

## Psychological Distress and Attitudes Toward Seeking Professional Psychological Help among Transwomen in Indonesia

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**Abstract.** Transwomen are one of the minority groups in Indonesia that are vulnerable to a high level of psychological distress, which may indicate the need to seek psychological help. An essential component of seeking help is attitude; without a positive attitude, individuals are less likely to have the intention to seek help. This study aimed to investigate the relationship between psychological distress and attitudes toward seeking professional psychological help among 117 transwomen in Indonesia, factoring in the level of psychological distress and the attitudes toward seeking professional psychological help. The study found no significant relationship between psychological distress and attitudes toward seeking professional psychological help. Results indicated that 72% of participants were classified as having a high level of psychological distress. A negative association between anxiety symptoms and psychological openness was observed, indicating that participants experiencing more symptoms of anxiety were less likely to open up about their psychological problems.

**Keywords:** attitudes toward seeking professional psychological help; transwomen; psychological distress

The Ministry of Social Affairs of the Republic of Indonesia [Kementerian Sosial Republik Indonesia] (2012) recognises the existence of transwomen and has designated them as one of the groups with social welfare problems (PMKS) that are entitled to Governments attention and access to services. However, the facts show that the way they are treated in society naturally leads to feelings of discrimination. For example, the Indonesian government only recognizes two genders (cisgender) men and women, which makes it difficult for many transwomen to obtain a National Identity Card (KTP). As a result, transwomen often cannot exercise their rights as citizens, i.e., to vote in elections (Priscilla, 2019). They also were not able to receive social assistance two years ago during the COVID-19 pandemic even though that social assistance was intended for marginalized groups (National Commission on Violence Against Women [Komisi Nasional Perempuan], 2020).

Another example concerns the general experience of transwomen, who are part of the gender

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minority group included in the 'T' of LGBT (Lesbian, Gay, Bisexual, Transgender). They often fall victim to gender-based discrimination because their conspicuous gender expression makes them easily identifiable (Kartiningdryani, 2019; Oetomo & Suvianita, 2013; of Women Empowerment et al., 2015). Low acceptance of transwomen also limits opportunities for them to work in the formal sector. Many transwomen earn a living by becoming sex workers even though the income is relatively low and cannot meet their daily needs (Praptoraharjo et al., 2016). This puts transwomen at risk because of their status as a minority, low levels of social support, job insecurity, and economic inequality, which are some of the factors that can threaten an individual's mental health (VicHealth, 2019).

Discrimination cause transwomen to experience symptoms of anxiety and depression at a disproportionately high rate compared to the general population (Budge et al., 2013; Hoffman, 2014; Nuttbrock et al., 2014). Transwomen who experience anxiety and depression also report very high rates of suicide ideation and suicide attempts (Halli et al., 2021; Maksut et al., 2020). In Indonesia, Praptoraharjo et al. (2016) discovered that 5% of transwomen participants residing in Jakarta disclosed having attempted suicide. Symptoms of anxiety and depression that transwomen often experience are symptoms of psychological distress.

Psychological distress is an unpleasant subjective state that appears in the form of two symptoms, namely anxiety and depression (Mirowsky & Ross, 2003). Psychological distress can occur due to stressors in daily life that are perceived as challenging to deal with (Arvidsdotter et al., 2016). Psychological distress was chosen as a variable in this research because the conditions of anxiety and depression experienced can interfere with daily functioning and, therefore, need to be treated before individuals are able to strive towards good psychological well-being (Boas & Morin, 2014; Franzen et al., 2021). With this condition in mind, the need for transwomen to get professional help becomes crucial. Despite this, some are reluctant to seek professional help even though they are experiencing psychological problems.

In research towards LGBTQ (Lesbian, Gay, Bisexual, Transgender, Queer) participants, Lytle et al. (2018) found that they preferred to seek psychological help from friends rather than professionals. According to Griffiths et al. (2011), these individuals may feel more comfortable being open to friends because their friends understand their background. However, a lack of knowledge about inadequate assistance may put the individual in a more dangerous position. Therefore, when experiencing psychological problems, seeking psychological help from professionals should remain a priority.

Psychological help-seeking is an active coping response carried out by individuals to overcome psychological problems. Sources of assistance may come from formal, informal, or self-help sources (Rickwood & Thomas, 2012). In this study, the source of assistance that became the focus of the study was formal sources. Formal sources include professionals who have been trained to deal with psychological problems, such as psychologists, psychiatrists, social workers, and doctors.

Psychological help-seeking consists of three components: Attitudes, intentions, and behaviour (Rickwood & Thomas, 2012). In this study, attitude is the component of seeking psychological help to be studied. The most essential component of help-seeking is attitude. Without a positive attitude, it is unlikely that individuals will have the intention to seek help (Mackenzie et al., 2004). Attitudes

toward seeking psychological help serve as a critical enabling factor for individuals to access mental health services (Picco et al., 2016; ten Have et al., 2010).

Attitude towards seeking psychological help is an evaluative reaction to seeking professional help in overcoming psychological problems (Mackenzie et al., 2004). Attitudes toward help-seeking can predict the intention and, ultimately, help-seeking behaviour (Chen et al., 2020). Therefore, it is crucial to examine the attitudes of transwomen towards seeking professional psychological help as a source of basic information to increase the use of mental health services among transwomen.

If not treated immediately, extreme psychological distress may develop into a serious disorder and further worsen an individual's mental health (Mirowsky & Ross, 2003). Therefore, psychological distress can indicate the urgency to seek help (Yamauchi et al., 2020). Research conducted by McNair and Bush (2016) on transgender participants in Australia showed that transwomen had a high level of psychological distress and accessed health services more often than participants with other gender identities. However, research on transgender participants in China showed that most participants with a high tendency to experience anxiety and depression did not want to seek help for the psychological problems they were experiencing (She et al., 2021).

Research by McNair and Bush (2016) and She et al. (2021) compared groups of transwomen who sought help and those who did not seek help when experiencing psychological distress. These differences may be due to the complexity of an individual's attitude toward seeking psychological help and past help-seeking experiences, affecting psychological help-seeking for psychological distress as a non-linear process (Cardemil et al., 2015). Therefore, in this study, an investigation was also conducted on participants' past help-seeking for psychological problems to enrich our understanding of their psychological help-seeking process. On the other hand, an investigation on the relationship between psychological distress and dimensions of attitudes toward seeking professional psychological help in minority groups has been conducted in some research.

Nelson et al. (2021) found a negative association between anxiety and depression symptoms with help-seeking propensity and indifference to stigma. Mesidor and Sly (2014) found that psychological distress was negatively correlated with psychological openness and indifference to stigma. The results of this study indicate that, in general, there is a negative association between psychological distress and attitudes toward seeking professional psychological help. However, there are variations in attitudes toward seeking professional psychological help significantly associated with psychological distress. Therefore, the relationship between psychological distress and attitudes toward seeking professional psychological help is highly dependent on the context of the participants. In this study, the context of the participants studied were transwomen in Indonesia.

Research on mental health conditions and seeking psychological help among transwomen in Indonesia is limited. However, transwomen are also human beings who have the right to protect themselves and obtain prosperity, so the data from the results of this study can contribute to building an inclusive society. Current research focuses more on transwomen's access to physical health services, particularly healthcare for HIV/AIDS (Fauk et al., 2019; Mitchell et al., 2019), however, the mental health condition of transwomen has not been widely studied.

Research by McNair and Bush (2016), Warren et al. (2016), and She et al. (2021) showed that there were differences in the patterns of help-seeking between two groups of transgender people with high levels of psychological distress. When experiencing psychological distress, there were groups of transgender people who sought help, but there were also those who did not seek help. This is thought to be due to differences in socio-demographic factors (Coppens et al., 2013; Picco et al., 2016), experiences seeking psychological help (Culph et al., 2015; Wuthrich & Frei, 2015), and other factors, such as concerns about being victims of discrimination and possible bias by professionals due to transgender people's gender identity (Hereth, 2021; She et al., 2021) which can influence individuals' attitudes towards seeking psychological help and ultimately influence individuals' decisions to seek psychological help.

The results of previous research (Mojtabai et al., 2016) showed that the association between attitudes towards seeking psychological help and the use of mental health services remained consistent even though it was studied in individuals with varying levels of need and history of help-seeking. Attitudes toward help-seeking can also predict intentions and, ultimately, help-seeking behavior (Chen et al., 2020; Pheko et al., 2013). Therefore, it is crucial to examine the attitudes of transwomen towards seeking psychological help as a fundamental source of information to increase the use of mental health services among transwomen.

Based on the description above, this study aims to investigate: 1) the relationship between participants' psychological distress and participants' attitudes toward seeking professional psychological help; 2) the mental health condition of transwomen through the levels of psychological distress; 3) transwomen's attitude toward seeking professional psychological help, which acts as a major supporting factor in the use of mental health services.

## Methods

### *Sample*

This study used convenience sampling of transwomen under the auspices of one of the transwomen foundations in Indonesia. The Google Form link was sent to the foundations representative who then forwarded the link to transwomen who were willing to participate in the study. This non-probability sampling technique was used because it is suitable for online survey research design that was done during the COVID-19 pandemic.

Transwomen in Indonesia is unknown. However, the representative of the transwomen foundation, which the researcher contacted, stated that the number of transwomen in the foundation is between 2,000 to 4,000 people. According to Bartlett et al. (2001), the minimum sample size for continuous data with an alpha level of 0.05 and a margin of error of 0.03 for a population of 2000 is 112. Thus, the sample in this study is determined at a minimum number of 112.

*Participants Demographic*

The number of this study obtained 136 responses. Through data screening, 16 participants filled in twice, one who filled in three times, and one who stated that he was not willing to fill out the questionnaire. So, the amount of clean data that can be processed is 117 responses ( $n = 117$ ). Details of the list of participants cities of birth with numbers of samples is presented in Table 1. The participants of this study did not cover all provinces in Indonesia. Most participants were born on the island of Java (81%).

**Table 1**  
*Participants of Studies Based on Cities of Birth*

	n	%
Nanggroe Aceh Darussalam	2	2%
Banten	7	6%
Bengkulu	1	1%
Jakarta	26	22%
West Java	16	14%
Central Java	13	11%
East Java	33	28%
West Kalimantan	2	2%
South Kalimantan	1	1%
Lampung	2	2%
West Nusa Tenggara	1	1%
Riau	2	2%
South Sulawesi	2	2%
West Sumatera	2	2%
South Sumatera	7	6%
Total	117	100%

Details of the participants' employment status were presented in Table 2. Most participants (51%) are working for themselves with irregular income.

**Table 2**  
*Participants of Studies Based on Job Status*

	n	%
Work for yourself with steady income	12	10%
Work for yourself with irregular income	60	51%
Work for other people with steady income	27	23%
Work for other people with irregular income	18	15%
Total	117	100%

*Ethical Clearance*

This study has gained approval from Atma Jaya Catholic University of Indonesia Research Ethics Commission based on letter number 0032N/III/LPPM-PM.10.05/12/2021, issued on December 20,

2021.

### *Instruments*

#### *The Hopkins Symptoms Checklist 25 (HSCL-25)*

Psychological distress was measured using The Hopkins Symptoms Checklist-25 (HSCL-25) by Derogatis et al. (1974) and has been translated to Indonesian by Turnip and Hauff (2007). Researchers have obtained permission to use the Indonesian version of HSCL-25. The HSCL-25 has two subscales consisting of 10 items representing anxiety symptoms and 15 items representing depression symptoms. There are 25 items in HSCL-25 with answers in the form of a 4-point Likert scale. All items in HSCL-25 are favorable. HSCL-25 scoring is done by calculating the total score for each item, then dividing by the number of items answered so that the HSCL-25 score range is one to four. If the total score is  $\geq 1,75$ , then the individual is classified as having a high level of psychological distress (Sandanger et al., 1999). The cutoff point of 1,75 has been used in various studies of LGBT participants and produces good validity and reliability (Goldbach et al., 2021; Perrin et al., 2020). In this study, the Cronbach's alpha for HSCL-25 is 0,965. All items in HSCL-25 have a corrected item-total correlation value above 0.6.

#### *Inventory of Attitudes Toward Seeking Mental Health Services (IASMHS)*

Attitudes toward seeking professional psychological help were measured using the Attitudes Toward Seeking Mental Health Services (IASMHS) Inventory by Mackenzie et al. (2004). This multidimensional instrument consists of 24 items with responses in the form of a 5-point Likert scale. IASMHS scoring is done by calculating the total score for each item so that the IASMHS score range is zero to 96. A total of eight items represent one of three dimensions in the IASMHS, namely psychological openness, help-seeking propensity, and indifference to stigma. The higher the total score, the more positive the individual's attitude towards seeking psychological help. The IASMHS by Mackenzie et al. (2004) still uses English. Therefore, the researchers adapted the instrument to Indonesian with a back-translation procedure based on Wild et al. (2005). In this study, Cronbach's alpha for IASMHS is 0,841. When performing the corrected item-total correlation analysis, one item from the indifference to stigma dimension was eliminated because it had a negative correlation. Thus, the maximum score for the indifference to stigma dimension is 28, and the IASMHS score range is zero to 92. The other 23 items have corrected item-total correlation values above 0,2.

### *Data Analysis*

The data analysis technique used in this quantitative research was descriptive statistical analysis and correlation. The descriptive statistical analysis investigated participants' level of psychological distress and their attitudes toward seeking professional psychological help. The statistical correlation technique was used to test the hypothesis regarding the relationship between symptoms of psychological distress and dimensions of attitudes toward seeking professional psychological help.

## Result

### *Association between Psychological Distress and Attitudes Toward Seeking Professional Psychological Help*

This study shows no significant correlation between the total HSCL-25 score and the total IASMHS score ( $r_s = -0.076$ ,  $n=117$ ,  $p > 0.05$ ). When a correlation test was carried out between the subscales in the HSCL-25 and the dimensions in the IASMHS, the study found that there was a significant relationship between the total score for the anxiety subscale on the HSCL-25 and the total score for the psychological openness dimension on the IASMHS. Table 3 shows the correlation value between symptoms of psychological distress and dimensions of attitudes toward seeking professional psychological help.

**Table 3**

*Results of Correlation between Symptoms of Psychological Distress and Dimensions of Attitudes Toward Seeking*

	Psychological openness	Help-seeking propensity	Indifference to stigma
Anxiety	-0,182*	0,125	-0,158
Depression	-0,088	0,094	-0,094

\*Significant correlation at alpha level 0,05 (two-tailed)

For the correlation between symptoms of psychological distress and dimensions of attitudes toward seeking professional psychological help, it was found that the only significant correlation was between anxiety and psychological openness ( $r_s = -0.182$ ,  $n = 117$ ,  $p > 0.05$ ). Spearman's rho value of -0.182 is classified as having a small effect size (Field, 2013). In addition, the value (coefficient of determination) of 0.033 indicates that the relationship with scores on the anxiety subscale can explain 3.3% of the variability in psychological openness scores.

### *Participants' Level of Psychological Distress*

The results of the descriptive analysis showed that the average total score of HSCL-25 from 117 participants was 2,315 ( $SD = 0,835$ ). 84 of the 117 participants (72%) were classified as having high psychological distress because they had a final HSCL-25 score greater than or equal to 1,75 (Sandanger et al., 1999; Winokur et al., 1984). Table ?? shows descriptive data for the anxiety and depression subscales in the HSCL-25 measuring tool.

### *Participants' Attitudes Toward Seeking Professional Psychological Help*

The results of the descriptive analysis showed that the average total score of IASMHS for 117 participants was 49,795 ( $SD = 10,794$ ), and the median was 50. This number indicates that most of the participants' final scores had a relatively higher value than the mean value. When compared with the median value of the IASMHS instrument used in this instrument which equals 46, it can be concluded that the mean value of the IASMHS of 117 participants tends to be high. Table 4 shows descriptive data for the dimensions of attitudes toward seeking professional psychological help.

**Table 4**

*Descriptions of Symptoms of Psychological Distress and Dimensions of Attitudes Toward Seeking Professional Psychological Help*

	Anxiety	Depression	Psychological Openness	Help-Seeking Propensity	Indifference to Stigma
Median	23	36	10	27	17
Mean	22.276	35.137	10,564	25,385	13,846
Std. Deviation	9.038	12.588	5,912	6,136	7,009

Compared between the median value of the maximum total score and the mean in each dimension, the data showed that the mean psychological openness of 117 participants tends to be low for the psychological openness dimension (median of total score equals 16), the mean help-seeking propensity of 117 participants tends to be high (median of total score equals 16), and the mean indifference to the stigma of 117 participants tends to be low (median of total score equals 14).

*Association between Attitudes toward Seeking Professional Psychological Help With Age, Level of Education, and Level of Income*

Table 5 shows a significant correlation between the dimension of indifference to stigma and the level of education ( $r_s = 0.040$ ,  $n=117$ ,  $p > 0.05$ ). The direction of the negative relationship between the total indifference to stigma dimension score and the participant's education level shows that the lower the participant's education level, the higher the indifference to stigma dimension score. Spearman's rho value of -0.190 is classified as having a small effect size (Field, 2013). In addition, the value (coefficient of determination) of 0.0361 indicates that the relationship with indifference to stigma can explain 3.61% of the variability in education level. There is no significant correlation between dimensions of attitudes toward seeking professional psychological help and age as well as level of income.

**Table 5**

*Correlations between Attitudes Toward Seeking Professional Psychological Help and Age, Level of Education, Level of Income*

	IASMHS	Psychological Openness	Help-Seeking Propensity	Indifference to Stigma
Age	.032	.028	.005	.062
Level of Education	-.172	-.100	.040	-.190*
Level of Income	-.050	-.050	.027	-.089

\*Significant correlation at alpha level 0,05 (two-tailed)

*Participants' Past Help-Seeking Experience*

Among 117 participants, 44 participants (38%) had sought help for their psychological problems in the past, while 73 participants (62%) had never sought help for their psychological problems. Out of 44 participants, a total of 19 participants (43%) sought help from friends, and a total of 10 participants



(23%) sought help from a psychologist for their psychological problems. Table 6 shows details of people they looked for when they needed help with psychological problems.

**Table 6**

*Sources to Look for When Participants Needed Help With Psychological Problems*

Sources	n	%
Teacher	1	2%
Family Member	4	9%
Organization	1	2%
Member	1	2%
Significant Other	1	2%
Social Worker	4	9%
Psychiatrist	4	9%
Psychologist	10	23%
Friend	19	43%
Total	117	100%

Participants who never sought help for their psychological problems were asked to tell why they had never sought help for their psychological issues. Based on the answers written by the participants, all the responses were coded so that several categories were formed. Table 7 shows some of the reasons participants did not seek help for their psychological problems. It indicates that 31 of 73 participants (42%) did not seek help because they felt they could solve their problems on their own.

**Table 7**

*Reasons for Not Seeking Help for Psychological Problems*

Reasons	n	%
Confused	7	10%
Cost Constraint	7	10%
Feeling Embarrassed	7	10%
Feeling like problems can be solved without seeking help	31	42%
Feeling Healthy	14	19%
Others	7	9%
Total	117	100%

*Comparison of Total Scores and IASMHS Dimension Scores between Participants Who Had and Never Sought Help.*

Table 8 shows the results of independent sample t-test calculations on the total IASMHS score, psychological openness, and indifference to stigma data group, as well as the results of the Mann-Whitney U-test calculation on the total help-seeking propensity score data group ( $U = 2070,500$ ,  $p > 0.01$ ). There was a significant difference in help-seeking propensity scores between the group of participants who had ever sought help for psychological problems ( $n = 44$ ) and the group of participants who had never sought help for psychological problems ( $n = 73$ ). Apart from that, the Rank-Biserial Correlation calculation shows a value of 0.289, which indicates that the effect size

is relatively small (Goss-Sampson, 2019). Meanwhile, the results of the independent sample t-test showed that there was no significant difference between the total IASMHS score, total psychological openness dimension score, and total indifference to stigma dimension score in the group of participants who had sought help for psychological problems and the group of participants who had never sought help for psychological problems.

**Table 8**

*Comparison of Total Scores and IASMHS Dimension Scores between Participants Who Had and Never Sought Help*

	t <sup>1</sup> U <sup>2</sup>	p
IASMHS <sup>1</sup>	0,671	0,504
Psychological Openness <sup>1</sup>	-0,995	0,322
Help-Seeking Propensity <sup>2</sup>	2070,500	0,009**
Indifference to Stigma <sup>1</sup>	-0,060	0,952

Note <sup>1</sup> Analysis using independent sample t-test

<sup>2</sup> Analysis using Mann-Whitney U-test

\*\*Significant at alpha level 0,01 (two-tailed)

Table 9 shows that the help-seeking propensity dimension score of the group of participants who have ever sought help for psychological problems ( $M = 27$ ,  $SD = 5.690$ ) is higher compared to the group of participants who have never sought help for psychological problems ( $M = 24.411$ ,  $SD = 6,227$ ).

**Table 9**

*Descriptive Data Comparison of Total Help-Seeking Propensity Scores in the Group of Participants Who Have Seek Help for Psychological Problems (n = 44) and Never Seek Help for Psychological Problems (n = 73)*

	Group	N	Mean	SD	SE
Help-Seeking Propensity	Have Seek Help	44	27	5,690	0,858
	Never Seek Help	73	24,411	6,227	0,729

## Discussion

The aim of this study was to investigate participants level of psychological distress, participants attitudes toward seeking professional psychological help, and the association between symptoms of psychological distress and dimensions of attitudes toward seeking professional psychological help. The descriptive analysis of HSCL-25 showed that 84 of the 117 participants (72%) had a final HSCL-25 score greater than or equal to 1,75. Thus, more than half of the transwomen participants in this study were classified as having a high level of psychological distress. Consistent with the results of previous studies, transgender participants were found to have a high or very high level of psychological distress (Bariola et al., 2015; Nuttbrock et al., 2014). The symptoms of anxiety (Budge et al., 2013) and depression (Budge et al., 2013; Hoffman, 2014) shared by transwomen also exceeds the general population.

The descriptive analysis of the total IASMHS score results indicated that in general, participants tended to have a relatively positive attitude towards seeking psychological help. A relatively high help-seeking propensity score also indicated that participants tended to believe that they are willing and able to seek psychological help from mental health professionals. However, based on participants relatively low psychological openness score, there was an indication that participants were still reluctant to disclose their psychological problems. Moreover, based on participants relatively low indifference to stigma, there was also an indication that participants were worried about what others would think of them if they were caught seeking professional psychological help.

Participants reluctance to disclose their psychological problems were also found in a study of transgender groups in New Zealand. Tan et al. (2020) found that transwomen participants were more reluctant to report current psychological distress than transgender men and non-binary participants. Tendency to be reluctant in disclosing psychological problems may help to explain why LGBT (Lesbian, Gay, Bisexual, Transgender) participants tend to seek professional help only when they have started to hurt themselves or attempted suicide because they were used to normalizing their suffering (McDermott et al., 2018). Therefore, a reluctance to disclose psychological problems needs to be watched out for, because it may be one barrier to having a positive attitude toward seeking professional psychological help. Psychological problems that are not treated immediately can develop into more serious problems.

Moreover, participants tendency to be worried about other peoples views of themselves if they were caught seeking professional psychological help may also be another barrier to having a positive attitude toward seeking professional psychological help. Fear of negative stigma is one of the main inhibiting factors for individuals seeking psychological help (Clement et al., 2015). Therefore, interventions are needed to address concerns about stigma if they were to seek help from professionals. This is important because several studies have shown that lower perceived stigma is significantly associated with more positive attitudes toward seeking psychological help from professionals (Arora et al., 2016; Shetty & Jain, 2016).

Finding also showed that there was a negative association between anxiety symptoms and psychological openness in the participants of this study. The direction of the negative correlation indicates that in the participants of this study, there is an indication that the higher the anxiety symptoms experienced by the participants, the lower their openness of the participants to admit the psychological problems they experienced. This result is thought to be related to Arslan's research (Arslan, 2018) which showed that anxiety is a symptom of psychological problems that can predict a person's level of self-disclosure. Arslan (2018) found that the higher the anxiety experienced by a person, the lower the level of self-disclosure.

Previous research has also shown that attitudes toward seeking psychological help are related to experience in seeking for psychological help in the past (Mojtabai et al., 2016). Therefore, an investigation on past help-seeking experiences was also done for this study. In this study, only 38% of participants had ever sought help for their psychological problems, while 62% had never sought help for their psychological problems. This finding showed that although most of the participants had

a positive attitude towards seeking professional psychological help, most had never sought help for their psychological problems. It is allegedly related to the results of descriptive analysis of the IASMHS dimension score, which showed that participants are still low in openness to admitting psychological problems experienced. They also tended to have high individual concerns about the views of others if they are caught seeking psychological help from professionals.

Among the 44 participants who had sought help for their psychological problems, the party most frequently contacted for help was their friends (43%). This finding is consistent with the research results on LGBTQ participants (lesbian, gay, bisexual, transgender, queer and questioning), which showed that participants with suicide ideation/behavior who sought support generally sought help from friends (Lytle et al., 2018). This result may emphasize participants tendency to have high concerns about the judgment of others if caught seeking professional help. Therefore, they feel more comfortable seeking help from friends, although participants who had ever sought help from psychologists in this study are also quite large (23%).

The two main reasons participants never sought help for their psychological problems were feeling able to cope on their own (42%) and feeling healthy (19%). Some of the other barriers found in the participants of this study were feelings of shame in expressing their problems and cost constraints. These barriers were also found in LGBT participants in Malaysia. Research conducted on LGBT participants in Malaysia found that internal resistance, such as low perception of the need to seek help and doubts about self-disclosure, were the main barriers to seeking help from mental health professionals. In addition, the lack of information and resources regarding mental health also hinders the search for psychological help from professionals (Hta et al., 2021).

## Conclusion

This study found no statistically significant correlation between participants' psychological distress and their attitudes towards seeking psychological help. Despite the prevalence of high psychological distress in over 50% of participants, there was a general demonstration of favorable attitudes towards seeking psychological help. While participants generally expressed positive attitudes towards seeking psychological help, they had persistent hesitations in openly acknowledging psychological challenges, evident in the psychological openness score. Additionally, concerns about societal judgments, highlighted by the indifference to stigma score, indicated a continued reluctance to openly seek psychological assistance. Although they maintained an overall positive attitude towards psychological help-seeking, reservations were apparent, underscoring the necessity to foster a more open and accepting environment when seeking psychological help.

### *Recommendation*

Suggestions for enhancing mental health services for transwomen must prioritize addressing the pervasive discrimination they frequently face. Targeted efforts are essential to establish a secure and non-discriminatory environment, given their notable indifference to stigma when seeking

psychological help. Future research should systematically address the limitations of this study to advance our understanding. This study's insights may provide a foundation for additional research dedicated to uncovering the root causes of the high level of psychological distress in transwomen. These endeavors can inform the development of interventions aimed at improving their well-being and overcoming barriers to seeking psychological help.

These research initiatives may also carry significant impacts for policymaking, urging the government to prioritize the welfare and rights of transwomen. This involves recognizing their roles as citizens and ensuring their access to psychological assistance without fearing discrimination.

## Declaration

### *Acknowledgment*

We would like to extend our gratitude to the three transgender communities who were willing to collaborate and participate in this research.

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This research was funded independently.

### *Author Contribution*

ET contributed to the conceptualization of the research, data collection, analysis and write up. TIS contributed to supervising the research, guiding the theoretical framework, reviewing and editing the manuscript.

### *Conflict of Interest*

The authors declare no conflict of interests in the production of the manuscript.

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