

Evaluating Academic Help-Seeking Behavior of Nursing and Midwifery Students in a Nursing Training College

Abstract

Background: Academic help-seeking behavior is essential for student success, yet it remains underexplored in nursing and midwifery education, particularly in Ghana.

Aim: This study assessed the academic help-seeking behavior of nursing and midwifery students at a nursing training college in Tamale, Northern Ghana.

Methods: A descriptive cross-sectional study design was employed. A sample of 283 nursing and midwifery students was randomly selected using a simple random sampling technique. Data were collected using a demographic form, the Computer Science Help-Seeking Scales (CSHS) questionnaire, and additional questionnaires on preferred help-seeking methods and barriers. Data analysis was performed using one-way analysis of variance (ANOVA) and independent sample t-tests.

Results: Most students were aged 21-24 years and were predominantly female. Overall, students exhibited a high level of academic help-seeking behavior (M=6.32, standard deviation (SD)=1.16), with instrumental help-seeking being the most prevalent (M=5.89, SD=1.34). Study groups (76.4%) were the most preferred method of seeking academic help. Younger students (\leq 24 years) demonstrated significantly higher academic help-seeking behavior (M=6.35, SD=1.13) compared to older colleagues (\geq 25 years; M=5.71, SD=1.26). Registered Midwifery students exhibited higher help-seeking behavior (M=6.48, SD=1.18) than Registered General Nursing students (M=6.19, SD=1.14). The major barrier to academic help-seeking was concerns about confidentiality and trust (75.6%).

Conclusion: Confidentiality and trust issues emerged as major barriers to academic helpseeking behavior. As policymakers and educational institutions strive to cultivate a supportive learning environment, understanding and addressing these barriers can enhance students' overall academic well-being and success.

Keywords: Academic help, barriers, midwifery students, nursing students

Introduction

In the field of educational psychology, research on students seeking help for academic and learning difficulties has been published in educational psychology journals, while studies on seeking help for socio-emotional difficulties have been published in counseling psychology journals. Since the 1980s, numerous studies have explored the definition and structure of academic help-seeking, linking it to other crucial variables in education.¹

In general, help-seeking is defined as "seeking assistance or support when faced with difficulties." Academic help-seeking, more specifically, is a learning and problem-solving strategy used by students to understand academic materials.² The concept of academic help-seeking encompasses three distinct dimensions: instrumental, executive, and avoidance. Instrumental help-seeking involves seeking assistance with the goal of independent learning, while executive help-seeking focuses on obtaining correct answers without a specific intent to learn. In contrast, avoidance of help-seeking occurs when a student refrains from seeking help even when it is needed.³

Experts agree that variations in academic performance are not solely due to differences in cognitive skills and content knowledge. Studies have identified personal and contextual factors influencing students' decisions to seek academic help from teachers and peers, including challenges in accessing support, concerns about confidentiality and trust, a preference for informal sources of help, and stigma.⁴⁻⁸ Other factors such

Rashidatu Monne¹, Mudasir Mohammed Ibrahim², Bridget Comfort Tawiah², Hanifa Adam², Mohammed Sherif Abukari², Ramatu Salifu³, Abubakari Wuni⁴

¹Department of Guidance and Counseling, Nurses' and Midwives' Training College, Tamale, Ghana ²Department of Nursing, Nurses' and Midwives' Training College, Tamale, Ghana ³Ghana Senior High, Tamale, Ghana ⁴College of Nursing, University of Kentucky, Lexington, USA

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Corresponding author: Mohammed Mudasir Ibrahim E-mail: mudassiribrahim30@gmail.com

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Copyright@Author(s) - Available online at www.jer-nursing.org Content of this journal is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License. as classroom behaviors, including persistence and appropriateness in help-seeking, as well as attitudinal factors like self-esteem, personal learning goals, and preferences for helpers, have also been highlighted. $^{\circ}$

While academic help-seeking is a valuable behavior for both faceto-face and online learners, some students refrain from seeking help for various reasons, as it may pose threats to self-image and selfesteem, especially for those with performance and social status goal orientations.¹⁰ Affective experiences play a pivotal role in motivating and encouraging students to seek help. However, not everyone with academic challenges intends to seek help from external sources to resolve these issues.¹¹ Academic help-seeking is a concept that has been relatively unexplored in the research literature,¹ and it is revealed that many college students are hesitant to seek assistance with academic challenges.7 Understanding how students seek academic help and the challenges they face can offer valuable insights into their learning processes, highlighting potential areas of struggle. This knowledge can then be used to develop targeted interventions to enhance their academic performance and overall success. There is a noticeable gap in research concerning the academic helpseeking behaviors of nursing and midwifery students. Specifically, no study has examined the levels of help-seeking, including instrumental, executive, and avoidance behaviors, in relation to sociodemographic factors, preferred help-seeking methods, and barriers encountered by students. This study aims to bridge that gap by providing valuable insights into the academic help-seeking patterns of these students, which are essential for understanding their learning needs and challenges. The findings of this study will be instrumental in creating a supportive learning environment, improving academic outcomes, and enhancing the overall quality of nursing and midwifery education.

Aim and Research Questions

The aim of this study was to assess the academic help-seeking behavior of nursing and midwifery students in a nursing training college. This study investigated the following research questions:

- 1. What is the level of academic help-seeking behavior among nursing and midwifery students?
- Are there significant differences in academic help-seeking behavior based on the demographic characteristics of nursing and midwifery students?
- 3. What is the most preferred method of academic help-seeking among nursing and midwifery students?
- 4. What are the barriers to academic help-seeking behavior among nursing and midwifery students?

Materials and Methods

Study Design

This quantitative descriptive cross-sectional study was conducted between November 2023 and December 2023.

Study Setting

The study was conducted at Nurses' and Midwives' Training College, Tamale, a public tertiary health institution located in the Northern Region of Ghana. Established in 1974 within the Dohinayili community under the Tamale Metropolis, the college was originally intended to train enrolled nurses. Over time, the institution expanded its programs, introducing the training of Registered General Nurses (RGN-Diploma) in 1999 and Registered General Midwifery (RM-Diploma) in 2009. The student population at the college, based on their program of study, is as follows: in the second year, 314 students were enrolled in the Registered General Nursing program and 274 in the Registered Midwifery program. In the third year, 230 students were enrolled in the Registered General Nursing program and 152 in the Registered Midwifery program. The total number of students across both years was 588 in the second year, 382 in the third year, and a combined total of 970 students across both programs.

Eligibility Criteria

The study population consisted of nursing and midwifery students at the college. The study included second- and third-year nursing and midwifery students but excluded first-year students due to their recent admission and lack of substantial academic coursework during the study period.

Sample Size and Sampling Procedure

A total sample size of 283 was determined using Taro Yamane's formula. The calculation was based on a target population of 970, with a margin of error of 5% (0.05). The formula used was:

$$n = \frac{N}{1 + N(e^2)}$$

With permission, the lists of second- and third-year students were obtained from the College's Academic Office. These lists were then imported into SAS JMP statistical software, where participants were randomly selected to take part in the study.

Data Collection Tools

The data collection tools used in this study comprised a demographic form, the Computer Science Help-Seeking Scales (CSHS) questionnaire, and questionnaires on the preferred methods of academic help-seeking and barriers to academic help-seeking behavior.

Demographic Form

The demographic form was developed by the researchers and consisted of six items designed to collect data on students' age, gender, grade, marital status, religion, and program of study at the college.

Computer Science Help-Seeking Scales Questionnaire

The Computer Science Help-Seeking Scales Questionnaire (CSHS), developed by Pajares et al. in 2004, was utilized in this study to measure students' academic help-seeking behavior in the context of college nursing education. The validity of the Academic Help-Seeking Scales has been extensively examined. Several authors have reported strong content validity, supported by expert reviews ensuring that the items comprehensively cover various aspects of academic help-seeking behavior. The reliability of the scales has also been well established, with internal consistency reliability, as measured by Cronbach's alpha, reported as high across studies ($\alpha > 0.70$). Pajares and colleagues indicated in 2004 that the help-seeking scales could be readily modified for use in other academic areas without prior permission, provided appropriate citation is given.^{12,13}

The CSHS questionnaire was originally designed to assess help-seeking behavior in the field of computer science. To adapt the scales to the nursing context, several modifications were made. Specifically, the phrase "Computer Science" was removed from all sections of the scales, and references to "Teacher" were replaced with "Nursing Tutor." The final adapted version of the questionnaire consisted of three subscales (Instrumental Help-Seeking, Executive Help-Seeking, and Avoidance of Help-Seeking) and included 29 Likert-type items to assess academic help-seeking behavior among nursing students.

The Instrumental Help-Seeking Scale consists of 10 items measuring effective help-seeking behaviors that promote learning and independence (e.g., "When I ask my nursing tutor for help, I prefer to be given hints or clues rather than the answer."). In contrast, the Executive Help-Seeking Scale, also comprising 10 items, evaluates ineffective helpseeking behaviors characterized by reliance on others to complete tasks (e.g., "When I ask the nursing tutor for help in this class, I prefer that the tutor do the work for me rather than explain how to do it."). Additionally, the Avoidance of Help-Seeking Scale, which includes nine items, assesses students' reluctance to seek help (e.g., "I don't ask for help in this class even when the work is too hard to solve on my own."). The subscales scores range from 1 to 8, where 1 represents "Definitely false" and 8 represents "Definitely true." To ensure that higher scores reflect effective academic help-seeking behaviors, responses for the Executive Help-Seeking and Avoidance of Help-Seeking scales were reversed, with scores assigned as 8, 7, 6, 5, 4, 3, 2, and 1. An average score was calculated from all 29 items across the scales to represent the overall level of academic help-seeking behavior. A mean score closer to 8 indicates a higher level of academic help-seeking behavior (i.e., "Definitely true").

Preferred Methods of Academic Help-Seeking Questionnaire

This self-developed questionnaire included six questions on preferred methods of seeking academic help, where students indicated their preferences on a scale from "Strongly Dislike" to "Strongly Like." The methods included peer support, study groups, online resources and tutorials, one-on-one interactions with a tutor in the office, selfhelp or self-study, and seeking counseling services.

Barriers to Academic Help Seeking Behavior Questionnaire

This questionnaire, developed by the researchers, consisted of eight items designed to identify the barriers students face when seeking academic help. The items included concerns about confidentiality and trust, severity of the problem, time constraints or busy schedules, fear of stigma, lack of support from friends, lack of awareness of available resources, poor past experiences with seeking help, and the belief that help is not wanted or needed. Students responded with "Yes" or "No" to each item, allowing for multiple responses to capture a broad range of barriers.

Tool Validity and Reliability

The data collection tool underwent both content and face validation to ensure its validity and reliability. Three experts in nursing education and two psychologists reviewed the tool items, assessing their relevance, clarity, and representativeness in the context of nursing academic help-seeking behavior. They unanimously indicated that each item was highly relevant, clear, and representative of the nursing field. During a pilot study involving 20 nursing and midwifery students, no issues were identified with the tool, and its original form was maintained. The tool demonstrated high internal consistency reliability, with a Cronbach's alpha coefficient of 0.82 for the overall scale and 0.79, 0.92, and 0.89, respectively, for the subscales (i.e., instrumental help-seeking, executive help-seeking, and avoidance of help-seeking).

Data Collection

A permission letter was obtained from the Research Quality and Ethics Committee of the Nurses' and Midwives' Training College to conduct the study (Approval Number: MOH/NMTC/51/280-23, Date: 19.12.2023). Subsequently, a suitable time was identified for data collection from the students. Both verbal and written consent were obtained from individual students, and the study's purpose was carefully explained to them, addressing any concerns they had. The questionnaires were then distributed for completion, and the filled questionnaires were sealed in envelopes for secure transport. On average, students took approximately 15 minutes to complete the questionnaire.

Table 1. Demog	graphic Chara	cteristics of S	tudents (N=28	3)	
Variable	Frequency	Percentage	Mean ± SD	Min	Max
Age in years			22.10 ± 1.80	19	33
Age Group					
20 years or younger	56	19.8			
21 to 24 years	203	71.7			
25 years or older	24	8.5			
Gender					
Male	83	29.3			
Female	200	70.7			
Grade					
2 nd class	170	60.1			
3 rd class	113	39.9			
Marital Status					
Married	20	7.1			
Single	263	92.9			
Religion					
Christian	91	32.2			
Muslim	192	67.8			
Program of Study in College					
Registered General Nursing	156	55.1			
Registered Midwifery	127	44.9			

Dimension	Item	Min	Max	Mean	SD
nstrumental Ielp-Seeking		1	8	5.89	1.34
	1. When I ask my nursing tutor for help, I prefer to be given hints or clues rather than the answer. $^{\scriptscriptstyle(*)}$	1	8	4.08	2.70
	2. When I am having trouble and ask the nursing tutor for help, I like to be given examples of similar problems we have done.	1	8	5.83	2.48
	3. When I ask the nursing tutor for help with something I don't understand, I ask the tutor to explain it to me rather than just give me the answer. ⁽⁺⁺⁾	1	8	6.91	1.90
	4. When I ask my nursing tutor for help in this class, I only want as much help as necessary to complete the work myself.	1	8	6.06	2.2
	5. When I ask my nursing tutor for help understanding the material in this class, I prefer that the tutor help me understand general ideas rather than simply provide the answer.	1	8	6.62	1.9
	6. When I ask a student for help with my work, I don't want that student to give away the whole answer.	1	8	4.81	2.5
	7. When I ask a student for help understanding the material in this class, I prefer that they help me grasp general ideas rather than just provide the answer.	1	8	6.46	2.0
	8. When I ask a student for help in this class, I want to be assisted in completing the work myself rather than having the work done for me.	1	8	6.54	2.1
	9. When I ask a student for help in this class, I prefer to be given hints or clues rather than the answer.	1	8	5.26	2.4
	10. When I ask a student for help with something I don't understand, I ask them to explain it to me rather than just give me the answer.	1	8	6.39	2.1
kecutive elp-Seeking		1	8	2.34	1.5
	1. When I ask the nursing tutor for help in this class, I prefer that they do the work for me rather than explain how to do it.	1	8	2.31	2.2
	2. When I ask my nursing tutor for help with something I don't understand, I prefer that they do it for me.	1	8	2.25	2.0
	3. When I ask my nursing tutor for help with something I don't understand, I prefer them to just give me the answer rather than explain it. $^{(\ast)}$	1	8	2.24	1.9
	4. When I ask the nursing tutor for help with my work, I prefer to be given the answer rather than an explanation of how to do it myself.	1	8	2.46	2.1
	5. When I ask my nursing tutor for help, I want them to do the work for me rather than help me complete it myself.	1	8	2.26	1.9
	6. When I ask a student for help with something I don't understand, I prefer that they just give me the answer rather than explain it.	1	8	2.43	2.0
	7. When I ask a student for help with my work, I prefer that they do the work for me rather than explain how to do it.	1	8	2.44	2.1
	8. When I ask another student for help with something I don't understand, I ask them to do it for me. ⁽⁺⁺⁾	1	8	2.51	2.2
	9. When I ask a student for help in this class, I want the work done for me rather than being assisted in completing it myself.	1	8	2.29	2.0
	10. When I ask a student for help with my work, I prefer to be given the answer rather than an explanation of how to do the work myself.	1	8	2.34	2.0

(Continued)

Dimension	Item	Min	Max	Mean	SD
Avoidance of Help-Seeking		1	8	2.57	1.68
	1. I don't ask for help in this class even when the work is too hard to solve on my own.	1	8	2.78	2.30
	2. If I need help with a problem, I prefer to skip it rather than ask for help.	1	8	2.44	2.17
	3. I don't ask for help in this class even if I don't understand the lesson.	1	8	2.51	2.29
	4. If I don't understand something in this class, I would guess rather than ask someone for help.	1	8	2.61	2.29
	5. I would rather do worse on an assignment I couldn't finish than ask for help in this class.	1	8	2.40	2.32
	6. Even if the work is too hard to do alone, I wouldn't ask for help in this class.	1	8	2.43	2.19
	7. I would put down any answer rather than ask for help in this class. ⁽⁺⁾	1	8	2.38	2.15
	8. I don't ask questions in this class even if I don't understand the lesson.	1	8	2.78	2.30
	9. If the work in this class is too hard, I choose not to complete it rather than seek help. $^{\scriptscriptstyle(**)}$	1	8	2.85	2.50

Data Analysis

Data entry and cleaning were performed using JMP version 17.1 (SAS Institute Inc., Cary, North Carolina, USA). The statistical analysis for this study was conducted using NCSS 2023 statistical software (NCSS, LLC, Kaysville, Utah, USA). Frequencies, percentages, means, standard deviations, minimum, and maximum values were used to describe the data. Additionally, one-way analysis of variance (ANOVA) and independent sample t-tests were used to test significant differences in academic help-seeking behavior based on students' demographic characteristics. The level of significance was set at P < 0.05.

Ethical Considerations

Ethical approval was obtained from the Research Quality and Ethics Committee of the college on December 19, 2023 (MOH/NMTC/51/280-23). All ethical considerations were adhered to throughout the study, ensuring the anonymity and confidentiality of the students. The researchers introduced themselves to the students and provided a brief explanation of the nature and objectives of the study before participation. Students were enrolled voluntarily after providing written informed consent. Students were assured that all information obtained during the study would remain confidential and used solely for research purposes. This study was conducted in compliance with the principles of the Helsinki Declaration.

Results

Demographic Characteristics

As shown in Table 1, the demographic characteristics indicate that most students were aged 21-24 years (71.7%) and were predominantly female (70.7%). The majority were single (92.9%) and enrolled in the Registered General Nursing program (55.1%). Regarding academic performance, a higher proportion of students (60.1%) were classified as second class.

Academic Help-Seeking Behavior

The mean scores for the dimensions of nursing academic help-seeking behavior are presented in Table 2. Overall, the level of academic help-seeking behavior among students was high, with a mean score of 6.32 (standard deviation [SD]=1.16, 95% confidence interval [CI] [6.18, 6.46]) out of 8. Instrumental help-seeking was the most prominent academic help-seeking behavior (mean=5.89 \pm 1.34), with the highest mean score associated with seeking detailed explanations to enhance understanding rather than directly requesting answers from tutors and peers. In contrast, avoidance of help-seeking (mean=2.57 \pm 1.68) and executive help-seeking (mean=2.34 \pm 1.57) behaviors were less frequent, reflecting a preference for active learning.

Relationship Between Scale Scores and Demographic Characteristics

The relationship between demographic characteristics and the mean scores of academic help-seeking behavior is summarized in Table 3. Independent sample t-tests and one-way ANOVA were used to analyze this relationship. The analysis revealed significant associations between academic help-seeking behavior and factors such as age (P=0.021), program of study (P=0.039), perceived problem severity (P=0.041), and awareness of help-seeking resources (P=0.022).

Post hoc comparisons using the Tukey honestly significant difference (HSD) test revealed that students aged 20 years or younger (M=6.49, SD=1.18) and those aged 21 to 24 years (M=6.35, SD=1.13) exhibited higher mean scores for academic help-seeking behavior than students aged 25 years or older (M=5.71, SD=1.26). Similarly, students enrolled in the Registered Midwifery program demonstrated higher mean scores (M=6.48, SD=1.18) compared to those in the Registered General Nursing program (M=6.19, SD=1.14). Interestingly, regarding the perceived severity of challenges, students who did not perceive their challenges as severe had higher academic help-seeking scores

Variables	Mean	SD	Mean Difference	Mean Difference 95% Cl	P value
Age					0.021*
20 years or younger	6.49	1.18	0.771	0.106-1.437	0.018*
21 to 24 years	6.35	1.13	0.632	0.043-1.221	0.032*
25 years or older	5.71	1.26	-	-	
Gender					0.132
Male	6.16	1.14	0.230	-0.06-0.530	0.131
Female	6.39	1.17	-	-	
Grade					0.922
2 nd class	6.33	1.16	0.013	-0.265-0.293	
3 rd class	6.31	1.18	-	-	
Marital Status					0.695
Married	6.42	1.10	0.111	-0.423-0.645	0.683
Single	6.31	1.17	-	-	
Religion					0.428
Muslim	6.36	1.19	0.121	-0.171-0.414	0.416
Christian	6.24	1.12	-	-	
Program of Study in College					0.039*
Registered Midwifery	6.48	1.18	0.285	0.012-0.558	0.041*
Registered General Nursing	6.19	1.14	-	-	
Perceived Severity of the Problem					0.041*
No	6.51	1.07	0.297	0.014-0.580	0.039*
Yes	6.21	1.21	-	-	
Awareness of Help-Seeking Resources					0.002*
Yes	6.56	1.05	0.433	0.163-0.703	0.001*
No	6.12	1.23	-	-	

(M = 6.51, SD = 1.07) than those who did (M = 6.21, SD = 1.21). Additionally, students aware of help-seeking resources at the college recorded higher scores (M = 6.56, SD = 1.05) than those who were not (M = 6.12, SD = 1.23). No statistically significant differences were observed based on gender, class level, marital status, or religion (P > 0.05).

Preferred Method of Academic Help-Seeking

As illustrated in Figure 1, the majority of students preferred utilizing study groups as their primary method of seeking academic help (76.4%). The least favored approach was one-on-one interactions with a tutor in the office (55.1%).

Barriers to Academic Help-Seeking Behavior

The study identified several key barriers to academic help-seeking behavior, including psychological, social, and systemic challenges. A

significant number of students (75.6%) reported concerns about confidentiality and trust, fearing that their academic struggles would be exposed, leading to embarrassment or judgment. Additionally, 63.6% of students felt their academic problems were too severe to seek help, while 57.2% cited time constraints as a barrier, feeling they lacked the time to reach out for assistance. Fear of stigma (57.2%) and poor past experiences with seeking help (53.4%) further discouraged students, as they worried about being labeled or were dissatisfied with previous attempts. Lack of awareness about available resources (53.7%) and a lack of support from friends (55.1%) also played significant roles in preventing students from seeking academic help (Table 4).

Discussion

The study revealed that the academic help-seeking behavior of students was high, indicating that students actively sought assistance when they encountered difficulties in their academic work. Similar

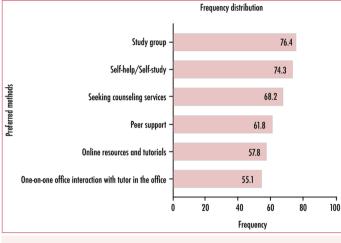


Figure 1. Preferred methods of academic help-seeking among students (N=283).

findings were reported in the study by Umarani.¹⁴ Good help-seeking behavior is often correlated with better academic outcomes. Therefore, providing training for nursing tutors and staff in colleges and universities on how to recognize when students might need help and how to encourage them to seek assistance without feeling stigmatized is crucial.

This research indicates that age influences the academic helpseeking behavior of students. This aligns with the studies of Brown et al.² and Bornschlegl et al.,¹⁵ which revealed that age is a determining factor affecting individuals' willingness or reluctance to seek assistance in academic settings. The perceived severity of academic challenges was also found to significantly influence students' academic help-seeking behavior, consistent with findings from previous studies.¹⁶ This could be explained by the fact that as academic problems become more severe, a significant portion of students may feel reluctant to seek assistance. This reluctance may stem from various factors, such as fear of judgment, embarrassment, or the perception that the issue is too serious to be resolved through help-seeking.

The present study revealed that a significant majority of students prefer using study groups as their primary method for academic help, which aligns with the findings of Li et al.¹⁷ This preference can be attributed to the study by Booth et al.,¹⁸ which reported that students feel more comfortable asking questions and seeking help from peers in a group setting rather than in one-on-one interactions. According to Munna and Kalam,¹⁹ active participation in study groups is a valuable learning approach among students. Study groups provide a structured and organized learning environment, fostering discussions among students on essential concepts and ultimately improving their academic skills. In contrast, the study by Qayyum⁵ and Giblin et al.²⁰ indicated that students prefer to seek help from peers. Additionally, a study by Reeves et al.²¹ revealed that email was the most popular resource for academic assistance among students. The difference in findings might be attributed to variations in the geographical locations where the studies were conducted.

The most significant barrier to academic help-seeking among students was concerns about confidentiality and trust. This finding is

Students (N = 283)						
Ranking	Barriers*	Frequency	Percentage			
1	Concerns about confidentiality and trust	214	75.6			
2	Severity of the problem	180	63.6			
3	Time constraints/busy schedules	162	57.2			
4	Fear of stigma	162	57.2			
5	Lack of support from friends	156	55.1			
6	Lack of awareness of available resources	152	53.7			
7	Poor past experiences with seeking help	151	53.4			
8	Does not want or need help	75	26.5			
*Participants could select multiple responses.						

Table 4 Barriers to Academic Help-Seeking Behavior Among

consistent with previous studies,^{4,16,22} which have highlighted that one of the major obstacles to seeking academic help is apprehension about confidentiality and trust. The implication may be that students lack confidence in the systems or individuals responsible for providing academic support. This could be related to concerns about how the information will be used, whether it will remain confidential, and whether seeking help might have negative consequences.

Limitations

Although the sample was randomly selected, it may not be representative of all nursing and midwifery students in the country or other regions. The study also relied on self-reported questionnaires, which are subject to response biases, such as social desirability bias. Students might have responded in a manner they believed was expected rather than reflecting their true behavior. Additionally, first-year students were excluded due to their lack of substantial academic coursework during the study period. This exclusion may limit the generalizability of the findings across all student levels. Furthermore, the study utilized closed-ended questionnaires, which may not fully capture the depth and complexity of students' help-seeking behaviors and the underlying reasons behind them. Incorporating qualitative data could provide richer insights into these behaviors.

Conclusion

The study revealed a high level of academic help-seeking behavior among nursing and midwifery students, particularly among younger students (aged 24 or below), those enrolled in the midwifery program, and individuals aware of available academic support resources. However, students facing serious or overwhelming academic challenges were less likely to seek help. Additionally, a significant number of students preferred study groups as their primary method of seeking academic assistance. Lastly, concerns about confidentiality and trust emerged as a major barrier to academic help-seeking behavior among nursing and midwifery students. These findings underscore the need for a transformative approach to nursing education to enhance student engagement and support. Nursing programs should prioritize active learning strategies, such as case discussions and peer-assisted learning, to foster deeper understanding and engagement among students. Additionally, creating a supportive environment is essential, requiring the elimination of psychological, social, and systemic barriers to help-seeking, such as fear of judgment and time constraints. Addressing these challenges can ensure that students feel safe and encouraged to seek assistance when needed. Moreover, tailored support for older students, combined with increased awareness of available academic resources through orientation sessions and regular reminders, can empower students to access the help they need. By implementing these strategies, nursing education can evolve into a more supportive, equitable, and engaging experience, equipping students with the skills and confidence to excel in their academic pursuits and future healthcare careers.

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Ethics Committee Approval: This study was approved by Ethics Committee of Nurses' and Midwives' Training College, (Approval No: MOH-NMTC-51-280-23, Date: 19.12.2023).

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Peer-review: Externally peer-reviewed.

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