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The Relationship Between Basic Psychological Needs and Mental Help-Seeking Attitude of State University Undergraduate Students

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Abstract:

Basic psychological needs—autonomy, competence, and relatedness—are foundational to well-being and may significantly influence help-seeking behaviors. This cross-sectional quantitative study examined the relationship between these needs and the mental help-seeking attitudes of 262 undergraduate students. Results indicated a significant but very weak positive correlation between autonomy and help-seeking attitude (*r* = .157, *p* = .010), suggesting that a greater sense of personal agency may slightly encourage openness to seeking support. No significant relationships were found for competence or relatedness.

Qualitative insights from a supplementary focus group further identified key barriers to help-seeking, including personal stigma, financial constraints, and a lack of awareness of available services. The findings underscore that while fostering autonomy may be beneficial, structural and attitudinal barriers play a more substantial role in shaping help-seeking intentions. This study provides practical implications for university administrators and mental health professionals to design targeted programs that address these multifaceted barriers, thereby improving students' access to and engagement with mental health support.

Keywords: **basic psychological needs, autonomy, competence, relatedness, mental help- seeking attitude.**

1.0 Introduction

Students need to be in a best mental health condition since they are in a stage of transitioning to enter adulthood. This enables them to function well and contribute to the society. Sometimes denial, lack of awareness, and unfamiliarity with mental health services in the campus cause students to put off getting treatment (Guillvier, Griffiths, and Christensen, 2010). This study proposes that the satisfaction of basic psychological needs can help in increasing mental help seeking attitude. While, students who feel that their basic psychological needs are ignored, they may be less likely to seek for mental help because of lack of autonomy, feelings of incompetence, and or social disconnection.

Basic psychological needs are psychological nutrient that is vital for an individual's growth, identity, and adjustment (Ryan & Deci 2017). In this framework, there are three formally identified needs—autonomy, competence, and relatedness (Deci & Ryan, 2000). It argues that meeting one's core psychological needs for relatedness, autonomy, and competence fosters the development of inner resources that promote resilience and overall wellbeing, whereas need frustration causes unpleasant feelings that make people more prone to vulnerability, defensiveness, and psychopathology (Ryan & Deci, 2000; Vansteenkiste & Ryan 2013). Many researches, some in meta- analyses (Ng et al. 2012; Slemp et al. 2018; Van den Broeck et al. 2016; Vasquez et al. 2016; Yu et al. 2018), has depicted that the basic psychological needs has a crucial role in wellness, adjustment, and development (Ryan & Deci 2017).

The student's mental health is one of the growing public health crises which includes but not limited to poor memory, attention, reduced attention span, inability to study, fatigue, economic strain, social injustice, and various form of loss due to COVID 19. These mental health difficulties significantly impact their general quality of life as they navigate through their academic, personal, and social relationships (Abrams, 2022). Ages 18- 25 years old are considered to be the peak years for the prevalence of substance use and mental health concern (Gogoi et al., 2022). A review conducted in England found that for over three years, 85 percent of the college students experienced mental health difficulties (Association of Colleges, 2017).

Despite the availability of mental health services in schools, a variety of factors such as attitude and sociodemographic status, can influence students' willingness to seek help which can lead to unmet needs, delays in seeking assistance, and gaps in treatment (Picco, et al., 2016, as cited in Topkaya, 2021). In one of the studies that examined the mental health services in Turkey, it consistently indicated that the there is a decreasing professional mental health services utilization among college students (Çebi & Demir, 2020, Topkaya, Şahin, et al., 2017, Topkaya, Vogel, et al., 2017, as cited in Topkaya, 2021).

There is limited research conducted in understanding the mental health situation in the higher education context considering that the higher education faces challenges on mental health. Understanding the role of basic psychological needs to mental health seeking attitude can provide insights into how educational institutions can foster student's well- being. While there are numerous studies conducted to explain the relevance of psychological needs in general, more research is required to focus on investigating specific context such as in the higher education of a developing country. Further, this aims to examine the relationship between the basic psychological context on the mental health seeking attitude to aid the creation of more effective and efficient treatment, programs, and resources in schools. The current study explores the significance of the satisfaction of the basic psychological needs—autonomy, competence, and satisfaction in fostering mental- help- seeking attitude among undergraduate students.

2.0 Methodology

2.1 Research Design

This study utilized a descriptive-correlational quantitative research design, with a focused group discussion to support quantitative data with qualitative insights. The descriptive research design was employed to evaluate and characterize the distribution and prevalence of basic psychological needs and mental help seeking attitude within a sample population at a single point of time (Wang & Cheng, 2020). Further, it utilized correlational research design, a non- experimental study that measures the statistical relationship between two variables. This statistical method was used to evaluate the strength and direction of the relationship between basic psychological need and mental help- seeking attitude.

2.2 Research Locale

This study was conducted in a state university in Cagayan de Oro City which caters one of the most numbered students among many universities and colleges. The state university faces barriers in fostering the mental help- seeking attitude of the students resulting to high undocumented cases of mental health problems and concerns. The limited number of guidance counselors has been a challenge to cater the needs and widen the reach of its functions and services to the undergraduate students.

2.3 Research Participants

The target population of this study were 2nd year- 3rd year undergraduate state university students who are currently enrolled in the General Education Courses (GEC) in the Midyear of the Academic Year 2023- 2024 which has a total population of 820. Using a stratified random sampling method, the population was divided into year level to ensure equal representation. The sample size was determined using the Select Statistics calculator with a 95% confidence level and a 5% margin of error, yielding a sample size of 262 (Creswell, 2019). Respondents were to evaluate their feelings about their student life during the last school year hence, 2nd year to 3rd year students are best fit respondents of the study.

Table 1. Distribution of Respondents

Year Level	*Population (N)*	*Sample (n)*
3rd year	563	181
2nd year	257	81
Total	820	262

2.4 Research Instrument

The data were collected using adapted and validated questionnaires. The instruments were divided into four sections;

Students Profile. This section gathers the demographic profile of the respondents including their age, sex, and monthly income. The family income was determined through the total household income monthly based on the Philippine economy and finances. The gathered data is according to the evaluation conducted by the Philippine Institute for Development Studies (PIDS) The scale is divided and qualitatively described and interpreted into 7 categories based on the total household income (PIDS, 2022).

Basic Psychological Needs Satisfaction Scale at School (BPNSS at School). The Basic Psychological Needs Satisfaction Scale at School (BPNSS at School) was an adapted 18- item, 5-point Likert scale that is modified by contextualizing statements in a school setting. It is used to measure the level of satisfaction of the basic psychological needs through students' feelings about their academic life in the university for the past 12 months (Deci, et al., 2001; Ilardi et al., 1993; Kasser et al., 1992). The scoring procedure for the scale is qualitatively described based on the level of likelihood Likert scale and qualitatively interpreted based on the level of satisfaction Likert scale (Brown, 2010).

Mental Help- Seeking Attitude Scale (MHSAS). The Mental Help Seeking Attitude Scale (MHSAS) is an adapted 9- item, 6- point Likert scale that is used to assess students' overall opinion — whether "favorable" or "unfavorable" — on their decision to seek for help in the event that they become aware of a mental health problem which ranges from personal difficulties to psychiatric problems (Hammer et al., 2018). This is adapted by modifying the qualitative description and interpretation of the bipolar Likert scale and transmitting the scores as 1 being the lowest and 6 being the highest in the Likert scale to improve clarity. The scoring procedure for the scale is qualitatively described and interpreted based on the level of quality Likert scale (Brown, 2010). Finally, it was modified by readily reversing the statements 2, 5, 6,8, 9 to fit the qualitative description and interpretation of the scale.

Guide Questions for Focus Group Discussion. This section includes open- ended interview questions that were used to collect qualitative insights of the participants on their psychological well- being and mental help seeking attitude.

Validity and Reliability

A pilot testing was conducted with 40 students to examine the validity and reliability of the instrument. A reliability test was further conducted to determine the Cronbach's alpha value of the scales with a minimum coefficient of 0.70 to ensure internal consistency (University of Virginia, 2024). Results show a good internal consistency of the items with the values of the Basic Psychological

Needs Satisfaction Scale at School (BPNSS at School) at α= 0.74 and Mental Help Seeking Attitude Scale (MHSAS) at α= 0.81. Content validity was established through a subject- matter expert review by three validators with one masteral and two doctoral-level qualifications in education and psychology. The results from the review were used as a guide in the refining the item construction to align with the nature of the study.

2.5 Data Gathering Procedure

An approval from the Dean of the Graduate School and concerned offices were obtained prior to conducting the study. Participants of the study were fully informed on the nature of the study, including their right to voluntary participation, right to withdraw at any time without judgment or penalty, and the right to confidentiality. Focused group discussions were conducted among 8 participants with 4 students representing each year level to support quantitative data with lived experiences and insights. By signing the form, the participants signify that they consent to participate in the study. The data were collected within the university premises during the free periods of the participants.

Respondents were asked to provide their age, sex, and monthly family income. The Basic Psychological Needs Satisfaction Scale at School (BPNSS at School) and Mental Help Seeking Attitude Scale (MHSAS) questionnaire entail a set of question that were used in gathering, evaluating, and analyzing quantitative data collected from the large number of respondents. Both measures took approximately 15- 20 minutes for the participants to complete. FGD discussions were audio- recorded with the consent of the participants.

The data were transcribed and thematically analyzed according to their perspectives on psychological well- being and mental help seeking attitude. All the data were anonymized, stored securely in password- protected devices, and are only accessible to the researcher and the adviser. The data was kept until the duration of the study and was destroyed according to the standards of the ethical board.

2.6 Data Analysis

After the data collection, the data set were carefully organized, assigned with values, screened to remove outliers. All statistical analyses were performed using JASP. Descriptive statistics (frequency, mean, and percentage distribution) were used to determine the demographic profile of the respondents and their level of psychological well- being and mental help- seeking attitude (Ali &Bhaskar, 2016).

To examine the group differences across demographic variables (age, sex, and monthly income), the independent samples t- test were conducted. Further, to examine the relationship between psychological well- being and mental help- seeking attitude, the Pearson R was utilized to determine (Pennsylvania State University, 2024). Finally, the qualitative data were thematically analyzed following the Braun and Clarke's (2006) six-step framework to determine the psychological well- being and the mental help- seeking attitude of the undergraduate students.

2.7 Ethical Considerations

This study conformed to the ethical standards applicable to human participants. Participation in this study was entirely voluntary, and participants retained the right to withdraw at any point without penalty or judgment. All the minimal risks and benefits, procedures, and any potential conflicts of interest were disclosed to ensure the rights of the participants in strict compliance to the institutional ethics guidelines. Participants were also informed of the available university counseling services should they experience any discomfort during or after the study.

The study upheld confidentiality and anonymity of the data collected. The data were inputted in software or applications through coded identifiers. Paper documents containing personal information (i.e. informed consent form, questionnaires, tracking sheet, etc.) were stored in a password protected devices and storage and handled by the researcher and the adviser only.

The data were presented in aggregate form to maintain the anonymity of the respondents. After the objectives and purpose of the study were achieved, all raw data were shredded and file servers were permanently deleted (Princeton University Research Integrity and Assurance, 2024).

3.0 Results

Table 2. Demographic Profile of the respondents based on age, sex, and monthly family income

Variable	*Category*	*Frequency (f)*	*Percentage (%)*
Age	19- 20 years old	100	38.17
	21- 22 years old	149	57.25
	23- 24 years old	13	4.58
Sex	Male	113	43.13

	Female	149	56.87
Monthly Family Income	Poor (less than ₱10,957)		
	Low income, but not poor (₱10,957 – ₱21,194)		
	Lower middle class (₱21,194 – ₱43,828)		
	Middle class (₱43,828 – ₱76,669)		
	Upper middle income (₱76,669 – ₱131,484)		
	High income, but not rich (₱131,484 – ₱219,140)		
	Rich (At least ₱219,140 and up)		
Total		**262**	**100**

Table 2 presents the demographic profile of the respondents when grouped according to age, sex, and monthly family income. Most of the respondents were 19- 20 years old (n= 100; 38.17%) followed by 21- 22 years old (n= 149; 57.25%), and 23- 24 years old (n= 13; 4.58%). For the sex profile, most of the respondents were females (n= 149; 56.87%) followed by the males (n= 113; 43.13%). Lastly, for the monthly family income, participants were categorized into seven income brackets based on Philippine pesos. Most of the respondents belong to the low income (but not poor) (n= 95; 36.26%) followed by the lower middle class (n= 67; 25.57%), poor (n= 54; 20.61%)., middle class (n= 31; 11.83%), upper middle income (n=10; 3.82), and high-income family (n= 4; 1.53%). A few of the students belong to the rich socioeconomic status (n= 1; 0.38%).

Table 3. Level of Basic Psychological Needs

Dimension	*Mean*	*SD*	*Description*	*Interpretation*
Autonomy	3.26	0.45	Sometimes	Moderately satisfied
Competence	3.46	0.49	Often	Very satisfied
Relatedness	3.61	0.57	Often	Very Satisfied
Total	**3.46**	**0.41**	**Often**	**Very satisfied**

Table 3 shows the descriptive statistics for basic psychological needs. Results show that among the three basic psychological needs, most of the respondent's relatedness is very satisfied ($\bar{x}$= 3.61), followed by competence which is very satisfied ($\bar{x}$= 3.46), and lastly, autonomy which is moderately satisfied ($\bar{x}$= 3.26). Overall basic psychological needs indicated that it is very satisfied ($\bar{x}$= 3.46). This means that the basic psychological needs are autonomy, competence, and relatedness of the respondents are satisfied.

Table 4. Level of Mental Help- Seeking Attitude

Mean	*SD*	*Description and Interpretation*
4.50	0.84	Moderately high

Table 4 shows the descriptive statistics for mental help- seeking attitude. Results show that the overall mental help- seeking attitude of the respondent is moderately high ($\bar{x}$= 4.50). This indicates that the respondents will seek mental help from guidance counselors when they encounter mental health concerns.

Tests of Significant Differences

Table 5. Summary of Group Difference Tests

Variable	*Category*	*Grouping Variable*	*Result (f; p- value)*	*Decision*
Basic Psychological Needs	Autonomy	Age	0.06; 0.94	Not significant
		Sex	-; 0.73	Not significant
		Monthly Family Income	1.20; 0.32	Not significant

	Competence	Age	0.30; 0.74	Not significant
		Sex	-; 0.70	Not significant
		Monthly Family Income	4.19; <0.001*	Significant
	Relatedness	Age	0.09; 0.91	Not significant
		Sex	-; 0.25	Not significant
		Monthly Family Income	1.83; 0.08	Not significant
	BPN Overall	Age	0.42; 0.65	Not significant
		Sex	-; 0.56	Not significant
		Monthly Family Income	2.48; 0.02*	Significant
Mental Help-Seeking Attitude	***MHSA Overall***	Age	4.64; 0.02*	Significant
		Sex	-; 0.01*	Significant
		Monthly Family Income	0.30; 0.93*	Not significant

Table 5 presents the summary of group difference tests of basic psychological needs and mental help- seeking attitude when grouped according to age, sex, and monthly family income. For Basic Psychological Needs, the subscales of Autonomy and Relatedness, as well as the overall BPN score, showed no statistically significant differences across any of the three demographic groups (all *p* > .05). However, a significant exception was found for the Competence subscale and the BPN Overall score when analyzed by monthly family income (*p* < .001 and *p* = .02, respectively). This suggests that perceived competence and the overall satisfaction of psychological needs vary significantly across different socioeconomic levels. No significant differences in BPN were found based on age or sex.

For Mental Help-Seeking Attitude, significant group differences were identified. The overall MHSA score differed significantly both by age (*p* = .02) and by sex (*p* = .01). However, no significant difference was found when MHSA was grouped by monthly family income (*p* = .93). The analysis reveals that demographic factors have selective influences. Socioeconomic status (income) is a significant factor for differences in psychological need fulfillment of competence, while age and sex are significant factors for differences in attitudes toward seeking mental help.

Table 6. Significant Relationships between Basic Psychological Need and Mental Help- Seeking Attitude

Category	*r*	*p*	*Description*	*Interpretation*
Autonomy and Mental- Help Seeking Attitude	.157	.010	Very weak positive relationship	Significant
Competence and Mental- Help Seeking Attitude	.113	.070	Very weak positive relationship	Not significant
Relatedness and Mental- Help Seeking Attitude	.101	.100	Very weak positive relationship	Not significant
Overall BPN and MHSAS	**.128**	**.040**	**Very weak positive relationship**	**Significant**

Table 6 presents the Pearson correlation analysis between Basic Psychological Needs (BPN) and Mental Help-Seeking Attitude (MHSAS). The results show significant, very weak positive correlations for the relationship of MHSAS with Autonomy (*r* = .157, *p* = .010) and with the Overall BPN score (*r* = .128, *p* = .040). In contrast, the relationships between MHSAS and Competence (*r* = .113, *p* = .070) and Relatedness (*r* = .101, *p* = .100) were positive but not statistically significant. All observed relationships were of very weak strength.

This suggests that while a general sense of psychological well-being, and autonomy in particular, may slightly encourage more positive attitudes toward seeking help, it is not a strong or primary determinant. More specific barriers (e.g., stigma, access) or other psychological factors may play a more substantial role in shaping help-seeking intentions.

Table 7. Results of the Focused Group Discussion on the Challenges in Mental Help- Seeking

Theme	***F (n= 8)***	*%*	*Exemplar Quotes*
Intrapersonal factors (shame, shyness, and denial)	4	31	*"[I] fear of being judged or misunderstood by someone, acknowledgement of the necessity for assistance and surpassing*

			denial or hesitancy, and building a firm trust with health professionals." *"I am kind of ashamed to seek assistance because of what they might think of me, like I am crazy or insane, though there is a mental-health consultation office."* *"[I am] in denial that I need it. I am not ready to open up my problems towards others because I am afraid to be judged. I have trust issues that is very difficult to overcome."* *"Growing up with my grandparents, I learned to be independent and handling problems on my own. This has made it challenging to seek help, as I often feel uncomfortable or anxious about sharing my concerns with others."*
Financial constraints	4	31	*"It is a challenge for me to afford mental health care."* *"I do not have the budget to pay the fees. So, what I do is search on YouTube videos, mental health awareness, and tests from doctors' and hospital accounts to assess my own mental health status."* *"The topmost challenge for me ma'am would be financial barrier as I am still a student, still financially dependent and my financial resources are limited and inclusive only for rent, food, and allowance."* *"Financial support aside, even my own parent is not aware of mental help programs or services available for people and as such, my parent thinks that it is just a waste of money."*
Social stigma	3	23	*"Another challenge is the public stigma and social norms about [the mental help- seeking] attitude. Instead of supporting the idea, most people believed that seeking mental-health means [that the person is] going crazy or overacting."* *"As a male, the stigmatized view for us on seeking mental help is a very common challenge."* *"I am a guy and I feel like being a man is a challenge since people see me as an easy-go-lucky, tough guy, always on a positive mood."*
Lack of awareness	2	15	*"It is my lack of awareness of the existing free access to mental health services in our campus."* *"The main challenges I have faced is a lack of awareness about available resources and how to access them."*
Total	**13**	**100**	

Table 7 synthesizes the key challenges in mental help-seeking identified through a focus group discussion (FGD) with eight undergraduate students. The findings are organized into four primary themes, supported by participant frequency (F), percentage representation (%), and exemplary quotes.

The most prominent barriers, each cited by 4 participants (31%), were Intrapersonal Factors and Financial Constraints. Intrapersonal challenges included shame, fear of judgment, denial of need, and a deep-seated preference for self-reliance, as reflected in one participant's statement: "I learned to be independent... This has made it challenging to seek help." Financial barriers centered on the inability to afford professional services, leading some to rely on informal online resources instead.

Social Stigma was reported by 3 participants (23%), who described gendered expectations (e.g., the pressure on men to appear "tough") and a widespread societal misconception that seeking help signifies instability. The least cited, yet notable, theme was Lack of Awareness (2 participants, 15%), pertaining to unfamiliarity with existing free or campus-based mental health services. These themes reveal that the obstacles to seeking mental health support are multifaceted, intertwining internal emotional struggles with significant external structural and societal barriers.

3.1 Discussion

Basic Psychological Needs and Mental Help- Seeking Attitude

Descriptive analyses revealed that participants generally reported high satisfaction of their basic psychological needs, with relatedness (M = 3.61, SD = 0.57) and competence (M = 3.46, SD = 0.49) being rated as "very satisfied." Autonomy (M = 3.26, SD = 0.45) was moderately satisfied. This overall need satisfaction (M = 3.46, SD = 0.41) aligns with Self-Determination Theory, which posits that fulfilling these innate needs is fundamental for motivation, wellness, and adaptive behavior (Ryan & Deci, 2017; Vansteenkiste et al., 2018). Concurrently, participants reported a moderately high overall attitude toward seeking mental help (M = 4.50, SD = 0.84), suggesting a general openness to utilizing services like guidance counseling when needed.

Group Differences in Basic Psychological Needs

Statistical tests for group differences yielded a nuanced picture. No significant differences in autonomy, competence, relatedness, or overall need satisfaction were found across age or sex. The lack of age-based differences supports the "universality assumption" of Self-Determination Theory, which holds that the link between need satisfaction and well-being is consistent across developmental stages (Deci & Vansteenkiste, 2004; Ryan et al., 1995). The absence of sex-based differences adds to literature suggesting the theory's gender invariance in educational contexts (Guerin et al., 2012; Manzano, 2019).

However, a significant difference emerged based on monthly family income, specifically for competence (*p* < .001) and overall need satisfaction (*p* = .02). Students from higher-income brackets (e.g., upper-middle class) reported higher competence satisfaction. This finding is consistent with research indicating that socioeconomic status influences access to educational resources, parental support, and enriched environments, which can bolster a student's sense of efficacy and academic competence (Reardon, 2011; Sirin, 2005).

Group Differences in Mental Help- Seeking Attitude

Attitudes toward seeking help varied significantly by age and sex. Post-hoc analysis indicated that younger participants (19–20 years old) had a more positive attitude than some older peers. This may relate to developmental differences in self-compassion or evolving perceptions of the risks and benefits of disclosure (Bluth et al., 2017; Heath et al., 2016). As consistently found in prior research, female participants reported a significantly more positive help-seeking attitude than males (Al-Rawashdeh et al., 2021). This is often attributed to gender socialization, where traditional masculine norms of stoicism and self-reliance can deter men from seeking help (Vogel et al., 2011). In contrast, monthly family income did not produce a significant difference in help-seeking attitudes (*p* = .93), suggesting that socioeconomic barriers, while real, may not directly shape underlying attitudes as strongly as age and gender (Kwan, 2014).

Relationship Between Basic Psychological Needs and Help-Seeking Attitude

Correlational analysis revealed a significant, albeit very weak, positive relationship between overall basic psychological need satisfaction and mental help-seeking attitude (*r* = .128, *p* = .04). When examined by subscale, only autonomy showed a significant, very weak positive correlation with help-seeking attitude (*r* = .157, *p* = .01). Competence and relatedness were not significantly related. This implies that a sense of personal agency and ownership over one's actions (autonomy) may slightly encourage openness to seeking help, aligning with the theory that internalizing a behavior requires a sense of volition (Ryan & Deci, 2017). However, the weakness of the correlation suggests that need satisfaction is not a primary driver; other factors likely play a more substantial role in shaping help-seeking intentions.

Challenges in Mental Help-Seeking

Focus group discussions with eight participants identified four primary, interrelated barriers: Intrapersonal Factors (shame, denial, self-reliance; 31%), Financial Constraints (inability to afford care; 31%), Social Stigma (fear of judgment, gendered expectations; 23%), and Lack of Awareness of available services (15%). These findings resonate strongly with both local and international literature. In the Philippine context and other collectivist cultures, concerns about "loss of face," ruining family reputation, and pervasive stigma are potent deterrents (Tan et al., 2020; Vahabi & Wong, 2017). Practical barriers like cost and access are exacerbated in settings with limited mental health infrastructure (Saxena et al., 2017). The emphasis on financial barriers and reliance on informal online resources highlights a critical gap between need and accessible, affordable professional care.

Practical Applications and Contributions to the SDGs

These findings offer clear practical implications for university administrators and mental health advocates. First, interventions must move beyond awareness campaigns to actively destigmatize and normalize help-seeking, with targeted programming for male students to counter restrictive masculine norms. Second, to address financial and access barriers, institutions should enhance the visibility, affordability, and availability of on-campus services, potentially integrate low-cost telehealth options and clearly communicate free resources. Third, fostering autonomy—a key psychological need linked to help-seeking—can be achieved by ensuring confidentiality, offering flexible service modalities, and promoting student agency in their wellness journey.

Collectively, these actions directly contribute to Sustainable Development Goal 3 (Good Health and Well-being), specifically Target 3.4, which aims to promote mental health and well-being. Furthermore, by reducing barriers to mental health support, this work supports SDG 4 (Quality Education) by creating a more inclusive and supportive learning environment where students can thrive academically and personally. Hence, effective interventions must be multifaceted, combining efforts to normalize help-seeking, increase awareness and affordability of services, and actively combat stigma at institutional and societal levels to translate positive attitudes into actual help-seeking behavior.

3.2 Conclusion

This study demonstrates that while undergraduate students satisfied psychological needs and a moderately positive attitude toward help-seeking, significant barriers persist. Demographic factors like sex and age influence attitudes, while socioeconomic status impacts feelings of competence. The very weak link between psychological need fulfillment (particularly autonomy) and help-seeking suggests that improving general well-being alone is insufficient to markedly improve service utilization. The qualitative data underscores that the journey to seek help is hindered by a complex matrix of internalized stigma, financial hardship, societal norms, and simple lack of information.

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