Attitudes Toward Seeking Professional Psychological Help Scale-Short Form (ATSPPH-SF)".

Questionnaire form: This form was created by the researcher by scanning the literature. The form included socio-demographic questions such as the student's gender, age, department, marital status, educational status, financial situation, family structure, number of siblings, and parent education status.

Mental Health Literacy Scale (MHLS): It not only helps to determine the mental health literacy (RSO) level of individuals and in which areas they may need more support, but also provides an opportunity to evaluate the effectiveness of interventions to improve the MHL level. The scale is a Likert-type self-assessment tool that has 35 items and is evaluated over a total score. The scale has six dimensions. The total score that can be obtained from the scale varies between 35 (the lowest) and 160 (the highest). While the Cronbach's Alpha coefficient was found to be 0.87 according to the validity and reliability study findings of the scale in the original language, it was found to be 0.89 in the Turkish validity and reliability study of Tokur-Kesgin et al. (Kesgin, Pehlivan, and Uymaz 2020).

Attitudes Toward Seeking Professional Psychological Help Scale-Short Form (ATSPPH-SF): It was developed by Fischer and Farina in 1995. This version of the attitude scale towards seeking psychological help has been shortened from the original 29-item scale. The short form consists of one dimension and ten items. The Turkish adaptation of ATSPPHS-SF was made by Topkaya. The items of the scale, which was prepared in accordance with the 4-point Likert style, contain responses ranging from (3) agree to (0) disagree. While the lowest score that can be obtained from the scale is 0, the highest score is 30. The high score the individual gets from the scale shows that her/his attitude towards getting help from a psychological helper is positive. The Cronbach Alpha coefficient calculated for the ATSPPHS-SF reliability was found to be .76 and the McDonald's reliability coefficient calculated for the construct reliability was found to be .76 (Topkaya 2011).

Data Collection

Research data were collected through scales in a face-to-face classroom environment. It took about 10 minutes to fill out the scales.

Statistical Analysis

The data obtained in the study were evaluated by the researchers using the SPSS (Statistical Package for Social Sciences) 25.0 package program on the computer. Descriptive statistics "number", "percentage", "mean" and "standard deviation" were used in the evaluation of the data related to the study. The difference between socio-demographic characteristics and scale mean scores was tested with the "t-test in independent groups" and with "one-way analysis of variance (ANOVA)" in groups of more than two. The relationship between scale scores was examined by Pearson correlation analysis.

Limitations of The Research

The results cannot be generalized since the research is limited to the students of İzmir Demokrasi University Vocational School of Health Services. In addition, since the study was conducted in a newly established university, the number of samples was also limited.

RESULTS

The socio-demographic characteristics of the participants are presented in Table 1.

The mean age of the students in this study was 20.36 ± 1.32 . 68.1% of the students are women and 55.1% of them are studying in the first grade. 51.4% of the students graduated from Health Vocational High School. The place where 52.2% of them live the longest is the city center.

Table 2 shows the total MHLS score, sub-dimension mean scores, and the Psychological Help-seeking Scale mean score. The mean scores of the MHLS scale sub-dimensions are as follows; "Knowing the patients" 27.77 ± 6.62 , "Information on how to access information" 14.09 ± 3.71 , "Information about risk factors and causes" 6.34 ± 1.65 , "Information about self-help / treatment interventions" 6.07 ± 1.27 , "Professional help

Table 1: Demographic Characteristics of Students

	n	%
Grade		
1. Grade	76	55.1
2. Grade	62	44.9
Gender		
Female	94	68.1
Male	44	31.9
Income		
Less income than expense	70	50.7
Income equal to expense	68	49.3
The place living longest		
City center	72	52.2
Town	66	47.8
Graduate of the student		
Health Vocational High School	71	51.4
Anatolian High School	52	37.7
Other	15	10.9
Maternal education level		
Primary school graduate	98	71
Secondary school graduate and above	39	28.1
Paternal education level		
Primary school graduate	86	62.3
Secondary school graduate and above	52	37.7

Table 2: Total MHLS Score, Sub-Dimension Mean Scores, and ATSPPH-SF Mean Score

Scales	Mean \pm SD	Min-Max
(F1)	27.77 ± 6.62	8-40
(F2)	14.09 ± 3.71	4-20
(F3)	6.34 ± 1.65	2-10
(F4)	6.07 ± 1.27	4-15
(F5)	42.21 ± 8.44	24-72
(F6)	9.84 ± 1.80	4-15
MHLS Total	106.34 ± 14.09	55-155
ATSPPH-SF Total	15.57 ± 4.62	0-30

"F1: Ability to recognize disorders", "F2: Knowledge of where to seek information", "F3: Knowledge of risk factors and causes", "F4: Knowledge of self-treatment", "F5: Knowledge of professional help available", "F6: Attitudes that promote recognition or appropriate help-seeking behavior"

information on accessing" 42.21 ± 8.44 and "Attitudes facilitating seeking appropriate help for mental health diseases and "attitudes towards mental health diseases" 9.84 ± 1.80 . The total MHLS score was 106.34 ± 14.09 . The mean score of the ATSPPH-SF was determined as 15.57 ± 4.62 .

In Table 3, no statistically significant difference was found between the MHLS total score according to sociodemographic

Table 3: Average of MHL Scores According to the Demographic Characteristics of the Students

Characteristics	MHLS	F1	F2	F3	F4	F5	F6
	Mean ± SD	Mean ± SD	Mean ± SD	Mean ± SD	Mean ± SD	Mean ± SD	Mean ± SD
Grade							
1	105.36±14.61	27.23±7.25	13.69±3.63	6.02±1.69	6.19±1.44	9.69±1.83	42.51±8.78
2	107.53±13.44	28.43±5.75	14.58±3.77	6.72±1.52	5.93±1.03	10.01±1.76	41.83±8.04
p value	0.372	0.292	0.165	0.013	0.233	0.303	0.642
Gender							
Female	106.79±13.44	29.14±5.99	14.48±3.56	6.44±1.72	6.12±1.31	10.07±1.58	40.51±7.55
Male	105.36±15.50	24.84±7.02	13.25±3.91	6.11±1.49	5.97±1.21	9.34±2.12	45.84±9.15
p value	0.579	0.000	0.067	0.272	0.522	0.025	0.000
Maternal education level							
Primary school graduate	107.47±13.85	28.29±6.01	14.18±3.64	6.35±1.68	6.10±0.38	9.92±1.86	42.61±8.75
Secondary school graduate and above	103.55±14.45	26.5±7.87	13.87±3.90	6.3±1.6	6.02±0.99	9.62±1.64	41.22±7.62
p value	0.138	0.149	0.659	0.855	0.749	0.371	0.383
Paternal education level							
Primary school graduate	105.93±14.52	28.13±6.77	14.37±3.79	6.18±1.79	6.13±1.31	9.73±1.91	41.36±8.33
Secondary school graduate and above	107.01±1.46	27.17±6.39	13.63±3.56	6.59±1.36	5.98±1.22	10.01±1.59	43.61±8.50
p value	0.662	0.408	0.260	0.159	0.482	0.367	0.129
Income							
Less income than expense	106.54±14.17	27.82±7.09	14.18±3.34	6.3±1.73	6.07±1.14	9.75±1.84	42.4±8.69
Income equal to expense	106.13±14.11	27.72±6.16	14±4.07	6.38±1.57	6.08±1.41	9.92±1.76	42.01±8.23
p value	0.865	0.924	0.770	0.771	0.939	0.583	0.790

F1: Ability to recognize disorders, F2: Knowledge of where to seek information, F3: Knowledge of risk factors and causes, F4: Knowledge of self-treatment, F5: Knowledge of professional help available, F6: Attitudes that promote recognition or appropriate help-seeking behavior.

characteristics. “Knowledge of risk factors and causes” was found to be statistically higher in 2nd grade students compared to 1st grade students. While the level of “knowledge of professional help available” in women was found to be higher than men, “attitudes that promote recognition or appropriate help-seeking behavior” were found to be higher in men compared to women. There was no statistical difference between the “psychological help seeking” scale scores according to socio-demographic characteristics.

According to the correlation analysis between the MHLS and ATSPPH-SF in Table 4, a statistically significant positive correlation was found between the two scales ($p=0.000$). It was determined that as the mental health literacy score of the students increased, their attitudes towards seeking psychological help increased.

DISCUSSION

This research was carried out to determine the relationship between mental health literacy and psychological help seek-

Table 4: Correlation between Participants' MHLS and ATSPPH-SF

		MHLS	ATSPPH-SF
MHLS	r	1	0.303
	p		0.000*

Pearson Correlation Analysis, * $p<0.01$.

ing attitudes and socio-demographic characteristics affecting mental health literacy in Health Services Vocational School students. In the study, the students' mean MHLS score was found to be at a moderate level (106.34 ± 14.09). Although we could not find any study dealing with mental health literacy in students before in our country, the MHLS score in our study is similar to the findings of the study conducted with high school students in Vietnam (Mean = 104.12 SD = 14.09) (Thai et al. 2020). In a study conducted in the United Kingdom, the MHLS score was found to be 127.7 ± 11.8 (Marwood and Hearn 2019), while it was determined as 132.41 ± 13.12 in a study conducted in Australia (Clough et al. 2019). In a study conducted in Nige-

ria, the level of MHLS in university students was determined to be low (Aluh et al. 2018). In a study conducted in Saudi Arabia, the MHLS was determined as 112.53 ± 12.64 (Almanasef 2021). Aluh et al., found that mental health literacy was at a very low level in their study of adolescents (Aluh et al. 2018). It is thought that especially the mental health literacy of the students who will serve as health personnel should be improved, and the courses on recognizing mental illnesses, combating stigma and seeking psychological help should be added to the curriculum.

When the socio-demographic characteristics affecting the mental health literacy scale of the students participating in the research are examined, it is seen that the “knowledge of the risk factors and causes” of the 2nd year students is statistically higher than that of the 1st year students. In a study, it was determined that the beliefs and attitudes of graduate students towards mental illnesses were at a better level compared to university students (Rafal, Gatto, and DeBate 2018). Moss et al. found a higher MHLS score in graduate students compared to undergraduate students in their studies (Moss et al. 2022). As the education level increases, especially in schools providing health-related education, “the knowledge of risk factors for mental illness and its causes” also increases. In this study, it is expected and desired that the awareness and knowledge level of the 2nd grade students on the subject increased. In our study, women’s level of knowledge about recognizing diseases and reaching professional help was found to be higher than men, while attitudes that facilitate seeking appropriate help for mental health-related diseases and attitudes towards mental health-related diseases were found to be at a better level in men compared to women. In the study of Almanasef, it was determined that female students had higher levels of mental health literacy compared to males (Almanasef 2021). Lee et al. determined that men’s attitudes towards mental health were significantly lower than women’s (Lee et al. 2020). Gorczynski et al. similarly, women found higher levels of mental health literacy than men in their studies (Gorczynski et al. 2020). It is thought that training should be given to male students in order to increase their awareness in the field they need. The fact that men have better attitudes towards mental health-related illnesses, which facilitates seeking appropriate help for mental health-related illnesses, may be related to the fact that men see help-seeking behavior more positively. Unlike this study, Cheng et al. stated that men reported less positive attitudes toward seeking psychological help in their studies (Cheng et al. 2018).

In this study, it was determined that students’ mental health literacy scores did not vary according to maternal and paternal education levels. Similarly to our findings, Bjørnsen et al. also found that MHLS did not vary according to maternal and paternal education levels in adolescents (Bjørnsen et al. 2019). Lam et al. found that MHLS did not change in adolescents according to the education level of the parents. (Lam 2014). Riiser et al. found that health literacy showed a statistically significant difference according to the education level of the parents, and that health literacy increased as the education level increased.

(Riiser et al. 2020). In a study conducted with university students, a positive statistically significant relationship was found between father’s education level and MHLS (Arslan and Karabey 2023). There may be various factors that can affect the MHLS score of students. The reason why the level of parental education did not have an effect in this study could be attributed to factors such as the small size of the sample group and the fact that they were all studying in the Health Department.

In the study, a statistically significant positive correlation was found between MHLS and ATSPPH. A positive development is also observed in the attitudes of students with increased mental health literacy towards seeking psychological help. Almanasef, in her study, found a positive correlation between MHLS and psychological help-seeking behavior, similar to our study (Almanasef 2021). Unlike our study, Gulliver et al. found that MHLS levels were not associated with participants’ intention to seek help or welfare (Gulliver et al. 2019). Gorczynski and Sims-Schouten found a positive relationship between MHLS and help-seeking behavior in their studies (Gorczynski et al. 2020). Kim, in his study with university students, found a positive relationship between MHLS and psychological help-seeking behavior (Kim 2021). Considering that mental health literacy has a positive effect on recognizing mental illnesses and reducing stigma, improving mental health literacy will facilitate seeking psychological help. In our study, it is a desired situation to have a parallel result.

CONCLUSION

As a result, while the MHL of the students was determined at a moderate level, “the knowledge about the risk factors and causes of mental illnesses” increased as the education level increased. In addition, while women’s level of knowledge about recognizing illnesses and reaching professional help was found to be higher than men, “attitudes that facilitate seeking appropriate help for mental health-related illnesses” and “attitudes towards mental health-related illnesses” were found to be higher in men compared to women. It is thought that training should be given to male students about recognizing diseases. Considering that psychological help-seeking behavior increases as mental health literacy increases, it is thought that students should receive more training on issues such as mental illnesses and combating stigma. Without a good foundation in mental health literacy, young people will not be well-prepared to successfully progress along the path of development that leads to adulthood and beyond. If we assume that advanced knowledge of mental health and reduced stigma are two essential components that facilitate help-seeking behaviors and early detection of mental disorders, it is believed that students need to be strengthened and trained in this area. It is recommended that mental health literacy lessons be added to the curriculum in schools, and practical training be provided on stigma prevention. All healthcare professionals have important responsibilities in identifying mental health problems early in the patient groups they serve, ensuring they receive early treatment, and improving their recovery and quality of life (Oztas, Bediye, Aydoğan 2021). For this reason, it is thought that the mental health literacy levels of the students studying

in the Health Department, who will be health professionals, should be improved. Ensuring individual learning motivation of all students in order to increase awareness on the subject and providing opportunities for educational programs related to the subject with institutional policies will make positive contributions to both the individual and the individual they serve.

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