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UNDERGRADUATE STUDENTS' VIEWS ON SEEKING PSYCHOLOGICAL HELP IN KYRGYZSTAN: A QUALITATIVE STUDY

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ВЗГЛЯДЫ СТУДЕНТОВ БАКАЛАВРИАТА НА ОБРАЩЕНИЕ ЗА ПСИХОЛОГИЧЕСКОЙ ПОМОЩЬЮ В КЫРГЫЗСТАНЕ: КАЧЕСТВЕННОЕ ИССЛЕДОВАНИЕ

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Abstract. Many university students go through periods of psychological difficulty. Far fewer actually go to a professional about it. This is not new, but the bulk of what we know about the gap between need and help comes from American, Western European, and East Asian samples. Central Asia is missing from most of those conversations, and Kyrgyzstan in particular has produced little visible work on the topic. The present study looks at how undergraduate students at Kyrgyzstan-Turkey Manas University talk about psychological support. Thirty students answered an online questionnaire (15 women and 15 men, convenience sample). Their written responses were coded thematically in MAXQDA. Six themes emerged: mental health awareness and personal growth; strength, courage, and responsibility; professional support and safe space; emotional relief and coping; social environment and support network; and negative perceptions and reluctance. Several patterns stand out. Students talked about asking for help as courage rather than weakness. They placed religion and family beside professional help instead of in competition with it. The barriers were familiar in some ways (stigma, both public and internal) and locally specific in others (real doubts about whether the profession in Kyrgyzstan is yet ready to deliver what students expect, and a strange but cheap problem: students who know counseling exists but cannot work out how to actually use it). What we found suggests attitudes have moved more quickly than the services around them.

Аннотация. Многие студенты вузов переживают периоды психологических трудностей, однако гораздо меньшее их число действительно обращается к специалистам. Это не новость. Тем не менее основная часть того, что нам известно о разрыве между потребностью в помощи и фактом обращения за ней, опирается на американские, западноевропейские и восточноазиатские выборки. Центральная Азия выпадает из большинства подобных дискуссий, а Кыргызстан, в частности, представлен крайне малым количеством заметных работ по данной теме. Настоящее исследование рассматривает, как студенты бакалавриата Кыргызско-Турецкого университета «Манас» высказываются о психологической поддержке. Тридцать студентов ответили на онлайн-анкету (15 женщин и 15 мужчин, удобная выборка). Их письменные ответы были закодированы тематически в программе MAXQDA. Выявлено шесть тем: осознание психического здоровья и личностный рост; сила, мужество и ответственность; профессиональная поддержка и безопасное пространство; эмоциональное облегчение и совладание; социальное окружение и сеть поддержки; негативное восприятие и нерешительность. Выделяется несколько закономерностей. Студенты говорили об обращении за помощью как о проявлении мужества, а не слабости. Они помещали религию и семью в один ряд с профессиональной помощью, а не в позицию конкуренции с ней. Барьеры в чем-то

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были привычными (стигма — как публичная, так и внутренняя), а в чем-то — локально специфичными: реальные сомнения в том, что профессия психолога в Кыргызстане готова дать то, чего ожидают студенты, и странная, но простая проблема — студенты знают о существовании консультирования, но не понимают, как им воспользоваться. Полученные данные говорят о том, что установки изменились быстрее, чем инфраструктура сопутствующих услуг.

Keywords: help-seeking, mental health, university students, Kyrgyzstan, post-Soviet, stigma, qualitative research.

Ключевые слова: обращение за помощью, психическое здоровье, студенты вузов, Кыргызстан, постсоветский контекст, стигма, качественное исследование.

Quite a lot of university students suffer from some form of psychological distress at some point during their studies. The numbers vary depending on whose study you read, but the general picture has been the same for years. Most of those students do not see a professional. That is the puzzle that this article, like many before it, tries to take seriously [1].

Almost everything written about this puzzle has been written in the United States, Western Europe, or East Asia. Türkiye contributes, too. Kyrgyzstan does not. To my knowledge, there is almost nothing in the international journals about how Kyrgyz students think about psychological help, even though the higher education system here has grown a lot in recent years and the kinds of pressures students live under (money, family, exams, an uncertain job market) are real and obvious.

There are a few things about Kyrgyzstan that make the standard literature an awkward fit. The country is post-Soviet, which carries with it a particular institutional history around psychiatry. It is also Muslim-majority, and Islam plays an active part in how people cope with day-to-day problems. And the institution where this study took place, Kyrgyzstan-Turkey Manas University, is a joint Kyrgyz-Turkish university. Models of help-seeking attitudes developed for, say, a counseling center at a US public university do not transfer cleanly. Here, a student might talk first to a religious figure, then to her mother, then perhaps consider a psychologist; some students openly question whether psychology, as practiced locally, is even a settled profession yet.

Determinants of students' help-seeking behavior have been fairly well outlined: mental health literacy, public and self-stigma, trust in professionals, previous access to services, social networks, and the delivery method [2]. None of this is in doubt for Kyrgyzstan. The question is, what do these familiar motifs look like when faced with elements that existing models say little about—religion as everyday coping and Soviet-era institutional mental health practice?

Thus, the present study seeks to conduct a description. It explores how a handful of undergraduates at Kyrgyzstan-Turkey Manas University discourse about psychological assistance. What draws them in? What drives them away? With that in mind, how do these factors fit among the elements already identified in the literature? The objective is to describe these phenomena.

Three questions directed the work: 1. How do students at this university understand psychological support? 2. What factors encourage or deter them from seeking it? 3. How do family, culture, and faith come into conflict with their own attitudes about seeking professional help?

Material and Methods

Design. The study employed a qualitative descriptive design. The intention was to allow students to describe their thinking in their own words rather than to test a hypothesis.

Participants. Thirty undergraduates at the Kyrgyzstan-Turkey Manas University in Bishkek participated in the study. Recruitment was conducted through convenience sampling, and

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participation was voluntary. The sample consisted of fifteen women and fifteen men from various departments and academic years.

Data collection. A semi-structured questionnaire was administered online via Google Forms. The questions were drafted based on relevant literature and reviewed by two researchers in educational sciences prior to distribution. Students provided written responses to five open-ended prompts: associations with the term "psychological support"; their history of considering or seeking such support; their typical coping mechanisms and social support networks; factors facilitating or hindering help-seeking; and their perceptions of the university's counseling services and prevailing social attitudes. Yes, written online responses miss things that face-to-face interviews would catch. That limitation gets attention later. The format also has a less obvious upside on a topic like this one. Students could think and write at their own pace, alone, which removes the kind of social pressure that comes from sitting across from someone and talking out loud about mental health. In a setting where stigma is still very real, that probably matters more than it would in, say, a Western European sample.

Ethical considerations. Participants were briefed on the aims of the study and on the voluntary nature of their participation. Confidentiality was promised; reporting was to be anonymized; no identifying information was collected. Withdrawal was possible at any stage. Ethical approval was obtained from the relevant university committee before fieldwork began.

Analysis. Thematic analysis was conducted in MAXQDA. The process followed the usual inductive sequence: reading, open coding, grouping into candidate themes, and refining against the data set. I coded all the responses myself. A second researcher re-coded a portion independently, and where we disagreed, we talked it through. Direct quotations appear in the next section. They were translated and lightly edited so they read more smoothly in English; the substance was not changed.

Results and Discussion

Six themes emerged from the coding: 1. Mental health awareness and personal growth; 2. Strength, courage, and responsibility; 3. Professional support and a safe space; 4. Emotional relief and coping; 5. Social environment and support network; 6. Negative perceptions and reluctance. Below, each theme is presented with student quotes and a brief discussion in the context of the literature.

Mental health awareness and personal growth: Many students did not describe psychological support in the way an older generation in this country likely would. They did not frame it as something one does only when there is something wrong, but rather as something one does because they take themselves seriously. Mental health and physical health were often mentioned in the same breath.

"Seeking psychological support means taking care of my mental health, just as I would my physical health." Some described counseling as a way to discover their true selves. A first-year student recalled the start of her time at university:

"I was struggling because I was just beginning to know myself. I felt I was doing everything wrong. Talking with a counselor helped me accept and understand some things." A number of students noted that the changes resulting from counseling were gradual and lasting rather than quick fixes. This characterization of support—as growth rather than crisis response—is consistent with mental health literacy research [1, 3].

The bit that interests me is that the students are doing this in Kyrgyzstan. The vocabulary of self-care and self-knowledge is not old here. A generation ago, psychology in this part of the world was tied to Soviet psychiatric institutions, where the prevailing logic was anything but an invitation to disclose. There has been a shift at the university level. Whether it has reached the wider society is a separate question, and we cannot answer it from these data. Strength, courage, and responsibility. A clear thread: asking for help is not a weakness. It takes guts.

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I see it as a courageous step, not a weakness. One student put it in terms of responsibility for one's own inner life: "It means taking responsibility for your inner world."

Old labels—"crazy," "troubled"—were said to be losing force among the students' peer groups. Watching a friend go through counseling and come out better seemed to do more than any campaign: "After seeing the positive changes in my friend, I found the courage to seek help myself."

Prior exposure to mental health services, direct or vicarious, has been linked in earlier work to a higher chance of seeking help later [2]. The students described this exactly. They were not waiting for posters in the corridor; they were watching each other.

Professional support and a safe space. For students, psychological support meant a trust relationship with someone qualified. Three qualities kept coming up: competence, an absence of judgment, and confidentiality. I imagine a specialist who listens without judging and helps me see my strengths.

Trust was not immediate. "Opening up to a stranger about your inner world takes time. But as the sessions progressed, my trust grew". The students' relationship to confidentiality was interesting because it was double-sided. They wanted it. They also doubted it would hold. *"Without trusting the psychologist's ethics and confidentiality, it is hard to open up".*

A few raised more practical concerns about whether a competent specialist is even available locally, and whether sessions would be affordable. The trust theme connects to Bordin's working alliance [4] and to more recent reviews that put perceived trustworthiness near the top of the list of youth help-seeking predictors [2]. But what the students were worried about goes a step beyond trust in the abstract. Their doubt is more specific. It is about whether the profession in Kyrgyzstan is currently equipped to deliver what they expect. One student wrote that ethical norms in Kyrgyz psychology are "not yet settled". That is a sharper observation than ordinary stigma. Similar patterns appear elsewhere in post-Soviet societies, where the institutional distrust inherited from Soviet psychiatry continues to shape how people approach mental health services [5].

Emotional relief and coping. Thoughts about seeking help usually appeared when students felt their own coping had run out. Academic pressure, exam stress, fear about the future — the usual suspects.*"This thought emerged during university, when academic pressure and uncertainty about my future increased".* Others said they considered professional support when the people around them stopped feeling adequate. They wanted someone outside their social circle.

"Sometimes even when you talk to people around you, you don't feel fully understood. In those moments, professional support seems healthier". This is a familiar finding. Students delay professional help until informal coping is exhausted, and the wish for a neutral listener is one of the most common triggers for finally crossing over [2].

Social environment and support network: family and close friends came first, always. Professional help came later, if it came at all. Religion and spirituality also came up consistently. For many students, faith was not in competition with professional help; it ran alongside it. "When I face a problem, I turn to two sources: my family and my faith. Together, they form my strongest support." The Qur'an and the Prophet's Sunnah were named as guides for big decisions. This is the cultural setting at work. Islamic tradition and the social structures left over from the Soviet period are doing real work in how people get through difficult periods. In the international literature, religion is usually framed as either protective or as a competing alternative to professional help. The picture here was different. Religion looked more like a base layer that other supports rested on. Family, friends, and faith were one layer; professional support, when it appeared at all, sat next to that layer rather than displacing it. The practical reading is uncomplicated: counseling services in Kyrgyzstan that present themselves as substitutes for spiritual coping are not going to land well. Anything that frames itself as compatible with faith will probably have a better chance.

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Negative perceptions and reluctance. Stigma was the most stubborn barrier. The students talked about external judgment and their own internal hesitation in the same breath.

"Society still sees psychological support as weakness or being troubled. The fear of being judged holds people back". Distrust of the profession itself also came up, tied to a sense that psychology in Kyrgyzstan is still developing.

"This field is not well-established in our country. Going to someone who is not well-trained might do more harm than good". And there was a third, more pedestrian, barrier. Students knew the university had counseling services. They had no idea how to actually use them.

"I know the service exists, but I don't know how to apply or what they help with. The information isn't clear". The basic stigma finding aligns with a long line of earlier work on social and self-stigma reducing help-seeking [6].

What is worth holding onto here is that both kinds were present together. Public-facing anti-stigma work tends to leave self-stigma untouched, and self-stigma is where a lot of the hesitation actually lives. Two further barriers deserve a separate note. The first is the perceived underdevelopment of psychology as a profession. This should not be filed under stigma at all; it is a judgment about service quality, and treating it as a misperception misses what the students are saying. Better training, real accreditation, and visible ethical oversight probably matter more here than another awareness campaign. The second barrier is plain logistics. The students knew the counseling service existed, but they did not know how to walk through the door. That is the cheapest problem on the list to fix: clearer pathways, visible referral steps, and a less mysterious intake process—none of this is about beliefs [2].

Conclusions

The students at Kyrgyzstan-Turkey Manas University hold views about psychological help that pull in different directions. They use the vocabulary of self-care and personal growth, and they talk about asking for help as a brave thing to do. At the same time, they point to stigma, doubts about the local profession, and unclear access pathways as factors that hold them back. Attitudes have shifted; however, services and the wider culture have not caught up. Three implications emerge from this—none of them especially complicated. First, religion: spiritual resources here are not in competition with professional support, and a counseling service that positions itself as a quiet replacement for faith will likely fail. Services that frame themselves as compatible with how students already cope have a better chance. Second, stigma: public attitudes and private self-stigma are not the same problem, and they do not respond to the same intervention. A campaign aimed at the public side leaves the private side untouched; both need work. Third — and this is the most fixable of the three—access: the distance between attitude and action in this sample is mostly a logistics gap. Clearer referral procedures, a visible counseling unit, and an intake process students can actually navigate would close most of that gap, and none of it requires changing what anyone believes. The limitations of the study are obvious. Written online responses do not capture the texture of lived experience the way an interview would. Thirty undergraduates at one university cannot speak for Kyrgyz youth in general. Future research using face-to-face interviews and broader sampling across the region would help test whether the findings translate to other post-Soviet, Muslim-majority Central Asian settings.

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