Research Paper

Factors Influencing Mental Help Seeking among Youth in Delhi-NCR

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ABSTRACT

In contemporary society, there is a noticeable increase in the youth's vocalization and acknowledgment of mental health issues. However, it remains unclear whether this heightened awareness translates into increased help-seeking behaviors. This study aims to explore the factors influencing mental health awareness and help-seeking behaviors among young adults in Delhi-NCR, India. A qualitative research design was employed, involving semi-structured interviews with six participants purposely selected to ensure diversity. Thematic analysis revealed several key findings. Participants exhibited awareness of mental health issues but faced significant barriers to seeking help, including societal stigma, lack of emotional support, financial constraints, limited accessibility to services, and governmental inaction. Stigma surrounding mental health, particularly rooted in traditional beliefs and gender norms, emerged as a significant deterrent to seeking professional help. Moreover, participants expressed limited mental health literacy, relying on unreliable sources for information. Financial constraints and lack of accessibility to mental health services further hindered help-seeking behaviors. Participants underscored the crucial role of supportive relationships and witnessing their friends having positive experiences with therapy in facilitating help-seeking. The study highlights the urgent need for de-stigmatization efforts, comprehensive mental health education, and accessible services to address barriers and promote mental well-being among young adults in India. Additionally, governmental initiatives are warranted to provide affordable and readily accessible mental health services. This research contributes to a deeper understanding of mental health awareness and help-seeking behaviors among youth, offering insights for the development of targeted interventions and policies to address mental health challenges effectively.

As research underscores, our global community currently accommodates 1.8 billion young individuals aged 10-24 years, constituting a substantial quarter of the world population (United Nations Population Fund, 2014). Of particular note, nine out of 10 of these young inhabitants reside in less developed countries, with India taking the lead by harboring an astonishing 356 million within this age cohort, surpassing even China in numbers (United Nations Population Fund, 2014).

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In Erikson's Stages of Psychosocial Development, young adults are grouped in Stage Six, 'Intimacy vs. Isolation,' which encompasses individuals aged 18-40 (Erikson, 1963). This stage addresses the challenge of forming meaningful connections, and some individuals may find themselves stuck in isolation due to mental health issues. This phase gains particular significance in the realm of mental health, given that the onset of most mental and substance use disorders (MSUDs) unfolds during adolescence, often persisting into adulthood with a chronic or relapsing course, as evidenced by studies conducted by Kessler et al., (2007).

Globally, the mounting burden of mental health challenges among young people has become a cause for heightened concern (Bor et al., 2014). Research consistently reveals that the majority of mental disorders manifest before the age of 25, with an increased likelihood between 11 and 18 years (Patton et al., 2016). The prevalence of common mental disorders, such as depressive and anxiety disorders, intensifies during childhood, peaks in adolescence, and persists into early to middle age (10–29 years) (Chadda et al., 2018).

Zooming into the Indian context, the National Mental Health Survey of India (2015-16) accentuates the urgency of addressing the situation. It estimates the current prevalence of mental disorders within the 18-29 age group at 7.39%, excluding tobacco use disorder, with a lifetime prevalence of 9.54% (Gururaj et al., 2016). Alarming rates of self-harm, with suicide emerging as a leading cause of death, underscore the imperative for immediate and comprehensive mental health interventions among young people in India (Prasad et al., 2004).

Crucially, approximately half of all mental illnesses commence by the age of 14, and three-quarters manifest by mid-20s (Kessler et al., 2007). This research aspires to authentically explore the nuanced dimensions of mental health awareness and help-seeking behavior among young adults in India, integrating insights from global and national studies to offer a comprehensive and authentic understanding of this critical issue.

Mental health

According to the World Health Organization (WHO) mental health is defined as a state of subjective well being, in which an individual realizes his or her own abilities, can cope with the normal stressors of life, can work productively and is able to make a contribution to his or her community. In this sense, mental health is the foundation for individual well-being and the effective functioning of a community (Reddy, 2017).

Mental health awareness, defined as knowledge and attitudes about mental health conditions (MHCs) which aid their recognition, management and prevention. (Uddin et al., 2019)

Mental health awareness activities are an important element of improving mental health because they help our community understand the impact on an important relationship to academics, workplace and personal success.

Mental help-seeking behavior

This study defines "mental help-seeking behavior" as the actions and efforts individuals take to seek support from various formal and informal health services. The help-seeking process encompasses awareness of the problem, knowledge of available support, willingness to seek help, and disclosure of treatments (Chandrasekara, 2016).

Mehrotra et al. (2018) identified poor identification of mental illness, even among young adults in higher education, as a significant barrier to mental help-seeking behavior. Only 15% of college-going youth could correctly identify depression in a vignette, especially when depressive symptoms were preceded by a negative life event. Similarly, Sameed et al. (2016) revealed a concerning trend in mental health literacy among medical students, with only 13% accurately identifying depression. This lack of awareness may contribute to hesitancy in seeking professional help, as individuals may not recognize depressive symptoms or consider them a passing phase.

Fathima et al. (2020) supported these findings, emphasizing that friends are often perceived as the primary source for seeking help with depressive symptoms, while professional help-seeking diminishes when depression is associated with a life event. These studies collectively highlight the urgent need to address mental health literacy and societal norms to encourage timely and appropriate help-seeking behaviors among young individuals. Gaiha et al. (2014) reported pervasive socio-cultural factors, especially stigma, inhibiting access to basic mental health information and care, despite knowledge that mental illness is treatable. Degrading treatment, loss of personal liberty, and social exclusion emerged as major barriers to mental help-seeking behavior.

Reddy's (2017) study revealed that 7.9% of students reported the idea of hurting themselves during the study period, indicating a need for interventions to improve help-seeking tendencies. Only 16.2% of those who sought help did so from professional sources, underscoring the importance of utilizing available help to prevent the development of more severe conditions. The systematic review by Gulliver et al. (2010) aimed to comprehensively analyze barriers and facilitators of help-seeking in young people. Findings emphasized that stigma, embarrassment, poor mental health literacy, and a preference for self-reliance are significant barriers, while positive past experiences and social support emerged as crucial facilitators. In a parallel effort, Sanghvi et al. (2021) focused on understanding help-seeking behaviors for mental health issues among adults in India, revealing a multitude of barriers and advocating for strategies addressing mental health literacy and reducing stigma.

Rationale
It might be apparent these days that the youth of the country is being vocal and open about the importance of mental health and in discussing their own mental health issues. The present study aims to understand whether this rise in awareness has resulted in more help seeking behavior and the factors influencing the same. Recognising the importance of mental health might not equate help seeking behavior as there are many other factors at play. There can be various impediments in mental help seeking even if the youth recognises the need for professional help. Identifying those factors that act as a barrier to mental help seeking can help formulate effective strategies that target those barriers. In India, help seeking is often a family-based decision making process where all the members of the family have to be involved before a person can consult a therapist. Thus, the family is often one of the factors.

Mental health literacy is important for the effective recognition, management, and prevention of mental health disorders. This literacy can be achieved by imparting basic psychological knowledge in schools, helping adolescents develop effective coping skills, and conducting workshops or seminars on mental health awareness and promotion. It is important to educate young people about mental health and emotional problems so that they know how to detect symptoms in order to seek effective help. Being ignorant, stigmatized,

or otherwise hindered, they are more likely to seek unreliable and possibly harmful ways to deal with stress and emotional or relationship issues, such as depending on alcohol to suppress uneasy feelings or turning to illicit drugs for an escape. Because of the poor mental health literacy and stigma surrounding mental illnesses, those individuals are inhibited from the available treatments.

Poor mental health is strongly related to other health and development concerns in young people, notably lower educational achievements, substance abuse, violence, and poor reproductive and sexual health (Patel et al., 2007). Hence, it becomes important to address the mental health needs of young people so that they can reach their potential and contribute to the development of the country.

MATERIALS AND METHODS

Objectives
To understand mental health awareness in youth and the factors influencing their mental help seeking.

Research Design
In the present study, a qualitative research design was utilized to delve into the viewpoints and experiences of young adults in Delhi NCR concerning their awareness of mental health and behaviors related to seeking help. The research design chosen for this study is the descriptive research design.

Sample
To construct our participant sample, a rigorous process was implemented to ensure diversity and representation within the study. The sample comprised six individuals, evenly distributed with three females and three males, aged between 18 and 29 years, purposefully drawn from the broader target population of Delhi-NCR. Employing a purposive sampling approach, participants were selected based on their willingness and suitability to participate, ensuring alignment with the characteristics of the broader target demographic.

Participant recruitment was facilitated through established personal connections, fostering trust and comfort. Utilizing guidelines from the semi-structured interview method, we employed a purposive approach to select a sample that was both diverse and representative. This involved identifying individuals willing to share their insights on mental health awareness and help-seeking behavior. Our inclusion criteria specified individuals who were willingly available, suitable for participation, and members of the target population, ensuring that the chosen participants reflected the study's focus on young adults in Delhi-NCR.

Before participants engaged in the study, they were presented with a comprehensive written informed consent form, elucidating the study's objectives, the nature of their involvement, and potential risks and benefits associated with participation. Participants were given ample time to review the consent form, and all queries were thoroughly addressed. Emphasis was placed on the voluntary nature of participation, granting participants the freedom to withdraw without encountering negative consequences.

Throughout the data collection process, which primarily utilized the semi-structured interview method, participants' physical and psychological well-being were vigilantly monitored. Any signs of distress or discomfort were addressed promptly, upholding a supportive and ethical research environment. To ensure participants' privacy and

confidentiality, all data collected during the study were anonymized and securely stored. Personal identifiers were systematically removed from the dataset, reinforcing our commitment to preserving the confidential nature of participants' identities. This comprehensive and ethical approach underscores the integrity and validity of the research endeavor, facilitating a nuanced exploration of mental health awareness and help-seeking behavior among young adults in Delhi-NCR.

Table 1: Participant demographic details

Participants	Age	Gender	Socio-Economic Status	Working/Student
P1	25	Male	Upper Middle Class	Working
P2	25	Female	Upper Middle Class	Working
P3	25	Male	Upper Middle Class	Working
P4	22	Female	Middle Class	Working
P5	22	Male	Middle Class	B.Tech Student
P6	20	Female	Middle Class	MBBS Student

Materials
Semi structured interview schedule, audio recorder.

Procedure
To delve into the nuances of mental health awareness and help-seeking behavior among young adults, a semi-structured interview approach was meticulously employed. The development of the interview framework involved an extensive review of existing literature and thoughtful deliberation by the researchers. The initial step included reaching out to potential participants, providing a comprehensive briefing on the study's objectives, and ensuring adherence to research ethics. Explicit consent was obtained for participation and the recording of the interviews. The interviews were conducted face-to-face, fostering a one-to-one setting in a location where participants felt at ease, with the flexibility to respond in their preferred language, either Hindi or English. The interviews, spanning approximately 30 to 50 minutes, commenced with broad questions, such as 'how do you perceive mental health awareness?,' leading to more focused inquiries tailored to the participants' responses, such as 'can you share your experiences in seeking help for mental health concerns?' Following the interviews, participants were debriefed and assured that the study details and their personal information would be handled confidentially, solely for research purposes.

Each researcher individually conducted interviews with two participants, and subsequently, the interviews underwent transcription. For analysis, an iterative process was employed, involving the identification of patterns and the linkage of themes through a meticulous reading of the transcripts on three separate occasions. This comprehensive and thoughtful methodology ensured a nuanced exploration of mental health awareness and help-seeking behavior among young adults, fostering a deeper understanding of their perspectives and experiences in the context of Delhi-NCR.

RESULTS
The findings of the study are obtained through thematic analysis of the qualitative data. As a result, nine distinct themes emerged, shedding light on the factors influencing mental health awareness and help-seeking behaviors among young adults in Delhi-NCR, India. These themes encompass both barriers and facilitators related to mental health support. Participants demonstrated awareness of mental health issues but encountered significant obstacles when

seeking help. These barriers included societal stigma, lack of emotional support, financial constraints, limited accessibility to services, and governmental inaction.

Table 2: Theme table

Themes

1. Mental Health Awareness
   ● Youth is aware
   ● Mental health perceived as important
   ● Mental and physical health as interrelated
 	
2. Stigma as a Barrier
   ● Society's backward beliefs regarding mental illness
   ● Labeling of people as "Crazy"
   ● Traditional masculine roles identified by society
   ● Norms against emotional disclosure
 	
3. Lack of Emotional Support as a Barrier
   ● Facing rejection from loved ones when seeking help
   ● Unsupportive families
   ● Social support is important in lightening the burden
 	
4. Lack of Mental Health Literacy as a Barrier
   ● Perceiving those who seek help as "abnormal"
   ● Incomplete knowledge about mental health and illness
   ● No formal education on this topic
 	
5. Ignorance as a Barrier
   ● Not seeking help despite awareness
   ● Privately enduring hardships in fear of being stigmatized
   ● Not being exposed to the therapeutic process
   ● Seeking therapy not the first choice
 	
6. Financial Constraint as a Barrier
   ● Counsellor's fee perceived as unaffordable to the middle and lower class
   ● Therapy perceived as a privilege only the rich can afford
 	
7. Lack of Accessibility as a Barrier
   ● Counselors not easily approachable
   ● Dependency on referrals from doctors
 	
8. Lack of Government Initiative as a Barrier
   ● Government inaction on mental health
 	
9. Experiential Insight as a Facilitator
   ● Acquaintance having a positive experience with therapy

DISCUSSION

The present study was carried out with an objective to understand mental health awareness in youth and the factors influencing their mental help seeking. Participants expressed similar sentiments regarding why people are unable to seek mental health help, by many citing common barriers. They highlighted reasons such as societal stigma, lack of emotional support, ignorance about mental health, financial constraints, limited accessibility to services, and government inaction. These shared experiences underscore the pervasive challenges individuals face in accessing mental health support and the urgent need for systemic change to address these barriers.

Mental Health Awareness

This theme explores the current state of mental health awareness in the youth. The participants seem to be well aware of the prevalence of mental health problems as well as the importance of mental health. The main sources of information for the youth are social media and western movies. Although awareness is growing among youth, they can still be misinformed and have incomplete knowledge because of the unreliable sources of information. The participants are aware of the distinct yet interrelated concepts of mental and physical health. They are aware of the process of therapy and believe in its effectiveness.

Globally, 20% of young people experience mental disorders, but only 7.3% of India's youth report such problems. Understanding stigma can inform targeted interventions to address it both in India and globally (Shivani Mathur Gaiha et al, 2020).

The need for promoting an understanding of the positive aspects of mental health and empowering young individuals to recognize that mental well-being is not static but can be enhanced or maintained (Linda Beckman et al, 2023).

P6: *"Mental health is a state of mind where it does not negatively interfere with daily functioning, and the person feels well both in body and mind"*.

P3: *"Therapy is for people who are in distress and need help. Therapy is where the person conveys their innermost thoughts and feelings to the other person, what they are feeling and facing, without being worried what the other person would think of them"*.

Stigma as a Barrier

This theme covers the stigma surrounding mental health in India. Stigma acts as a major barrier preventing youth from seeking help from a professional. The participants reported being hindered by the pressures of society when it comes to mental health. Indian society holds traditional and backward beliefs regarding mental health illness, making it a taboo to openly speak about it. Participants pointed out how the norms against emotional disclosure keeps them from seeking help. Those who visit a counselor or seek therapy are viewed and labeled as "crazy", "insane", or "abnormal". These kinds of labels make the person hesitant from seeking help in fear of being stigmatized and outcast. A systematic mapping review found that despite efforts to improve accessibility, there remains a lack of comprehensive understanding of inequalities in access to mental health services. Key barriers include individuals' ability to seek (e.g., stigma and discrimination) and ability to reach e.g., availability of services (Hayley J. Lowther-Payne et al, 2023).

P3: *"People come under the pressures of society. The mentality is still traditional and backward where people think that if someone goes to a therapist, they must be insane or crazy. So, because of the fear of stigma from society, they don't seek therapy".*

P4: *"Indian parents are like this only. They are backward in their beliefs. They will take you to a "Baba" and suggest doing some rituals or black magic. The main reason I think is the stigma. There is this mixture of the traditional Indian society and the modern one".*

Additionally, the traditional masculine roles forced upon the men act as a barrier to openly expressing and seeking appropriate help for their mental health problems. They are brought up to be emotionally distant, quietly enduring hardships and to act as strong and independent. In lieu of their upbringing and socialization, those under the masculine role find it difficult to be vulnerable and hence choose other means of coping such as escaping through drugs and alcohol. Because of the prevalent stigma, people in need of help are being prevented from seeking the appropriate way of dealing with mental health problems.

P5: *"Sadly, society kind of tells, or we can say teach men to keep their feelings and fears to themselves and not ask for help". "I don't think I can share my problems with my family or friends because I'm a man, and my society teaches me that a man is someone who can manage all his issues, problems, and challenges on his own without relying on others for help or support".*

The reporting of mental disorders in India revealed that self-reporting of mental illness is less than 1%. The reluctance to report mental health issues persists due to the prevailing stigma, and individuals often choose silence over seeking help, fearing social judgment (IIT Jodhpur, 2024).

Lack of Emotional Support as a Barrier
The theme of "Lack of Emotional Support" encapsulates the profound impact of facing rejection and unsupportive environments when seeking help for mental health issues. Participants express a palpable hesitancy in discussing their struggles, fearing societal judgment and misunderstanding. This reluctance underscores a perceived lack of acceptance within their social circles, hindering open communication with parents, friends, and relatives. Supportive relationships play a crucial role in mental health outcomes (Maritta Törrönen et al, 2021).

However, participants recognize the critical importance of emotional support in navigating mental health challenges, particularly from loved ones. They emphasize the pivotal role of familial and social support networks in alleviating the burden of mental health issues. Nevertheless, unsupportive family environments are depicted as significant barriers to seeking help, exacerbating feelings of isolation and distress. The National Longitudinal Study of Adolescent Health in the United States found that adolescents who reported feeling connected to home or school were as much as 66% less likely to experience health risk behaviors related to sexual health, substance use, and violence. Connectedness to family, school, and community positively impacts mental health and overall wellbeing in adulthood (Robert W Blum, professor et al, 2022).

The theme underscores the therapeutic value of supportive relationships, highlighting the indispensable role of familial, maternal, and community support in facilitating help-seeking behavior and fostering resilience. It emphasizes the need for broader societal acceptance and

understanding of mental health issues, while also recognizing the profound impact of supportive networks on overall well-being. Peer support is found to be particularly important, having an equivalent impact to two other protective factors, fostering positive peer relationships and supportive teacher–student relationships promote mental health and resilience for all children, including both those with and without supportive home environments (Nadia Butler et al, 2022).

P1: *"I don't want to be seen as someone who has a problem, or something like that So, yeah, I don't think I can openly talk to my parents or my friends, or my relatives, as if that matters about mental health problems, especially."*

P5: *"I mean even those who need help can't get it because their parents aren't supportive"*

P4: *"I think parents play a vital role in these types of situations because if their child is gathering his all strength to tell you that he or she is not feeling well, he is going through a worst situation, and if the parent does not react in a good supportive way, then it has a deep impact on the kid. Because then he will start ignoring his problems and whatever he was going through. So, yes, I think their support is quite important."*

P2: *"Emotional support is very, very important for the person because, you know, anyone cannot go through this phase alone. If we have and even if they can, I mean, there are various people who do go through this alone. But if you have this emotional support from your parents or your friends or from someone who is dear to you, that really helps you a lot in the times of need. So, you know, it's like that. So important support from your loved ones is very, very important."*

Lack of Mental Health Literacy as a Barrier

Under this theme, the prevalent lack of knowledge regarding the concept of mental health is addressed. The knowledge of young people on this topic is very limited and often distorted because of the unreliable and informal sources of their information such as social media and Hollywood movies. This is mainly because the educational institutes in India do not impart basic psychological knowledge which leaves the youth unaware and ill-informed. The participants showed understanding of a few terms such as anxiety, depression, and trauma. They conceded that they did not have a full understanding of these concepts either. The socio-cultural basis of these wellbeing determinants are rooted in hierarchical social structures and collectivistic cultural orientation (Dhriti Ratra et al, 2022). Only 7.3% of India's youth report mental health problems, understanding and combating stigma remain crucial (Shivani Mathur Gaiha et al, 2020).

P3: *"I don't have a detailed understanding of mental health and psychology. I only know a few terms like depression and anxiety that we face. And this too we didn't learn in school or never studied. It's only through social media that we come to know of these concepts. The government is not even aware, they do not recognise this need".*

One of the participants (P1) considers those who seek help as "abnormal", stating that *"I think that those who take therapy are not normal. I mean, why would anyone with lots of stress and people who just talk random stuff and do random things, be considered normal? I mean, that is obviously not normal in any sense".*

This kind of labeling and stigmatizing is a result of lack of mental health literacy and can only be rectified through formal education on mental health and related concepts. Without

knowing the appropriate terms, those who need help won't be able to clearly express what they are going through and without knowledge of the professional help that is available to them, they won't be able to seek help.

A participant (P6) noted that the society associates seeking psychological help with severe mental illness as she recalled *"there is a relative who was referred to a psychologist but then he never went, because of the usual taboo, that only psycho or mad people go to a psychologist and he believes that there is nothing wrong with my mind so why should I go"*. This reflects a misconception due to lack of literacy on mental health that only those suffering severe psychological disorders seek help.

P6: *"In many areas, mental disorders are viewed as some sort of evil curse or black magic. So instead of going to the hospital, they might go to temples, like the Balaji temple for remedies, thinking it can help. The problem is, not understanding mental health like we do with physical health, can lead to delays in getting the right kind of help"*.

Ignorance as a Barrier
The theme of "Ignorance as a Barrier" highlights the pervasive influence of societal attitudes and personal perceptions that hinder individuals from seeking help for mental health challenges. Participants exhibit a notable lack of understanding and awareness regarding mental health, often categorizing those facing such challenges as "weird" and questioning the value of seeking professional treatment.

P1: *"Yeah, I definitely think that they (people who have mental health issues) are not normal. I mean, why would anyone with lots of stress and people who just talk random stuff and do random things, be considered normal? I mean, that is obviously not normal in any sense. they do weird stuff, and they act so weirdly and everything. So they're obviously not normal in so many ways."*

P1: *"No, why would I be friends or even make acquaintance with people who have something wrong in themselves? I mean, that is so weird."*

The provided verbatims illustrate a troubling viewpoint regarding mental health, marked by stigma and a lack of compassion. The speaker labels those with mental health issues as "not normal," attributing their behaviors to randomness and abnormality, showcasing a profound misunderstanding of mental health complexities. Additionally, the speaker shows reluctance to engage with individuals facing mental health challenges, dismissing them as unworthy of social connections. This mindset perpetuates stigma, erects social barriers, and deepens the isolation felt by those already marginalized.

Furthermore, seeking therapy is not the initial inclination for participants, who tend to cope with emotional challenges privately due to a fear of stigmatization. There is a reluctance to show vulnerability or discuss problems openly, with counseling perceived as external assistance rather than a viable solution.

P6: *"if it (mental health problem) is not resolved then approaching a professional for counseling will be a last step"*

This theme also highlights the normalization of life's challenges and the acceptance of unrealistic standards of strength, which further discourage seeking professional help.

P5: *"No way, definitely not. I wouldn't go for counseling because I think I can deal with my own mental stuff."*

Overall, the theme underscores the need for greater education, awareness, and destigmatization efforts to address ignorance as a significant barrier to mental health support-seeking behaviors.

Financial Constraint as a Barrier

The theme of "Financial Constraint as a Barrier" illuminates the considerable hurdles individuals face in accessing mental health support due to financial limitations. Participants highlight the exorbitant costs associated with therapy sessions, particularly emphasizing their unaffordability for those in the middle and lower socioeconomic classes. High copays, deductibles, and limited coverage for mental health providers are common barriers. Many individuals face difficulties accessing treatment due to financial constraints (Joel L. Young M. D., 2017).

The disparity is compounded by a perceived privilege attached to therapy, with the upper class seen as more able to afford and access such services. The theme underscores the urgent need for addressing affordability issues and ensuring equitable access to mental health support for individuals across all socioeconomic backgrounds.

P2: *"there are various financial issues because these sessions are, you know, very, very, very expensive for a normal middle class person to attend, right?"*

P4: *"As of now, people who are going to counseling are only the highly educated, rich people."*

P6: *"Yes, it (financial constraints) could be a possible reason, that won't allow people to go for therapy."*

P5: *"Yes, I think most people see going to a therapist as something only rich people do."*

Challenges include unequal access to mental health care providers, an outdated and fragmented care ecosystem, and high out-of-pocket costs. Inadequate access to mental health care has consequences not only for individuals but also for governments and economies (Alison Muckle Egizi et al., 2022). Geographic, financial, and provider accessibility are major barriers to accessing mental health care. These interconnected barriers impact individuals' ability to seek timely and quality mental health service (Jean M Twenge et al., 2021).

Lack of Accessibility as a Barrier

The theme underscores the challenges individuals face in accessing mental health support due to limited availability and difficulty in approaching counselors. Participants highlight a gap between those in need of help and the resources available to assist them, with counselors not easily approachable in public settings. Moreover, individuals express uncertainty and the perception that obtaining mental health support is not straightforward. Disparities in mental health utilization by marginalized ethnic groups are influenced by factors such as provider discrimination, lack of adequate health insurance, high costs, stigma, mistrust of the healthcare system, and limited awareness about mental illnesses (Deep Shukla, 2020).

This theme emphasizes the importance of addressing barriers to accessibility in mental health services, as highlighted by Participant 6 observation that individuals often rely on referrals from general physicians, indicating a disjointed pathway to care.

P6: *"My views on this are that they are not easily available in public. People generally first report to doctors, the general physician and then they are referred to a psychologist. So, I think there is a big gap between those who need help and those who can help them"*

Participant 5 comment further emphasizes the struggle individuals face in navigating the process of seeking mental health support and underscores the need for increased accessibility and awareness surrounding available resources.

P5: *"They feel they need mental help, but they're unsure how to approach a counselor, and getting mental help is not that easy."*

Prominent barriers include limited resources, system complexity, attitudinal and social matters, technological limitations, distance to services, insufficient culturally-sensitive practice, and lack of awareness (Bianca E. Kavanagh et al., 2023).

Lack of Government Initiative as a Barrier
This theme captures the inaction of the Indian government in the area of mental health. Participants talked about how the government does not even recognise the need and importance of mental health in the country. No participant was able to recall any initiative taken by the government on mental health of the youth. The government should provide affordable and easily accessible mental health services so that people would be more willing to seek help. There is widespread ignorance regarding mental health especially in the rural areas, where the government has a significant role to play in spreading awareness and tackling taboo and outdated practices.

Making mental health a topic of interest by the government can help the youth come forward in seeking help. Unfortunately, no specific government initiatives related to mental health for youth were recalled by participants. However, the government's role is crucial in spreading awareness, tackling taboos, and providing accessible services (Ramdas Ransing et al., 2021).

P5: *"I don't think the government is doing anything for mental health. I've never heard of anything like that. On a societal level there should be awareness campaigns, toll-free helplines, and free access to psychologists in society so that support is readily available whenever it's needed".*

Experiential Insight as a Facilitator
Having a first hand experience of a close one seeking therapy that resulted in a positive experience and outcome for them may act as a facilitator for the youth to seek help for themselves. Participants expressed how their relative or friend had benefited from consulting a psychologist. Their positive experiences helped create a positive image of therapy for the participants and strengthened their belief in the effectiveness of therapy. Being exposed to the process of therapy and acknowledging the benefits of the same helps foster a willingness to seek help in times of need.

Positive experiences with therapy can influence future help-seeking behaviors (Natalie Divin et al, 2018). Perceived stigma, difficulty expressing concerns, and a preference for self-reliance were identified as barriers (Caroline Mitchell et al., 2017). Understanding attitudes and behaviors related to seeking help is crucial for mental health interventions (Maria Nicula et al, 2022).

P3: *"One of my friends has been to counseling for mental health issues. It was because of her relationship problems that she took therapy after her breakup. She had a very positive experience. She told me that the therapist explained everything to her, she took multiple sessions. Her issues were resolved in around 5 to 6 sessions. And now she is totally sound and mentally fit. So, the therapy was effective".*

P6: *"I have seen one of my college mates gone for counseling, and she came out better. There was a drastic change in her behavior and personality after the treatment and counseling. She sought counseling because she couldn't adjust in the hostel".*

CONCLUSION

The exploration of mental health awareness among young adults in Delhi-NCR reveals a complex landscape marked by both progress and significant barriers. While participants demonstrate a growing recognition of mental health issues and the importance of seeking help, they are hindered by pervasive stigma deeply rooted in traditional beliefs and societal pressures. The taboo surrounding mental health, compounded by gender norms dictating emotional expression, contributes to a reluctance to seek professional help and a preference for coping mechanisms perceived as more socially acceptable. Moreover, limited mental health literacy, exacerbated by the lack of formal education on the subject, perpetuates misconceptions and inhibits help-seeking behaviors. Financial constraints further impede access to mental health support, as therapy sessions are often deemed unaffordable for many.

Accessibility barriers, compounded by a lack of government initiatives, exacerbate the challenge of accessing mental health services, particularly in rural areas. However, positive experiences of individuals close to them seeking therapy offer a glimmer of hope, highlighting the potential for firsthand exposure to facilitate help-seeking behaviors among youth. Addressing these multifaceted barriers demands comprehensive efforts to destigmatize mental health, enhance education and awareness, improve affordability and accessibility of services, and foster supportive environments conducive to seeking help.

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