

FACTORS AFFECTING HELP-SEEKING BEHAVIOR AMONG PATIENTS WITH MENTAL DISORDERS IN MBEYA CITY COUNCIL

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Abstract: This research investigated the multifaceted factors that influence help-seeking behaviors among individuals diagnosed with mental disorders. Help-seeking behaviors is a critical aspect of mental health care utilization. Yet, it is often hindered by a range of individual, social, and structural barriers. The aim of this study was to provide a comprehensive understanding of these factors in order to develop targeted interventions that can improve timely access to mental health services. This study is framed social behaviors theory which explain on the function of individuals predisposition to use the service, enabling factors that either facilitate or impede the use of a service, and the need for the service. Drawing upon qualitative approach, and case study research design through interviews helped to capture a holistic perspective of the influence on help-seeking behaviors. The findings suggested that stigma and lack of awareness about mental health services were significant barriers that deterred individuals from seeking help. Moreover, cultural norms and family dynamics played a pivotal role in shaping attitudes towards mental health care. The study also posited the role of good help and support services in influencing help-seeking behaviors, with implications for designing accessible interventions. This research contributes to the growing body of knowledge regarding the factors that impact help-seeking behaviors among individuals with mental disorders. By identifying these factors, mental health professionals, policymakers, and advocates can tailor strategies to reduce barriers, increase awareness, and promote a more supportive environment for individuals in need of mental health support.

Keywords: mental health, mental illness/disioder, help seeking behavior.

1. INTRODUCTION

Mental illness or psychiatric illness/diseases is primarily characterized by behavioral or psychological impairment of functioning measured in terms of a deviation from some normative concept in society. It is associated with distress or diseases, not just an expected response to a particular event, or limited to relations between a person and the society (Scott & Marshall, 2004). Mental Illness refers collectively to all diagnosable mental health conditions involving significant changes in thinking, emotions and behaviors that cause distress and/or functioning problems in social, work or family activities or care giving also in maintaining Healthy relationships and inability to adapt to change and cope with environment (Jack- Ide &Uys, 2013). The causes of mental disorders are often unclear but genetic and environmental factors are two major factors that are said to cause mental disorders. People with mental illness continue to face many problems such as frustration, shame and guilt, social exclusion, stigma, discrimination, unequal treatment or opportunities and stereotyping in the society.

On average, 29.2% of adults develop mental illness in their lifetime (Steel, et al., 2014). According to the center for diseases control and prevention CDC (2019), 1 in every 8 people, or 970 million people around the world are living with a mental disorder, and most of the patients live in the developing countries like Tanzania. In such countries, anxiety and depressive disorders are most common (WHO,2018). In 2020, the number of people living with anxiety and depressive disorders rose significantly because of the Corona Virus Disease -2019 (COVID-19) pandemic (Kola, et al., 2021). Initial estimates show a 26% and 28% increase respectively for anxiety and major depressive disorders in just one year. Worldwide, mental disorders are an immense economic burden for the society (Christensen et al., 2020).

Mental disorders contribute to about 12% of the global burden of diseases and this proportion is expected to rise to 15% by 2025 (WHO, 2018). Evidence from studies conducted in different settings has shown that the contribution of mental disorders on the burden of diseases to government and the way it affects economic development due to reduction of man power and large budget spent on treatment of mental disordered patients differs from country to country. For example, in the sub-Saharan Africa, mental disorders are thought to account for a smaller proportion of the disease burden comparing to European countries (Kola, et al., 2021). In Namibia, mental disorders are estimated to contribute to 6.9% of the burden of diseases, compared to 6.6% in Togo and 5.2% in Mali while in Tanzania, mental disorders contribute to about 5.3% of the disease burden (WHO, 2011) This effect can be observed from individual level up to the national level. For example, a person who experience mental disorders may experience difficulties in participating in daily activities such as finding jobs and participating on social activities as well as establishing and maintaining social relationships. Also, people or relatives who are responsible to take care of them may not participate in various productive activities due to limited time and resources mostly spent to help disordered patients (WHO, 2018).

Health systems have not yet adequately responded to the needs of people with mental disorders and are significantly under resourced and face a lot of challenges (Jack-Ide & Uys, 2013). The gap between the need for treatment and its provision is wide all over the world; and is often poor in quality when delivered. For example, only 29% of people with psychosis and only one third of people with depression receive formal mental health care. In the sub Saharan countries, the gap between the number of people with mental disorders who require, and those who receive treatment – the ‘treatment gap’ – is large. The current estimates range from 75% in South Africa (Williams, et al., 2008) to over 90% in Ethiopia (Alem, et al., 2009). It is unlikely that this treatment gap will be met by mental health specialists alone as there is approximately one psychiatrist per 2.5 million people, one psychiatric nurse per 500 000 people and one psychologist per 2 million people in Africa (World Health Organization, 2011).

Recently, studies in Tanzania have estimated that only 24% of people with mental disorders in Dar Es Salaam attend modern health-care services compared to 48% who consult traditional healers and spiritual healers (Mbatia , Singleton & White, 2010). This shows that the Majority of people with a mental disorder do not seek help from any health care professional, although help seeking for mental health problems at an early stage is crucial to reduce the burden of mental illness and social and personal financial costs to prevent future relapses and to improve social functioning and the quality of life (Campion , Bhui , & Bhugra, 2012).

Help seeking behaviors among patients with mental disorder is one of the major aspects that affects treatment of mental illness/ disorder worldwide and in Tanzania specifically. Help-seeking behaviors refers to any action of energetically patient/person seeking help from the health care services or from trusted people in the community. It also involves a wide range of behaviors displayed by the society or individuals in handling mental disordered patients such as perception and attitude towards mental disorder, at what point the patient should seek help, where the patients should seek help, resources and support provided during help seeking and who are involved in help seeking that often influence people’s decisions to delay seeking professional help or to avoid it altogether, which can, in turn, significantly compromise treatment and care (Furnham & Blythe , 2012)

According to Jain et al, (2006) help-seeking behaviors, particularly in rural communities, is a complex outcome of many factors operating at the individual, family, and community levels, including biosocial factors, an individual’s past experiences with health services, and the availability of alternative health care. Other factors affecting the help seeking behaviors and choice of service delivery in care settings or community include psychological factors such as self-esteem, economic factors like poverty as well as systemic factors such as lack of human resource for mental health especially at the

primary health care level, inadequate training for mental health and misplacement of human resource for mental health (Scott & Walter, 2010)

Low and middle income countries like Tanzania face many challenges in meeting mental health needs to their citizens. The majority of individuals with severe mental disorders remain untreated due to a number of factors such as Stigma and discrimination associated with mental illness, Limited awareness and knowledge about mental health and mental Financial constraints (Economic factors, such as poverty and limited financial resources) , limited availability and accessibility of mental health services, cultural and religious beliefs and fear of medication or side effects also poor trust in the healthcare system (Kibusi, et al.,2013). These challenges can collectively impact the help-seeking behaviors and well-being of patients with mental disorders. Addressing these challenges can be crucial in improving the mental health outcomes of patients and promoting access to appropriate care.

In Tanzania, different models like biomedical as well as traditional healers provide primary healthcare services to patients with mental illness (Daniel, et al., 2018). The Tanzanian Ministry of Health, Community Development, Gender, Elderly, and Children has made a lot of efforts to integrate mental health in all levels of health-care service and to motivate help seeking behaviors among patients with mental disorders in cooperation with non-governmental organizations. However, most of people with mental disorders do not engage in help seeking behaviors and others are motivated to seek help to traditional and spiritual healers than going to hospitals where professional help is provided (Mbatia , Singleton & White, 2010). Few studies have been conducted on mental health issues. Others have explored perceptions of mental disorders patients or help-seeking behaviors such as Minzi, & Matovelo. (2017). The available studies are inconclusive with regard to help seeking behaviors among patients with mental disorders. Therefore,

The study sought to assess factors affecting help seeking behaviors among patients with mental disorders in Tanzania. followed by this research questions.

- I. To What extent are the support help services available to patients with mental illness in Mbeya city council?
- II. What is the contribution of help seeking behaviors on the wellbeing of patients with mental illness in Mbeya city council?
- III. What are the challenges patients with mental illness get during help seeking in Mbeya city council?

2. RESEARCH METHODOLOGY

Research design

This study applied a case study research design, focusing on the challenges faced by patients with mental disorders during help-seeking at Mbeya city council in Tanzania. The case study design was appropriate for this study as it allowed for an in-depth investigation of a specific case, namely the Mbeya city council to gain insights into the unique characteristics, context, and dynamics of the challenges faced by patients with mental disorders during help-seeking in this particular area.

Population and sampling techniques.

The study population consisted of members of the Mbeya city community taking care of patients with mental disorders, out patients of mental disorders who were continuing with treatments and having good insight enough to provide accurate information and health-care providers in the Mbeya city council making a total number of 70 participants. The study used purposive and snowball sampling techniques to recruit participants in the study The study involved three categories of participants: patients with mental disorders, their caregivers, and healthcare providers who were selected based on inclusion criteria and the researcher's judgment to ensure diversity in the sample. The use of purposive and snowball sampling techniques allowed for the recruitment of participants who had relevant experiences and perspectives on help-seeking behaviors among patients with mental disorders.

Instrumentation

In this study, the researcher used semi-structured interviews at different places of Mbeya city council. These interviews explored the challenges they encountered during the help-seeking process, their experiences, perceptions, and coping strategies. The approach was applied through the use of semi-structured interviews with patients who had been diagnosed with mental disorders, as well as their caregivers and health professionals.

Validity and reliability

Ensuring trustworthiness is important for ensuring the validity and reliability of the study's findings. In this proposed study, several measures were taken to ensure trustworthiness. First, the researcher established rapport and built trust with the participants to encourage open and honest responses during the interviews. This was achieved by explaining the purpose and objectives of the study and obtaining informed consent from the participants. The researchers also assured the participants of confidentiality and anonymity and informed them that their participation was voluntary and that they could withdraw from the study at any time without penalty. To ensure the credibility of the study's findings, the researcher also used multiple sources of data including interviews and observations to triangulate the findings. The researcher also engaged in member checking which involves sharing the findings with the participants to ensure that their perspectives were accurately represented in the analysis.

Ethical Considerations

The researcher made sure that ethical considerations were considered since Social researchers are bound to ethical considerations in their studies. Confidentiality, right to withdraw and informed consents were also highly observed by the researcher as data and all information collected from the respondent participants were briefed about the study and made informed decision to participate and any identifying information of participants was not shared anywhere The researcher also attended and completed a training in good clinical practice and obtained a certificate. The researcher also collected information in the field after asking for a permission letter from the University of Iringa (UOI) where he was studying as well as from relevant government authorities where data was collected.

3. FINDINGS AND DISCUSSION

This chapter analyzes and presents data from the field. The findings obtained relied on the factors affecting help seeking behavior among patients with mental disorders in Tanzania. The findings are presented in accordance with the research objectives and questions.

Participants Demographic Information

A total of 70 participants (40 male and 30 female) were selected for the study. In total, we conducted 70 semi structured interview, and the median age of all participants was 44 years. The majority were married (n=38), and who had gone to school (n=52,) The interview participants were health-care providers (n=20), patients (n=30), and care givers (n=20)

Table 1

Respondents	Frequency	Percentage
Patients	30	42.8%
Health care provider	20	28.5%
Care givers	20	28.5%
Total	70	100%

Objective 1. Examining the support help services available to patients with mental illness in Tanzania

Types of Support help services available to patients with mental illness in Tanzania

The participants' views and perspectives on types of Support help services available to patients with mental illness in Tanzania were grouped into two themes. Which are formal support help services and informal Support help services as described in findings.

Formal support services have also been regarded to play a crucial role in addressing mental health needs in Tanzania. Hospitals provide medical treatment, psychiatric care, and access to mental health professionals. NGOs contribute by offering counseling, awareness campaigns, and community based interventions (Mbembati, *et al.*, 2020).

On the other hand, informal support systems are deeply rooted in the Tanzanian culture. Spiritual healers and traditional practitioners offer holistic approaches to mental health challenges, often combining rituals, herbs, and community engagement. These practices are deeply respected and trusted by many individuals seeking mental health assistance (Ndeti, *et al.*, 2019).

Despite the coexistence of formal and informal support systems, there can be challenges in integrating them harmoniously. While formal services offer evidence-based treatments, cultural stigma and lack of access remain barriers. Informal systems, while culturally relevant, might not always align with modern medical practices (Mbwayo-Valentin, *et al.*, 2018).

Effectiveness of formal support help services available to patients with mental illness in Tanzania

The analysis of interviews revealed much information about the situation of mental health service delivery in Mbeya city council. Three major themes that emerged from this study were human resource challenges, environmental/system challenges, and satisfaction with mental health services. Resource challenges Resource challenges is one of the major themes that emerged that included inadequate mental health training, inadequate human resource for mental health, lack of psychiatric wards and associated services, limited space for service provision and worn out buildings, and inadequate diagnostic and treatment equipment.

Objective 2. The contributions of help seeking behavior on the wellbeing of patients with mental illness in Tanzania.

The findings of this research underscore the importance of addressing help-seeking behaviors as a critical factor in enhancing the well-being of patients with mental illness in Tanzania. By promoting awareness about available mental health services and reducing stigma associated with seeking help, interventions can encourage individuals to seek timely and appropriate assistance. The influence of cultural beliefs and geographical location on help-seeking behaviors further emphasizes the need for tailored strategies that cater to the specific needs of diverse populations.

The results of this study align with previous research that highlights the positive impact of help-seeking behaviors on the well-being of individuals with mental illness. The findings suggest that efforts to improve mental health outcomes should not only focus on clinical interventions but also on community-based initiatives that address the barriers to seeking help, particularly in regions where traditional beliefs hold significant influence. Interventions that collaborate with local healers and traditional practitioners may bridge the gap between modern mental health services and cultural practices, ultimately improving the well-being of patients in both urban and rural areas.

Mushiet *al.*, (2018) warns that further destigmatizing mental illness and fostering an open dialogue within families and communities can contribute to creating an environment where seeking help is seen as a sign of strength rather than weakness. In conclusion, this research sheds light on the pivotal role of help-seeking behaviors in influencing the well-being of patients with mental illness in Tanzania. By acknowledging the intricate interplay of cultural, social, and geographical factors, policymakers and mental health professionals can develop comprehensive strategies to improve access to care and overall quality of life for individuals living with mental health conditions.

Objective 3. Challenges patients with mental illness get during help seeking in Tanzania

This study also explored the barriers to help-seeking behaviors among patients diagnosed with mental disorders and identified the emergence of traditional treatment as a recurring theme. The findings shed light on the complex interplay between modern mental health services and traditional healing practices, highlighting the significance of cultural beliefs and their impact on individuals' decision-making processes when seeking help for mental health issues. The study findings align with previous studies that have emphasized the role of cultural factors in influencing help-seeking behaviors among individuals with mental disorders (Smith & Young, 2017; Agyapong, *et al.*, 2019). In the current study, a substantial number of participants expressed hesitation in seeking professional help due to deeply ingrained cultural beliefs that favored traditional healing methods.

These traditional practices, often deeply rooted in community history and spirituality, were seen as more culturally acceptable and familiar, thus influencing the participants' perceptions of efficacy and acceptability. The prevalence of traditional treatment as a perceived alternative to modern medical interventions underscores the need for culturally sensitive approaches in mental health care (Kohrt, *et al.*, 2020).

The findings also resonate with Kohrt *et al.*'s (2019) argument that a lack of integration between traditional practices and modern mental health services can result in missed opportunities for collaboration and improved outcomes. Furthermore, the stigma associated with mental illness, which has been widely acknowledged in global literature (Corrigan, 2004), was another barrier that deterred participants from seeking help, particularly from professional sources. The fear of being labeled and ostracized within their communities contributed to the participants' preference for discreet traditional treatment options

that carried less social stigma. The implications this study research underscore the importance of culturally tailored interventions that bridge the gap between traditional healing practices and modern mental health services. Collaborative efforts that engage traditional healers and practitioners in the mental health care ecosystem can not only address cultural preferences but also foster a more inclusive and holistic approach to treatment (Kirmayer, *et al.*, 2011).

The study highlights the theme of traditional treatment as a significant barrier to help-seeking behaviors among patients with mental disorders. The findings emphasize the urgent need for context-specific strategies that address cultural beliefs, stigma, and the integration of traditional practices within the broader mental health care framework.

Our study delved into the barriers that hinder help-seeking behaviors among individuals with mental disorders, revealing a prominent theme: the lack of understanding about mental disorders. This finding underscores the pressing need to address gaps in public knowledge and awareness of mental health conditions, which can significantly impact individuals' decision to seek professional assistance. Our results align with previous research that has identified a lack of understanding about mental disorders as a widespread issue (Gulliver *et al.*, 2010; Lauber *et al.*, 2006). A significant number of participants expressed confusion, misinformation, and stigma related to mental health conditions.

4. CONCLUSIONS AND RECOMMENDATIONS

The research titled "Factors Affecting Help-Seeking Behavior Among Patients with Mental Disorders: A Qualitative Study at Mbeya City Council" investigates the various factors influencing the willingness of patients with mental disorders to seek help. Utilizing a qualitative approach is suitable as it allows for an in-depth exploration of participants' experiences and perspectives. The study involves 70 participants distributed among three categories: patients, caregivers, and healthcare providers. By interviewing individuals from these diverse groups, the research aims to gain comprehensive insights into the barriers and facilitators that influence help seeking behavior in the context of mental health at Mbeya City Council. The study aimed to explore the barriers to help seeking and utilization of mental health services in Mbeya city community, and the mental health system is deeply affected by various barriers. Community members, awareness and community education efforts are needed to tackle the myths and misconceptions and stigma that perpetuates poor help seeking behavior among patient with mental health problem also by strengthening the community health systems would improve access and increase utilization of mental health services.

Recommendation

There is a need for the establishment of stigma reduction campaigns, developing and implementing public awareness campaigns aimed at reducing stigma surrounding mental health issues. These campaigns should target both the general population and specific cultural or demographic groups to foster a more accepting environment for seeking help. There is also a need of enhancing community education programs, establish community-based education programs to raise awareness about common mental disorders, their symptoms, and available treatment options. These programs should be tailored to the local contexts and take cultural sensitivities into account. Furthermore, the government should provide training and workshops for healthcare professionals to improve their abilities to identify signs of mental disorders, offer appropriate guidance, and facilitate referrals to specialized care when necessary and Integrate mental health services into primary healthcare facilities to ensure that individuals can access support in familiar and easily accessible settings. This approach could help reduce the perceived gap between physical and mental health care. In addition, the government should use telehealth and technology solutions by exploring the implementation of telehealth platforms and technology-driven solutions to expand access to mental health services, especially in remote or underserved areas. This could include virtual counseling sessions and mental health apps.

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