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Assessing Formal Mental Health Help-Seeking Perceptions, and Attitudes Towards Campus-Based Mental Healthcare Services Amongst University Students in Rwanda

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Abstract

Mental health issues are prevalent among college students, but only a fraction of them seek professional mental health support. This is especially so in Africa where there is little to no sufficient mental health services. The lack of comprehensive data about prevalence further exacerbates the problem. The aim of this study is to assess perceptions, behaviour and attitudes towards formal mental health help-seeking behaviour among university students. The study used a mixed-method design and employed an online survey to collect data from 185 college students enrolled in 15 universities in Rwanda. A descriptive approach was used in analysing the data. The study found that the majority of students (61.6%) acknowledged the value of seeking help, and perceived mental disorders to be like any other medical illnesses. However, only 9.7% of that number sought professional help. Privacy concerns, trust issues and perceived lack of comfort when seeking help were the main justifications why they did not seek mental help support. Participants overall showed positive attitudes towards campus-based mental healthcare services. However, they are hesitant to patronise these services due to the unavailability of established wellness centres in some schools. Also, due to the limited number of trained mental health professionals in Rwanda, some of the wellness centres in these higher education institutions employ students. This could explain the trust and privacy concerns raised by the students. Consequently, they prefer informal ways of seeking help, such as talking to friends and family, as they deem them more trustworthy. However, none of the study participants could account for the sufficiency of this approach. The study recommends the use of digital platforms that will leverage access to professional mental healthcare in and outside of Rwanda for students.

Keywords: Mental Health, Professional Help-Seeking Behaviour, Campus Wellness, University Students and Rwanda

Introduction

Mental health is a state of well-being in which a person realises his or her abilities, efficiently deals with daily stresses of life and works productively [1]. Illnesses that affect mental health are referred to as mental disorders. They are generally characterised by abnormal emotions, thoughts, self-perception, and behaviours outside of a healthy mental state [2]. There is growing evidence of the global impact of mental disorders. According to the World Health Organization, people with severe mental health conditions die two decades earlier; one reason being the high suicide rates common among people with untreated mental illnesses [3]. In Africa, 17.9 million years were lost to disability due to mental health disorders in 2015 alone [4]. Epidemiological studies reported that most psychiatric disorders have their onset before the age of 25, which revealed that young people have a higher risk for mental health issues [3,5]. Similar to other African countries, existing figures on mental health in Rwanda revealed 11.9% depression prevalence in the general population versus 35.0% in the sub-population of survivors of the 1994 genocide. Similarly, the Post-traumatic Stress Disorder (PTSD) prevalence was reported to be 27.9% in survivors versus 3.6% in the general population [6,7]. Despite such

prevalence, the rate of professional help-seeking is still very low. A 2018 Rwanda mental health survey revealed that professional mental health services were only used by 5.3% of the population [8]. A study conducted among young Rwandans revealed that most of them prefer to talk to trusted people in their communities [9]. However, it has been discussed that such means of seeking help come with the disadvantage of receiving uninformed support. A backdrop to this approach of seeking help is that culturally, mental health is an often disregarded or rarely understood illness. This underscores the need for professional mental healthcare interventions [10]. Therefore, it is essential to understand the underlying reasons behind low professional mental health help-seeking by examining people's perceptions, behaviour, and attitudes towards seeking formal help for mental health illnesses. The target population for this study are students in institutions of higher learning in Rwanda.

Literature Review

Help-seeking is defined as an act of actively and intentionally seeking help from other people; it involves discussing personal matters with another person for guidance and support [11,12]. The sources of help are formal – such as people who have a professional degree in a relevant course – and informal, such as trusted people, including parents or friends (ibid). Alfa and Grotnan argued that mental health problems are higher among university students than in the general population due to challenging changes that happen when adolescents transition to young adulthood [13,14]. The transition is characterised by overwhelming life-changing experiences that affect financial, social, and emotional aspects of life and put post-secondary students at a higher risk of mental disorders [6,15].

Several studies discussed mental health problems' impact on students' performance. According to the International Board of Credentialing and Continuing Education Standards when students are experiencing depression or anxiety, their mental capacity focuses on creating worrisome thoughts that exhaust them [16]. This process detracts their learning abilities by weakening memorisation and concentration, making it hard for them to acquire new knowledge and cope with examination situations, which eventually results in poor academic performance [14]. Additionally, depressive disorders are associated with reduced cognitive function, lack of interest in others, and physical symptoms such as nausea, high blood pressure, fatigue and lowered mood, which sometimes push students to miss classes [17,18]. These studies detailed how mental illness negatively affects students' performance and their learning abilities.

Despite the prevalence of mental health problems among college students, the frequency of professional help-seeking is low. An epidemiological study conducted among six Canadian postsecondary institutions revealed that while 80% of students felt mentally disturbed, only 15.4% sought professional help for their mental health disorders [19,20]. Bantjes also reported a low utilisation of campus mental healthcare services among South African students despite how well-resourced these services were [4]. Some research findings highlighted that young people with emotional problems were more likely to seek help from trusted people in the community [9]. However, a study from Australia mentioned that even though seeking support from trusted and close people can provide emotional and informational support, it comes with the disadvantage of receiving uninformed information, which might not provide the full support in need [10].

The reported barriers to seeking professional help among college students were peer pressure, stigma, less information about campus counselling services, negative previous experiences, and long waits experienced when students want to meet campus counsellors [21,19]. Ibrahim found self-stigma to be the most substantial barrier to seeking professional mental health support because seeking help is perceived as a sign of weakness and acceptance of failure, which sabotages self-esteem [22]. According to the Mental Health Foundation, 9 out of 10 people with mental disorders experience stigma, and it comes in two forms: public stigma and self-stigma [23,24,25]. Public stigma comes from society's reaction to mental illness, while self-stigma is the prejudice people put on themselves [26].

This review looked into various aspects of mental help-seeking among college students. While university students were revealed to be a high-risk group to mental issues, there is limited literature on formal help-seeking patterns among that group in low-income settings. Moreover, no previous studies looked into students' attitudes toward campus-based mental health services in Rwanda, such services being one of the means to seek help for that group.

This study aimed to assess college students' perceptions and behaviour on professional mental health help-seeking and examine their attitudes towards campus-based mental healthcare services. The study was guided by the following research questions: (1) Which perceptions and behaviours do college students have towards formal help-seeking? (2) What are the students' attitudes towards campus-based mental health care services?

Methods of Data Collection

This study employed mixed research methods to understand and assess university students' help-seeking perceptions, and attitudes towards formal help. The participants were college students from 15 Rwandan universities with all academic years represented. Most of the previous papers that worked on similar topics had defined populations; however, the current study targeted an unknown population and used Cochran's formula that enabled the calculation of the minimum sample size for the unknown population. The sample was estimated to be 150 respondents derived from a 95% confidence interval and 8% acceptable margin of error as detailed below:

$$n_0 = \frac{Z^2 pq}{e^2}$$

Where: **Z- value** of a 95% confidence interval: 1.960

P: Degree of variability; P= 0.5

Q = 1-P

e = Margin of error; e=8%.

Due to the sensitivity of the topic and COVID-19 social distancing regulations, data was collected anonymously and virtually. An online survey was created using Google form; it consisted of closed-ended and open-ended questions to understand why respondents picked particular choices. Most of the previous studies used quantitative methods; however, the current study added a qualitative aspect (open-ended questions) to get an in-depth understanding of formal help-seeking behaviours [11,22]. Some of the survey questions were derived from pre-designed questionnaires meant for mental health research purposes, such as the General Help-Seeking Questionnaire [22]. The link to the survey was shared with participants randomly via WhatsApp, Emails and Google Hangouts.

Results

IBM Statistical Package for Social Scientists (SPSS) version 26.0 was used to code, capture data and generate descriptive statistics. Substantial amount of qualitative data that could not be analysed using SPSS was analysed using a content analysis approach. A total of 185 participants agreed to participate in the study and responded to a structured questionnaire administered virtually. A total of 50.3% (n=93) of the respondents were male, 44.9% (n=83) were female; and 4.9% (n=9) preferred not to mention their gender. Data was collected from all five levels of tertiary education across multiple campuses in Rwanda. A total of fifteen universities were represented in the study out of 27 accredited higher education institutions in Rwanda. These fifteen universities are African Leadership University, African Leadership Institute, Adventist University of Central Africa, AkillahDavis College, Mount Kigali/Kenya University, Kigali Independent University, University of Technology and Art Byumba, University of Tourism, Technology and Business Studies, University of Lay Adventists of Kigali, Institute of Applied Sciences- Ruhengeri, The Integrated Polytechnic Regional College Kicukiro and Tumba Campuses, Catholic Institute of Kabgayi, National University of Rwanda colleges across the country.

The demographic characteristics of the participants are listed in Table 1.

Characteristics		n(%)
Gender	Male	93(50.3%)
	Female	83(44.9%)
	Preferred not to say	9(4.9%)
Academic Year	Year 1	28(15.1%)
	Year 2	28(15.1%)
	Year 3	55(29.7%)
	Year 4	46(24.9%)
	Year 5	3(1.6%)
Employment status	Employed	20(10.8%)
	Unemployed	165(89.2%)
Universities represented		15(60%)
Leading causes of mental health issues among college students	Financial problems	76(50%)
	Relationships	60(39.5%)
	Family issues	60(39.5%)
	Academics	58(38.2%)

Table 1: Demographic Characteristics of the Participants (n=185)

Professional Mental Health Help-Seeking Perceptions and Behaviour among University Students

Students' views were sought on the perceived importance of seeking professional help, their trust in mental health professionals, and perceived comfortability while seeking help. Participants provided their opinions on how relevant they perceived mental illnesses compared to physical conditions. The majority 90.3% responded that they perceive mental disorders to be as important as any other medical illness. A significant proportion of the students also understand the value of seeking help; 61.6% of the students responded that 'they should not deal with their mental issues on their own without some form of external support'. However, 55.5% of students indicated that they would feel uncomfortable seeking professional help. This brings forth the question of trust where 8.1% indicated having no trust for mental health professionals while the majority (35.8%) reported otherwise.

To assess students' help-seeking behaviour, participants were asked if they had felt mentally unwell in the last six months; 39% (n = 72) responded yes. Out of 72 respondents who felt they were mentally unhealthy, only around

10% (n = 7) of them sought professional help. The majority, 37.5% (n = 27) used individual/non-professional coping strategies such as listening to music or reaching out to close friends and family (32%). And then some did nothing about it (16.7%). These statistics revealed that students prefer informal methods of seeking help such as talking to close people over professional ones. Self-reliance preference, comfortability, trust issues and privacy concerns were the common reasons that drove participants to go with informal ways of seeking help instead of professional ones.

In this study, a slight gender difference was found concerning help-seeking behaviours. Males sought professional help more than females, and females sought help from close people than their counterparts, as displayed in the figure below:

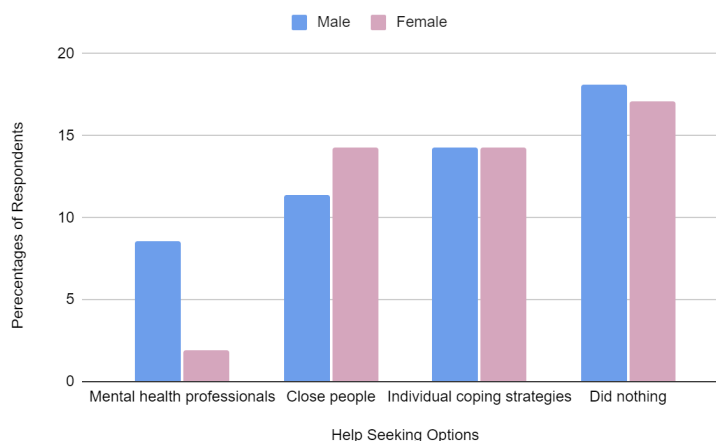


Figure 1: Comparison of Males and Females Help-Seeking

(Figure 1 shows a comparison between male and female behaviours in mental health help-seeking).

Students Attitudes on Campus-Based Mental Healthcare Services

To understand students' attitudes towards campus-based mental health care services, also known as wellness centres, the availability of such services on campuses, students' willingness to seek help from them and their underlying reasons were investigated. More than half of the students 52%, responded that they lack wellness centres or other ways of supporting students' mental well-being on their campuses. In response to the question "What is your willingness to seek help from a university's wellness centre", a minority of participants (15.7%) indicated they would not seek help from wellness centres, while the majority (46.5%) reported they are probably willing with 23.6% who responded that they are definitely willing.

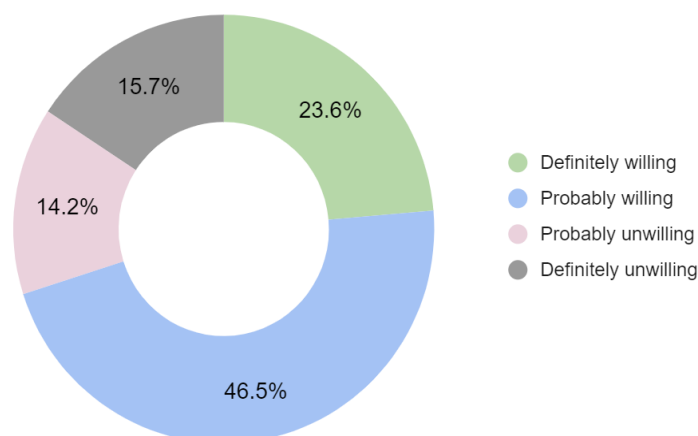


Figure 2: Willingness to Seek Help from Wellness Centres (Campus-Based Services)

(Figure 2. shows how willing college students are to seek professional mental help at their campus-based services).

These results implied that students have an intermediary, positive wards, attitude toward on-campus mental healthcare services. A following open-ended question asked students to explain the reasons behind their stand. Students who would seek help from wellness centres mentioned their reasons to be: Quick help offered, most accessible, helps to save time and money, trained and qualified workers, and good ratings from other students who went there. Their counterparts indicated that they do not trust their issues will be kept secret. They doubt their level of professionalism. They do not feel comfortable sharing their problems with strangers, and others mentioned they would feel ashamed sharing their issues. One of the participants, in particular, responded that wellness centres employ students, and he/she would not share his/her issues with someone they are likely to meet every day. Besides, some participants also reported that they have less information about wellness centres.

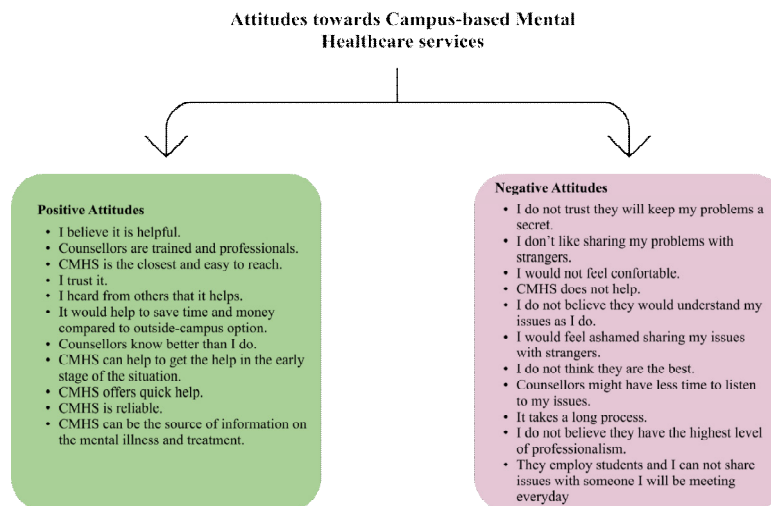


Figure 3: Students' Attitudes Towards Campus-Based Mental Healthcare Services (CMHS)

(Figure 3 shows Students' attitudes towards Campus-based Mental Healthcare Services).

Conversely, participants expressed that they are more likely to seek help from mental healthcare institutions (52.9%) than from wellness centres (16.3%) when presented with both options. Mental healthcare institutions include public and private centres that offer mental healthcare support for everyone, while on-campus wellness centres are only for students. This can be explained by the drawback's students reported above and the lack of wellness centres in higher education institutions, as half of the students responded that they do not have wellness centres at their schools.

Discussion

This study aimed to understand and assess college students' perceptions, behaviour and attitudes towards formal mental health help-seeking, including campus-based professional mental health support. Overall, college students perceive formal help to be useful and have a good understanding of mental health help-seeking. Their depth of knowledge on the subject is evident from their perceptions of mental illnesses and help-seeking. A majority of the students acknowledged the value of seeking help and identified mental health disorders as important as any other medical illness. This is similar to but also contrary to what Kamimura found in their comparative analysis of Vietnam and US college students [27]. They found US students to perceive mental disorders to be the same as other illnesses while Vietnamese tended to perceive individuals with mental issues to be dangerous. The positive perceptions on mental health among college students found in the current study might be linked to the mental health-related conversations that have been passed on different social platforms in Rwanda, which advanced the community's understanding of mental health. This explains why raising mental health awareness is crucial to ensuring better mental health outcomes within any community.

The low frequency of formal help-seeking (9.7%) among college students found by the current study is in accordance with what an epidemiological study conducted in Canada found. However, the study mentioned peer pressure, stigma, less information about campus counselling services, negative previous experience, and long waits to be the reasons why students do not go to wellness centres, while the current study found them to be trust, privacy concerns and perceived low comfortability when seeking professional help [19]. This is in accordance with what Umubyeyi mentioned as acceptability in their study, which was highlighted to be the reason why young people turn to trusted individuals in their community [9]. The development differences between Canada and Rwanda can explain the difference in barriers for both studies. Mental health infrastructures in Rwanda, even in Africa as a whole, are not as developed as in the high-income countries; consequently, most people lack information on how professional mental healthcare support works and end up not trusting it. Moreover, professional mental healthcare in Rwanda was initially perceived to be for people with psychotic (severe) symptoms, such as people who have disconnected from reality, which makes people feel uncomfortable seeking such help. Trust and privacy are essential in mental healthcare provision as help-seeking involves the discussion of personal matters. Therefore, institutions that offer professional mental health services such as campus counselling services should raise more awareness on why people should trust these services. These might include the code of conduct or regulations that govern formal mental health support.

Further analysis showed that 69.5% of respondents who felt mentally unhealthy went for informal means of seeking support, such as talking to close people, which highlighted poor formal help-seeking behaviour among college students, as seen in a South African study [20]. However, Griffiths highlighted that seeking support from trusted and close people comes with the disadvantage of receiving uninformed information and a lack of proper diagnosis, which might not provide the full support in need [10]. Addressing the aforementioned barriers to seeking professional help can improve the formal help-seeking behaviour among college students. Moreover, informal support could be enhanced by raising awareness and conducting workshops to teach people how to support people with mental illnesses from the cell level.

Besides, while seeking professional mental health support is relatively low, it was surprising to find that men sought it more than women in the current study, which is different from what Call & Shafer discussed in their study [28]. They reported that men seek formal help far less than women, one reason being higher rates of suicides and undiagnosed mental illness among men than women. While this might be viewed as a gender shift in help-seeking behaviour, the difference in data for the current study was not statistically enough to assert that there has been such a shift. Further research can thoroughly explore this.

Lastly, it was found that students have intermediary, positive-wards, attitudes toward campus counselling services, as also found by Motau [29-34]. Trust issues have been the most reported barrier to going to wellness centres. The part of the survey that was concerned with students' trust for mental health professionals revealed that the majority of participants have trust for them. However, this finding implies that students' trust is around mental health knowledge possession among professionals, but slightly includes the beliefs that these professionals can give students the help they need.

This study has a few limitations. Firstly, it was exploratory research in its nature as it intended to understand the "why" of low professional help-seeking. Ideally, qualitative methods such as interviews would have been more suitable. However, due to social distancing restrictions and the sensitivity of the topic, it used an online survey. Future studies can use qualitative methods to get an in-depth understanding. Additionally, more studies can look into how mental health facilities' availability on campuses influences students' perceptions of formal help-seeking.

Conclusion

This study found out that while university students have positive perceptions and attitudes towards professional mental health support, including campus counselling services, their frequency of formal help-seeking is very low due to trust, and privacy concerns. Consequently, they prefer informal ways of seeking help, such as talking to friends and family, as they deem them more trustworthy. In addition to these barriers, some of the students reported they do not have wellness centres on their campuses. Addressing such challenges by raising awareness and ensuring more universities have wellness centres can improve the formal help-seeking behaviour among students as they are the easiest and quickest way to get mental health support for university students. Moreover, decentralising formal mental health support to community health workers might help to address the trust and privacy issues mainly because people are more open to seeking help from people around them. Besides, implementing interventions that educate students and the general population on how to support people with mental illnesses can be a sustainable approach, as most participants preferred informal ways of seeking help. Some of these interventions might be introducing a mandatory psychology discipline across high schools and higher institutions to educate people on how to help themselves and others from a young age and to raise awareness around mental health support provision at the cell level.

Declarations

Ethics Approval and Consent to Participate

Ethical approval for this study was obtained from the African Leadership University Ethics in Research Committee. The research was conducted in accordance with EiR standards which can be found [here](#). Written informed consent was obtained from all subjects before data collection.

Consent for publication

Not Applicable

Availability of Data and Materials

The datasets generated and/or analysed during the current study were submitted to Figshare and can be accessed via this [link](#).

Competing Interests

The authors declare that there are no competing interests.

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Appendixes

Appendix 3: Data Collection Tools Survey Questions

Demographic Characteristics

- A. What is your Age?
- B. Marital status
 - Single
 - Married
 - Divorced
- C. Household Size (Number of siblings and parents)
- D. Employment status
 - Unemployed
 - Employed (does not include being a student)
- E. Source of income
 - Parents
 - Employed
 - Other Family members
 - Scholarship
- F. Which university do you attend?
- G. Which Academic year are you in?
- H. Program being studied
- I. Gender
 - Female
 - Male

The Mental Health Literacy section

1. Mental Health disorders are as important as any other medical illness
 - I strongly agree
 - I agree
 - I am neutral
 - I disagree
 - I strongly disagree
2. Psychological problems work themselves out.
 - I strongly agree
 - I agree
 - I am neutral
 - I disagree
 - I strongly disagree
3. I should figure out how to deal with my mental issues on my own without any external help
 - I strongly agree
 - I agree
 - I am neutral
 - I disagree
 - I strongly disagree
4. I would have a very good idea of what to do when I experience a mental health issue
 - YES

- NO
- 5. Seeking Mental Healthcare professional means you are not strong enough to manage your own difficulties
 - I strongly agree
 - I agree
 - I am neutral
 - I disagree
 - I strongly disagree
- 6. I know where to seek help about a Mental Health issue I might experience (other mental health services institutions excluding NDERA psychiatric centre)
 - YES
 - NO
- 7. I believe treatment for a mental illness, provided by a mental health professional, would be effective
 - I strongly agree
 - I agree
 - I am neutral
 - I disagree
 - I strongly disagree
- 8. Which of these mental illnesses do you know something about (check all that apply)
 - Depression
 - Anxiety
 - Bipolar disorder
 - Trauma-related disorders
 - Schizophrenia
 - Post-Traumatic Stress disorders
 - Social Phobia
 - Eating disorder
 - Obsessive-Compulsive Disorder
 - None

Questions about help-seeking behaviour

- 9. Have you felt mentally unhealthy in the last six months?
 - YES
 - NO
- 10. If your mental health condition was diagnosed by a professional, what was it?

- 11. Where did you seek help from or would you prefer to seek help from in case you experience an MHI?
 - Mental health professionals
 - Individual coping strategies such as Meditation, sports, or listening to music,
 - People (friends & family)
 - Taking prescribed medications
 - Did nothing
 - Other.....
- B. Why that choice ?

- 12. Does your university have a wellness centre (or any other way of supporting student's mental wellbeing)?
 - YES
 - NO
- 13. What is your willingness to seek help from a university's wellness centre?
 - Definitely willing
 - Probably willing
 - Neither
 - Probably unwilling
 - Definitely Unwilling
- B. What are the reasons behind your choice?

.....

14. What are the things that contribute to your mental health problems?

- Covid-19,
- Relationships
- past trauma
- Loneliness
- financial problems
- loss of someone
- figuring out what to do after studies
- overthinking
- family issues
- issues with friends
- a disease
- academics
- Other.....

15. I have used online resources to learn about a mental health issue I was experiencing

- YES
- NO

16. Suicidal thoughts have crossed my mind for the last six months

- YES
- NO

17. I can seek help (either formal or non-formal help) if I feel mentally ill for:

- 1 WEEK
- 2 WEEKS
- A MONTH
- 3 MONTHS
- 6MONTHS
- A Year and above

18. If I realise I were having a mental breakdown, my first thought would be to get professional attention

- YES
- NO

19. I would feel uncomfortable seeking professional help for psychological problems

- I strongly agree
- I agree
- I am neutral
- I disagree
- I strongly disagree

20. On a scale of 5, how much is your trust for professional mental health support

- None
- Very Little
- Some
- Trust
- Highly

21. If I were experiencing a serious psychological problem, I would be confident that I could find relief in psychotherapy.

- I strongly agree
- I agree
- I am neutral
- I disagree
- I strongly disagree

22. What could be your convenient way of receiving professional mental health support

- Face to Face
- Via a Phone call
- Video Calls
- Chats / Text messages

- Other

23. Have you faced challenges while seeking professional mental healthcare?

- Yes
- No
-
- brief yes, please list them
-

24. What kind of support would you require to help you seek professional help?

- Financial
- Mental health awareness/Education
- The wellness centre at school
- other.....