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#### RESEARCH ARTICLE

# Not All the Same: An Analysis of Diverse Help-Seeking Patterns among International Students

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#### **Abstract**

This study explored the diversity of help-seeking among international students in U.S. higher education. Mental health has been a major concern among college students, and international students may encounter additional stressors, such as adjusting to an unfamiliar culture, using English as a non-native language, and being physically distant from their families. Help-seeking is a critical step for students to express their mental health concerns and receive appropriate support. While existing studies have examined the variety of help-seeking among domestic students, little is known about the diversity of help-seeking intentions and behaviors among international students. Inspired by a critical quantitative approach, this study examined the racial, sex, and age differences in help-seeking among international students. The analysis found that international students of color and male international students reported lower help-seeking intentions and behaviors.

**Keywords:** help-seeking, international students, mental health, race, sex

# Introduction

The U.S. higher education system hosts the largest number of international students globally (IIE, 2024b). During the 2023 to 2024 academic year, more than 1.1 million students from over 200 countries and regions, including those enrolled in undergraduate, graduate, and optional training programs, studied in the U.S., and this number marked a record high (IIE, 2024a). Coming from diverse backgrounds and cultures, international students navigate new academic and social environments, develop their agency, and cultivate new identities after arriving in the U.S. (Hunter-Johnson, 2021; Kim, 2025; Malcolm & Mendoza, 2014; Metro-Roland, 2018).

However, the recruitment of international students tends to be the primary focus of many higher education institutions due to the benefits these students bring, particularly economic contributions (NAFSA, 2023), while support for international students' experiences and success after arrival is often treated as secondary (Arthur, 2017). That said, international students are frequently dehumanized and deemed as financial assets in U.S. higher education; this is exemplified by the use of the term "cash cow" to describe international students (Yao & George Mwangi, 2022; Yao et al., 2024). Given international students' resilience in navigating unfamiliar academic and social environments, it is critical for higher education institutions to create supportive educational spaces that actively foster their success and personal development upon arrival in the U.S.

Mental health is one of the major concerns that international students need to manage to achieve successful academic and social experiences. While mental health issues are common among all college students, including domestic students (Wood, 2024), the same issues may be even more pronounced among international students (Yeung et al., 2022). According to the American College Health Association-National College Health Assessment, a large-scale survey, international students were more likely to report suicide attempts and depression than domestic students (Yeung et al., 2022). These disparities may stem from the unique experiences international students undergo during their college years. For instance, social norms can differ between the U.S. and other countries, and some international students have difficulty forming positive relationships in the host country (Pedersen et al., 2016). Additionally, language barriers and physical distance from family members can increase feelings of stress or loneliness (Luo et al., 2019; Rajapaksa & Dundes, 2002). Furthermore, discrimination against racially minoritized international students has been linked to negative mental health outcomes (Yao et al., 2019). Thus, additional attention should be paid to creating a supportive higher education environment for international students' mental health issues.

Help-seeking behaviors are critical for navigating mental health concerns among college students in general. Access to appropriate resources, such as counseling services, therapy, or peer support, helps college students improve their mental health and, consequently, their academic success. However, international students are often hesitant or unable to access these valuable resources (Brownson et al., 2014; Ji & Nagata, 2024; Xiong & Yang, 2021). For example, professional mental health support

from counselors or therapists may be uncommon in some countries, and stigmatization of mental health issues is more pronounced in other cultures (Clough et al., 2019; Hyun et al., 2007). International students from such countries and cultures may avoid expressing their mental health support needs or may prefer coping strategies that differ from those of others.

While scholars have explored international students' help-seeking intentions and behaviors in general, little is known about the variation in help-seeking among international students. Although international students are often viewed as a homogeneous group, they are not all the same (Heng, 2019). Existing literature focusing on domestic students has found inconsistencies in help-seeking intentions and behaviors by race or ethnicity and gender (e.g., Eisenberg et al., 2012; Lipson et al., 2022). In contrast, research examining differences in help-seeking behaviors based on international students' diverse backgrounds has been limited. However, the lack of understanding of those international student differences can lead to the inaccurate portrayal of international students as a homogeneous group and may promote one-size-fits-all educational practices, which probably do not work for many international students (Katsumoto, 2025). In other words, to promote international student mental health, it is crucial for higher education institutions and practitioners to gain an accurate understanding of their help-seeking behaviors, including diverse patterns.

Therefore, using a multi-institutional dataset, this study explores the extent to which international students' help-seeking behaviors differ based on their backgrounds. This study is significant for comparative and international higher education because it challenges the stereotype of viewing international students as a homogeneous group and uncovers an accurate understanding of international students' diverse help-seeking patterns. Overgeneralization of experiences within a particular group masks the diversity within the group and encourages one-size-fits-all educational practices. However, such practices may not be effective for all members within a group and prevent the development of appropriate educational practices. Guided by a critical quantitative approach, this study examines and aims to provide empirical evidence of the diverse help-seeking intentions and behaviors among international students. In other words, this study explores the following research question: To what extent do international students' help-seeking intentions and behaviors differ based on their race, sex, and age?

## Literature Review

#### International Student Navigational Experiences and Mental Health

Mental health has been a critical concern in the U.S. higher education system in general. The intensity of mental health issues among university students has increased significantly. According to Lipson et al. (2022), a nationally representative sample showed a 134 percent increase in depression and a 109 percent increase in anxiety between 2013 and 2021. Factors such as adjusting to higher education, academic pressure, family responsibilities, and personal relationships can negatively impact the

mental health of students (American Psychological Association, 2022; University of Colorado Boulder, 2024).

While mental health issues are widespread among higher education students, international students tend to face additional navigational experiences due to their backgrounds. Having left their home countries, international students must adjust to a completely new environment in the host country (Pedersen et al., 2016; Rajapaksa & Dundes, 2002). Unfamiliar cultures, different social norms, and unique academic expectations in the host country complicate the adjustment process more for international students compared to domestic students. Additionally, due to cultural and linguistic differences, some international students in various countries find limited opportunities to develop meaningful connections with other students, faculty, and staff (Gareis, 2012; Rose-Redwood & Rose-Redwood, 2018; Young & Schartner, 2014). International students who are racially minoritized, from non-Western countries, or nonnative speakers of the host country's language often experience discrimination and bias, which hinders positive social integration and academic success (Rice et al., 2009; Valdez, 2015). The outbreak of COVID-19 has exacerbated discrimination against international students, particularly those from Asian countries, which has negatively affected their mental health and well-being (Yao & George Mwangi, 2022).

In addition to these navigational experiences, the U.S. political climate has also been unfriendly toward international students. During the COVID-19 pandemic, most U.S. higher education institutions closed their physical campuses and shifted to online instruction. In 2020, the Department of Homeland Security announced that international students whose programs transitioned online might be required to leave the country (Redden, 2020). Although this announcement was later rescinded, it highlighted the fragile status of international students under visa restrictions, causing psychological distress (Johnson, 2018; Lynch et al., 2024). Anxiety and concern among international students increased during the first Trump administration (Lynch et al., 2024), and it is assumed that a similar political climate under a returning administration may again have a negative impact on the mental health of international students.

#### Help-Seeking

Help-seeking is the process of attempting to access external support for mental health concerns, which includes both formal and informal support (Rickwood & Thomas, 2012). Help-seeking intention refers to the psychological willingness or interest in seeking support from others (White et al., 2018), while help-seeking behavior refers to the actual act of searching for or requesting help from others (APA, 2025). Due to the prevalence and severity of mental health issues among students in general, higher education institutions have provided mental health support. Many U.S. universities have offered on-campus counseling services and telehealth services and have initiated comprehensive programs for improving student mental health (ACE, 2024; Wood, 2024).

However, the availability of mental health support does not guarantee better mental health. Without expressing the need for support, students may not receive proper help from others, including professional mental health services (American Association of Veterinary Medical Colleges, 2020). Help-seeking can guide students in accessing appropriate support, which eventually enhances mental health (Vidourek et al.,

2014; Yonemoto & Kawashima, 2023). In other words, help-seeking is a critical first step in connecting students with mental health support. Unfortunately, it is reported that most college students who perceive a need for mental health support do not actually seek it (Wood, 2024).

Existing literature has explored potential factors that influence help-seeking among university students in general. In their systematic review, Eisenberg et al. (2012) listed several potential factors influencing help-seeking: stigma, perceived need for help, social context, and mental health literacy. Stigma, including both self-stigma and perceived public stigma, discourages students from seeking help (Broglia et al., 2021; Eisenberg et al., 2012). Moreover, ones who are unaware of the need or benefits of mental health support are unlikely to seek it (Eisenberg et al., 2012). In contrast, having a close friend or family member who has used professional mental health support can promote help-seeking (Eisenberg et al., 2012).

In addition to these factors impacting students in general, unique elements affecting help-seeking have been identified among international students. The stigmatization of mental illness and its treatment is often more pronounced in other cultures, such as in many Asian countries (Brownson et al., 2014; Forbes-Mewett & Sawyer, 2016; Hyun et al., 2007). Such home countries' cultures and values regarding mental health can impact international students' help-seeking in a host country; for example, students from Asia are more reluctant to utilize professional mental health support (Hwang et al., 2014; Hyun et al., 2007; Maeshima & Parent, 2022). Proficiency in the primary language of the host country is also a critical factor for international students' help-seeking. According to studies from other English-speaking countries, such as Australia, some international students hesitate to use professional mental health support because they fear that using English as a non-native language may hinder effective communication (Clough et al., 2019; Forbes-Mewett & Sawyer, 2016). Similarly, cultural differences between the home and host countries may cause international students to question whether mental health professionals in the host country fully understand their unique experiences (Cogan et al., 2024; Forbes-Mewett & Sawyer, 2016). International students tend to prefer counselors and mental health professionals who share a similar background, as this can facilitate better understanding (Chen & Lewis, 2011); however, it is often difficult for international students to find mental health professionals from the same countries or cultures in the host country.

#### Moderation on Help-Seeking Intentions and Behaviors

In addition to the benefits and barriers associated with help-seeking, existing literature, which focuses on students in general rather than international students, has suggested moderating effects that shape help-seeking intentions and behaviors. In other words, help-seeking intentions and behaviors are not uniform across all students. White students are more likely to seek counseling or professional mental health support compared to students of color, even though the latter group experiences greater mental health challenges (Brownson et al., 2014). The longitudinal study by Lipson et al. (2022) also indicates that White students have become more inclined to utilize treatment compared to other groups between 2013 and 2021. On the other hand, Asian students have been reported to access professional mental health support less frequently than

White students (Eisenberg et al., 2007, 2012; Lian et al., 2020). This is likely because the stigma surrounding mental health and the use of professional services is more pronounced in Asian cultures (Eisenberg et al., 2012; Masuda et al., 2009).

Other moderating factors include sex and sexuality. Female students tend to report higher help-seeking behaviors and perceive greater benefits from seeking help than their male counterparts (Eisenberg et al., 2012; Vidourek et al., 2014). Similarly, sexual minorities, such as bisexual and gay students, report a higher perceived need for mental health support and are more likely to seek help (Eisenberg et al., 2012). Additionally, age is positively associated with help-seeking behaviors (Eisenberg et al., 2009).

Nevertheless, existing studies on the variation in help-seeking have primarily focused on students in general or only on domestic students. When studies have examined international students' help-seeking, the focus has been on whether international students engage in help-seeking or on how their help-seeking intentions and behaviors differ from those of domestic students (Brownson et al., 2014; Cogan et al., 2024; Eisenberg et al., 2007; Lian et al., 2020; Maeshima & Parent, 2022). Also, a study by Xiong and Yan (2021) compared a group of Asian international students with a group of all other international students. However, whether help-seeking intentions and behaviors vary between multiple racial categories and other identities within international students has not been fully discussed.

## **Conceptual Framework**

A critical quantitative approach guided the present study. Stage (2007) developed this approach, being inspired by the Frankfurt School of critical philosophy. Importantly, while the terms critical quantitative (or quantitative criticalism) and QuantCrit are often used interchangeably, there are philosophical differences between them (Tabron & Thomas, 2023). QuantCrit, developed by Gillborn et al. (2018), is derived from Critical Race Theory and focuses explicitly on race and racism. In contrast, critical quantitative approaches stem from Frankfurt School critical theory and aim to explore "experiences of individuals and groups in light of cultural constraints and societal prescriptions" (Stage, 2007, p. 6; Tabron & Thomas, 2023). With the goal of examining international students' diverse experiences related to help-seeking intentions and behaviors, beyond solely race and racism, this study employs a critical quantitative lens.

According to the work of Stage (2007) and Stage and Wells (2014), critical quantitative research involves three main tasks. The first is to use large-scale datasets to reveal systemic inequality. The second is to accurately depict the experiences of understudied populations. The third is to develop culturally relevant research. In addition, based on an extensive review of the literature, Rios-Aguilar (2014) identified eight important elements of critical quantitative research (Tabron & Thomas, 2023). These elements include: (1) asking relevant questions about equity and power, (2) selecting appropriate data and applying rigorous, sophisticated analyses, (3) disaggregating data by gender, race/ethnicity, language proficiency, and socioeconomic

status, and conducting research on multiple groups of marginalized students, (4) interpreting results with care, (5) using enriching theories from multiple disciplines, (6) informing and challenging existing institutional practices and decisions, and (7) informing and challenging educational policies.

In short, this critical quantitative approach weighs the importance of appropriately utilizing quantitative methods to examine the diversity existing within a particular group, which is directly associated with Stage's second purpose of a critical quantitative approach. To accurately understand student experiences and challenges, researchers need to utilize large-scale data and rigorous methodology to examine disaggregation within a particular group (particularly responding to the first, second, third, fourth, and sixth elements argued by Rios-Aguilar). Thus, this study uses a large-scale dataset, aiming to explore the diverse help-seeking intentions and behaviors of international students beyond their general pattern.

The Theory of Planned Behavior (Ajzen, 1991) also guides this study. It is one of the most widely used theories for explaining human behavior, including mental health help-seeking (Ajzen, 2020; Mo & Mak, 2009). According to the theory, three key factors influence an individual's intention to engage in a specific behavior: attitudes toward the behavior, subjective norms, and perceived behavioral control. According to the first factor, international students may hold diverse attitudes toward mental health based on their cultural beliefs and past experiences. For instance, professional psychological help is often considered shameful in collectivist cultures. Students from such backgrounds may have a personal preference for relying on personal connections, such as friends, rather than accessing counseling services to address mental health challenges (Han & Pong, 2015; Shea & Yeh, 2008).

The second factor, subjective norms, refers to perceived social expectations. If a student's community or society bears particular messages about mental health treatment, whether encouraging or stigmatizing, these social norms may influence the student's behavior beyond their personal attitudes. Third, perceived behavioral control refers to an individual's belief in their capacity to perform the behavior. For example, differences in first languages, healthcare systems, or financial concerns may lower international students' perceived control over seeking help, which reduces the likelihood of utilizing professional services. In sum, the Theory of Planned Behavior provides a useful framework for examining both internal and external influences on international students' help-seeking intentions and behaviors.

## **Data and Methods**

This study, as a secondary data analysis, employed the Healthy Minds Study (HMS) dataset, which was collected during the 2021–2022 academic year. The HMS has collected national, multi-institutional data annually since its initiation in 2007 to reveal mental health trends and service utilization among students in U.S. universities and colleges (HMS, n.d.a). At each participating institution, students were either randomly selected or all students were invited to participate (HMS, n.d.b). Scholars can request

access to the deidentified HMS data by completing the required form. This dataset was selected because of its national, multi-institutional scope, the variety of variables collected, and its large sample size.

Such a large-scale dataset is appropriate for critical quantitative studies, as it provides a sufficient sample size and relevant variables for analyzing diversity within the group of international students, who have often been portrayed as a homogeneous population (Heng, 2017; Stage, 2007; Stage & Wells, 2014). The HMS includes core sections completed by all participants, as well as elective sections that institutions may choose to administer. This study focused on participants who completed the section on Knowledge and Attitudes about Mental Health and Mental Health Services, which includes critical information for this research, such as attitudes toward mental health.

The analytical sample comprises 2,333 international students from 58 four-year institutions, including baccalaureate, master's, and doctoral universities. Associate's colleges and special-focus institutions were excluded due to their different institutional and curricular structures. The average age of the sample was 24.01 years, and more than half of the participants identified as female (59%). The racial composition of the sample was 9% Black/African, 51% Asian, 7% Hispanic, 5% Middle Eastern/Arab, 18% White, and 10% other. Thirty percent of the participants were first-generation university students. Regarding academic characteristics, 46% were STEM majors, 23% were enrolled in a master's program, and 25% were pursuing a doctoral degree. In terms of mental health experiences and perceptions, 53% reported having experienced a mental health problem, and 69% indicated having friends or family members who had sought professional help. The mean perceived public stigma score (i.e., student perceptions of public stigma) was 0.45 (SD = 0.50), while the mean personal stigma score was notably lower at 0.13 (SD = 0.33). A majority of students (81%) reported knowing where to access mental health resources at their school. Descriptive statistics for all variables are provided in Table 1.

**Table 1: Descriptive Statistics** 

Variables	Mean	SD
If you were experiencing serious emotional distress, whom would you talk to about		
this?		
Professional clinician (e.g., psychologist, counselor, or psychiatrist)	.32	.47
Roommate	.16	.37
Friend (who is not a roommate)	.49	.50
Significant other/romantic partner	.30	.46
Family member	.43	.49
Any therapy visits in the past 12 months	.27	.45
Any medication use during the past 12 months	.12	.32
In the past 12 months have you received support for your mental or emotional		
health from any of the following sources?		
Roommate	.13	.33
Friend (who is not a roommate)	.40	.49
Significant other/romantic partner	.22	.42
Family member	.33	.47
Faculty member/professor	.06	.23
White	.17	.38
Black/African	.09	.28
Asian	.51	.50
Hispanic	.07	.26
Middle Eastern/Arab	.05	.21
Other	.10	.31
Female	.59	.49
Age	24.01	5.23
First-generation	.30	.46
Knowing where to access resources for my mental health from my school	.81	.39
Any mental health problem	.53	.50
Perceived public stigma of mental issues	.45	.50
Personal stigma of mental issues	.13	.33
STEM major	.46	.50
Bachelor's degree	.52	.50
Master's degree	.23	.42
Doctoral degree	.25	.43
Having friends or family member who have ever sought professional help	.69	.46

Note: The reference categories for race and degree are White and bachelor's degree, respectively.

#### Measures

#### Dependent Variables

This study employs a series of binary variables related to help-seeking intentions and behaviors. According to the Theory of Planned Behavior, intention is a key predictor of engaging in a particular behavior. Some students might not currently experience mental health challenges and therefore might not engage in immediate help-seeking behaviors. However, an understanding of students' help-seeking intentions can provide

insights into how likely they are to seek help if they do encounter mental health issues. Help-seeking generally involves external support in both formal (e.g., professional services) and informal (e.g., support from friends or family members) forms (APA, 2025; Rickwood & Thomas, 2012). Therefore, this study examines help-seeking intentions and behaviors in both formal and informal contexts.

The first set of binary variables indicates to whom students would talk if they encountered emotional distress. That is, these variables measure help-seeking intentions. The question stem was: "If you were experiencing serious emotional distress, whom would you talk to about this?" The response options included: "Professional clinician (e.g., psychologist, counselor, or psychiatrist)," "Roommate," "Friends (who are not roommates)," "Significant other/romantic partner," "Family member," and "Religious counselor or other religious contact" (0 = not selected; 1 = selected).

In contrast to these perception-based measures, other outcome variables assess actual help-seeking behaviors with the question stem: "In the past 12 months, have you received support for your mental or emotional health from any of the following sources?" Two binary variables asked whether students had used therapy or medication during the past 12 months (0 = no; 1 = yes), respectively. In addition, another series of binary variables asked whether students had actually received support for their mental or emotional health from various sources, including "Roommate," "Friend (who is not a roommate)," "Significant other," "Family member," "Religious counselor or other religious contact," "Faculty member/professor," and "Staff member" (0 = not selected; 1 = selected).

#### **Independent Variables**

Given that this study is guided by a critical quantitative approach and aims to examine diversity in help-seeking among international students, the key independent variables are their demographic characteristics. Previous studies have found differences in help-seeking among domestic students based on race, sex, and age, so this study includes the same variables. The HMS dataset provides self-reported racial categories, and the race variable in this study comprises six categories: White (reference category), Black/African, Asian, Hispanic/Latin(x), Middle Eastern/Arab, and Other. Sex is measured as a binary variable (0 = male, 1 = female; note that the original surveys provided three options of male, female, and others, but none of the international students in this sample chose others), and age is treated as a continuous variable.

This study intentionally used privileged groups, White international students and male international students, as reference groups. I am aware that such a practice poses the risk of strengthening the current social norm (Mayhew & Simonoff, 2015) as if the reference group is centered or their experience is normalized. At the same time, one of the major elements of the critical quantitative approach is to reveal inequity and power in society (Rios-Aguilar, 2014). To directly and critically capture the differences between the privileged group and other groups, this study used the privileged group as the reference category and compared the disparities between this group and others.

In addition to these key independent variables, the model includes various control variables. First-generation college student status and STEM major are included as binary control variables, as these characteristics tend to be associated with college student

experiences and success (Mayhew et al., 2016). Degree level is also included as a categorical variable, with master's and doctoral degrees compared to a reference category of bachelor's degree. Following previous studies (e.g., Eisenberg et al., 2007), additional variables were taken into account: whether a student knows where to access resources on campus (0 = disagree, 1 = agree); whether a student has been bothered by any mental health issues in the past two weeks (0 = no, 1 = yes); whether a student perceives public stigma related to mental health issues (0 = no, 1 = yes); whether a student knows family members or close friends who have used professional mental health support (0 = no, 1 = yes).

#### **Analytical Approach**

Because this analytical sample contained missing values (2.8% of the data), multiple imputation by chained equations was conducted to create 20 complete datasets. The results from these datasets were pooled, and the standard errors were adjusted accordingly. This imputation method produces less bias compared to traditional methods, such as listwise deletion or mean imputation (for more information, see Carpenter & Kenward, 2013; Van Buuren, 2018).

As an analytical method, this study used multilevel logistic regression to predict binary outcome variables. One of the critical assumptions in estimating the relationships between predictors and an outcome variable is the independence of observations (Snijders & Bosker, 2011). However, the HMS sample design is multilevel, and students are nested within institutions. Because students from the same institution may be more similar to each other, this can violate the assumption of independence of observations. Multilevel modeling was employed to account for institution-level differences and to explore individual-level relationships (Snijders & Bosker, 2011). To assess the extent to which the key independent variables (race, sex, and age) predict help-seeking, each model included one outcome variable along with all control variables. The initial analyses were conducted using the full sample. In addition to the base model using the full sample, I conducted the same analysis on a subsample of students who reported mental health challenges in the past 12 months, as these students might have distinct help-seeking intentions and behaviors.

# **Findings**

Overall, international students of color consistently reported lower help-seeking intentions and behaviors compared to White international students, especially in seeking support from professionals, friends, and family members. Female international students were more likely than male students to seek help through various channels, while older students were generally less likely to do so. Variables like perceived stigma showed no significant effect, but knowing someone who had used mental health services was linked to greater help-seeking across the models.

#### **Racial Differences**

Table 2 presents the results of the multilevel logistic regression predicting international students' help-seeking intentions using the full sample. Compared to White international students, international students of color were less likely to talk to others when experiencing serious emotional distress, as indicated by significant coefficients. In particular, Black/African international students had lower probabilities of speaking with their roommates (OR = .58, p < .05) or family members (OR = .64, p < .05) than the privileged group, White international students. In other words, the former group's odds of seeking help from roommates or family members were 42% and 36% lower, respectively, than the latter group. Additionally, Asian international students had a lower intention to seek professional help (OR = .68, p < .01) compared to White international students. Hispanic international students also had 42% lower odds of talking to roommates (OR = .58, p < .05) compared to the privileged racial group. Middle Eastern/Arab international students were less likely to seek help from roommates (OR = .36, p < .05) or significant others (OR = .51, p < .05) than White international students if they experienced mental health challenges.

When the analysis was restricted to international students with prior mental health challenges, the discrepancies between White international students and international students of color remained or became even more pronounced (Table 3). Compared to White international students, Black/African international students were less likely to seek help from professional clinicians (OR = .57, p < .05), friends (OR = .50, p < .01), and family members (OR = .54, p < .05). Consistent with the full sample analysis, Asian international students reported 46% lower odds of intending to talk to professional clinicians (OR = .54, p < .01) than White international students. Additionally, Hispanic international students and Middle Eastern/Arab international students showed lower odds of talking with friends or roommates, respectively, compared to White international students.

Differences between White international students and international students of color were also evident in actual help-seeking behaviors (Table 4 for the full sample results and Table 5 for the results of the sample with mental health challenges). In the full sample analysis, Black/African international students sought less support from therapy (OR = .50, p < .01), friends (OR = .54, p < .01), and significant others (OR = .42, p < .001) in the past 12 months compared to the privileged racial international students. Similarly, the odds of using therapy and medication were 48% (p < .001) and 49% lower (p < .01), respectively, among Asian international students than among White international students. Hispanic and Middle Eastern/Arab international students were also less likely to seek help from roommates (OR = .49, p < .05 for Hispanic international students; OR = .30, p < .05 for Middle Eastern/Arab international students) or significant others (for Middle Eastern/Arab international students only; OR = .48, p < .05) compared to White international students.

As with help-seeking intentions, the limited help-seeking behaviors among international students of color relative to White international students remained, or became even stronger, when the analysis focused on international students with mental health challenges. Black/African international students sought less support from therapy (OR = .48, p < .05), friends (OR = .41, p < .01), and significant others (OR = .30, p < .001)

in the past 12 months compared to the privileged racial international students. These odds ratios were lower than the results based on the full sample. In other words, when Black/African international students had mental health concerns, their odds of seeking help from those sources were even lower.

#### **Sex and Age Differences**

Sex and age also showed significant associations with international students' help-seeking intentions. Female international students had 32% higher odds of having the intention to talk to significant others (OR = 1.32, p < .01) when facing mental health issues than male international students (Table 2). However, this significant difference was not observed when the analysis focused solely on students with mental health concerns. In the full sample analysis, age was negatively related to the odds of having the intention to talk with roommates (OR = .91, p < .001) and friends (OR = .96, p < .01) and positively related to the odds of having the intention to talk with significant others (OR = 1.02, p < .05). However, among students with mental health challenges, only the negative relationship with the intention to talk with roommates remained significant.

Female international students also engaged in help-seeking behaviors more actively than male international students. The odds of utilizing therapy (OR = 1.99, p < .001) and medication (OR = 1.54, p < .01), and seeking help from roommates (OR = 1.60, p < .01), friends (OR = 1.75, p < .001), significant others (OR = 1.84, p < .001), family members (OR = 1.48, p < .001), and faculty members (OR = 1.75, p < .01), were higher among female international students than male international students. This pattern was similar among international students with mental health challenges, particularly for help-seeking via therapy and medication.

In the full sample analysis, older students were less likely to utilize support from therapy (OR = .92, p < .05), roommates (OR = .91, p < .001), and friends (OR = .96, p < .001). That is, being one year older was associated with 8%, 9%, and 4% lower odds of utilizing therapy or seeking help from roommates or friends, respectively. However, among international students with mental health challenges, most of these significant effects became insignificant, except for support from roommates.

In addition to the main dependent variables, several noteworthy findings emerged from the control variables. Overall, international students' perceived public stigma and personal stigma regarding mental health were not significantly associated with help-seeking intentions or behaviors. Doctoral international students were more likely to receive support through therapy and medication compared to bachelor's-level international students. Additionally, knowing family members or close friends who had used professional mental health support was associated with higher help-seeking intentions and behaviors among international students.

Table 2: Multilevel logistic regression results predicting help-seeking intention variables using the full sample

Table 2. Ividi	Profes clini	sional	Room		Frie		Significa	-	Family member		
	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	
Black	.83	.19	.58*	.25	.72	.18	.71	.20	.64*	.19	
Asian	.68**	.13	.76	.16	1.23	.12	.79	.13	.83	.13	
Hispanic	1.01	.19	.58*	.26	.83	.19	.96	.20	.87	.19	
Middle	.90	.24	.36*	.39	.81	.23	.51*	.27	.83	.23	
Other	1.03	.17	.65	.22	1.21	.17	.98	.18	.93	.17	
Female	1.19	.10	1.02	.12	1.12	.09	1.32**	.10	1.11	.09	
Age	1.01	.01	.91***	.02	.96**	.01	1.02*	.01	1.01	.01	
First-gen	.91	.11	1.19	.13	.90	.10	.84	.11	.87	.10	
Problem	1.21*	.10	.80	.12	.74**	.09	.89	.10	.40***	.09	
Perceived	.97	.11	.90	.13	.86	.10	.95	.11	.90	.10	
Own	.80	.17	.84	.22	1.08	.15	.76	.17	.78	.16	
STEM	.89	.10	1.02	.12	.84	.09	.92	.10	.98	.09	
Master's	.73	.16	.96	.19	1.05	.13	1.01	.15	.96	.14	
Doctoral	1.23	.17	1.35	.23	1.25	.15	1.49*	.16	.96	.15	
Someone	2.20***	.12	1.05	.15	1.80***	.11	1.38**	.12	1.14	.11	

Note: The reference categories for race and degree are White and bachelor's degree, respective. p < .05 p < .01 p < .001

Table 3: Multilevel logistic regression results predicting help-seeking intention variables among students with mental health challenges

Chancinges	Profes clini		Room	mate	Frie	end	Significa	nt other	Family member		
	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	
Black	.57*	.28	.60	.34	.50**	.27	.65	.31	.54 <sup>*</sup>	.30	
Asian	.54**	.18	.66	.21	.93	.17	1.03	.19	.97	.18	
Hispanic	.65	.28	.53	.37	.53*	.27	1.31	.28	.84	.28	
Middle	.87	.32	.02**	.62	.55	.31	.68	.35	1.14	.31	
Other	.89	.23	.62	.29	.75	.23	1.40	.24	1.42	.23	
Female	1.23	.14	1.17	.18	1.09	.13	1.26	.14	1.07	.14	
Age	.97	.02	.93 <sup>*</sup>	.03	.99	.02	1.01	.02	1.03	.02	
First-gen	.98	.15	1.31	.18	.73*	.14	1.03	.15	.72*	.15	
Perceived	1.08*	.14	.73	.19	.92	.13	1.07	.14	.96	.14	
Own	.59	.24	.77	.32	.86	.21	.90	.23	.83	.23	
STEM	.90	.14	.83	.17	.79	.13	1.07	.14	.92	.13	
Master's	.86	.22	1.14	.27	.88	.19	1.08	.21	.92	.20	
Doctoral	1.49***	.26	1.79	.33	.92***	.23	1.52*	.24	.73	.24	
Someone	1.95***	.17	1.11***	.21	1.79	.15	1.39***	.16	1.30*	.16	

Note: The reference categories for race and degree are White and bachelor's degree, respective. p < .05 p < .01

Table 4: Multilevel logistic regression results predicting help-seeking behavior variables using the full sample

Table IIII	Therapy		Medication		Roommate		Friend		Significant other		Family member		Faculty member	
	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE
Black	.50**	.24	.53	.32	.61	.28	.54**	.20	.42***	.25	.73	.20	.44	.47
Asian	.52***	.15	.51**	.20	.77	.17	.86	.13	.82	.14	.86	.13	.84	.25
Hispanic	1.39	.21	.73	.29	.49*	.30	.80	.19	.97	.21	1.14	.19	1.21	.35
Middle	1.43	.27	1.11	.33	.30*	.48	.81	.24	.48*	.30	.70	.25	.53	.56
Other	1.07	.19	1.17	.23	.97	.23	1.07	.17	1.03	.19	1.06	.17	1.45	.31
Female	1.99***	.12	1.54**	.16	1.60**	.14	1.75***	.10	1.84***	.11	1.48***	.10	1.75**	.21
Age	.97*	.02	1.03	.02	.91***	.02	.96**	.01	1.01	.01	1.00	.01	1.03	.02
First-gen	.80	.13	.93	.16	1.04	.15	.90	.10	.99	.12	.84	.10	.91	.21
Problem	2.41***	.11	3.86***	.18	1.34*	.13	1.16	.09	1.13	.11	.78**	.09	1.82**	.20
Perceived	1.06	.12	1.38*	.15	.89	.14	.98	.10	1.01	.11	.92	.10	1.04	.20
Own	.73	.22	.81	.28	.87	.24	.84	.16	.76	.20	.66*	.17	.73	.37
STEM	.90	.11	1.02	.15	1.02	.14	1.03	.10	1.08	.11	1.16	.10	.63*	.20
Master's	.65*	.20	.36***	.28	.98	.22	.94	.15	.91	.17	.99	.14	.27**	.39
Doctoral	1.52*	.21	.90	.25	1.57	.26	1.13	.17	1.73**	.17	1.16	.16	1.52	.32
Someone	2.46***	.16	1.95**	.21	1.65**	.17	2.46***	.11	1.79***	.14	1.73***	.12	1.49	.26

Note: The reference categories for race and degree are White and bachelor's degree, respective. p < .05 p < .01 p < .001

Table 5: Multilevel logistic regression results predicting help-seeking behavior variables among students with mental health challenges

	Therapy		Medication		Roommate		Friend		Significant other		Family member		Faculty member	
	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE	Odds Ratio	SE
Black	.64	.29	.48*	.36	.52	.37	.41**	.28	.30**	.39	.64	.30	.57	.53
Asian	.48***	.19	.43***	.22	.66	.22	.74	.18	.93	.19	.86	.18	.79	.30
Hispanic	1.17	.29	.68	.33	.52	.37	.57*	.27	1.01	.30	1.05	.28	.65	.50
Middle	1.34	.33	.60	.41	.31*	.55	.64	.32	.46	.40	.58	.35	.51	.66
Other	1.14	.24	.99	.26	.90	.28	.87	.23	1.25	.25	1.35	.23	1.51	.36
Female	2.14***	.15	1.58 <sup>*</sup>	.19	1.40	.19	1.54**	.14	1.77***	.16	1.13	.14	1.52	.26
Age	.96	.02	1.02	.03	.92*	.03	.98	.02	.98	.02	.99	.02	1.06	.04
First-gen	.84	.16	.94	.19	1.01	.19	.84	.14	1.15	.16	.73*	.15	.76	.28
Perceived	1.08	.16	1.35	.18	.80	.18	1.13	.14	.95	.16	.88	.15	1.25	.25
Own	.71	.25	.92	.32	.82	.32	.69	.22	.88.	.26	.65	.25	.76*	.43
STEM	.85	.14	1.03*	.17	.78	.18	.92	.13	1.09	.15	1.00	.14	.53**	.25
Master's	.67	.24	.48	.31	1.25	.28	.90	.20	1.01*	.23	1.27	.21	.17	.55
Doctoral	1.38***	.28	1.12*	.30	1.82*	.34	.99***	.24	1.92*	.27	1.48**	.26	1.05	.43
Someone	2.03	.19	1.82***	.24	1.57***	.22	2.32***	.15	1.55***	.18	1.63***	.17	1.35***	.31

Note: The reference categories for race and degree are White and bachelor's degree, respective. p < .05 p < .01

#### Limitations

There are several noteworthy limitations in this study. First, although student race was used to examine diversity in help-seeking among international students, a more detailed variable for ethnicities and nationalities would be ideal. Although the HMS questionnaire includes items on student nationality, this information is not available in the public dataset. A similar analysis should be conducted if a large dataset including international student nationalities becomes available. Second, the study could not include a potentially critical variable: English proficiency. Only an elective section of the HMS inquired whether students were raised in an English-dominant environment, and the majority of the sample did not complete this section. Moreover, this question only addressed the English environment in which students were raised, and no objective measure of English proficiency, such as test scores, was available. Given that proficiency in the host country's primary language significantly impacts many aspects of university life, I urge the HMS to include a comprehensive English proficiency item in future surveys.

Third, while the HMS either randomly selected students or invited all students from each participating institution, generalizability to all international students is not fully ensured, as not all institutions in the U.S. participated or were randomly invited to participate. Fourth, to clarify the differences between the privileged group and non-privileged groups, this study, which was guided by a critical quantitative approach, selected White international students and male international students as a reference group. While this approach should be effective in depicting the exact discrepancy between the privileged and non-privileged groups, it is not free from the risk of normalizing the privileged group. Future studies may be interested in using a personcentered approach, such as latent class analysis, to explore the differences within a group of international students from a different perspective.

## **Discussion and Conclusion**

Guided by the aims of critical quantitative research (Stage, 2007; Stage & Wells, 2014), this study explored whether help-seeking behaviors and intentions are diverse within a group of international students. The literature has increasingly explored international students' help-seeking or diverse help-seeking patterns among domestic students (e.g., Eisenberg et al., 2012; Ji & Nagata, 2024; Lipson et al., 2022; Xiong & Yang, 2021). However, international students in U.S. higher education have largely been treated as a homogeneous group (Heng, 2019), and little research has examined the differences that can exist within the international student group. An accurate understanding of international students' help-seeking is critical for higher education institutions to develop tailored practices, rather than one-size-fits-all approaches.

One significant finding from this study is that help-seeking behaviors among international students vary significantly by race, sex, and age. Previous studies on diverse

help-seeking among domestic students have revealed similar discrepancies between students of color and White students (Brownson et al., 2014; Lipson et al., 2022). In particular, Asian American students have reported lower levels of help-seeking than White domestic students, which is often attributed to the strong stigma associated with mental health issues and professional mental health support in Asian cultures (Brownson et al., 2014). However, this study, which adjusted for both public and personal stigma, still found that international students of color exhibited lower help-seeking intentions and behaviors than their White counterparts.

A potential explanation for these findings is the contextual factor of available support. While past studies often cited cultural backgrounds, such as stigmatization of mental health in the country of origin, as a potential barrier (Clough et al., 2019; Hyun et al., 2007), researchers should further examine organizational barriers that may prevent international students of color from expressing their need for help. For instance, college students in general often feel more comfortable with therapists who share similar ethnic backgrounds (Chen & Lewis, 2011). According to the American Psychological Association (2022), 88% of health service psychologists are White. If school counselors reflect a similar racial composition, this may represent an organizational barrier that discourages international students of color from actively seeking help while White international students may more easily find counselors who share similar ethnic backgrounds. Similarly, if a preference for support from same-race or ethnic peers extends to informal sources, White international students may be more likely to access help from other White students, who make up the majority of the U.S. higher education population. On the other hand, international students of color may have a lower probability than their White international peers of finding students who share similar racial or ethnic backgrounds. In short, context and institutional settings should be critically assessed to determine whether the environment allows international students of color to feel comfortable expressing their need for mental health support.

Another significant finding is the variation in help-seeking intentions and behaviors among different racial groups of international students when White international students are used as the reference group. While international students of color generally expressed lower help-seeking intentions and behaviors, the patterns were not consistent across all groups. For instance, among international students who had experienced mental health problems, Black/African and Asian international students were less inclined to seek help from professionals or use medication than White international students, whereas this tendency was not observed among Hispanic and Middle Eastern/Arab international students. Additionally, compared to White international students, Middle Eastern/Arab international students hesitated to, and did not, receive help from roommates, while Hispanic and Black/African international students were less likely to receive mental health support from their friends.

Differences between male and female international students were also evident in the findings. Female international students consistently reported higher help-seeking behaviors compared to their male counterparts, even among those who had experienced mental health issues in the past. Specifically, female international students were more likely to receive support through therapy, medication, friends, and significant others than male international students. Interestingly, a similar pattern has been found among

samples of domestic students in previous studies (e.g., Brand et al., 2019; Vidourek et al., 2014). Future studies may explore the mechanisms underlying this consistent trend, regardless of student nationality.

Additionally, this study found that older international students reported less likelihood of seeking help for their mental health. This tendency was opposite to findings from domestic students (Eisenberg et al., 2009). The question raised is what dynamics demotivate older international students from actively seeking help. While research on nontraditional-aged international students is rare, existing work suggests that family obligations may be one such factor (Gallie & Griffin, 2025). Such additional responsibilities may limit their access to networks or information resources for seeking help.

Given these racial, sex, and age differences, U.S. higher education institutions need to consider how to promote help-seeking among their diverse international student populations. For instance, Asian international students, who represent the largest racial group among international students, along with Black/African international students, should be effectively connected with professional mental health services. International student offices might consider allocating more time during orientation to explain available mental health services and collaborating with ethnicity- or race-based international student organizations, if they exist.

Another effective strategy is actively recruiting a diverse range of counselors and other mental health professionals from various cultural backgrounds, including those who are foreign-born. Given international students' preference for counselors who share similar cultural experiences, particularly among students of color, such diversity in counselors may help reduce perceived barriers to seeking support. Higher education institutions should critically assess whether their mental health professionals reflect the diversity of their student population.

In addition, opportunities to intervene in the key behavioral factors identified in the Theory of Planned Behavior (Ajzen, 1991) may be beneficial. Students from different cultures hold diverse attitudes toward help-seeking and may be influenced by different social norms. For instance, Chinese international students often prefer self-management of mental health issues over the use of professional services, which influences their help-seeking decisions (Ji & Nagata, 2024). Introducing new perspectives or social values that actively encourage the use of both formal and informal mental health support may help shift help-seeking intentions and behaviors among international students.

Additionally, U.S. higher education institutions could offer mental health training for students. Roommates and friends with basic mental health knowledge and an understanding of how to access services can encourage international students to seek help. These roommates are likely to recognize when their international roommate needs support and connect them with appropriate professionals. Although the primary responsibility for mental health care should remain with institutions and professionals, having a network of informed peers can help in identifying concerns.

Another recommendation is that higher education institutions develop targeted support systems specifically for older international students. In contrast to previous findings on domestic students (Eisenberg et al., 2009), older international students in this study reported greater reluctance to seek help. Researchers and institutional leaders

should investigate the factors that discourage help-seeking in this group. If these factors are rooted in unique life circumstances, such as caregiving responsibilities for family members, relevant offices should take active action in connecting these students to appropriate mental health support services. Additionally, the availability of support services, such as affordable daycare, can be helpful for international students with families, as it allows them to secure the time needed to seek help.

Moreover, scholars need to examine whether such variation in help-seeking intentions and behaviors is consistent outside of the U.S. context. While the U.S. has been the top host country for international students and hosts approximately 16% of the global international student population, more than 80% of international students pursue their education elsewhere (IIE, 2024b). Thus, it is critical to understand international students' help-seeking intentions and behaviors and their potential diversity in order to develop appropriate support systems in other host countries.

The findings of this study should be valuable for critically examining the experiences and differences among international students. International students are likely portrayed as a homogeneous group (e.g., Heng, 2019). However, the oversimplification of international students hinders the development of an accurate understanding of international student experiences, which is essential for creating appropriate support. Critical quantitative approaches emphasize the importance of selecting appropriate data and methods to accurately understand the experiences and diversity of understudied groups (Rios-Aguilar, 2014; Stage, 2007; Stage & Wells, 2014). This study reveals the diversity within a group of international students and provides statistical evidence against the oversimplification of their experiences.

U.S. higher education has often been criticized for its approach to prioritizing the recruitment of international students, rather than providing support for them (Choudaha & Hu, 2016). However, preparing an appropriate environment for international student success must be central to the discussion. Given the potentially adverse social and political climate in the U.S., international student mental health is at greater risk than ever before. Higher education institutions and professionals must develop a nuanced understanding of international students' diverse experiences, including their help-seeking intentions and behaviors, to ensure the U.S. remains an attractive destination for students from around the world.

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The original data can be requested from the Healthy Minds Network, the survey administrator.

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