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ASSESSMENT OF PSYCHOLOGICAL HELP-SEEKING BEHAVIORS IN ADOLESCENT STUDENTS: A METHODOLOGICAL STUDY

ERGEN ÖĞRENCİLERDE PSİKOLOJİK YARDIM ARAMA DAVRANIŞLARININ DEĞERLENDİRİLMESİ: METODOLOJİK BİR ÇALIŞMA

ÖZLEM ÖZKAN SALKIM¹ **SEYDA ÖZBIÇAKÇI²**

¹Ph.D Candidate, Dokuz Eylul University, Institute of Health Sciences, Public Health Nursing, Izmir, TURKEY.

ozlemozkansalkim@gmail.com

²Assoc. Prof., Dokuz Eylül University Faculty of Nursing, Izmir, TURKEY, ozbicak@deu.edu.tr

Sorumlu Yazar

Özlem ÖZKAN SALKIM Dokuz Eylül University, Institute of Health Sciences, Ph.D. Candidate in Public Health Nursing, Izmir, Turkey. **ORCID:** 0000-0002-3211-4075,

Adres: Dokuz Eylül University Faculty of Nursing, Public Health Nursing Department, Inciralti, 35340, IZMIR

e-posta:

ozlemozkansalkim@gmail.com

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ABSTRACT

Aim: This study was conducted to test the validity and reliability of the Turkish Version of the Attitudes Towards Seeking Psychological Help Scale- Short Form in the Turkish adolescent group students population.

Material and Method: Descriptive, correlational and methodological design was used. The samples of the study consisted of 287 volunteer students studying in a total of six schools in İzmir. SPHS-S were used as data collection tools. Data were evaluated with content validity index (CVI), exploratory and confirmatory factor analysis, Cronbach's Alpha coefficient.

Findings: Factor loadings explained 58% of the total variance in the two sub-dimensions. The KMO value was determined as .93, and the sample was found to be sufficient. The Cronbach's alpha coefficient of the entire scale was determined as.91. The alpha values of the subdimensions were determined as .94 and .84, respectively. In both exploratory and confirmatory factor analysis, all factor loads are greater than 0.30. In the confirmatory factor analysis, all fit indices were found to be more than 0.80 and the Root Mean Square Error of Approximation (RMSEA) value was determined as 0.077.

Conclusion: The results of the study revealed that it is a valid and reliable measurement tool that can be used in the evaluation of adolescents' attitudes towards seeking psychological help. This study will be a guide in protective and preventive mental health studies for researchers and school nurses working with students.

Keywords: Attitude, seeking psychological help, adolescents, students, validity, reliability.

ÖZET

Amaç: Bu çalışma, Psikolojik Yardım Aramaya Yönelik Tutum Ölçeği Kısa Formu'nun (PYTÖ-K) Türkçe Versiyonunun Türk ergen grubu öğrenci evreninde geçerlik ve güvenirliğini test etmek amacıyla yapılmıştır.

Gerec ve Yöntem: Arastırmada tanımlayıcı, korelasyonel metodolojik yöntem kullanımıstır. Arastırmanın örneklemini İzmir'de toplam altı okulda öğrenim gören 287 gönüllü öğrenci oluşturmuştur. Veri toplama aracı olarak Psikolojik Yardım Aramaya Yönelik Tutum Ölçeği Kısa Formu kullanılmıştır. Veriler kapsam geçerlilik indeksi (KGI), açımlayıcı ve doğrulayıcı faktör analizi, Cronbach Alpha katsayısı ile değerlendirilmiştir.

Bulgular: Faktör yükleri her iki alt boyuttaki toplam varyansın %58'ini acıklamaktadır. KMO değeri ,93 olarak belirlenmiş ve örneklemin yeterli olduğu görülmüştür. Ölçeğin tamamının Cronbach alfa katsayısı ise ,91 olarak bulunmustur. Alt boyutların alfa değerleri sırasıyla ,94 ve ,84 olarak belirlenmiştir. Hem açımlayıcı hem de doğrulayıcı faktör analizinde tüm faktör yükleri 0,30'un üzerindedir. Doğrulayıcı faktör analizinde tüm uyum indeksleri 0,80'den büyük bulunmuş ve RMSEA değeri 0,07 olarak belirlenmiştir.

Sonuc: Arastırmanın sonuçları ergenlerin psikolojik yardım aramaya yönelik tutumlarının değerlendirilmesinde kullanılabilecek gecerli ve güvenilir bir ölcme aracı olduğunu ortaya koymuştur. Bu çalışmanın öğrencilerle çalışan araştırmacılara ve okul hemşirelerine koruyucu ve önleyici ruh sağlığı çalışmalarında yol gösterici olacağı düşünülmektedir.

Anahtar Kelimeler: Tutum, psikolojik yardım arama, ergenler, öğrenciler, geçerlilik, güvenilirlik.



INTRODUCTION

Seeking psychological help means seeking support to resolve a stress situation or problem, as well as contacting someone in need of treatment. information. advice and a1.. understanding (Rickwood et 2005). Individuals with emotional help-seeking attitudes have both cognitive and behavioral inclinations (Eigenhuis et al., 2021). And it can be classified as positive and negative. The fact that individuals are afraid and worried about seeking psychological help, even though they need it, causes them to have a negative attitude towards this help (Barrow and Thomas, 2022). Shame. blame. re-emergence past experiences, anxiety about change and treatment, stigma can be shown among these (Patalay and Fitzsimons, 2018; Yıldırım et al., 2014).

Barrow and Thomas (2022) currently stated that, one in eight of five -19 -year -olds (12.8%) have a diagnosable mental health difficulty, with half of all lifetime cases emerging before the age of 14 (NHS Digital, 2017). The development of adaptive functions during adolescence constitutes a very important infrastructure for the well-being of adulthood (Patton et al., 2016). Despite the high incidence, many adolescents continue their lives without any support due to undiagnosed mental disorders (Radez et al., 2021). Only one in four adolescents in the UK has access to mental services (NHS Digital, 2017). Rickwood and Thomas underlined that the most important barrier to early diagnosis and interventions for mental problems is low-level help-seeking behaviors (Rickwood and Thomas, 2012). Emotional competency, mental health literacy, recognition and encouragement from school personnel and peers, and accessibility of care providers have been implicated in increasing the likelihood of seeking support (Eigenhuis et al., 2021; Rickwood et al., 2005). Conversely, Velasco et al. (2020) found that stigma, and negative beliefs about help-seeking were the most prominent barriers to mental health helpseeking. It is postulated that schools provide a crucial, universal access point to deploy services that enhance prevention and early detection of mental health difficulties, and provide timely support (O'Reilly et al., 2016). Gowing (2019) proposed that locating mental health provision within the school improvement agenda could serve as a ripe opportunity for professionals to add to their already extensive professional repertoire. Thus, the potential asset of the profession contributing to mental health promotion at various levels is often overlooked (Zafeiriou and Gulliford, 2020). In the results obtained in the study conducted by Savi Çakar and Kılınç (2020), the necessity of increasing the protective factors in terms of mental health of adolescents and the necessity of expanding educational programs to eliminate risk factors was revealed (Savi Cakar and Kılınç, 2020).

A detailed understanding of the factors that influence help-seeking behavior is necessary to explore the gap between the high prevalence of mental health difficulties in young people and low levels of service utilization. Provided a comprehensive overview of commonly reported inhibiting and facilitative factors relating to why young people may or may not seek professional help when experiencing mental difficulties. Across 53 quantitative qualitative studies, four facilitator and barrier themes emerged. These themes captured individual factors, social factors, young people's perceptions of the therapeutic relationship with professionals and systemic and structural barriers. However, the studies



reviewed by Radez et al. (2021) pertained to both school and community-based mental health help-seeking and extended beyond the adolescent age range (Radez et al., 2021).

Anxiety disorders are one of the most important mental health problems of adolescence. Every year, 15-20% of adolescents are affected for this reason. More importantly, 80% of individuals who need mental health services during adolescence do not apply for treatment or seek resources (Bjørnsen et al., 2017; Rozbruch, 2018). Attitudes towards seeking psychological help cause anxiety and hesitation in adolescence.

In our country, Attitudes Towards Seeking Psychological Help-Short Form (SPHS-S) Scale was developed by researcher Türküm (2004) to measure attitudes towards seeking psychological help. The validity and reliability of this SPHS-S scale, which has been proven to be valid and reliable in university students in Turkey (Türküm, 2004), has not been tested in adolescents. The aim of this study is to test the psychometric properties of the SPHS-S Scale in adolescents to be used in a project with adolescents.

METHODS

Design

This was methodological study included a correlational method to evaluate the validity and reliability.

Population and Sample

The sample of the research consisted of students studying at 3 secondary schools and 3 high schools in İzmir province which is the western part of Türkiye. The convenience sampling method was used. In the literature, it is stated that the number of samples below 100 is insufficient, between 100 and 200 is low, between 200 and 400 is medium, between 500 and 1000 is good, and above 1000 indicates an excellent sample size (Şencan, 2005, Hayran

and Hayran, 2011). In addition, in the case of factor analysis, it is recommended to take at least 200 people for both explanatory and confirmatory factor analysis (Özdamar, 2005). The number of students in the schools determined for this study is approximately 550. In order to show the results of the study clearly and to make factor analysis with a sufficient sample were tried to be reached. For this reason, it was decided to form the sample of the study for all students studying in these schools. In order to increase the generalizability of the study, it was planned to conduct the study with all students who agreed to participate in the study without sampling (Akgül, 1997, Sencan, 2005). This study was completed with 287 volunteer students who agreed to participate. After expert opinions, the comprehensibility of the scale was tested by applying it to 25 adolescent students in a different school with similar characteristics to the subjects by conducting a pilot study. Since negative/need to be improved feedback was received from the students regarding intelligibility, the study continued. Students participating in the pilot study were excluded from the sample. Inclusion criteria; The age range of the students is between 12-18 (All students from 6th grade to 12th grade), obtaining consent form from students and parents who have an internet connection.

Instruments

Sociodemographic Data Form

This form included questions about the participants' characteristics, name, age, gender, grade.

SPHS-S

This scale was developed by Türküm in Türkiye (Türküm, 1997) and revised version of the SPHS-S (Türküm, 2004) psychometric properties of the first form show that the scale is a valid and reliable instrument (Türküm, 1997). Second version which named SPHS-S in this study the results of the factor analysis applied to the data collected from 481 university students in the revision study of the scale showed that 18 items, which explained 52.6%

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of the total variance, were collected in two factors (Türküm, 2004). In the SPHS-S the first factor consists of 12 items containing positive opinions about seeking psychological help, and the internal consistency coefficient is .92 and the average of item-total correlations is .67. The second factor includes negative opinions about seeking psychological help and the internal consistency coefficient is .77 and the average of item-total correlations is .54. The internal consistency coefficient calculated for the whole scale is .90. The correlation coefficient obtained by applying the scale to 50 students twice with an interval of 10 weeks is .77.

SPHS-S form also consists of 18 items marked between 1 and 5 and min-max score was between 18 and 90. A high score from the scale indicates a high positive attitude towards psychological help. The scale, which consists of 5 Likert type categories, is scored as Totally Agree, Strongly Agree, Undecided, Slightly Agree, and Strongly Disagree. Strongly Agree =5, Strongly Agree =4, Undecided =3, Slightly Agree = 2, Strongly Disagree = 1. The six items of the scale are calculated by scoring in reverse. These items are: 2, 8, 12, 13, 16, 17. Total Cronbach alpha value of the scale is, 91. Spearman Gutman split-half results were calculated as .88, descriptive factor analysis fit indices were calculated over .90 (Türküm, 2004).

Data Collection

Data were collected between December 2021 and January 2022 using an online survey. After obtaining written permission from the Ministry of National Education and the University Ethics Committee, data were collected from students who met the criteria for participation in the study. The survey data were collected by sending a link containing a Google survey (Google forms), informed consent form, personal information form and the study questionnaire to the whatsapp accounts of the families through the school vice principals. It took 5-7 minutes for students to complete the questionnaire.

In order to use the SPHS-S in this study, firstly,

opinions were received from three child psychiatry experts and two educators regarding the applicability of the scale on the intelligibility of the items in this age group. These five experts evaluate scale items by grading them from 1 (not appropriate) to 4 (very appropriate) and it was evaluate by using Davies technique (Davis, 1992). The percentage of agreement (CVI) of expert opinions and item-level content validity index (I-CVI) was used to determine the content validity of specialists. The I-CVI value should be higher than 0.78 to have harmony between the specialists (Yurdagül, 2005).

Data Analyses

The IBM SPSS Statistics 26.0 package and IBM SPSS Amos version 25.0 were used for data analysis in the study (Corp, 2019). Numbers, percentages and averages were taken for descriptive statistics.

Validity analysis of scale: Content Validity Index (CVI), exploratory factor analysis (EFA), confirmatory factor analysis (CFA), were used for validity analysis. Exploratory factor analysis was conducted using principal component analysis.

The adequacy of the data for factor analysis was evaluated by using the Kaiser-Meyer-Olkin (KMO) test and Bartlett's test of sphericity. Eigenvalues greater than 1 were used to determine the factors. The value of .40 or higher on factor loadings was chosen as the significant criteria for assigning items to factor. Varimax rotation was applied in order to obtain factors for the approximation of the simple structure. Validity was examined through concordance validity, construct validity. Concordance validity was evaluated with the help of the item level-content validity index. Construct validity was examined through exploratory factor analysis (EFA) and confirmatory factor analysis (CFA). Item-total score analyzes were then performed and split-half analysis was used. The model verification of CFI was conducted on the basis of the chi-square test, degree of freedom, root-mean-square error of approximation (RMSEA, normal value: <.05; Acceptable



values: <.08). Goodness of fit index (GFI normal value: >.95; Acceptable values: >.90). Comparative fit index (CFI, normal value: >.95; Acceptable values: >.90), and normal fit index (NFI, normal value: >.95; Acceptable values: >.90) (Akgül, 2003; Şencan, 2005; Şimşek 2010).

Reliability analysis of scale: Pearson's correlation analysis was used for the total-item score analysis of scales and sub dimensions; Cronbach's Alpha coefficient was used for the internal consistency of scales and sub dimensions were used for reliability analysis (Akgül, 2003; Şencan, 2005). In all types of analyses, 5% significance level was used.

Ethical Considerations

Permission was obtained by e-mail for the use of the scale in the 12-18 age group from the author. Written permission was obtained from the Dokuz Evlül University Non-Interventional Ethics Committee (2021/26-27, 6599-GOA) and the İzmir Directorate of National Education for the schools where the study was conducted. Written informed consent was obtained from the students and their families participating in the study.

FINDINGS

Participants

Of the adolescent students in the study population, 287 adolescents participated in the present study. The mean age of participants was 14.76 ± 2.15 years. Among them 37.6 % (n=108) were 15 years old, 35.5% (n=102) were at 14 years old. 8% (n=23) were at 13 years old, the gender distributions were 58.9% are female and grades distributions were 54% 9 th grade, 30.3% 10th grade.

Content Validity

The agreement among five experts ranged from 0.88 to 0.99 for each item (I-CVI), whereas it was 0.96 for the whole scale (S-CVI). Items rated higher than 0.80 on average were considered to have adequate face validity. The scores given by the experts were consistent with each other and high level of agreement was found among the experts.

Exploratory Factor Analysis (EFA)

Exploratory factor analysis results of the scale are shown in Table 1. The Promax rotation method was used in factor analysis, as in the original form of the scale. Factor analysis results confirm that the scale consists of two sub-dimensions. According to Table 1, the total explained variance rate of the scale was 58 %. The factor loadings of the scale varied from 0.60 to 0.89. Keiser – Meyer – Olkin Measure of Sampling Adequacy: .93, Bartlett's Test of Sphericity: 3407.575, Df: 53, p<0.05.



Table 1. Results of explanatory factor analyses (n: 287)

	ITEMS	Sub S	Sub Scale	
	•	1	2	
1	If my psychological discomfort does not go away on its own,			
	seeking psychological help is a solution for me.	0.783		
2	I am afraid that the specialist I will consult thinks that I am a		0.450	
	mentally ill person.			
3	By getting psychological help, I can understand the cause of my			
	mental problems.	0.758		
4	When a close friend asks my opinion about her mental problem, I			
	can suggest her to seek psychological help.	0.688		
<u>5</u>	If I feel very uncomfortable, I can seek psychological help.	0.753		
6	When necessary, I can reveal my personal secrets to an expert to			
	help resolve emotional issues.	0.721		
7	A person can learn how to cope with her wearing feelings by			
	getting psychological help.(dişil)	0.846		
8	It would embarrass me to hear that I have mental problems.		0.625	
9	Psychological help increases one's ability to cope with problems.		0.872	
10	With psychological help, I can find a safe environment to review		0.897	
	my feelings.			
11	It is easier for the person receiving psychological help to	0.780		
	communicate with other people.			
12	Because of what will be said about me, I hesitate to seek		0.806	
	psychological help.			
13	Psychological help lowers one's self-esteem.		0.807	
14	Talking to an expert about problems is an effective way to get rid of			
	emotional conflicts.	0.826		
15	I believe that I can overcome an emotional crisis that I may			
	encounter in my life with psychological help.	0.818		
16	If a person does not want her relations with her environment to be			
	damaged, she should hide from them that she is receiving a spiritual		0.728	
	treatment.			
17	The person who is known to receive spiritual treatment is doomed			
	to lose her friends.		0.812	
18	If I think I have a mental disorder, the first thing I would do would			
	be to seek professional help.	0.674		

Confirmatory Factor Analysis

Confirmatory factor analysis results of the scale are shown in Table 2 and Fig. 1. The analysis results confirmed the two-dimensional scale structure. According to the confirmatory factor

analysis results, factor loads ranged from 0.45 to 0.89. CFA models were indicated for scale the two-factor intercorrelated model χ 2: 790.964, df: 128 (p <0,01), RMSEA: 0.07, GFI: 0.87.

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Table 2. Confirmatory factor analyses goodness of fit indices (n: 287)

Models/Data- model fit indices	χ^2	df	χ²/df	RMSEA	CFI	IFI	TLI	GFI
Two-factor model	980.664	128	1.441	0.07	0.93	0.93	0.92	0.87

 $[\]chi^2$, Chi-square; df, Degrees of Freedom; RMSEA, Root Mean Standard Error Approximation; CFI, Comparative Fit Index; IFI, Incremental Fit Index; TLI Trucker-Lewis Index, GFI, Goodness of Fit.

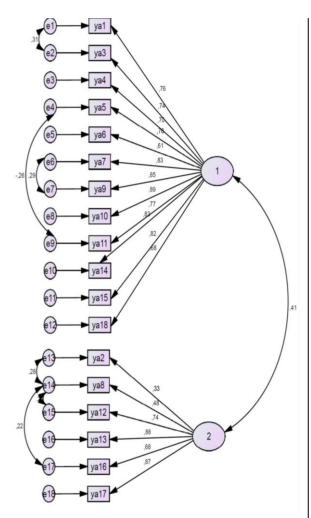


Fig. 1. Confirmatory factor analyses of two factor model

Reliability

The α of the whole scale was determined as 0.91, Valued Action Subscale α value was 0.94, and subscale a value was 0.84. The results of the split-half analysis of the scale are shown in Table 3. Spearman Gutman split half method was used and The Pearson correlation analysis showed that the correlations of the items with the total score ranged from 0,46 to 0.67, and the correlations of the item-subscale scores ranged from 0.41 to 0.69 (Table 3). Spearman-Brown: .90, Guttman split-half: .88, Two Half Correlation: .82.



Table 3. Reliability analyses of scale and sub-dimensions (n=287)

		Split Half							
Scale Sub scale	Cronbach α	First Half Cronbach α	Second Half Cronbach α	Spearman -Brown	Guttman split-half	Two Half corelation			
Scale Total	0.91	0.90	0.80	0.90	0.88	0.82			
F1	0.94								
F2	0.84		•			_			

DISCUSSION

The present study was aimed to introduce an easy to use, validated and reliable Turkish measurement tool to assess adolescents' attitudes towards seeking psychological help. SPHS-S was chosen as a target measurement tool for this purpose. The psychometric properties of the scale were evaluated.

To evaluate content validity of scale, opinions were obtained from experts. The results of the study showed that there was consensus among the experts. This results underlined that the scale measures the subject adequeately and the content validity was achieved (Çam and Baysan, 2010; Polit et al., 2007). The understandability of the content of the scale in the adolescent group was approved by experts.

The appropriateness of the obtained data and the factor analysis of the sampling size were evaluated by use of the KMO coefficient and Bartlett's test. Being greater than 0.60 for the KMO value and the meaningfulness of the Bartlett's test indicates that the database is appropriate for factor analysis and the number of samples is sufficient for factor analysis (Şencan, 2005). In this study, the KMO value was 0.60 and Bartlett's test was p<0.05. These results indicate that the data are appropriate for factor analysis.

In this study, it was determined that the two subdimensions revealed 52 % of the total variance. According to the exploratory factor analysis, the factor loads were found to be above 0.30 in all sub-dimensions. While the total variance explained in the literature is considered to be between 30-60%, to be above 50% for this value is accepted as evidence for a strong construct validity. In this study, both the greatness of the explained variance and being above 0.30 for all factor loads in all the sub-dimensions showed that the scale had a strong structure validity in the adolescent sample (Şencan 2005; Polit et al., 2007; Hayran and Hayran 2011; Hooper et. al, 2008). The results of this study shows more powerful structure in adolescent than university student the original scale by Türküm 2004.

Similar to Türküm's (2004) study, factor loadings of the factored scale were found to be between .33 and .74, as a result of factor analysis, and the total variance explanation rate was found to be 41.70%. In this study, the total variance of the scale in the two-factor structure was 52% in the adolescent group, and the results were significantly explained in the two-factor structure. As a result of CFA, factor loads of the two subdimensions varied between 0.45 and 0.89 (Figure 1). The fact that all factor loads were greater than 0,30, fit indices were greater than 0,90, RMSEA was less than 0.08, and χ 2/df was less shows that items in each dimension defined their factors sufficiently. The results of this study were similar with the confirmatory factor analysis results in Türküm (2004).

The EFA and CFA results in this study support the structural validity of the scale and reveal that the scale is a valid tool.



Internal Consistency Analysis of the Scale and Its Sub-dimensions when the Cronbach's alpha coefficient varies between 0.60 and 0.80, it shows that a scale is quite reliable; and when it varies between 0.80 and 1.00, it shows that a scale is highly reliable (Şencan, 2005; Hayran and Hayran, 2011). For our study Cronbach's alpha for the whole scale was 0.91, and Cronbach's alpha values for the two sub-dimensions were all above 0.70. This results shows similarity in the original scale was (Türküm, 2004).

In the split-half method used in this study, the Cronbach's alpha values for both sections were over 0.80, and there was a strong and significant relationship between the halves. These results provide important evidence supporting the reliability of the scale. Item-total score and item sub-dimension total score correlations should be greater than 0.20, and preferably as close to 1 as possible, and positive (Rattray and Jones 2007). Our study, the item correlations with scale total scores and subscale total scores were above 0.40. The item-total score and itemsubscale total score correlations in the original scale show similarity with this study's results (Türküm 2004). These results show that each item is highly interrelated with all scales and subscales. The scale sufficiently measures Attitudes Towards Seeking Psychological Help for the 12 to 18 years old age group, and the item reliability of scale and sub-dimensions is high.

Limitations

The strength of this study was that students were from different public schools and different age groups. The present study has some limitations. First, adolescent students are open to mistakes of social desirability. Second, validity of the scale was evaluated using construct validity. The concurrent validity could not be used since

there are no other scales, which measures attitudes Towards Seeking Psychological Help in the country. Additional studies may be conducted by using this scales. The study was conducted only in the western part of the country. These limitations may affect the generalization of the results of the study. The lack of research examples in which the scale was studied in adolescents also prevented comparison of the results.

CONCLUSION

The results of the study revealed that it is a valid and reliable measurement tool that can be used to evaluate the attitudes of adolescents. It will be a guide for other researchers and school nurses working with students in protective and preventive studies in school settings.

We recommended using this scale, students' help seeking behavior can be determined, and the student's perceived attitudes can be defined more clearly with further studies. This study may be a guide for determining risk groups, planning preventive studies that focus on these groups, and assessing the effectiveness of these planned initiatives.

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Conflict of Interest

None declared.

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Authorship Contributions

Design of Study: Şeyda Özbıçakçı, Özlem Özkan Salkım; **Analysis and Collection of Data:** Şeyda Özbıçakçı, Özlem Özkan Salkım; **Preparation of Manuscript:** Şeyda Özbıçakçı, Özlem Özkan Salkım

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