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**HELP-SEEKING FOR PSYCHOLOGICAL
PROBLEMS AMONG MALAY COLLEGE STUDENTS**

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**Paper presented at the Third Afro-Asian Psychological Congress,
held at Bangi, Malaysia on 23-26 Aug 1994**

Help-Seeking for Psychological Problems

Among Malay College Students

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Abstract

The help-seeking patterns and receptivity to counselling among Malay young adults were explored. An original questionnaire was used to obtain self-reports from 216 Malay students in an American college programme in Malaysia. Outside help was sought for an emotional problem by 70% of respondents in the previous six months, most frequently from peers and their mother. Among 20% who had seen a Malay college counsellor, 70% reported willingness to return for help and to refer others.

In ratings of 26 varying counselling vignettes, highest receptivity was found for a counsellor who is: Malay, male or female, close in age to the respondent; casual rather than formal, not conservative in attire, and situated on the college campus. Greatest receptivity towards counselling approaches was found for: relaxation training, problem-focused advice, and non-directive reassurance. Cultural factors and perceptions underlying the reliance upon indigenous helping networks and the expressed preferences of these young adults with regard to various aspects of counselling are discussed.

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The research reported here explored prevalent patterns of help-seeking among Malay young adults and their receptivity to various counselling arrangements. This study was part of a larger and ongoing programme of research by the co-authors exploring aspects of psychosocial development and concerns among Malay young adults. Our findings to date have underscored the central role of Islam in the value systems and worldview of the Malay young adults who have participated in the research. At the same time, respondents have pointed to certain sources of stress that frequently threaten their overall sense of well-being, as well as their general dissatisfaction with their ability to cope with stress-related problems. (Our findings about patterns and correlates of stress among our research participants are reported in another paper of the present conference.)

The investigation reported here was guided by two overriding questions: (1) What are the help-seeking behaviours of Malay young adults? (2) To what kinds of counselling and counsellors might Malay young adults be receptive?

METHOD

Research Sample.

Participants in the present study were 216 Malays (108 women and 108 men), aged 19 to 21 years. Sixty percent had grown up in towns and cities (pop. > 10,000), while 40% were from rural areas. All respondents were Muslim.

Questionnaire.

Respondents participated on a voluntary, anonymous, and informed basis. Questionnaires were completed during small group sessions conducted by the investigators. The questionnaire developed for use in this study consisted of 123 open- and closed-ended items assessing: (1) demographic characteristics; (2) experience in the past 6 months of problems involving "strong emotions" or "other psychological distress" that were shown in previous research to be prevalent in this population; (3) frequency in the past 6 months of seeking help from various other people; (4) experiences of use of counselling services; and (5) receptivity to various counsellor characteristics and approaches.

For the latter, 26 counselling vignettes were briefly described. The vignettes varied with respect to selected characteristics of the counsellor, including: race, gender, age, clothing, formality, training, and institutional affiliation. The vignettes also varied with respect to the type of approach described, including: relaxation training; problem-focused advice; non-directive reassurance; guidance relying on Islamic principles; self-exploration; exploration of early childhood and family life; and exploration of dreams and fantasies. Variations did not involve all possible combinations of counsellor characteristics and approaches, since this would have generated a series of vignettes that were too lengthy and too subtly distinct for this respondent population.

Respondents were asked to rate how "receptive" they were to going to the counsellor for help, if it were free of charge, entirely confidential, and given the counsellor's characteristics or approach outlined in the vignette. Extensive pilot testing led to the development of a definition of "receptivity" that was reflected in the final questionnaire instructions as follows: "Base your rating on a consideration of: (1) Your willingness to see the counsellor for help, given the description; (2) How comfortable you think you would feel with the counsellor; and (3) How willing you would be to consider seriously the kind of help the counsellor offered." Lower ratings on the five-point Likert scale indicated greater "receptivity."

RESULTS

Psychologically distressing problems.

As a group, respondents reported feeling stress several times each week over the previous six months ($M = 4.0$). Table 1 shows mean ratings indicating the frequencies with which respondents experienced various psychologically distressing problems that had been shown in previous research to be prevalent in this population.

Seeking help from others.

Seventy percent of the respondents reported having sought help from someone else during the previous six months for a problem involving emotional or other psychological distress. Table 2 shows the frequency with which respondents reported turning to various people for help.

Among both women and men, the preferred helpers were:

- (1) a female friend (53%);
- (2) one's mother (38%);
- (3) a male friend (37%).

Respondents expressed these preferences in reference to all except two of the problems assessed:

- (1) for stress-related health problems, most students reported seeking help from a local clinic;
- (2) for distress over academic work, most students reported seeking help from their student advisor.

Related to respondents' help-seeking, respondents reported feeling a strong sense of support from their family ($M = 4.0$) and friends ($M = 3.5$). Also, they reported moderately high satisfaction with their peer relationships ($M = 3.6$).

Utilization of counsellors.

Twenty percent ($n=45$) of the respondents reported that they had been to see one of the Malay/Muslim counsellors on their college campus. They averaged two visits (range = 1 to 10 visits). Half ($n=22$) of these respondents reported that they had gone voluntarily, while the other half had been required by their Malay college administrators to see one of the college counsellors.

Seventy percent of those who had seen a counsellor, voluntarily or not, reported satisfaction with "the ways the counsellor responded to me." All except one respondent stated that they would seek a counsellor's help again if needed, and that they would refer a friend to the counsellor they had seen. Based on the accounts of two of the college counsellors, their usual approach in sessions with students could be described as problem-focused, highly directive, and explicitly based on Islamic principles and practices. For example, he or she would usually advise the student to engage in certain religious rituals, and would attempt throughout the session to remind the student of Allah and thereby to increase the student's

confidence in facing his or her problem.

Receptivity to counselling.

Counsellor's race. As a group, respondents were most receptive towards a Malay counsellor, and second most receptive to an American counsellor. Least receptivity was found for both Malaysian Chinese and Malaysian Indian counsellors. Table 3 shows mean ratings of receptivity and results of pairwise t-tests comparing receptivity to the four counsellor races. All but one comparison yielded statistically significant differences in receptivity ratings.

Counsellor's age. As a group, respondents were more receptive to a counsellor who is "one to five years older" than oneself ($M = 1.23$); second most receptive to a counsellor who is "the same age" ($M = 1.56$); third most receptive to a counsellor who is "six to 10 years older" ($M = 2.24$); and equally low in receptivity to counsellors in age brackets exceeding 10 years older than oneself ($M = 3.27$).

Counsellor's demeanour. As a group, respondents were more receptive to a counsellor who behaves in a casual manner and tries to develop a friendly rapport ($M = 1.44$) than to a counsellor who is more formal and maintains an authoritarian stance ($M = 3.14$).

Counsellor's attire. With the exception of a vignette involving a female counsellor wearing a mini-skirt, respondents were increasingly less receptive to both male and female counsellors who wore more conservative clothing associated with Islam (e.g., *tudong*, *jubah*, *baju kurong*, *songkok*, robes). For example, t-test analyses revealed that respondents were significantly more receptive to a female counsellor wearing casual clothes and no head covering ($M = 1.87$) rather than wearing a *jubah* ($M = 2.38$). Respondents were significantly more receptive to a female counsellor wearing a *tudong* ($M = 1.92$) rather than a *jubah* ($M = 2.38$) ($t(214) = 9.53, p < .000$).

In response to vignettes involving male counsellors, significantly greater receptivity was found toward counsellors in less conservative Muslim attire, for example: casual dress versus *songkok* and robe ($t(214) = 5.97, p < .000$); *songkok* and no robe versus *songkok* and robe ($t(214) = 8.61, p < .000$).

Counsellor's gender. T-tests revealed that women were slightly less receptive than men to a counsellor of the opposite sex, especially to a male counsellor wearing Islamic forms of dress (e.g., *songkok*; robe). No other significant differences were found in the receptivity to counselling reported by men compared to women, by rural compared to urban respondents, or by respondents who gave higher compared to lower ratings about the importance of religion and the practice of prayer.

Counsellor's training. Respondents indicated greatest receptivity to an alumnus of their own college programme who has receiving training in counselling ($M = 1.24$). There were almost no differences in receptivity to counsellors with other training backgrounds, ranging from local, other Asian, or Western training, and from minimally to highly trained ($M = 1.84$ to 1.85).

Counsellor's affiliation. As a group, respondents were more receptive to a counsellor working on their college campus ($M = 2.31$), rather than in the larger community ($M = 3.2$), and to a counsellor who is an employee of the college ($M = 2.33$), rather than in a private practice, even if the counselling sessions were free ($M = 3.34$).

Counselling approach. Table 4 shows mean ratings of receptivity to seven counselling approaches, and results of pairwise t-tests comparing receptivity to these approaches. All but two comparisons yielded statistically significant differences in receptivity ratings.

DISCUSSION

Findings of the prevalence of problems involving psychological distress found in this study were consistent with previous findings showing that these Malay young adults perceive themselves as suffering from quite high, chronic stress and a wide array of specific problems in their daily life.

The finding that 70% of the students had sought help from other people for an emotional problem on an average of two occasions during the previous six months would seem to reflect the rather high prevalence of general stress and specific problems reported by respondents. Respondents most frequently turned to close friends or to their mother. Consistent with our observations of Malay community life, respondents in this study reported a strong sense of belonging to their peer group, extended family, and religious group. A preference for seeking help from family and friends has been found by many investigators of Asian Americans (Atkinson, Whiteley, & Gim, 1990; Narikiyo & Kameoka, 1992; Suan & Tyler, 1990).

In the case of Malay young adults, the tendency to turn to peers first may be a result of Muslim socialization in Malaysia, which holds that youngsters should avoid expression of emotions, contradictory opinions, and problems when in the presence of elders. Friends are considered a more "suitable" audience (Abdul Rahman Ahmad, 1989).

Overall, Malay young adults appear to have a variety of sources of social support when faced with problems, including their peer group, family, religious teachers, and Islamic study group. The importance of these naturally-occurring and most frequently used helping resources should not be underestimated in planning preventive and therapeutic interventions for this population. For example, the first preference for turning to peers for help suggests the potential cultural accessibility and effectiveness of confidential peer counselling as an approach to increasing psychosocial support for this population. Another avenue for optimizing the naturally-occurring availability of help would be to recognize and involve community religious teacher-counsellors in school life, work, and recreational settings. Also, institutional accommodation could be extended to religious "study" groups, such as *usrahs*.

The findings suggest that Malay young adults are receptive to a variety of formal counselling arrangements. One-fifth of the respondents in this study had experienced at least one formal session with a college counsellor. A majority of these respondents reported satisfaction and willingness to return and to refer other students to the counsellor. For the hypothetical counselling vignettes, none of the mean ratings for the group dropped below 3.1 on the five-point rating scale, indicating moderate levels of receptivity even for those counselling approaches that were least favoured among the seven different types described.

Significant differences were found in receptivity to different kinds of counselling approaches. However, these findings should not be over-interpreted. First, ratings of "receptivity" do not always translate into actual utilization of services (Yau, Sue, & Hayden, 1992). Second, few Malays have much exposure through personal experience, their social group, or popular culture to counselling of any variety. Hence, the respondents would not have been in a position to make informed discriminations among the various approaches described, except on the basis of the little information provided and their own presuppositions.

Nevertheless, as an avenue to articulating exploratory hypotheses, we can speculate about factors that may motivate the preferences found expressed by these young people. The highest receptivity found for relaxation training may be best understood with reference to the widespread perception among Malay college students that they are under almost unbearable levels of chronic stress. Also, in recent years, the media in Malaysia has been admonishing people to "relax" more as apparent levels of work-related stress increase. Relaxation training may seem to young Malays to have more appealing, modern "mystique" than the other approaches described. Another possibility is that Malays would be more receptive to relaxation training because it seems rather impersonal, in that it involves a structured training programme that does not require extensive dialogue and probing into one's private life. Finally, this approach may seem compatible with the traditionally unhurried, pastoral Malay lifestyle.

Second highest receptivity was found toward being given advice about specific actions to take in solving a concrete problem. Many investigators concerned with cross-cultural or multicultural counselling have concluded that directive and structured forms of counselling are most preferred, or most appropriate for Asians (Atkinson, Maruyama, & Matsui, 1978; Stumphauzer & Davis, 1983; Sue & Sue, 1990). In the present study, comparatively lower receptivity was found toward counselling approaches involving reflecting on childhood and family life, and on dreams and fantasies. Taken together, these findings are consistent with the view of Atkinson et al. (1978) and others with reference to Asians living in the U.S.; namely, that Asian Americans prefer counselling that is structured and appears to be rational and logical, rather than one that is "affective, reflective, and ambiguous" (p. 81).

Respondents were significantly less receptive toward counselling that explicitly incorporated Islamic practices and prescriptions than to four other counselling approaches. Related findings showed the significantly decreasing receptivity to counsellors wearing increasingly conservative Islamic attire. These findings appeared to contradict the findings of our other research studies of this population which have underscored the personal importance of Islam to the majority of these young Malays. In order to shed light on this finding, a summary of the findings from this study was given to a group of the respondents with a request for an "insiders'" perspective on certain puzzling aspects of the results.

These participant-informants generally agreed that if a Malay person went to a formally designated counsellor, it would almost always be because other, indigenous approaches to solving one's problem or obtaining emotional relief had failed. Initial approaches would almost invariably involve Islamic rituals and, possibly, discussion with a religious teacher or study group, and so on. One would then seek help from a counsellor in the hope of being offered an alternative problem-solving approach. In sum, Islamic approaches to problems are part of the informal helping resources of the Malay community, and one does not require a formal counsellor to avail oneself of this help.

The present findings are only suggestive, and must be verified in subsequent experimental studies, or in client satisfaction studies carried out when more Malays have had an opportunity to utilize a range of counselling services. The most important conclusion that can be drawn from the present exploratory investigation is that Malay young adults appear to hold quite receptive attitudes toward several novel approaches to problem solving through formal counselling arrangements. Further, the counselling offered to them should be sensitive to their strong Islamic faith, while offering something different than the kinds of help offered by family and friends.

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Table 1

Mean Ratings of Frequencies of Psychologically Distressing Problems

Psychologically Distressing Problem	M*
Anxiety about academic work	3.7
Self-expression	2.8
Worries about transfer to the United States to continue college studies	2.7
Conflicts with peers in general	2.7
Disagreements with a best friend	2.5
Difficulties getting along with roommates	2.5
Difficulty adjusting to the codes of conduct enforced by Malay college administrator	2.4
Worry about a family member's problem	2.4
Stress-related health problems (e.g., headaches, gastric pains)	2.3
Difficulty "getting along with" a lecturer (i.e., accepting or adjusting to his/her teaching style)	2.3
Confusions or misgivings about Islamic practices or beliefs	2.2
Conflict with a family member	2.2
Sex problem	2.1
Underweight or overweight	2.0
Sleep disorder	2.0
Struggling to accept an aspect of Malay tradition	1.7
Struggling to accept an aspect of Western culture	1.6
Difficulty quitting smoking	1.6
Problem involving drug abuse	1.3

Note. Ratings were: 1 = almost never; 2 = occasionally, but not every week; 3 = one or two days each week; 4 = several days each week; 5 = nearly every day.
n = 216.

Table 2

Number of Students Seeking Help from Various Sources in Previous 6 Months

Person sought help from	Percentage	
	<u>n</u>	of Sample
Female friend	53	24.54
Mother	38	17.59
Male friend	37	17.13
Sister	21	9.72
College counsellor	20	9.26
Father	18	8.33
Lecturer	14	6.48
Brother	11	5.09
Religious teacher	9	4.17
Other relative	8	3.70
Grandparent	3	1.39
Bomoh (indigenous Malay healer)	3	1.39
Psychiatrist	1	0.46

 $n = 216.$

Table 3

Pairwise Contrasts of Receptivity Ratings for Counselors of 4 Different Races

Counselor Ethnicity	Mean	Counselor Ethnicity		
		Malay	American	Chinese
Malay	1.53			
American	2.08	6.84***		
Chinese	2.47	11.52***	5.78***	
Indian	2.48	12.12***	6.04***	0.46

Note. t-tests, 2-tailed test of significance. Lower rating on the 5 point scale indicates greater receptivity.

* $p < .05$

** $p < .01$

*** $p < .001$

Table 4

Pairwise Contrasts of Receptivity Ratings for 7 Different Counselling Approaches

Counselling Approach	Mean	Counselling approach					
		Relaxation Training	Problem-Focused Advice	Non-Directive Reassurance	Self-Reflection	Islamic Guidance	Explore Family Life
Relaxation Training	1.68						
Problem-Focused Advice	2.14	5.69***					
Non-Directive Reassurance	2.26	7.98***	1.21				
Self-Reflection	2.45	9.74***	3.18**	2.09*			
Islamic Guidance	2.47	8.52***	3.92***	2.06*	0.23		
Explore Family Life	2.66	11.94***	5.48***	4.12***	3.39***	1.93*	
Explore Dreams/Fantasies	2.86	13.86***	6.55***	7.19***	4.35***	3.38***	2.08*

Note. t-tests, 2-tailed test of significance. Lower rating on the 5 point scale indicates greater receptivity.

* $p < .05$

** $p < .01$

*** $p < .001$

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