



| Research Article / Araştırma Makalesi |

## The Relationships Between Stigma Toward Psychological Help Seeking, Self-Efficacy, Family Sense of Coherence and Social Support

### Psikolojik Yardım Aramaya İlişkin Damgalama Düzeylerinin Özyeterlik, Aile Bütünlük Duygusu ve Sosyal Destek ile İlişkisi<sup>1</sup>

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#### Keywords

1. psychological help seeking
2. self-stigma
3. public stigma
4. self-efficacy
5. family sense of coherence
6. social support

#### Anahtar Kelimeler

1. psikolojik yardım arama
2. kendini damgalama
3. toplumsal damgalanma
4. özyeterlik
5. aile bütünlük duygusu
6. algılanan sosyal destek

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#### Abstract

*Purpose:* The main purpose of this study was to investigate the relationships university students' stigma levels toward psychological help seeking with self-efficacy, family sense of coherence, and social support.

*Design/Methodology/Approach:* This study was carried out with 520 students in 2016-2017 academic year. The data used in this study was adopted from Demographic Information Form, Self-Stigma of Seeking Help Scale, Stigma Scale for Receiving Psychological Help, General Self-Efficacy Scale, Short Form of the Family Sense of Coherence Scale and Multidimensional Scale of Perceived Social Support.

*Findings:* Predictive power of self-efficacy, family sense of coherence, and perceived social support on self-stigma and public stigma were analyzed by hierarchical regression analysis. As a result of hierarchical regression analysis where the self-stigma and public stigma toward psychological help seeking was taken as predicted variable, it was found that self-efficacy and family sense of coherence were the significant predictors of self-stigma and public stigma toward psychological help seeking. On the other hand, it was found that sub-dimensions of social support were no significant predictors of self-stigma and public stigma toward psychological help seeking.

*Highlights:* When students have high self-efficacy, they may experience less self-stigma and public stigma. Support and psycho-educational groups can be arranged for students with low self-efficacy. Besides, family sense of coherence predicted university students' self-stigma and public stigma toward psychological help seeking levels. For individuals with a low family sense of coherence, psychological counselors can provide individual or group counseling.

#### Öz

*Çalışmanın amacı:* Bu araştırmanın temel amacı; üniversite öğrencilerinin psikolojik yardım aramaya ilişkin damgalama düzeylerinin özyeterlik, aile bütünlük duygusu ve sosyal destekle ilişkisinin incelenmesidir.

*Materyal ve Yöntem:* Araştırma; 2016-2017 eğitim öğretim yılı bahar döneminde öğrenim görmekte olan 520 üniversite öğrencisinin (%63.5 kadın, %36.5 erkek) katılımı ile gerçekleştirilmiştir. Araştırmada veriler; Kişisel Bilgi Formu, Psikolojik Yardım Aramada Kendini Damgalama Ölçeği, Psikolojik Yardım Alma Nedeniyle Sosyal Damgalanma Ölçeği, Genel Özyeterlik Ölçeği, Aile Bütünlük Duygusu Ölçeği-Kısa Formu ve Çok Boyutlu Algılanan Sosyal Destek Ölçeği ile elde edilmiştir.

*Bulgular:* Özyeterlik, aile bütünlük duygusu ve sosyal desteğin üniversite öğrencilerinin psikolojik yardım aramaya ilişkin kendini damgalama ve toplumsal damgalanma puanlarını yordama gücü hiyerarşik regresyon analizi ile incelenmiştir. Psikolojik yardım aramaya ilişkin kendini damgalama ve toplumsal damgalanma düzeylerinin özyeterlik algısı ve aile bütünlük duygusu tarafından anlamlı bir şekilde yordandığı, sosyal destek tarafından ise yordanmadığı sonucuna ulaşılmıştır.

*Önemli Vurgular:* Yüksek özyeterliğe sahip öğrencilerin kendini damgalamaları ve toplumsal damgalanmaları daha düşüktür. Bu nedenle düşük özyeterliğe sahip öğrencilere yönelik olarak özyeterliklerini artırıcı grup rehberlikleri, psiko-eğitim ve benzeri çalışmalar yapılabilir. Öğrencilerin aile bütünlük duygularının psikolojik yardım aramaya ilişkin kendini damgalama ve toplumsal damgalanma düzeylerini anlamlı olarak yordadığı bulunmuştur. Bu doğrultuda, düşük aile bütünlük duygusuna sahip ailelere aile danışmanlığı veya grupla psikolojik danışma yapılarak aile bütünlük duyguları desteklenebilir.

<sup>1</sup> This study is derived from master's thesis of the first writer written under the supervision of the second writer.

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## INTRODUCTION

The period of university years is an important stage in people's life when they slowly complete the adolescence period and start to strive to be an adult. According to Arnett (2000), university period, also called as the period of emerging adulthood, refers to a developmental period consisting of people in their twenties and having its own features. University students start to experience psychosocial development and changes at this period (Arnett, 2004). During the period of emerging adulthood, students who have started university might face some developmental troubles caused by the transition from adolescence to adulthood as well as many problems related to daily issues (Arnett 2000; Özgüven, 1992). University students are observed to come across difficulties about issues such as financial problems, yearning due to staying away from family, anxiety caused by the uncertainty of future, bad eating habits, hardship of academic life, failure to adapt to social life (Doğan, 2012; Gizir, 2005). Furthermore, students can also have more serious psychological problems besides such daily troubles (Kitzrow, 2003) and some of them might have difficulty in overcoming these problems on their own (Rosenthal and Schreiner, 2000). Partly due to the features specific to the period of emerging adulthood, when compared to people at other developmental stages, university students have more difficulty in dealing with stress caused by negative life experiences and are more likely to be affected by negative emotional states (Schulenberg and Zarrett, 2006). Students who cannot solve the problems through their own resources may overcome these difficulties with professional support (Atik and Yalçın, 2011). However, some students avoid receiving psychological support, which leads the problems to deteriorate. It is possible to state that the most important reason of avoiding the behaviour of seeking psychological help is about people's fear of "being stigmatized" (Vogel, Bitman, Hammer and Wade, 2013; Vogel, Shechtman and Wade, 2010).

Stigma is defined as a quality that is used to degrade individuals and make them look like faulty and ignored people (Goffman, 1963). One of the cases which is mostly accompanied by stigma is the process of seeking psychological help (Corrigan, 2004; Goldberg and Smith, 2011). Stigma towards seeking psychological help arises when individuals who have resorted to psychological help feel that they are not welcomed by people around them, and turn out to be isolated socially (Vogel, Wade and Haake, 2006). People have hesitations about seeking or receiving psychological help in order to stay away from the problems brought by stigma (Vogel, Wade and Haake, 2006). When the negative perceptions about seeking psychological help are considered, people often hide the process of psychological help or avoid treatment in order to stay away from the detrimental effects of stigma (Corrigan and Matthews, 2003). Stigma which is accepted to be a barrier in front of seeking psychological help can also lead individuals to delay psychological counselling or end it early during a process of treatment (Corrigan, 2004). Because of that reason, struggling with the existing stigma is regarded to be as important as the process of treating mental illnesses (Bilge and Çam, 2010).

The process of stigma appears in two forms, which are public stigma and self-stigma (Corrigan, 2004). Public stigma is composed of perceptions presented by others putting forth that individuals who are seeking psychological help are unacceptable in social terms (Vogel, 1998; cited by Corrigan, 2004). On the other hand, self-stigma consists of people's own perceptions which they developed with the idea that they will not be accepted socially as a result of having a decrease in self-esteem or self-worth (Vogel, Wade and Hackler, 2007). Although public stigma and self-stigma are interrelated processes, internalizing public stigma mostly leads to self-stigma (Vogel, Bitman, Hammer and Wade, 2013; Vogel, Wade and Hackler, 2007; Wahto, Swift and Whipple, 2016). However, when individuals who experience public stigma establish a strong bond with the stigmatized group, this lowers the likelihood of self-stigma (Corrigan, Kerr and Knudsen, 2005).

It is of vital importance to support people about their perceptions in their individual and social areas in order to prevent public stigma and self-stigma to be an obstacle in their way to seeking psychological help (Wilson, Bushnell and Caputi, 2011). When people's personal areas are considered, stigma towards seeking psychological help as well as their attitudes towards and beliefs about themselves in turn damage their perceptions of self-efficacy (Corrigan and Watson, 2002). Self-efficacy can be defined as people's beliefs about their capacity to fulfil the expected roles to reach specific goals (Skaalvik and Skaalvik, 2010). When people who have a high level of self-efficacy face with a failure or trouble, they cope with continue the behaviour by putting more effort in order to overcome the problem (Bandura, 1994). On the other hand, those who have a low level of self-efficacy cannot have a complete control of themselves, and their defence against stressful situations and depression is weaker (Bandura, 1995). Depressive attitudes and behaviours that these people mostly display are said to explain the low level of self-efficacy possessed by individuals who have stigmatized themselves because of mental illnesses (Luszczynska, Schwarzer, Lippke and Mazurkiewicz, 2011). In a study that focused on the relationship between self-stigma on one side and self-esteem, self-efficacy and psychosocial compliance with treatment on the other side, it was revealed that self-stigma was negatively associated with self-esteem, self-efficacy and psychosocial compliance with treatment. The findings of this study point out that self-stigma is a big obstacle in the process of recovery for most people (Fung, Tsang, Corrigan, Lam and Cheng, 2007). In another study whose participants were schizophrenic patients, the mediating role of self-efficacy was investigated to understand the relation between schizophrenic patients' self-stigma and processes contributing to negative symptoms and social functionalities. This study revealed that there was a statistically significant relation between self-stigma and self-efficacy in the negative direction. According to this finding, those who experience self-stigma have a lower level of self-efficacy (Hill and Startup, 2013). In this direction, people's perception of self-efficacy was addressed in the study considering the impact of individual features on the processes of stigmatization regarding psychological help seeking.

Individuals' social life is an important factor in psychological help seeking. When compared to public stigma, people are more intensely affected by stigma by those who they interact with (Vogel, Wade and Ascherman, 2009). Mental disorders are perceived as a weakness by individuals' families and social environment (Arora, Metz and Carlson, 2016). As a result of this, individuals are exposed to stigma more intensely and they become less likely to psychological help seeking. (Vogel, Wade and Hackler, 2007). Individuals can be supported to overcome the barriers put on them by stigma by means of intervening their private spaces such as family or social circle about the process of stigma that causes them to hesitate to psychological help seeking. (Vogel and Wade, 2009). Considering the importance of social environment in the processes of stigma regarding psychological help seeking, the variables of family sense of coherence and social support were included in this study as they were thought to be related to the level of stigma towards psychological help seeking.

Antonovsky and Sourani (1988) define family sense of coherence as the total of beliefs possessed by the family about usable resources to meet structured, explicable and predictable demands by the environment. When families who have a strong family sense of coherence face a problem, they can adapt to the problem quickly, manage stressful situations more easily and get organized in a short time after a crisis (Antonovsky, 1987; cited by Çeçen, 2008). When individuals have a mental disorder, family members can experience stigma together with them. A study conducted with schizophrenic patients investigated the impact of family sense of coherence on self-stigma and life quality. The study revealed that people who were affected by self-stigma had a lower level of life quality. It was also found out that family sense of coherence had a mediating role in the role between self-stigma and life quality. In line with the study results, including programs about family sense of coherence in the struggle with self-stigma can help individuals to have a higher level of life quality (Hsiao, Lu and Tsai, 2017).

Social network has a significant impact on the process when one decides to psychological help seeking (Vogel, Wade, Wester, Larson and Hackler, 2007). There are studies in the literature which show that social support, which has a positive impact on psychological adaptation, psychological well-being and mental diseases, has an important mediating effect in studies of mental health (Birtel, Wood and Kempa, 2017; Chalise, Saito, Takahashi and Kai, 2007; Mcdonnell, 2014). Social support refers to psychological and social help given by individuals' family, friends, special people in their lives (Cotterel, 2007) as well as other people around them when they need (Yıldırım, 1997). Social support is observed to protect people against tension, ensure them to adapt to their environment and support their personal development (Rees, Hardy and Evans, 2007). Furthermore, individuals who have a network of social support also have a lower level of stigma as to psychological help seeking (Takada and others, 2014). In a study which was conducted with schizophrenic patients, it was found out that patients who had a weak network of social support had a higher level of self-stigma toward receiving psychological help (Sibitz and others, 2011). On the other hand, recent studies have shown that social support has a mediating role in the relation between public stigma and psychological well-being (Mickelson, 2001). Individuals who have social support internalize public stigma at a lesser degree and this in turn has a positive impact on their mental health (Birtel, Wood and Kempa, 2017). In this direction, it is significant to support people with a mental disease to enter in new social environments and improve their skills to establish social skills (Mcdonnell, 2014).

The literature review shows that there are many studies that investigate students' attitudes towards psychological help seeking although there is a limited number of studies that address individual and social causes of the processes of public stigma and self-stigma regarding psychological help seeking. However, it is observed that university students who go through a period when they are accepted neither as an adolescence nor an adult come across many problems while trying to adapt to their new lives. These problems sometimes require professional help. It is thought that carrying out a study with such a participant group can give an idea about their attitudes to avoid psychological help seeking. This study is thought to be significant in that addressing individual and social factors that affect public stigma and self-stigma that prevent students from psychological help seeking will help to identify individuals' level of stigma and the factors related to it. The findings of the current study, which aims at examining the processes of stigmatization about psychological help seeking, are expected to find solutions about how to intervene in the processes of stigma that is an obstacle for students to psychological help seeking. The current study, which addresses the aforementioned variables affecting the process of stigma that hinder university students' behaviours to psychological help seeking, aims at investigating university students' level of stigma regarding psychological help seeking in relation to self-efficacy, family sense of coherence and social support. The questions for which an answer is sought in line with this purpose are as below:

- Does university students' level of self-efficacy, family sense of coherence and social support predict their level of self-stigma as to psychological help seeking at a statistically significant level?
- Does university students' level of self-efficacy, family sense of coherence and social support predict their level of public stigma as to psychological help seeking at a statistically significant level?

## METHOD

### The Study Group

The study group of the research consists of 520 students (%63.5 female, %36.5 male) studying at various universities in Ankara. With the aim of obtaining the desired sampling methods were applied convenience sampling methods. The distribution of the participants in the research according to various variables is given in Table 1.

**Tablo 1. Distribution of the study group according to various variables.**

		N	%
Gender	Female	330	63.5
	Male	190	36.5
Grade Level	1.st	106	20.4
	2.nd	212	40.8
	3.rd	110	21.2
	4.th	92	17.7
Faculty	Faculty of Education	215	41.3
	Faculty of Business Administration	94	18.1
	Faculty of Economics and Administrative	62	11.9
	Faculty of Engineering		
	Faculty of Medicine	95	18.3
		54	10.4

## The Data Collection Tool

In this study, personal information form, Self-Stigma of Seeking Psychological Help Scale, Stigma Scale for Receiving Psychological Help, The General Self-Efficacy Scale, Family Sense of Coherence Scale- Short Form and Multidimensional Scale of Perceived Social Support were used to collect data. There are explanations about the data collection tools mentioned below.

### Self-Stigma of Seeking Psychological Help Scale (SSOSH)

Self-Stigma of Seeking Psychological Help Scale was used in the study to measure the self-stigma of the university students. Self-Stigma of Seeking Psychological Help Scale was developed by Vogel, Wade and Haake (2006) has 10 items assessing. The scale is a 5-point Likert type and it has single factor structure. The scale was adapted to Turkish by Acun-Kapıkıran and Kapıkıran (2013). In terms of psychometric properties; Cronbach's alpha was found as .71 (Acun-Kapıkıran and Kapıkıran, 2013). In the current study, Cronbach alpha was found for .68.

### Stigma Scale for Receiving Psychological Help (SSRPH)

Stigma Scale for Receiving Psychological Help was used in the study to measure the public stigma of the university students. SSRPH was developed by Komiya, Good and Sherrod (2000) and the scale is a 5-items which is 4-point Likert type scale. The scale has one sub-dimensions. Higher scores indicate higher levels of public stigma. Cronbach alpha coefficients were found to be .72 for the scale. The scale was adapted to Turkish by Topkaya (2011). In terms of psychometric properties; Cronbach's alpha was found as .80 (Topkaya, 2011). In the current study, Cronbach alpha was found for .84.

### The General Self-Efficacy Scale (GSE)

The General Self-Efficacy Scale was developed by Sherer et al. (1982). GSE is a 17-items which has one sub-dimensions. The scale was adapted to Turkish by Yıldırım ve İlhan (2010). The Cronbach's alpha coefficient for the entire scale was .80 and the test-retest reliability was .69 (Yıldırım and İlhan (2010). In the current study, Cronbach alpha was found for .85.

### Family Sense of Coherence Scale- Short Form (FSOC-S)

Family Sense of Coherence Scale was developed by Antonovsky and Sourani (1988) originally 26 items which the scale's short forms was developed and 12 items short form by Sagy (1998). FSOC-S is a 7-point Likert type scale. The scale was adapted to Turkish by Çeçen (2007). The Cronbach's alpha coefficient for the entire scale was .80 and the test-retest reliability was .85. In the current study, Cronbach alpha was found for .80.

### Multidimensional Scale of Perceived Social Support (MSPSS)

Multidimensional Scale of Perceived Social Support was used in the study to measure the social support of the university students which the scale was developed by Zimet, Dahlem, Zimet ve Farley (1988). MSPSS is a 12-items and 7-point Likert type scale. The scale has three factors which are family, friends and special person. The scale was adapted to Turkish by Eker, Arkar ve Yaldızlı (2001). The Cronbach alpha coefficients were found to be .89 for the overall scale, .85 for family, .88 for friends and .92 for special person sub-dimensions. The test-retest reliability was .65 (Eker, Arkar ve Yaldızlı, 2001). In the current study, Cronbach alpha was found for 87 for the overall scale, 84 for family, .88 for friends and .93 for special person sub-dimensions.

## Data Analysis

In the current study, the predictive power of total score of stigma towards psychological help seeking was evaluated via hierarchical regression analysis. In hierarchical regression analysis, predictors are processed as a block. These blocks can be composed of one or more variables (Meyers, Gamst and Guarino, 2013). The researcher who conducts the hierarchical regression analysis determines the processes of entering the blocks depending on a theoretical or logical order. The variables that predict the dependent variable the most are processed first, whereas it is also possible to process the variables that predict the most at the last stage and to process the variables that predict the least at first (Tabachnick and Fidell, 2007). In this study, in which self-stigma and public stigma are predicted variables, a separate analysis was carried out for the two variables. The variable of self-efficacy was included in the model at first followed by family sense of coherence and social support respectively.

The data set was analyzed in terms of missing value and data gathered from 3 participants were excluded from the data set as they hadn't responded to most of the items in scales or any of the items in a whole scale. Therefore, the number of participants decreased from 623 to 620. Standard z score was obtained in order to conduct univariate outlier analysis, and the values higher than +3.00 and lower than -3.00 were excluded from the analysis (Çokluk, Şekercioğlu and Büyüköztürk, 2016). At the end of this step, data gathered from 30 participants were excluded from the data set. 24 outliers obtained via boxplot graphics were also excluded from the data set, and it was seen in the end that the number of participants was 566. Multivariate outliers were analyzed by using Mahalanobis distances in the regression (Çokluk, Şekercioğlu and Büyüköztürk, 2016). According to this, data gathered from 46 participants were not included in the analysis, and the following steps were taken with the data of 520 participants. Critical chi-square value was accepted to be .001 (Büyüköztürk, 2011).

Before the analysis was started, the problem of multicollinearity was also checked. When there is a correlation that is equal to or over .90 between independent variables, there is a problem of multicollinearity (Tabachnick ve Fidell, 2007). Because of that, Pearson correlation coefficients were checked first of all, and bivariate correlations were assessed among the variables, and it was seen that the relationships among the variables varied between 0.01 and 0.61. Variance inflation factor (VIF), condition index (CI) and tolerance values were also checked in order to evaluate the problem of multicollinearity. It was seen that variance inflation factor (VIF) was between 1.143 and 1.831, tolerance value varied between 0.54 and 0.87 and condition index (CI) was 21.570 which lower than 30, which means that there was not a problem of multicollinearity in the current study. Autocorrelation analysis was conducted by evaluating Durbin Watson coefficient and Durbin Watson coefficient must be between 1.5 and 2.5 (Kalaycı, 2009). It was seen that Durbin Watson coefficient was found to be 1.79. Therefore, it can be stated that there was no autocorrelation between variables in the current study. The SPSS 20 statistical software were used in the current study.

## FINDINGS

The current study, first of all, investigated the relations between the variables that were included in the process of regression analysis. Then the findings of hierarchical regression analysis as to predicting the participants' level of self-stigma and public stigma as to psychological help seeking were given place.

### The Relations Between the Variables Included in the Hierarchical Regression Analysis

Before conducting hierarchical regression analysis, correlation coefficients between the variables investigated within the framework of the current study (self-stigma, public stigma, general self-efficacy, family sense of coherence, social support by family, social support by friends and social support by a special person) were investigated in the study. The results of Pearson Product-Moment Correlation Coefficient carried out to investigate the relations between these variables are given in Table 2 below.

**Table 2. Correlation Coefficients Between the Variables Included in the Current Study**

	1	2	3	4	5	6	7
Self-Stigma (1)	-						

**Table 2. Correlation Coefficients Between the Variables Included in the Current Study**

Public Stigma (2)	.37**	-					
General Self-Efficacy (3)	-.15**	-.23**	-				
Family Sense of Coherence (4)	-.17**	-.16**	.34**	-			
Social Support by Family (5)	-.14**	-.11**	.26**	.61**	-		
Social Support by Friends (6)	-.13**	-.14**	.25**	.34**	.46**	-	
Social Support by a Special Person (7)	-.01	-.07*	.16**	.15**	.26**	.31**	-

\*\*p<.01, \*p<.05

As is seen in Table 2, there is a statistically significant positive relation between self-stigma and public stigma ( $r=.37$ ,  $p<.01$ ), both of which are the predicted variables of the current study. It is also clear that there is a statistically significant negative relation between self-stigma and self-efficacy ( $r= -.15$ ,  $p<.01$ ), family sense of coherence ( $r= -.17$ ,  $p<.01$ ) and social support by family which is one of the sub-dimensions of perceived social support ( $r= -.14$ ,  $p<.01$ ) and social support by friends ( $r= -.13$ ,  $p<.01$ ) as to the predicted variable of psychological help seeking in the study. On the other hand, the correlation value of social support by a special person, which is another sub-dimension of social support, is not statistically significant. When it comes to the other predicted variable of the study, psychological help seeking, there is a statistically significant negative relation between public stigma and self-efficacy ( $r= -.23$ ,  $p<.01$ ), family sense of coherence ( $r= -.16$ ,  $p<.01$ ) and social support by family ( $r= -.11$ ,  $p<.01$ ), social support by friends ( $r= -.14$ ,  $p<.01$ ) and social support by a special person ( $r= -.07$ ,  $p<.01$ ), all of which are sub-dimensions of perceived social support.

### Hierarchical Regression Analysis Regarding Self-Stigma Towards Psychological Help Seeking

Hierarchical regression analysis was conducted to predict the level of self-stigma regarding psychological help seeking. The results of hierarchical regression analysis conducted with the data as to the variables which were addressed as the predictors of stigma towards psychological help seeking are given in Table 3.

**Table 3. Results of Hierarchical Regression Analysis Regarding the Scores of Self-Stigma**

Variables	R	R <sup>2</sup>	B	SHa.	B	t	F	p
Model 1	.159	.025					13.364	.000
General Self-Efficacy			-.088	.024	-.159	-3.656		.000
Model 2	.201	.040					10.869	.000
General Self-Efficacy			-.063	.026	-.114	-2.482		.013
Family Sense of Coherence			-.068	.024	-.131	-2.862		.004
Model 3	.219	.048					5.188	.000
General Self-Efficacy			-.060	.026	-.107	-2.299		.022
Family Sense of Coherence			-.048	.029	-.092	-1.635		.103
Social Support by Family			-.044	.066	-.039	-.666		.506
Social Support by Friends			-.087	.057	-.077	-1.538		.125
Social Support by a Special Person			.038	.032	.055	1.201		.230

Dependent variable: Self-Stigma of Psychological Help Seeking.



According to Table 3, the variable of general self-efficacy was included in the first model, the variable of family sense of coherence was included in the second model, and the variables of social support by family, friends and a special person were included in the third model. According to the results of the analysis, the variable of general self-efficacy accounts for 2.5% of the total variance in university students' level of self-stigma towards psychological help seeking in Model 1 ( $R^2 = .025$ ;  $F(1,518) = 13.36$ ,  $p < .05$ ). When the variable included in Model 1 is considered, it is clear that the variable of general self-efficacy ( $\beta = -.159$ ,  $p < .05$ ) predicts university students' level of self-stigma towards psychological help seeking at a statistically significant level. When the effect of general self-efficacy is considered in Model 2, the total variance of the variable of family sense of coherence has increased to 4% in the second model ( $R^2 = .040$ ;  $F(1,517) = 10.86$ ,  $p < .05$ ). Furthermore, the table shows that the variable of family sense of coherence ( $\beta = -.131$ ,  $p < .05$ ) predicts university students' level of self-stigma towards psychological help seeking at a statistically significant level. When it comes to variables addressed in Model 3, the analysis regarding the effect of general self-efficacy and family sense of coherence shows that the total variance of the variables of social support by family, friends and a special person has risen up to 4,8% in the third model ( $R^2 = .048$ ;  $F(3,514) = 5.18$ ,  $p < .05$ ). When the variables of social support by family ( $\beta = -.039$ ,  $p > .05$ ), social support by friends ( $\beta = -.077$ ,  $p > .05$ ), social support by a special person ( $\beta = .055$ ,  $p > .05$ ) are considered, it is clear that they do not predict university students' level of self-stigma towards seeking psychological help.

#### Hierarchical Regression Analysis Regarding the Prediction of Public Stigma Towards Psychological Help Seeking

A hierarchical regression analysis was conducted to predict university students' level of public stigma towards psychological help seeking, and a regression model was obtained in the end. The results of hierarchical regression analysis conducted with the data as to the variables which were addressed as the predictors of public stigma towards seeking psychological help are given in Table 4.

**Table 4. Results of Hierarchical Regression Analysis Regarding the Scores of Public Stigma**

Variables	R	R <sup>2</sup>	B	SHa.	B	t	F	p
Model 1	.233	.054					29.781	.000
General Self-Efficacy			-.068	.012	-.233	-5.457		.000
Model 2	.248	.062					17.007	.000
General Self-Efficacy			-.059	.013	-.202	-4.456		.000
Family Sense of Coherence			-.025	.012	-.091	-2.015		.044
Model 3	.257	.066					7.298	.000
General Self-Efficacy			-.055	.013	-.190	-4.133		.000
Family Sense of Coherence			-.022	.015	-.080	-1.436		.152
Social Support by Family			.011	.034	-.018	.310		.757
Social Support by Friends			-.042	.029	-.072	-1.442		.150
Social Support by a Special Person			-.002	.017	-.012	-.270		.787

Dependent variable: Public Stigma of Psychological Help Seeking.

According to Table 4, the variable of general self-efficacy was included in the first model, the variable of family sense of coherence was included in the second model, and the variables of social support by family, friends and a special person were included in the third model. According to the results of the analysis, the variable of general self-efficacy accounts for 5.4% of the total variance in university students' level of public stigma towards psychological help seeking in Model 1 ( $R^2 = .054$ ;  $F_{(1,518)} = 29.78$ ,  $p < .05$ ). When the variable included in Model 1 is considered, it is clear that the variable of general self-efficacy ( $\beta = -.233$ ,  $p < .05$ ) predicts university students' level of public stigma towards psychological help seeking at a statistically significant level. When the effect of general self-efficacy is considered in Model 2, the total variance of the variable of family sense of coherence has increased to 6.2% in the second model ( $R^2 = .062$ ;  $F_{(1,517)} = 17.00$ ,  $p < .05$ ). Furthermore, the table shows that the variable of family sense of coherence ( $\beta = -.091$ ,  $p < .05$ ) predicts university students' level of public stigma towards psychological help seeking at a statistically significant level. When it comes to variables addressed in Model 3, the analysis regarding the effect of general self-efficacy and family sense of coherence shows that the total variance of the variables of social support by family, friends and a special person has risen up to 6,6% in the third model ( $R^2 = .066$ ;  $F_{(3,514)} = 7.29$ ,  $p < .05$ ). When the variables of social support by family ( $\beta = -.018$ ,

$p > .05$ ), social support by friends ( $\beta = -.072$ ,  $p > .05$ ), social support by a special person ( $\beta = .012$ ,  $p > .05$ ) are considered, it is clear that they do not predict university students' level of public stigma towards psychological help seeking.

## DISCUSSION

The findings of the current study reveal that university students' self-efficacy and family sense of coherence predict their level of self-stigma and public stigma towards psychological help seeking at a statistically significant level. On the other hand, social support by family, friends and a special person do not predict their level of self-stigma and public stigma towards psychological help seeking at a statistically significant level. During the hierarchical regression analysis, the variables included in the model are respectively self-efficacy, family sense of coherence and social support by family friends and a special person. It is clear that social support by family, friends and a special person included in the third model do not contribute to the model at a statistically significant level. According to this, the variables in question account for almost 4.8% of the total variance of self-stigma towards psychological help seeking and almost 6.6% of the total variance of public stigma as to psychological help seeking.

The findings obtained from the first model in which self-stigma towards psychological help seeking was addressed reveal that the variable of self-efficacy predicts university students' level of self-stigma towards psychological help seeking at a statistically significant level in the negative direction. In other words, it has been found out in the current study that university students having a low level of self-efficacy have a higher level of self-stigma towards psychological help seeking. Related findings in the literature also point out that having a low level of self-efficacy increases individuals' level of self-stigma towards psychological help seeking (Corrigan, 1998; cited by Corrigan, 2004; Corrigan, Larson and Rüsche, 2009; Corrigan, Watson and Barr, 2006; Florer, 2015; Fung, Tsang, Corrigan, Law and Cheng, 2007; Hill and Startup 2013; Okhakhume, 2012; Vogel, Wade and Haake, 2006). Individuals' level of self-efficacy helps them to deal with stress effectively in various situations (Vauth, Kleim, Wirtz and Corrigan, 2007). However, those who have a low level of self-efficacy cannot deal with stress effectively. This in turn leads individuals to have a lesser level of self-esteem and have a negative perspective about themselves, their development and success (Bandura, 1977). As a result, individuals who cannot have a complete control of themselves have difficulty in overcoming stress and depression (Bandura, 1995; Luszczynska, Schwarzer, Lippke and Mazurkiewicz, 2011). People who have a low level of self-efficacy are less likely to believe in a happy ending and such people are less likely to continue their behaviours to overcome the problems they face (Florer, 2015). Similarly, as they have a lower level of defence against mental disorders, they can experience mental illnesses more often (Corrigan, Watson and Barr, 2006). A low level of self-efficacy results in a low level of activity and a higher level of need for counselling (Florer, 2015). That's because low level of self-efficacy causes individuals to feel worthless. At this point, self-stigma as to psychological help seeking is significantly affected by self-efficacy. People who feel worthless can start to stigmatize themselves more towards psychological help seeking. As the findings of the current study and other studies in the literature show, a low level of self-efficacy both leads to self-stigma and causes individuals to internalize prejudices held by the society towards psychological help seeking.

When the findings obtained in the second model are examined, it is clear that family sense of coherence predicts university students' level of self-stigma towards psychological help seeking at a statistically significant level in the negative direction. In other words, it has been found out that university students having a family sense of coherence have a lower level of self-stigma towards psychological help seeking. The literature review shows that individuals having family sense of coherence have a lower level of self-stigma towards psychological help seeking, which supports the finding of the current study (Antonovsky, 1979; cited by Ngai and Ngu, 2013). According to Hsiao, Lu and Tsai (2017), individuals who have a weak family sense of coherence experience a decrease in their life quality and an increase in self-stigma. When individuals come across a problem in their life, they make use of coping strategies to overcome them and these strategies are learnt within the family at first (Wickens and Greeff, 2006). Individuals who have grown up in families having a strong family sense of coherence can manage a stressful problem more easily, can use their resources more effectively and have less difficulty in seeking psychological help (Antonovsky, 1987; cited by Çeçen, 2008). Individuals who cannot feel the family sense of coherence sufficiently within the family cannot learn the coping strategies necessary to overcome a problem, and so they are more vulnerable to mental disorders. If these individuals cannot overcome a stressful problem, they can experience a mental illness, and this illness can be regarded as a weakness both by the individual and the family (Arora, Metz and Carlson, 2016). In such a case, individuals are exposed to more severe stigma due to the sense of worthlessness resulting from the family, and they become less likely to seek psychological help (Vogel, Wade and Hackler, 2007) and recover (Baumann and Gaebel, 2008). Individuals who do not have a strong family sense of coherence can internalize negative thoughts about themselves towards psychological help seeking.

When the findings of the hierarchical regression analysis conducted in the third model of the current study are considered, social support's sub-dimensions of support by family, friends and a special person do not predict self-stigma as to psychological help seeking. However, when it comes to the relation between self-stigma towards psychological help seeking and social support



by family and friends is considered (Table 2), there is a statistically significant relation between these variables although it is at a low level. It is possible that in the regression analysis, some variables that might mediate the relation between self-stigma towards psychological help seeking and social support by family, friends and a special person can turn out to be a repressor variable. Because of that reason, some variables can play a repressive role in the predictive value of the variables in question. Further studies in the literature can be conducted to investigate this relation in depth. Literature review shows that social support has a statistically significant impact on the level of self-stigma as to psychological help seeking, which is not parallel with the findings of the current study. There are some studies in the literature that social support diminishes mental disorders (Goldberg and Smith, 2011; Vogel and Wei, 2005) as well as stigma (Salter and others, 2010) and there is a mutual relationship between stigma and social support. In other words, social support reduces stigma (Salter and others, 2010), whereas being stigmatized reduces social support (Mak and others, 2007). Previous studies reveal that social support has a positive impact on psychological adaptation and mental disorders, and so it has an important mediating role in studies about mental health (Chalise, Saito, Takahashi and Kai, 2007; McDonnell, 2014). Therefore, it is of vital importance for those having a mental illness to improve their skills to establish social relations (McDonnell, 2014). As a result, the finding of the current study is not supported by any study in the literature. It is thought that it would be useful to address the relation between these variables in further studies.

The findings of the hierarchical regression analysis in the model in which public stigma towards psychological help seeking is investigated indicate that the variable of self-efficacy predicts university students' level of public stigma towards psychological help seeking at a statistically significant level in the negative direction. In this light, it can be stated that university students who have a low level of self-efficacy have a higher level of public stigma towards psychological help seeking. Although the literature review shows that there aren't any studies that focus on the relation between public stigma towards psychological help seeking and perceptions of self-efficacy, there are some theoretical views that support the current finding. Self-efficacy refers to individuals' belief and trust about what they can do themselves (Yıldırım and İlhan, 2010). Individuals who have a low level of self-efficacy experience a low level of self-esteem, and might have pessimistic views about their personal development (Bandura, 1977). Therefore, such individuals are more likely to experience sense of worthlessness about themselves. As they do not have a sufficient level of self-efficacy and do not have a belief or trust as to what they can do, they have difficulty in overcoming problematic issues and they in turn have less self-efficacy. Even if they have the capacity or necessary skills to deal with a problem they face, they cannot activate these skills (Yıldırım and İlhan, 2010), and they attach their failure to the impossible nature of the task or to their personal deficiency (Bandura, 1989). Since a low level of self-efficacy is an obstacle in front of solutions to personal problems, individuals can need to receive psychological help. However, low level of self-efficacy can cause individuals to be affected more severely by the negative thoughts and prejudices held by the society as to psychological help seeking. Perceptions and expectations of the society from the individuals have an important effect on individuals' level of self-efficacy (Bandura, 1994) and it can undermine self-efficacy further. It can be thought that low level of self-efficacy leads to an increase in individuals' sense of worthlessness and cause them to experience public stigma more seriously. Hence, it seems possible to indicate that individuals who have a low level of self-efficacy have a higher level of public stigma towards psychological help seeking.

When the findings as to the second model are considered, it is clear that family sense of coherence predicts university students' level of public stigma as to psychological help seeking at a statistically significant level in the negative direction. It can be stated that family sense of coherence decreases university students' level of public stigma as to psychological help seeking. Although the literature review shows that there aren't any studies that focus on the relation between public stigma as to psychological help seeking and family sense of coherence, there are some theoretical views that support the current finding. If families having difficulties in life also have family sense of coherence, individuals can stand up to these difficulties and they can overcome problems easily (Moen and Hall-Lord, 2016). Thus, when such individuals face a problem, they can normalize difficulties, find a solution to their problems and soften their reactions in a very short time. Moreover, family sense of coherence helps individuals to reduce possible feelings of embarrassment and guilt that may arise as a result of the problems they face (Walsh, 2002). Those who do not have a sufficient level of family sense of coherence can get affected by the society's negative perceptions and thoughts as to psychological help seeking. According to Phillips, Pearson, Li, Xu and Yang (2002), when families have a low level of sensitivity, this can be a source of being more severely affected by stigma. Stigmatizing thoughts imposed by the society on individuals can cause them to suffer from more intense negative feelings such as unhappiness or desperation. On the other hand, family sense of coherence brings about the strengths of a family and helps individuals to get rid of the feelings of failure and desperation. This can create a spirit of pride, trust and "can do" in the family (Walsh, 2002) and contribute to individuals' life satisfaction (Çeçen, 2008). It can be inferred that individuals who have a high level of life satisfaction are more likely to ignore the negative thoughts held by the society as to psychological help seeking. In light with the finding of the current study, it is thought that individuals who have a strong feeling of coherence with their families can stand up to public stigma towards psychological help seeking, and thus they can continue the process of seeking help more easily. Because of that reason, family sense of coherence can be indicated to predict public stigma as to psychological help seeking in the negative direction.

The findings as to the third model reveal that social support's sub-dimensions of social support by family, friends and a special person do not predict university students' level of public stigma towards psychological help seeking at a statistically significant level. However, when it comes to the relation between public stigma towards psychological help seeking and social support by

family, friends and a special person (Table 2), there is a statistically significant relation between these variables although it is at a low level. It is possible that in the regression analysis, some variables that might mediate the relation between public stigma as to psychological help seeking and social support by family, friends and a special person can turn out to be a repressor variable. Because of that reason, some variables can play a repressive role in the predictive value of the variables in question. The current study did not investigate which variables could be repressive. It would be efficient to address this relation in further studies. The literature review shows that social support decreases individuals' level of public stigma. It is emphasized that social support networks such as family, friends and a special person have an important effect on individuals' decision to receive psychological help (Vogel, Wade, Wester, Larson and Hackler, 2007). Individuals who can receive a sufficient amount of social support can find solutions for their problems in these social networks. On the other hand, individuals who have a low level of social support wish to receive psychological help more and they seek psychological help to solve these problems (Cramer, 1999; cited by Vogel and Wei, 2005). Literature review shows that there are studies on social support networks in relation to public stigma as to psychological help seeking whose findings do not support the current study finding. In a study carried out by Takada and others (2014), it was concluded that public stigma has a statistically significant negative relation with social support. On the other hand, Markiewicz and Hintze (2016) conducted a study in which they investigated the relation between stigma and social support with a participant group composed of women who had had a chronic illness (breast cancer and schizophrenia). It was found out at the end of the study that there was not a statistically significant relation between public stigma and social support given to patients with schizophrenia. Schizophrenic patients mostly hide their illness, avoid social contact and even fully withdraw from social life, and so develop self-stigma in order to deal with public stigma (Corrigan, Larson and Rüsçh, 2009). As a result, it is suggested to carry out further studies to investigate the relations between the variables addressed in the current study.

## CONCLUSION AND RECOMMENDATIONS

The results of the current study show that participant university students' level of self-stigma and public stigma towards psychological help seeking is predicted by their perception of self-efficacy and family sense of coherence at a statistically significant level, whereas it is not predicted by social support by family, friends and a special person. Some suggestions are given below within the light of the study findings for researchers who will conduct a study on a similar topic as well as practitioners in the field.

It has been found out at the end of this study that the independent variables account for 4.8% of the total variance in predicting self-stigma towards psychological help seeking, whereas they account for 6.6% of the total variance in predicting public stigma towards psychological help seeking. In this context, researchers are suggested to carry out further studies focusing on the relation between self-stigma and public stigma as to psychological help seeking and other variables. The current study focuses on university students' level of self-stigma and public stigma towards psychological help seeking. Further studies can be conducted with participants of different age groups to investigate stigma towards psychological help seeking. The variables that affect self-stigma and public stigma towards psychological help seeking are influenced by cultural elements. Therefore, it can be suggested to investigate these variables within the framework of cultural elements in Turkey. The participant group of the current study is composed of university students studying psychological guidance and counselling at all grades, but the study results were evaluated over the whole group. Because of this reason, the variables of this study can be compared with a study which will include data from only psychological guidance and counselling students. Conducting a qualitative study that will enable researchers to investigate university students' level of self-stigma and public stigma towards psychological help seeking in detail can contribute much to the literature and support further studies on stigma.

Stigma towards psychological help seeking is a feature that can be intervened and some suggestions can be given to practitioners in this light. It has been concluded that university students' perception of self-efficacy predicts self-stigma and public stigma towards psychological help seeking at a statistically significant level. Students who have a high level of self-efficacy have a lower level of self-stigma and public stigma. Therefore, experts working at Psychological Guidance and Counselling Centers of universities can provide students with a low level of self-efficacy with some programs such as group counselling or psycho-education to enhance their level of self-efficacy. It has been found out that university students' family sense of coherence predicts their level of self-stigma and public stigma at a statistically significant level. A strong sense of coherence within the family decreases individuals' level of self-stigma and public stigma towards psychological help seeking. In this light, families who have a low level of family sense of coherence can be presented family counselling or group counselling to improve their sense of family coherence. Intervention programs addressing individuals or families are expected prevent students' stigma as to psychological help seeking. When the generalizability of the study findings is considered, it is limited to the participants of this study and university students having similar features. Another limit of the current study is that it is a correlational and comparative research design, so cause and effect cannot be inferred from the findings of the current study.

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### Statements of publication ethics

We hereby declare that the study has not unethical issues and that research and publication ethics have been observed carefully.

### Researchers' contribution rate

The study was conducted and reported with equal collaboration of the researchers. This study is derived from master's thesis of the first writer written under the supervision of the second writer.

### Ethics Committee Approval Information

The study was approved by Ankara University Ethics Committee (26/09/2016-266/20).

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