

Mental Health Stigma among International University Students in Malaysia

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Abstract

This study explored the effects of public stigma and self-stigma on psychological help-seeking attitudes among international university students in Malaysia, guided by the Theory of Planned Behaviour (TPB). A quantitative research design was adopted, and 250 participants were selected using a simple random sampling method from an international university in Malaysia, following ethics approval. Three validated instruments were used: the Perceptions of Stigmatization by Others for Seeking Help (PSOSH), the Self-Stigma of Seeking Help (SSOSH), and the Attitudes Toward Seeking Professional Psychological Help – Short Form (ATSPPH-SF). The findings revealed that self-stigma significantly and negatively accounted for 6% of the variance in students' psychological help-seeking attitudes, 2 % of the variance in openness to seeking help, and 7 % of the variance in the perceived value of seeking help. Conversely, public stigma did not directly affect help-seeking attitudes, though a significant positive correlation between public stigma and self-stigma suggests an indirect effect through the internalization of stigma. These results highlight the critical role of self-stigma in shaping help-seeking behaviour and underscore the need for culturally sensitive mental health initiatives that address internalized stigma among international students from individualistic cultures in Malaysian universities.

Keywords: Self-Stigma, Public Stigma, Psychological Help-Seeking Attitudes, International University Students

Introduction

Studying at a foreign university is a dream for many students, despite the numerous challenges they may face, such as adapting to a new academic and cultural environment. In Malaysia, for instance, students from various countries take the opportunity to enrol in both public and private universities. As of 2024, approximately 104,315 international students are enrolled in these institutions (Malay Mail, 2024). While studying abroad presents opportunities for academic and personal growth, these students often encounter significant adjustment challenges, including loneliness and homesickness (Zheng et al., 2023). The

struggle to acclimate to a new environment encompasses essential aspects of daily life such as food, climate, accommodation, language barriers, and social integration. Additionally, cultural differences shape values and beliefs that influence perception and decision-making, often leading to psychological distress (Gulraihan & Sandaran, 2018).

Mental health issues among university students have become a growing global concern, frequently highlighted in media discussions due to the immense pressures students face (Mofatteh, 2020). Beyond adjustment difficulties, university students experience a critical transition from adolescence to adulthood, requiring them to manage financial independence, relationships, time, academic workload, and basic necessities (Mofatteh, 2020). The inability to cope with these responsibilities effectively can contribute to stress, anxiety, and depression. In severe cases, unmanaged mental health issues can escalate to suicidal tendencies, emphasizing the need for mental health support (Harmer et al., 2024). Despite experiencing these mental health challenges, international university students in Malaysia report low engagement with professional psychological services (Ismail & Kahwa, 2020). Various barriers contribute to this reluctance, including trust issues, financial constraints, stigma, and a preference for informal support networks (Ismail & Kahwa, 2020). Trust plays a crucial role in effective psychological services, yet many students fear breaches of confidentiality, leading them to worry about being perceived as weak or incompetent (Kafka et al., 2024). Without guaranteed privacy, students hesitate to seek professional help. Financial limitations further hinder psychological help-seeking, as therapy sessions are often seen as an unnecessary expense, with students prioritizing essential costs over mental health services (Mirawati et al., 2023).

Among the most significant barriers to seeking psychological help is stigma, which acts as a powerful deterrent, discouraging individuals from accessing the support they need (Ahad et al., 2023). Research indicates a negative correlation between stigma and mental health literacy—when stigma is high, awareness and understanding of mental health issues tend to be low (Yang et al., 2024). Negative perceptions surrounding psychological help often overshadow its potential benefits, leading students to avoid available support services, even those provided within university campuses (Soo et al., 2024). Addressing stigma is therefore essential to fostering an environment where international students feel encouraged to seek psychological assistance without fear of judgment. International students face unique challenges that contribute to mental health difficulties, yet stigma and other barriers continue to impede their willingness to seek psychological help. By fostering trust, ensuring confidentiality, enhancing affordability, and increasing mental health literacy, universities can improve access to psychological support (Kafka et al., 2024).

Literature Review

Public stigma and Psychological Help-Seeking Attitudes

Public stigma, as defined by Corrigan and Rao (2012), refers to socially endorsed negative attitudes, stereotypes, and prejudices held against certain groups, which can hinder their opportunities and overall well-being. This stigma is particularly significant in shaping the self-perception of individuals seeking psychological help (Corrigan & Rao, 2012). In multicultural societies like Malaysia, where unity and social cohesion are highly valued, closely knit communities often influence individual choices and behaviours (Lino & Hashim, 2020). Within such environments, people may fear being labelled as different or deviating from societal

norms, leading to reluctance in seeking psychological help. In collectivistic societies, mental health discussions remain taboo (Ahad et al., 2023), and for international students, this stigma is further exacerbated by cultural differences and unfamiliar social expectations. Public stigma can have profound consequences for international students, contributing to feelings of exclusion, discrimination, and difficulty in adapting to a new culture (Takeuchi & Sakagami, 2018). These challenges not only affect their academic performance but also their psychological well-being. As a result, many international students shy away from professional mental health services (Oduwaye et al., 2023). The governance of mental health in their home countries further reinforces these attitudes; in some regions, poor mental health policies and low mental health literacy perpetuate misconceptions about psychotherapy, portraying it as shameful or ineffective rather than beneficial (Ahad et al., 2023). When individuals lack awareness about mental health, they may fail to recognize their own symptoms and instead internalize negative societal perceptions, making them less likely to seek help (Corrigan & Rao, 2012).

A study by Loong et al. (2024) found that public stigma significantly predicted low help-seeking behaviour among Malaysian university students. This suggests that in societies where mental health stigma is prevalent, students are less inclined to seek professional assistance. Similarly, Kim and Yon (2019) observed a strong negative relationship between perceived social stigma and help-seeking attitudes, emphasizing that individuals who perceive higher levels of social stigma are less likely to engage with psychological services. These findings align with the broader understanding that behaviour is closely linked to cognitive processes. When individuals internalize societal messages that mental illness is unacceptable, their willingness to seek help diminishes (Subu et al., 2021). Among international university students in Malaysia, Ismail and Kahwa (2020) reported that only one in ten students had sought psychological help from available university support services. The study further revealed that help-seeking behaviour from both on-campus and off-campus services ranged from 15% to one-third of students. However, only 3.77% had accessed university mental health services, and 8.6% were unaware that such services existed. This suggests that public stigma not only discourages help-seeking but also contributes to a lack of awareness, potentially due to students avoiding mental health discussions altogether. Cultural influences play a critical role in shaping these attitudes, reinforcing the notion that mental health issues remain stigmatized within certain communities (Ismail & Kahwa, 2020).

Contrastingly, studies by Soo et al. (2024) and Eui and Tan (2019) found that Malaysian university students generally do not attribute mental health issues to religious factors. However, the strong beliefs upheld by older generations may instil self-stigma, further deterring students from seeking professional psychological help (Soo et al., 2024). These findings suggest that while public stigma may not always be a direct predictor of low psychological help-seeking attitudes, it plays an indirect role by shaping negative perceptions and reinforcing self-stigma. Ultimately, public stigma remains a significant barrier to psychological help-seeking among international students in Malaysia. The fear of societal judgment, coupled with low mental health literacy and cultural influences, prevents students from accessing essential support (Ahad et al., 2023). Addressing public stigma through mental health awareness campaigns, culturally sensitive counselling approaches, and increased accessibility to psychological services is crucial in fostering a supportive environment. By

tackling stigma, universities can encourage international students to prioritize their mental well-being without fear of discrimination or exclusion.

Self-Stigma And Psychological Help-Seeking Attitudes

Self-stigma, in the context of psychological help-seeking, refers to an individual's internalized perception that seeking mental health support is socially unacceptable (Eui & Tan, 2019). Eisenberg et al. (2007) described self-stigma as occurring when individuals categorize themselves as part of a stigmatized group, adopting negative societal stereotypes and prejudices about mental health into their own self-concept. This internalization can lead individuals to perceive themselves as weak or incompetent for requiring psychological assistance, ultimately deterring them from seeking help. Cheng et al. (2018) further noted that self-stigma poses a direct threat to personal self-worth, as individuals may fear that seeking psychological support could result in social rejection or judgment.

Self-stigma is largely driven by the internalization of public stigma. When negative societal attitudes toward mental health are deeply ingrained, individuals absorb and apply these attitudes to themselves, leading to a diminished sense of self-esteem and an increased reluctance to seek psychological help. Eisenberg et al. (2007) found that among university students, self-stigma was a significant barrier to professional mental health services, with many students experiencing depression but avoiding therapy due to fears of social judgment. Research has consistently shown that individuals who internalize stigma experience heightened shame, self-blame, and perceived social disapproval, all of which contribute to their unwillingness to access professional support (Spencer, 2023).

In Malaysia, several studies have demonstrated the detrimental effects of self-stigma on help-seeking attitudes. Eui and Tan (2019) and Misran et al. (2023) found that self-stigma significantly and negatively predicted psychological help-seeking behaviours among Malaysian university students. Their research indicated that individuals who perceived therapy as a personal failure experienced reduced self-esteem, reinforcing avoidance behaviours. This phenomenon aligns with self-perception theory (Bem, 1972), which suggests that individuals develop their attitudes and beliefs based on their observations of their own behaviours within a social context. When society portrays seeking psychological help as a weakness, individuals internalize this belief, leading to further declines in self-worth and the avoidance of professional support (Karamanoli, 2024).

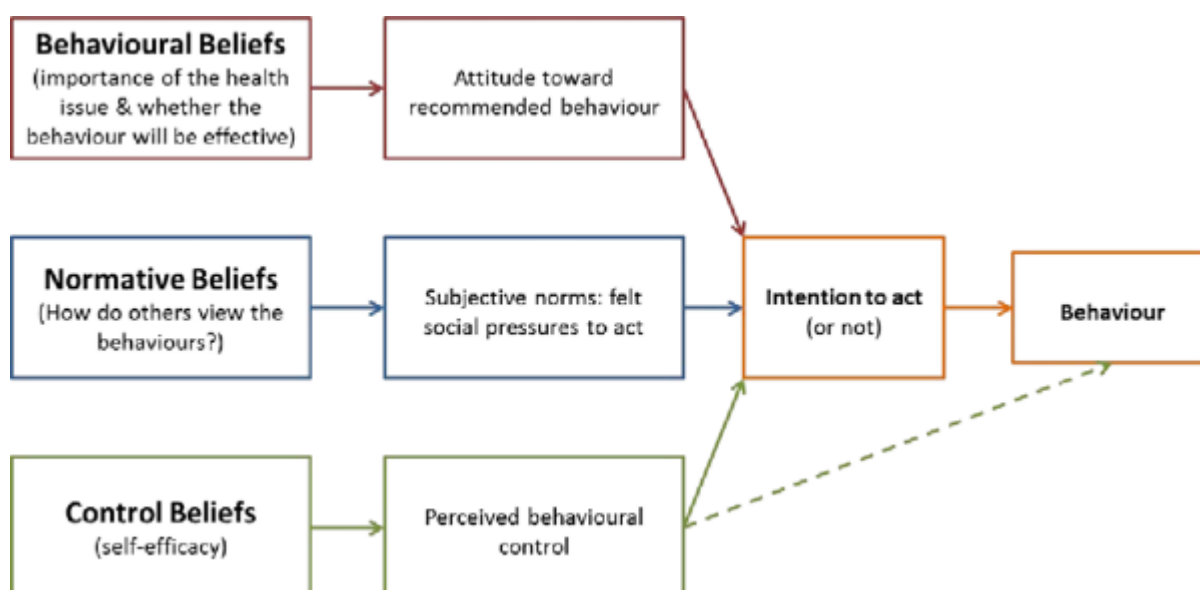
Self-stigma remains a substantial barrier to psychological help-seeking among international students in Malaysia (Ching et al., 2024). The fear of societal judgment, coupled with internalized negative beliefs and low mental health literacy, prevents students from accessing the support they need. Addressing self-stigma through targeted mental health awareness initiatives, culturally sensitive counselling approaches, and improved accessibility to psychological services is essential in fostering a supportive academic environment (Waqas et al., 2020). By actively combating self-stigma, universities can encourage international students to prioritize their mental well-being without fear of discrimination, social exclusion, or diminished self-worth.

Building upon the past findings, the objectives of this study are;

1. To investigate the effects of public stigma on psychological help-seeking attitudes among international university students in Malaysia.
2. To investigate the effects of self-stigma on psychological help-seeking attitudes among international university students in Malaysia.
3. To investigate the relationship between self-stigma and public stigma.

Theoretical Framework

The Theory of Planned Behaviour (TPB) by Ajzen (1991) explains psychological help-seeking among international university students through three key factors: attitudes, subjective norms, and perceived behavioural control. Public and self-stigma strongly shape attitudes toward help-seeking. Public stigma, defined as societal negative stereotypes, often portrays seeking help as a sign of weakness. When internalized, this turns into self-stigma, leading students to perceive therapy as a personal failure, reducing their willingness to seek help. Subjective norms, or social expectations, also impact help-seeking behaviours. In collectivist cultures, mental health struggles may be viewed as shameful, discouraging students from reaching out due to fear of judgment. This reinforces self-stigma, making students less likely to access professional support despite recognizing the need. Perceived behavioural control refers to an individual's confidence in seeking help. Financial constraints, lack of mental health awareness, and unfamiliarity with services hinder students from accessing psychological support. Stigma exacerbates this, creating a psychological barrier that makes them feel undeserving of help.



Note. Adapted from Rathbone (2014).

Figure 1. Theory of Planned Behaviour

Conceptual Framework

In this study, attitudes are defined as Openness to Seek Professional Help and Value and Need in Seeking Professional Help, subjective norms refer to public stigma, and perceived behavioural control is represented by self-stigma. It is hypothesized that the psychological help-seeking attitudes of international university students in Malaysia are impacted by public stigma and self-stigma.

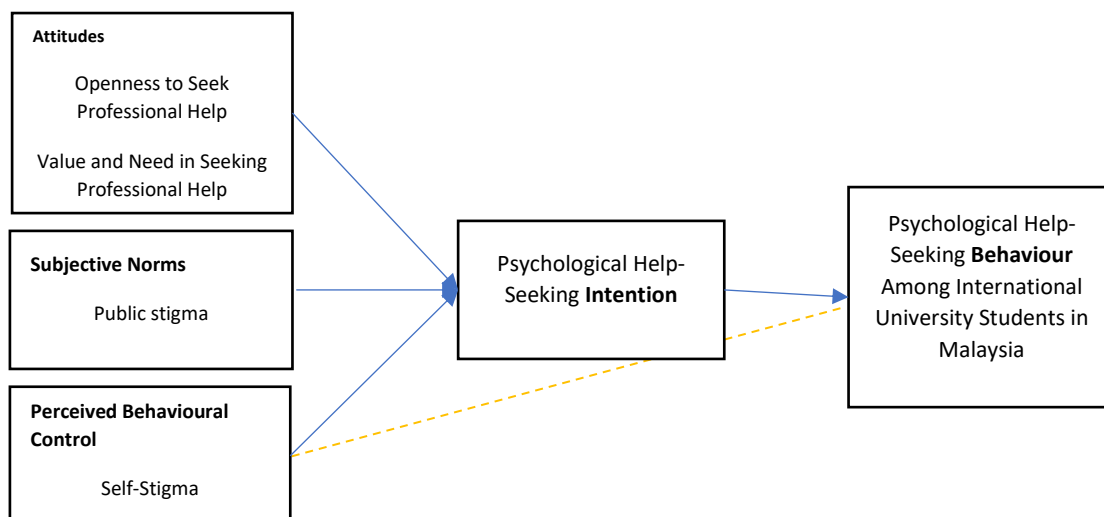


Figure 2. Variables of this study.

Based on the literature reviews and theoretical framework (Figure 1), the following hypotheses were formulated:

Hypothesis 1: There is a significant impact of public stigma on psychological help-seeking attitudes among international university students in Malaysia.

Hypothesis 2: There is a significant impact of self-stigma on psychological help-seeking attitudes among international university students in Malaysia.

Hypothesis 3: There is a significant relationship between self-stigma and public stigma.

Methodology

This study employed a quantitative approach, utilizing a simple random sampling method to select participants. An international university in Malaysia was approached for participant recruitment, and after receiving ethics approval, participants were selected. A total of 250 university students participated in the study. The origin countries of the participants are Australia (17.1%), the United States of America (18.2%), United Kingdom (9.7%), Poland (37.9%), Canada (17.1%), representing the Individualistic culture. All participants indicated speaking English fluently. The majority of participants (64.5%) were aged between 18 and 22 years old. They were enrolled in various academic programs, including computer science, arts, science and technology, business, tourism management, humanities and social sciences, and medicine. Notably, 20.5% of participants were pursuing degrees in engineering, followed by 19.0% in religious studies.

Instruments

Perceptions of Stigmatisation by Others for Seeking Psychological Help (PSOSH)

The PSOSH scale was developed by Vogel et al. (2009) who have conducted research in the help-seeking and stigma area for more than five years and are licensed counselling psychologists who have worked with clients with stigmatisation and fears of how others view them for seeking psychological help. There are five items in this scale, to reflect on how the stigma associated with seeking treatment influences the social reaction of others. Types of items reflect on behavioural, cognitive and emotions. For example, behavioural items are like 'React negatively to you, emotional items, 'see you as seriously disturbed and cognitive items, 'think you posed a risk to others'. Items are scored on five-point Likert scale ranging from 1

(not at all) to 5 (a great deal) and higher scores indicated greater perceived stigma from those the individual interacts with. Vogel et al. (2009) found that all items are useful in measuring other's stigma in seeking psychological help but believed that long measures are difficult to incorporate into survey research. They deemed PSOSH as an adequate measure in terms of reliability, factors structure, and concurrent validity. Ponterotto and Ruckdeschel (2007) also deemed that the scale was an excellent measure. In this study, the reliability of the PSOSH scale was $\alpha=0.90$ while the validity was 0.87, $p < 0.00$.

Self-Stigma of Seeking Help (SSOSH)

SSOSH was developed by Vogel et al. (2006). The ten-item scale assesses threats to one's self-evaluation for seeking psychological help. Items are rated on a five-point Likert scale from 1 (strongly disagree) to 5 (strongly agree), with five reversed scored items. A sample item is 'I would feel inadequate if I went to a therapist for psychological help'. This scale predicts attitudes and willingness to seek counselling. The internal consistencies range from .86 to .90 in college samples (Vogel et al., 2006). In U.S. college samples, estimates of the internal consistency ranged from .86 to .90 (Vogel et al., 2006). SSOSH has also been previously used in Australia and translated versions of the SSOSH have been used in Brazil, Taiwan, and Turkey. In these international samples, the translated SSOSH scores have reported internal consistency estimates between .73 and .88 (Baptista & Zanon, 2017; Griffiths et al., 2014; Topkaya, 2011; Vogel et al., 2013). In this study, the reliability values for SSOSH were $\alpha= 0.61$, while the validity was 0.67, $p < 0.00$.

Attitudes Toward Seeking Professional Psychological Help (ATSPPH-SF)

The socio-cultural appropriateness of the Attitudes Toward Seeking Professional Psychological Help Scale – Short Form (ATSPPH-SF) is supported by its widespread use across diverse cultural settings, its strong psychometric properties, and its ability to capture key dimensions of psychological help-seeking attitudes. Developed by Fischer and Farina (1995), the ATSPPH-SF consists of ten items that assess an individual's openness to seeking psychological help and their perceived value in doing so. Participants respond using a four-point Likert scale (0 = disagree, 1 = probably disagree, 2 = probably agree, and 3 = agree), with reverse scoring applied to items #2, #4, #8, #9, and #10. Higher total scores indicate more positive attitudes toward seeking professional psychological help, with a cut-off score of 20 or higher suggesting a generally favourable attitude. Elhai et al. (2008) identified two primary constructs within the ATSPPH-SF: openness to seeking professional psychological help (items #1, #3, #5, #6, and #7) and the perceived value and need for seeking professional help (items #2, #4, #8, #9, and #10). These constructs have been consistently replicated in studies across different cultural groups. Studies examining the cross-cultural reliability of the ATSPPH-SF have reported strong Cronbach's alpha values. For instance, Palmer (2009) found a Cronbach's alpha of 0.87 among Jamaican Americans, which was comparable to the reliability found in the original standardized population (Fischer & Turner, 1970). In this study, the reliability values for ATSPPH-SF were $\alpha = 0.61$, while the validity (R-values) were 0.70 and 0.84 for the openness to seeking professional help and value and need in seeking professional help constructs.

Results

Table 1

The Effects Of Public Stigma On Psychological Help-Seeking Attitudes (Openness To Seek Professional Help, Value And Need In Seeking Professional Help).

Hypothesis	Regression Weights	Beta Coefficient	R Square	F	p-value
H1	Public stigma – Psychological Help-Seeking Attitudes	0.03	0.00	1.04	0.30
	Public stigma – Openness to Seek professional Help	0.03	0.00	0.61	0.43
	Public stigma – Value and Need in Seeking Professional Help	0.03	0.00	0.89	0.34

Hypothesis 1 tests if public stigma carries a significant impact on psychological help-seeking attitudes. The dependent variable psychological help-seeking attitudes was regressed on predicting variable public stigma to test the hypothesis H1. As shown in Table 1, public stigma did not significantly predict psychological help-seeking attitudes, $F(1,249) = 1.04$, $p > 0.05$, which indicates that public stigma does not play a significant role in shaping psychological help-seeking attitudes ($b = 0.03$, $p > 0.05$). Additionally, the impact of public stigma on openness to seek professional help was tested. Results depict that public stigma did not significantly predict openness to seek professional help, $F(1,249) = 0.61$, $p > 0.05$. Similarly, results also show that public stigma does not significantly impact value and need in seeking professional help, $F(1,249) = 0.89$, $p > 0.05$, which indicates that public stigma is not a significant predictor in determining the value and need for seeking professional help among international university students ($b = 0.03$, $p > 0.00$). Hence, H1 is not supported.

Table 2

The Effects Of Self-Stigma On Psychological Help-Seeking Attitudes (Openness To Seek Professional Help, Value And Need In Seeking Professional Help).

Hypothesis	Regression Weights	Beta Coefficient	R Square	F	p-value
H2	Self-stigma – Psychological Help-Seeking Attitudes	-0.24	0.06	16.43	<0.00
	Self-stigma – Openness to Seek professional Help	-0.16	0.02	6.58	0.01
	Self-stigma – Value and Need in Seeking Professional Help	-0.26	0.07	19.38	<0.00

Hypothesis 2 tests if self-stigma significantly impacts psychological help-seeking attitudes. The dependent variable psychological help-seeking attitudes was regressed on predicting variable self-stigma to test the hypothesis H2. As shown in Table 2, self-stigma significantly predicted psychological help-seeking attitudes, $F(1,249) = 16.43$, $p < 0.05$, which indicates that self-stigma can play a significant, negative role in shaping psychological help-seeking attitudes ($b = -0.24$, $p < 0.05$). These results clearly direct the negative affect of self-stigma. Moreover, the R square = 0.06 depicts that the model explains 6% of the variance in psychological help-seeking

attitudes. Additionally, the impact of self-stigma on openness to seek professional help was tested. Results depict that self-stigma significantly and negatively predict openness to seek professional help, $F(1,249) = 6.58$, $p < 0.05$. Additionally, self-stigma also negatively and significantly predicted value and need in seeking professional help, $F(1,249) = 19.38$, $p < 0.05$, which indicates that self-stigma can play a significant role in determining the value and need for seeking professional help among international university students ($b = -0.26$, $p < 0.05$). Hence, H2 is supported.

Table 3

The correlation between Self-stigma and Public Stigma

Hypothesis	Variables	Self-stigma	Public stigma
H3	Self-stigma	1	0.12*
	Public Stigma	0.12*	1

*Correlation is significant at the level 0.05 (2-tailed).

Pearson product correlation of self-stigma and public stigma was found to be positive and statistically significant ($r = .12$, $p < 0.05$). Hence, H3 is supported. This shows that an increase in public stigma in psychological help-seeking attitudes would lead to a higher self-stigma among international university students.

Discussion

Public stigma and PHSA

The findings of this study revealed that public stigma did not significantly influence psychological help-seeking attitudes among international university students in Malaysia. Specifically, public stigma was not found to have a significant effect on participants' openness to seeking professional help, nor on their perceived value and need for such help. This suggests that international students in the Malaysian context are not deterred by societal stigma when it comes to seeking psychological assistance. These results can be interpreted through the lens of the Theory of Planned Behaviour (TPB), which posits that behaviour is shaped by three key components: attitudes, subjective norms, and perceived behavioural control. Applied to this context, the lack of influence from public stigma may indicate that the participants held positive attitudes toward psychological help-seeking, were surrounded by supportive social environments (subjective norms), and possessed a strong sense of agency or confidence in their ability to seek help (perceived behavioural control).

For instance, international students who have been exposed to mental health education or awareness programs in their home countries—particularly those from Western, individualistic cultures—may view help-seeking as a constructive and acceptable approach to managing psychological distress, rather than as a taboo (Gopalkrishnan, 2018). Additionally, they may be supported by friends, family, or university personnel who normalize conversations about mental health. In such settings, seeking professional help is more likely to be seen as a proactive and responsible choice, consistent with values such as personal autonomy and self-care (Hammoudi Halat et al., 2023). This supportive combination of personal beliefs and social encouragement may reduce the relevance or impact of public stigma, enabling students to make decisions based on personal need rather than fear of societal judgment. Thus, even if public stigma exists in the broader environment, it may not hold enough personal relevance to deter help-seeking behaviour among these individuals.

However, these findings stand in contrast to previous research by Loong et al. (2024), who found that public stigma negatively predicted help-seeking behaviour among Malaysian university students. Loong et al. (2024) attributed this to the influence of traditional Asian cultural values, which tend to emphasize social harmony, familial reputation, and sensitivity to public perception. In such collectivistic cultures, mental health struggles may be perceived as a source of shame, leading individuals to avoid seeking help in order to protect their family's or community's image (Ahad et al., 2023). The discrepancy between the current study and that of Loong et al. (2024) highlights the critical role of cultural orientation—specifically, the contrast between collectivism and individualism—in shaping the impact of public stigma on help-seeking attitudes. In collectivist cultures, where group cohesion and social evaluation are prioritized, public stigma can serve as a powerful deterrent. In contrast, individualistic cultures promote self-determination and personal responsibility, which may buffer individuals from external judgments and allow them to prioritize their own mental well-being (Cheng et al., 2020).

Therefore, these findings underscore the importance of considering cultural context when examining the relationship between stigma and psychological help-seeking. Among international students from individualistic societies, public stigma may be less influential due to cultural values that support personal choice and mental health autonomy (Yamawaki & Green, 2020). Consequently, interventions designed to promote help-seeking behaviour must be culturally tailored, recognizing that the influence of stigma may differ significantly depending on an individual's cultural background.

Self-Stigma and Psychological Help-Seeking Attitudes

The findings of this study indicate that self-stigma plays a significant and negative role in shaping psychological help-seeking attitudes among international students. Specifically, self-stigma was found to negatively impact not only the general attitude toward seeking psychological help but also two critical subcomponents: openness to seeking professional help and the perceived value and need for such help. These results suggest that international university students in Malaysia may internalize negative beliefs about mental health, which in turn reduces their willingness to seek support, even when facing emotional or psychological crises. This internalized stigma appears to act as a psychological barrier, inhibiting openness, diminishing perceived utility, and ultimately deterring individuals from accessing necessary mental health resources. The cultural background of the participants may provide additional insight into these findings. Many of the students in this study come from Western, individualistic societies, where personal autonomy, self-reliance, and individual achievement are strongly emphasized (Humphrey & Bliuc, 2022). In such cultural contexts, seeking psychological help can be perceived as a sign of personal weakness or failure, which may exacerbate self-stigmatizing attitudes (Ahad et al., 2023). The high value placed on independence may lead individuals to internalize the belief that needing help reflects incompetence or a lack of resilience (Ran et al., 2021). Consequently, these cultural values can discourage help-seeking behaviour, resulting in the prolongation of mental health issues and the potential for more severe psychological distress over time.

Previous research supports this cultural explanation, noting that individuals from individualistic cultures tend to be more susceptible to internalizing mental health problems and are generally less inclined to seek professional assistance compared to individuals from

collectivist cultures (Yamawaki & Green, 2020). In collectivist societies, where interdependence and communal support are emphasized, seeking help is more socially acceptable and may even be encouraged as a way of maintaining group harmony and well-being (Zheng et al., 2021). From the perspective of the Theory of Planned Behaviour (TPB), the influence of self-stigma on psychological help-seeking can be interpreted as a disruption between intention and behaviour. According to TPB, behaviour is shaped by three primary components: attitude toward the behaviour, subjective norms, and perceived behavioural control. In the context of help-seeking, a student may hold positive attitudes toward accessing mental health services—believing that psychological support is beneficial and effective. They may also claim not to be directly influenced by the opinions of others (subjective norm), especially in an environment that outwardly promotes mental health awareness.

However, self-stigma emerges when societal attitudes toward mental illness are internalized, leading individuals to perceive help-seeking as a personal weakness or failure. This internalization conflicts with their initial intention to seek support. The resulting cognitive dissonance forces individuals to regulate their behaviour in a way that preserves their self-image. In doing so, they may suppress the desire to seek help in order to avoid feelings of shame, inadequacy, or incompetence. Thus, self-stigma becomes a barrier that overrides otherwise positive intentions, even in supportive environments. This interpretation is further supported by the findings of Ismail and Kahwa (2020), who reported that 78.6% of international students in their study were unaware of on-campus mental health support services, contributing to the underutilization of available resources. While the lack of awareness was a practical barrier, their study also highlighted the enduring stigma surrounding mental health in some students' countries of origin. This suggests that international students may carry pre-existing stigmatized views into new academic environments, which they internalize and act upon, even when local cultural norms are more accepting. In such cases, the perceived behavioural control component of TPB is also affected. Students may perceive psychological help-seeking as something that threatens their self-efficacy or social identity. Even if resources are available and attitudes are favourable, students may not feel psychologically equipped or socially "permitted" to access those services, due to internalized norms from their home cultures.

These findings underscore the complexity of help-seeking behaviour among international students. Interventions aimed at improving help-seeking attitudes must not only address surface-level access and awareness but also target deep-seated beliefs about mental health that students bring with them from their cultural backgrounds (Ahad et al., 2023). Education campaigns, culturally sensitive counselling, and stigma-reduction initiatives tailored for international students could be instrumental in bridging the gap between intention and behaviour. As a result, these students may turn to alternative self-managed coping strategies such as journaling, meditation, or the use of mental health mobile applications (Nagar et al., 2023). These methods, while potentially helpful, may be preferred because they allow individuals to address their distress privately, thus avoiding the perceived threat to self-image or identity that could come from engaging with professional services. This coping pattern underscores the importance placed on maintaining self-esteem among individuals from individualistic cultures (Nagar et al., 2023). Interestingly, self-esteem may also act as a protective factor. Individuals with higher levels of self-esteem may be more resilient to the detrimental effects of stigma and, consequently, more open to seeking

psychological help (Liu et al., 2021). In contrast, those with lower self-esteem may be more vulnerable to self-stigmatization and more likely to avoid formal mental health support, perpetuating a cycle of distress and avoidance. Overall, these findings emphasize the nuanced role that self-stigma plays in the help-seeking behaviours of international students, particularly those from individualistic cultures. Interventions aiming to improve mental health outcomes for this population must therefore address both cultural factors and self-perceptions, promoting help-seeking as a strength rather than a weakness.

Relationship between Self-stigma and Public Stigma

The findings of this study revealed a significant relationship between public stigma and self-stigma, suggesting that societal attitudes toward mental health can influence the way individuals perceive themselves when experiencing psychological distress. Public stigma refers to the negative stereotypes, prejudices, and discriminatory behaviours directed toward individuals with mental health issues by the broader community (Corrigan & Watson, 2002). When individuals become aware of these negative societal beliefs, they may begin to internalize them, resulting in self-stigma—where they adopt these negative views and apply them to themselves (Corrigan & Rao, 2012). This internalization process is critical because it can lead individuals to feel shame, embarrassment, or a diminished sense of self-worth, which in turn can act as a barrier to seeking psychological help. Although the direct effect of public stigma on help-seeking attitudes was not statistically significant in this study, the presence of a strong link between public stigma and self-stigma indicates a possible indirect pathway. Specifically, public stigma may not deter help-seeking directly, but it may contribute to increased levels of self-stigma, which has been shown in previous literature to have a robust negative effect on the willingness to seek psychological support.

Therefore, these findings highlight the complex and potentially mediated relationship between societal attitudes and individual behaviour. It is plausible that public stigma exerts its influence through self-stigma, suggesting that interventions aiming to improve psychological help-seeking attitudes among students should not only address individual beliefs but also target the broader cultural narratives and social norms surrounding mental health (Waqas et al., 2020). Reducing public stigma could consequently diminish self-stigmatizing beliefs, thereby facilitating a more supportive environment for individuals to access mental health services without fear of judgment or shame.

Conclusions

This study highlights that self-stigma significantly impacts psychological help-seeking attitudes among international university students in Malaysia. While public stigma did not show a direct effect on help-seeking attitudes, the findings revealed a significant correlation between public stigma and self-stigma, suggesting that public stigma may still exert an indirect influence on help-seeking behaviour when internalized. This indicates that although students may not be overtly influenced by societal stigma, its internalization as self-stigma can nonetheless hinder their willingness to seek professional psychological support. However, the study is subject to certain limitations. The sample was drawn exclusively from a single international university in Malaysia, and the participants were purposefully selected from Western backgrounds, excluding both Malaysian students and international students from non-Western countries. As a result, the findings may not be generalizable to the broader population of international university students in Malaysia, who may represent diverse

cultural orientations and experiences. Future research should consider adopting a more heterogeneous sample, incorporating participants from a variety of cultural and national backgrounds, to provide a more comprehensive understanding of how cultural values and stigma interact to shape psychological help-seeking attitudes across different student populations.

Contribution

This study provides a meaningful theoretical contribution by clarifying the distinct yet interconnected roles of public stigma and self-stigma in shaping psychological help-seeking attitudes among international university students in Malaysia. Although public stigma did not emerge as a direct predictor of help-seeking behaviour, its significant correlation with self-stigma indicates an indirect influence, whereby societal attitudes are internalized and subsequently affect behaviour. This finding supports and extends existing models of mental health stigma (Corrigan, 2004; Vogel et al., 2006), reinforcing the argument that self-stigma functions as a mediating mechanism between public stigma and behavioural outcomes. The study further enhances theoretical understanding by incorporating cultural dimensions—specifically, the impact of Western cultural orientations such as individualism, autonomy, and self-reliance—on how stigma is perceived and managed. Western students, who often value independence, may interpret help-seeking as a sign of weakness or personal failure, thus internalizing stigma more readily in contexts where seeking help may not align with their cultural norms (Ahad et al., 2023). This expands the cross-cultural applicability of stigma theory and emphasizes the need to consider cultural value systems in help-seeking models. Additionally, the study reaffirms the relevance of the Theory of Planned Behaviour (TPB) in the context of psychological help-seeking. TPB posits that behavioural intentions are influenced by attitudes, subjective norms, and perceived behavioural control (Ajzen, 1991). The findings here suggest that subjective norms shaped by internalized stigma, particularly among students navigating new cultural landscapes, may diminish the intention to seek help despite favourable personal attitudes. This aligns with previous research (Pheng et al., 2019) and highlights the necessity of integrating self-stigma and cultural adaptation into the TPB framework when applied to diverse student populations.

From a contextual standpoint, the study addresses an important gap in the literature by focusing on Western international students studying in Malaysia, a demographic that has received limited attention in mental health research. The unique sociocultural setting—a collectivist host culture interacting with individualist student backgrounds—offers a distinctive lens to examine how cross-cultural transitions impact mental health behaviours (Yakunina & Weigold, 2011). This contributes to a more globally inclusive understanding of help-seeking attitudes, especially as international student mobility continues to rise. The findings are particularly significant in highlighting self-stigma as a primary barrier to accessing mental health services within this group. As Pheng et al. (2019) emphasized, self-stigma is often more influential than public stigma in deterring individuals from seeking professional help. By identifying self-stigma as a key determinant in this specific context, the study strengthens calls to centre self-stigma within theoretical frameworks on help-seeking behaviour.

Practically, the study provides insights that are highly relevant to university administrators, counselling services, and policy makers. The clear impact of self-stigma

underscores the need for targeted interventions—such as self-stigma reduction programs, awareness campaigns, and culturally responsive peer support systems—that promote help-seeking as a constructive and normative behaviour. Initiatives that challenge public stigma may also be effective in reducing the likelihood of internalization. Furthermore, staff training and mental health education that take into account students' cultural backgrounds can create more supportive environments for international students (Cheng et al., 2020; Eisenberg et al., 2007).

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