

Japanese university students' stigma and attitudes toward seeking professional psychological help

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Abstract: This study investigated the relationships between perceived public stigma, self-stigma, and the attitudes associated with seeking professional psychological help, with the aim of determining how to foster appropriate help-seeking. Sex differences for each variable were also investigated. The questionnaire for this study was completed by 435 Japanese university students. Results of the *t*-tests indicated no significant sex differences for the attitudes associated with seeking professional help and self-stigma scores. However, there was a significant sex difference for the perceived public stigma score; women perceived more public stigma than men. Because of this significant difference, the relationships between variables were investigated separately for each sex. A multi-group analysis showed that perceived public stigma was positively correlated with self-stigma, and self-stigma was negatively correlated with attitudes toward seeking professional help for both men and women. These findings suggest that in order to reduce the psychological barriers regarding seeking help when students perceive public stigma, it would be beneficial to reduce self-stigma.

Keywords: perceived public stigma, self-stigma, help-seeking attitudes, university students

Introduction

Currently university students' problems are complex and diverse (e.g., Sato, 2010). However, many people do not seek professional psychological help even when help-seeking is preferable (e.g., Nomura & Igarashi, 2004). This study investigated the factors associated with attitudes toward seeking professional psychological help, with the aim of determining how to foster appropriate help-seeking.

Many factors have been examined in relation to attitudes toward seeking professional psychological help. Stigma associated with mental health has been

identified as one barrier to help-seeking (e.g., Corrigan, 2004). According to Corrigan (2004), there are two types of stigma associated with mental health. One is public stigma, which is the public's negative attitude toward the stigmatized group. The other is self-stigma, which is the reduction in self-esteem or self-worth held by stigmatized individuals. Stigma specifically associated with seeking professional psychological help is defined below. Public stigma associated with seeking professional psychological help is the public perception that a person who seeks psychological treatment is undesirable or socially unacceptable. Self-stigma associated with

seeking professional psychological help is the perception held by individuals who seek psychological help, which can lead to a reduction in self-esteem or self-worth (Vogel, Wade, & Haake, 2006).

Vogel, Wade, and Hackler (2007) found that the relationship between perceived public stigma associated with mental illness and attitudes toward seeking professional help was mediated by self-stigma associated with seeking professional help. It has been suggested that university students in Japan are reluctant to be seen entering the student counseling center (Yoshitake, 2012). This implies the existence of public stigma. In Japanese culture, people are motivated to find a way to fit in with relevant others, to fulfill and create obligation, and in general to become part of various interpersonal relationships (Markus & Kitayama, 1991). Therefore, perceived public stigma is assumed to be related to help-seeking attitudes in Japan. Miyaji (2010) suggested that self-stigma has a negative effect on employees' help-seeking attitudes. The relationships between perceived public stigma, self-stigma, and attitudes associated with seeking professional help have not been investigated in Japanese university students. In the current study, the relationships between these variables were investigated based on Vogel's model, with the aim of elucidating a specific intervention. All variables are associated with seeking professional psychological help.

In addition, we investigated sex differences for each variable. Some previous studies found that women had more positive help-seeking attitudes than men, but other studies did not find evidence for sex differences (e.g., Mizuno & Ishikuma, 1999); men reported more perceived public stigma (e.g., Komiya, Good, & Sherrod, 2000) and

self-stigma (e.g., Vogel et al., 2006) than women.

Methods

Participants

Participants were 451 Japanese undergraduate students (208 men and 243 women); 435 (196 men and 239 women) valid responses were received. The mean age of participants was 20.00 years ($SD = .92$; range 19-24).

Procedures

Surveys were conducted in July and October 2012. Participants were informed that participation was voluntary and anonymous. They were informed that questionnaire responses were considered to be consent.

Measures

Attitudes toward seeking professional psychological help. The 10-item Attitudes Toward Seeking Professional Psychological Help: A Shortened Form (Fischer & Farina, 1995) was used. This is a unidimensional scale. Items are rated on a 4-point Likert scale. Five items are reverse-scored such that higher scores reflect more positive attitudes. Fischer and Farina (1995) suggested that researchers may use the scale in any way helpful to their projects, and they need not contact the authors for permission.

Perceived public stigma. The 5-item Stigma Scale for Receiving Psychological Help (Komiya et al., 2000) was used. This is a unidimensional scale. Items are rated on a 5-point Likert scale. Higher scores reflect greater perception of public stigma. We obtained permission from the scale author to translate and use this scale.

Self-stigma. The 10-item Self-Stigma of Seeking Help Scale (Vogel et al., 2006) was used. This is a unidimensional scale. Items are rated on a 5-point Likert scale. Five items are reverse-scored such that higher scores reflect greater self-stigma. We obtained permission from the scale author to translate and use this scale.

All scales were translated into Japanese by the author, and back-translated into English by a professional translator. A Japanese version was developed by comparing the original, translation, and back-translation (Tables 1-3). In Japan, the distinction

between “counseling,” “psychotherapy,” and “clinical psychology” is not clear, and “counseling” is the most popular approach (Shimoyama, 2010). Therefore, all words meaning professional psychological help were translated as “counseling” or “counselor”, which is well-known in Japan.

Ethical consideration

The study was approved by the Ethics Committee of the Graduate School of Education and Human Development, Nagoya University.

Table 1. Japanese version of the Attitudes toward Seeking Professional Psychological Help: A Shortened Form

1.	自分が精神的にまいっていると確信したときには、まずカウンセラーのところに行こうと思う。 (If I believed I was having a mental breakdown, my first inclination would be to get professional attention.)
2.	自分の悩みをカウンセラーに相談しても、心理的な葛藤を取り除けるとは思えない。 (The idea of talking about problems with a psychologist strikes me as a poor way to get rid of emotional conflicts.)
3.	もしも今、自分が心理的にひどく危機的な状態に陥っていると、カウンセリングを受ければ安心感が得られると確信している。 (If I were experiencing a serious emotional crisis at this point in my life, I would be confident that I could find relief in psychotherapy.)
4.	葛藤や気がかりなことがあっても、カウンセラーに頼らず自分で対処しようとする人の態度は立派な感じがする。 (There is something admirable in the attitude of a person who is willing to cope with his or her conflicts and fears without resorting to professional help.)
5.	もし長い間、不安な気持ちや動揺が続いたら、カウンセラーに相談したいと思う。 (I would want to get psychological help if I were worried or upset for a long period of time.)
6.	心理的な悩みを抱えている人は、一人でそれを解決しようとせず、カウンセラーの助けを借りて解決しようとするだろう。 (A person with an emotional problem is not likely to solve it alone; he or she is likely to solve it with professional help.)
7.	自分の悩みは自分で何とかすべきであり、カウンセリングは最後の手段だ。 (A person should work out his or her own problems; getting psychological counseling would be a last resort.)
8.	カウンセリングにかかる時間や費用を考えると、自分のような者にとってカウンセリングに価値があるとは思えない。 (Considering the time and expense involved in psychotherapy, it would have doubtful value for a person like me.)
9.	将来、心理カウンセリングを受けたいと思うことがあるかもしれない。 (I might want to have psychological counseling in the future.)
10.	心理的な悩みといっても、他の悩みと同じで助けを借りなくても、自然に解決していくものだ。 (Personal and emotional troubles, like many things, tend to work out by themselves.)

Note. The upper sentences were from the Japanese version of the Attitudes Toward Seeking Professional Help: A Shortened Form (Fischer & Farina, 1995) which were developed by the author, and the lower sentences were from the original scale.

Results

Scale structure

Attitudes toward seeking professional psychological help. An exploratory factor analysis using weighted least squares was

performed with 10 items. The observed scree test suggested a one-factor solution. All item loadings were greater than .30. The alpha coefficient was .73.

Perceived public stigma. An exploratory factor analysis using weighted least squares

Table 2. Japanese version of the Stigma Scale for Receiving Psychological Help

1.	心理的なことや人間関係の問題でカウンセラーに相談に行った人に対して、世間の人々は良くない印象を持つ。 (Seeing a psychologist for emotional or interpersonal problems carries social stigma.)
2.	心理的なことや人間関係のことでカウンセラーに相談するのは、人間的な弱さや無力さのしるしだ。 (It is a sign of personal weakness or inadequacy to see a psychologist for emotional or interpersonal problems.)
3.	ある人がカウンセラーに相談したということを、もし世間の人々が知ったら、世間の人々はその人のことをより否定的な目でみるだろう。 (People will see a person in a less favorable way if they come to know that he/she has seen a psychologist.)
4.	カウンセラーに相談に行ったことがあるという事実は、隠しておく方が賢明だ。 (It is advisable for a person to hide from people that he/she has seen a psychologist.)
5.	世間の人々は、カウンセラーに相談に行っている人に対して、あまり良い印象をもたない傾向がある。 (People tend to like less those who are receiving professional psychological help.)

Note. The upper sentences were from the Japanese version of the Stigma Scale for Receiving Psychological Help (Komiya et al., 2000) which were developed by the author, and the lower sentences were from the original scale.

Table 3. Japanese version of the Self-Stigma of Seeking Help Scale

1.	もし自分がカウンセラーのところへ相談に行ったら、自分は無力であると感じるだろう。 (I would feel inadequate if I went to a therapist for psychological help.)
2.	自分がカウンセラーに助けを求めることは、自分に自信をなくすことにはつながらないだろう。 (My self-confidence would NOT be threatened if I sought professional help.)
3.	カウンセラーのところへ相談に行くことで、自分は知的に劣っていると感じてしまうだろう。 (Seeking psychological help would make me feel less intelligent.)
4.	カウンセラーに相談することで、自分の価値や能力に対してより自信を持てるようになるだろう。 (My self-esteem would increase if I talked to a therapist.)
5.	カウンセラーに相談することを選んだからといって、自分への見方は変わらないだろう。 (My view of myself would not change just because I made the choice to see a therapist.)
6.	カウンセラーに相談することで、自分は他者よりも劣っていると感じてしまうだろう。 (It would make me feel inferior to ask a therapist for help.)
7.	もし自分がカウンセラーに相談することを選んでも、そのような選択をした自分は正しかったと思えるだろう。 (I would feel okay about myself if I made the choice to seek professional help.)
8.	もし自分がカウンセラーのところへ相談に行ったら、自分自身にあまり満足できないだろう。 (If I went to a therapist, I would be less satisfied with myself.)
9.	自分では解決できない悩みをカウンセラーに相談しても、自分への自信は保つことができるだろう。 (My self-confidence would remain the same if I sought help for a problem I could not solve.)
10.	もし自分で自分自身の悩みを解決できなかったら、自分はさらにだめだなあと感じるだろう。 (I would feel worse about myself if I could not solve my own problems.)

Note. The upper sentences were from the Japanese version of the Self-Stigma of Seeking Help Scale (Vogel et al., 2006) which were developed by the author, and the lower sentences were from the original scale. The item in italics was not included in the analysis.

was conducted with 5 items. The observed scree test suggested a one-factor solution. All item loadings were greater than .65. The alpha coefficient was .87.

Self-stigma. An exploratory factor analysis using weighted least squares was conducted with 10 items. The observed scree test suggested a one-factor solution. Factor analysis was repeated until there were no items with factor loadings less than .30. The final solution included 9 items with loadings greater than .35. The alpha coefficient was .81.

Descriptive statistics and correlations

Variable means, standard deviations, ranges, and correlations between variables are presented in Table 4. Perceived public stigma was positively correlated with self-stigma ($r=-.35$, $p<.001$), and self-stigma was negatively correlated with help-seeking attitudes ($r=.32$, $p<.001$). However, there was no association between perceived public stigma and help-seeking attitudes ($r=-.07$, $p=.14$).

Sex differences

Results of the t -tests indicated no significant sex differences for the attitudes toward seeking help ($t_{(433)}=-1.18$, $p=.24$) and self-stigma ($t_{(433)}=.47$, $p=.64$) scores. However, there was a significant sex difference for the perceived public stigma score ($t_{(433)}=-3.94$, $p<.001$); perceived public

stigma scores were higher for women than men. Because of this significant difference, the model analysis was conducted separately for each sex.

Model

A multi-group analysis was conducted for men and women (Figure 1). The z tests were used to examine sex differences in path coefficients. Results indicated no significant sex differences (path coefficients from perceived public stigma to self-stigma: $z=1.45$, $p=.147$, 95%CI=[-.047, .313]; path coefficients from self-stigma to help-seeking attitudes: $z=1.61$, $p=.107$, 95%CI=[-.032, .322]).

Discussion

Relationship between stigma and attitudes toward seeking help

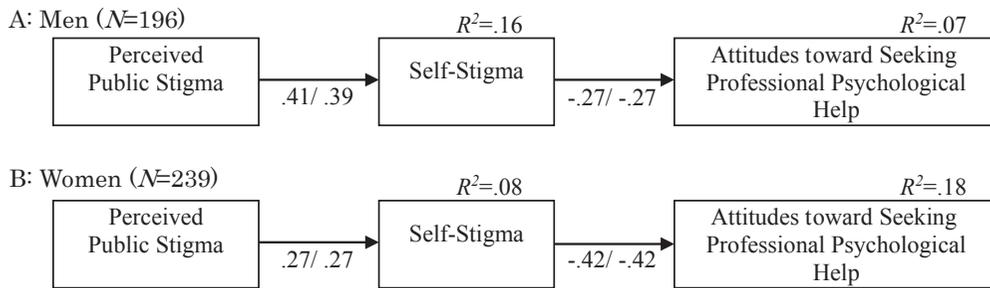
In this study, perceived public stigma was positively correlated with self-stigma, and self-stigma was negatively correlated with attitudes toward seeking professional help for both men and women. This is consistent with the Vogel et al. (2007) model, and supports the generalizability of their findings to Japan. In Japanese culture, meeting the expectations of others leads to actualization of the ideal-self; therefore, Japanese individuals tend to direct attention toward their weaknesses and shortcomings

Table 4. Means, standard deviations, ranges and correlations between variables

Variable	<i>M (SD)</i>			Range	1	2	3
	Total	Men	Women				
1. Attitudes	2.40 (.39)	2.38 (.42)	2.42 (.37)	1-4	-		
2. Public stigma	2.82 (.87)	2.64 (.89)	2.97 (.83)	1-5	-.07	-	
3. Self-stigma	2.61 (.60)	2.63 (.64)	2.60 (.57)	1-5	-.35***	.32***	-

Note. Total: $N=435$; Men: $N=196$; Women: $N=239$. Attitudes=Attitudes toward Seeking Professional Psychological Help: A Shortened Form; Public stigma=Stigma Scale for Receiving Psychological Help; Self-stigma=Self-Stigma of Seeking Help Scale.

*** $p<.001$



$\chi^2=.404$, $df=2$, $p=.817$, CFI=1.00, RMSEA=.000.

Note. Path coefficients are all statistically significant at the .001 level. Unstandardized path coefficients are presented on the left of the slash. Standardized path coefficients are presented on the right of the slash. Description of error variables is omitted.

Figure 1. Results of the multi-group analysis

because they have a conspicuous tendency towards self-criticism where self-improving motivation triggers self assessment and complements what they lack (Takata, 2004). Japanese university students' negative attitudes toward seeking professional help may be facilitated by internalizing public stigma associated with seeking professional help, not by merely perceiving it.

Correlational analysis revealed no association between perceived public stigma and help-seeking attitudes. This is inconsistent with previous studies that showed a negative relationship (e.g., Komiya et al., 2000; Vogel et al., 2007). One possible explanation for this difference is that there are other factors that need to be considered when this relationship is examined. Aikawa (1989) suggested that help-seeking decisions are determined by the balance between help-seeking benefits and costs; people seek help when help-seeking benefits exceed help-seeking costs, while people do not seek help when help-seeking costs exceed help-seeking benefits. Therefore, individuals who perceive more help-seeking benefits may have positive attitudes toward seeking professional help

even when they perceive public stigma. Conversely, individuals who perceive few help-seeking benefits may have negative attitudes when they perceive public stigma. Focusing on the balance between benefits and costs in the relationship between perceived public stigma and help-seeking attitudes is worthy of further investigation. Another possibility is that there are other factors that have stronger associations with attitudes toward seeking professional help than perceived public stigma. Previous studies reported that university students' help-seeking preferences were positively related to 1) the perceived expectations of a friend, family member, or university professor regarding the use of counseling services (Kimura & Mizuno, 2008), and 2) the help-seeking experiences of close acquaintances (Kamiyama, 2005). These findings suggest that attitudes toward seeking professional help are more strongly associated with close acquaintances than the public in general. However, further investigation is needed.

Sex differences

In this study, no sex difference was

found for help-seeking attitudes regarding professional help. This is consistent with some previous studies (e.g., Kimura & Mizuno, 2008), but inconsistent with other studies that found that women had more positive help-seeking attitudes than men (e.g., Fischer & Farina, 1995). Sex differences in help-seeking attitudes have been explained by traditional male gender roles (e.g., Addis & Mahalik, 2003). In other words, men had more negative help-seeking attitudes than women because help-seeking was against the traditional male gender role. Therefore, it is possible that the inconsistencies between previous findings can be explained by differences in traditional gender roles between participants. Komiya et al. (2000) showed that men perceived more public stigma than women. In the present study, however, women perceived more public stigma than men. This may be a cultural difference. Harada and Izumo (2008) suggested that in Japan, female university students have a stronger need for not being rejected by others than male students. Hence, in Japan, women might be more sensitive to the negative attitudes of others than men. There was also no sex difference in self-stigma. This is inconsistent with Vogel et al. (2006), but consistent with Miyaji (2010). Vogel et al. (2006) suggested that men experienced greater self-stigma because of the male gender role, but the results of this study suggest that the influence of the gender roles is not salient in Japan.

Implications and limitations

The results of this study offer potential directions for practice and future help-seeking studies. These findings suggest that in order to reduce psychological barriers to seeking help when students perceive public stigma, it would be beneficial to

reduce self-stigma by informing them that having psychological problems and seeking professional help is not a weakness on the part of the individual. Moreover, disposing of perceptions of public stigma is an important preventative measure against self-stigma. Therefore, parents and teachers should continue to show the benefits of counseling and positive attitudes toward seeking professional help from childhood onwards.

The current study has several limitations. First, scales used in this study were translated, and their validity in Japan was not fully established. Moreover, few Japanese researchers have examined stigma associated with seeking professional help. It would be worthwhile to examine this stigma qualitatively as well as quantitatively in order to better understand stigma in Japan. Second, the scale measuring perceived public stigma did not include reverse-items; participants may have answered desirably and it is possible that perceived public stigma was not adequately measured. It might be important to use a scale with reverse-items. Third, prior experience was not taken into account in this study. For example, Phillips and Murrell (1994) reported that stressful experiences are related to help-seeking. Moreover, Mizuno and Ishikuma (2000) showed that previous help-seeking was positively associated with help-seeking preferences. The significance of help-seeking variables may vary according to participants' prior experiences. Therefore, it is important for future research to consider participants' experiences when examining the relationship between help-seeking and various variables.

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