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A DEVELOPMENT OF MODEL FOR SOCIAL DISTANCE TOWARD PEOPLE WITH MENTAL ILLNESS



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WAN AINIL HUSNA BINTI WAN SALIM

SULTAN IDRIS EDUCATION UNIVERSITY

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WITH MENTAL ILLNESS**

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Kampus Sultan Abdul Jalil Shah



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**THESIS SUBMITTED IN FULLFILLMENT OF THE REQUAIREMENT FOR THE
DEGREE OF DOCTOR OF PHILOSPHY**

**FACULTY OF HUMAN DEVELOPMENT
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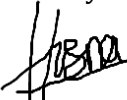
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
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ACNOWLEDGMENT



In the Name of Allāh, the Most Gracious, the Most Merciful

All praise to Almighty Allah for giving the ability and strength to complete this thesis paper of “Social Distance toward People with Mental Illness”. This thesis paper was prepared to fulfill the requirement to attain the Doctor of philosophy (educational psychology).

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For all those unspecified, who have personally or professionally involve directly or indirectly in completing this task i wish to thanks to you all and may Allah bless you here and hereafter.



ABSTRACT

This study aims to develop a model by looking at the following factors; attitude, conception on mental illness and knowledge with social distance towards people with mental illness. Besides that, this study also examines prejudice as a moderator and hypothesizes a model developed fit with data sample. A cross-sectional study was used to achieve the desired objective of the study. An online survey was created by using Google Form. A number of a public university students in Selangor (n=384) was invited to participate in an online questionnaire. Responses were rated on five-point likert scale. Smart-PLS was been used to analyze the data got from respondent. Findings reported that only attitude ($R^2=0.24$, $p<0.05$; $t = 6.38$) and conception on mental illness ($R^2 = 0.224$, $P<0.05$; $t=8.63$) have a significant relationship with social distance toward people with mental illness and the model is fit with data sample. Next, prejudice did not work as a moderator variable in this study because all P value of attitude, conception on mental and knowledge more than 0.05 ($P>0.05$; $t = 1.27$, $P>0.05$; $t = 0.25$, $P>0.05$; $t=0.44$). Furthermore, this study found that, 91.9% public university students have social distance towards people with mental illness. This study adds weight to the argument that either having knowledge on mental illness or not, the feeling of fear and unstable attitude of people with mental illness force them to make social distance toward people with mental illness. As a conclusion, social distance towards people with mental illness has encouraged other people to underestimate them, to the point where this group of people had to undergo unemployment. This study implicates that reducing social distance toward people with mental illness can enhance their social function.





PEMBENTUKAN MODEL BAGI PENJARAKAN SOSIAL TERHADAP PESAKIT MENTAL

ABSTRAK

Kajian ini bermatlamat untuk membangunkan satu model dengan melihat kepada faktor-faktor berikut; sikap, tanggapan terhadap penyakit mental, dan pengetahuan tentang penjarakan sosial terhadap pesakit mental. Selain itu, kajian ini juga mengkaji prasangka sebagai moderator dan membuat hipotesis berdasarkan model yang dibangunkan sesuai dengan sampel data. Satu kajian keratan rentas dijalankan untuk mencapai matlamat objektif bagi kajian ini. Satu tinjauan dalam talian telah dicipta dengan menggunakan Google Form. Sebilangan pelajar dari universiti awam di Selangor ($n=384$) telah dijemput untuk menyertai satu soal selidik secara dalam talian. Tindak balas mereka dinilai dengan skala likert lima mata. Smart-PLS telah digunakan untuk menganalisis data yang diperolehi dari responden. Dapatan melaporkan bahawa hanya sikap ($R^2=0.24$, $p<0.05$; $t=6.38$) dan tanggapan terhadap penyakit mental ($R^2=0.24$, $p<0.05$; $t=6.38$) yang mempunyai hubungan signifikan dengan penjarakan sosial terhadap pesakit mental dan model tersebut sesuai dengan sampel data. Seterusnya, sikap prasangka tidak berfungsi sebagai pemboleh ubah moderator untuk kajian ini kerana semua nilai P untuk sikap, tanggapan terhadap penyakit mental dan pengetahuan lebih daripada 0.05 ($P>0.05$; $t=1.27$, $P>0.05$; $t=0.25$, $P>0.05$; $t=0.44$). Tambahan pula, kajian ini mendapati 91.9% pelajar universiti awam mempunyai penjarakan sosial terhadap pesakit mental. Kajian ini menyokong hujah bahawa perasaan takut dan sikap yang tidak stabil dalam kalangan pesakit mental membuatkan mereka dijauhi dalam kalangan masyarakat, walaupun sebilangan daripada masyarakat itu mempunyai pengetahuan tentang penjarakan sosial terhadap pesakit mental. Kesimpulannya, penjarakan sosial terhadap pesakit mental telah menggalakkan orang lain untuk memandang rendah terhadap mereka di mana mereka terpaksa menganggur. Kajian ini menunjukkan bahawa dengan mengurangkan penjarakan sosial terhadap pesakit mental, ia dapat memperbaiki fungsi sosial mereka.



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LIST OF ABBREVIATIONS

CASVE Generic Information Processing Skills

IPTA Public Institutions of Higher Learning

MIASA Mental Illness Awareness and Support Association

NHMS National Health and Morbidity Survey

SPSS Statistical Package for Social Science

SDO Social Dominance Orientation

SLT Social Learning Theory



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CHAPTER 1

INTRODUCTION

1.1. Background of the Study

86% of mental illness patients had experienced discrimination (Pawar, Peter & Rathod, 2014). These can be seen through incidents like the killing of children by their own mother, suicidal cases of students and many more. Society can only show their sympathy without trying to understand these situation when they heard such cases. This scenario occurs frequently as society at large assumed that mental illness issues is taboo to be discussed in public and it eventually lead to discrimination towards people with mental illnesses. Due to this, society has created social distance towards people with mental illness. Social distance can be defined as social separation between groups caused by perceived or real differences between groups of people (Crossman, 2018). The social distance can be categorized in terms of economic status, race, gender and many more. This also includes a person's health condition, especially mental health (Dabby, Tranulis & Kirmayer, 2015). Though it is not visible, mental illness is a real condition. Therefore, people with mental illness are segregated from society.





Many reports on crime cases in Malaysian social media can be connected or linked to people suffering from mental illness. Milby (2015) stated that, 28 murder cases have been reported in mass media in 2013 whereby 14 of these cases which is equivalent to 50 percent were caused by people with mental illness. These situations happened because changes of the nowadays lifestyle that solely focus on the achievement and materialism (Idris, 2016). It shows that one is considered successful when he can drive a luxury car, owns a luxury house and holds a professional position such as being a doctor or lawyer. Thus, an individual is urged to obtain such achievement be it through decent or indecent attempts in order to be acknowledged and accepted by society.

The stigmatization on mental illness became stronger when this situation happens, and it has led to the increasing number of patients with mental health disorders. This was supported by Zuraida (2017) who stated that 40% of Malaysian are predicted to have mental illness in the future. This issue has caught the attention of Malaysian Government as it was discussed in the Parliament (2017). The issue that has been discussed were in terms of promotion, treatment, healthcare budgets and many more. Patients with mental illness had already carried the burden of the condition itself and they also must face the stigma put by the society as well. These will lead to harsher social distances towards people with mental illness.

When the social distances happen, eventually, the treatment will be the last alternative and less likely patient seeking help from a relevant mental health professional (Schomerus & Angermeyer, 2008). According to the patients' family, to have a member of the family undergoing mental treatment is like a curse to them.





Besides that, even the family that takes care of people with mental illness will also be stigmatized by society (Mohd Suhaimi et. al 2012). This will delay the process of getting professional treatment, specifically; psychiatrists, for patients with a mental disorder. This is because the people with mental illness is like an 'alien' to the society (Baumann, 2009). This has been proven by an article that was written by Henderson et. al (2013) which stated, globally, more than 70% of mental illness patients did not receive treatment. Not only that, in Malaysian context, prejudice towards such groups in a society is inevitable and this has been proven by research done in America towards white and black people (Zaki, 2010). In conclusion, seeking professional helps regarding mental illness treatments will be the last resort for patients as they are afraid of the backlash from society in general.



to talk about openly. This is due to many misunderstandings and misconceptions about mental illness. According to the National Institutes of Health (2007), "a mental illness is defined as a health condition that changes a person's thinking, feelings, or behavior (or all three) and that causes the person distress and difficulty in functioning". It means that, mental illness is the condition of one's mental health. However; having poor mental health did not necessarily means that this person will have a mental illness (Megellan health.com, 2018) as mental health is included in the well-being of a person. On the other hand, mental illness is a wide range of disorders that affect mood, thinking and behavior. According to Snyder and Shane (2007), there are three principles that able to explain about mental health namely, (1) emotional wellbeing, (2) social welfare and lastly (3) psychological well-being. Moreover, there is slight difference between mental health and mental illness.





Corrigan and Watson (2002), have found that negative stigmatization of mental illness has led people to avoid mental illness patients. The negative attitudes of stigmatization such as fear, refusal to get treatment and the inability to accept the illness has become the barrier for the service provider in curing mental illness patients. Hence, the services will be underutilized (Haynes, 2010 & Anwar et al 2017). Kamunyu, Ndungo and Wango (2016) found that students are reluctant to attend counselling session in their university and one of the reasons was negative perceptions that they received. This information does not tallied with the statistics which show the increasing number of people getting treatment for mental illness (Malaysia's National Health and Morbidity Survey) (NHMS) (2015). It shows that students are still being ignorant especially regarding their mental wellbeing.



students refused to seek or went for psychological treatments that are provided for them; only 9.3% of students willing to seek help from a counselor if they have problem. It is clearly showed that only a small number of students understand the benefits of seeking advice from counselors. Counseling services become unpopular among Malaysian students (Chen & Kok, 2015). Counselling is deemed to be the first aid in the issues of mental illness. However, if students are reluctant to see counselor, first aid cannot be given to them. A counselor will decide whether they need to be referred to a psychiatrist or the issue can be solved only by attending counseling sessions. In this situation, peer support is important and significant in helping students with mental illness in order to come forward and get treatment from professionals such as counselors or psychiatrists.



As a result, some patients, especially with psychosis situations were unable to be cured within 5 years before seeking help (Associate Professor Dr Koh Ong Hui). Besides that, people can be affected by mental illness regardless of their gender, age and ethnicity. Adult Psychiatric Morbidity Survey (2016) stated that young people from the age of 16 until 34 years old are most affected by mental illness. This scenario occurred as during this period, young people are trying to decide what they want in their life. Dr. Ruzita (2016) reported that mental illness is expected to be the second- highest form of health problem affecting Malaysians after heart illness by 2020 and the statistics also show that there is an increasing number of new cases that have been reported regarding mental illness. Currently, the world is facing Covid-19 pandemic, and this includes Malaysia. This can lead to a panic attacks and anxiety in the society (Firdaus, 2020). This is due to the uncertainty of this disease in terms of treatment, medicine and the disease itself specifically as it is relatively new. (Firdaus, 2020).

It does not only affect the sufferer and people at large, but it also create a financial problem as well as some people has lost their job because of the Movement Control Order from the government, thus it will affects their future well-being in a long term). A survey that was conducted by Lai et al (2020) in Wuhan found that 50% of front-liners especially nurses, women and caregivers of Covid-19 patients had suffered depression while 45% developed anxiety. Subsequently, it can also be expected that other countries which are affected by Covid-19 will experience similar or probably more severe situations in dealing with this issue. The situations will be an additional sources of the increasing number of mental illness cases worldwide.



Movement Control Order (MCO) have also impacted the mental health of Malaysian society; Nur Hisyam (2020) stated that from 8380 calls received by hotline until 18th May 2020 in terms of mental health service, 46.8% were experiencing emotional problems such as stress, anxiety and family problem, 20% were feeling anxious about Covid-19 and 2.4% deals with psychiatric problem. In addition, other 6% and 0.2% were from domestic violence and abused of children. From these data, it can be seen that anxiety regarding this pandemic existed. In the context of university students, when MCO was implemented, the methods of learning changed to online applications. This also affected students' mental health. According to Fawaz & Samaha (2021), 17.9% students have mild depression, 13.8% of the students have moderate depression and 1.7% have severe level of depression, 3.3% of respondent have mild anxiety, 21.9% with moderate anxiety and 2.3% have severe extremely anxiety, 11% of students have mild and 1.7% moderate stress level due to online learning. Even though, there are statistics to prove that, mental illness is a serious conditions and immediate action should be taken to solve this problem but, it is still a taboo in the society either for Malay, Chinese and Indian to discuss about this publicly (Anita, 2020). This can validate the claim that this year, the second- highest mental illness are issues pertaining to mental health.

Apart from that, mental health has become issue and challenges which occurs within society in this era of modernization (Utusan, 2010). If we look at Asian countries like Hong Kong, Japan, Singapore Korean and Thailand, their view on people with mental illness are dangerous and aggressive especially when these patients were diagnosed with Schizophrenia and Bipolar (Zhang et al, 2020). In addition, a report from Malaysia's National Health and Morbidity Survey (NHMS) (2015), found that the





trend of mental health problem among Malaysian adult, especially younger adults from the age of 16 and above are increasing from 11.2% in the year 2006 and 29.2% in the year 2015 among the population of 4.2 million, and 40% from that statistics are suffering schizophrenia.

This statistic shows that, mental health problem is increasing twice in ten-years' time. A report from Utusan Malaysia Online (2012) stated that youth suffer from mental illness had been increasing from 13% in the year 1996 to 20% in the year 2011. Furthermore, according to Mukhsin (2010) the number of patients getting treatment from 1 or 2 every day in the year 1999 to 7 or 8 every day in 2009 is increasing rapidly. The statistic above clearly showed that the number of people suffers from mental illness is changing drastically during the pandemic. In short, the number of patients with mental illness has already risen and the occurrence of pandemics makes it worst.

However, there is not enough psychiatrist in Malaysia to handle mental health cases with the ratio of 1:200,000 which means 1 doctor treat 200,000 patients with mental illness that is lower than the recommendation made by World Health Organization of 1:10,000 (National Healthcare Establishment and Workforce Statistic). Furthermore, Warnke et al (2018) found that medical students have a neutral attitude to choose psychiatry as their career after graduation. This situation happens because of society's perception regarding the psychiatry profession. With the increasing trend on mental illness, it shows the support of peers in the university is important to help those who are affected so they will come forward to obtain treatment from professionals (Cheemond, Davies & Inder, 2020). However, the support of peers is still lacking



towards people with mental illness considering the social distancing of society (Hall, Kakuma, Palmer et al, 2019).

This increment was due to societal anxiety on the need to produce mentally health future leaders and if the statistics is continually increasing, it may affect the employability rate in the future and one of the causes to this increasing statistic is the cost of living increment. The high cost of living resulted to people striving to survive in life that can lead people to depression. Thus, this can also lead to suicide (Daniel 2014). In addition, in this pandemic session, “Polis Diraja Malaysia (PDRM)” reported 681 cases of suicidal in the year 2020, and this year, 468 cases suicidal reported from January until Mei (Abd Jalil Hassan, 2021). So, this issues need to be consider relevant to be disuses, as it impact the lives of people. It shows that society need to play their role in giving support to reduce suicide cases.

Besides that, people are likely to talk more about physical health than mental health because they are more aware of their physical health rather than mental health (Steevens 2007). As a result, they will not get appropriate information about mental health, which later lead to negative perception. In addition, society believes that mental illness is your personal problem and it is a shame if they suffer mental illness (Harian Mentro, 18 May 2017). It became worse, when people do not believe that after treatment the people with mental illness can revert to normal life (Ferreire, 2015). It becomes more severe, as they tend to believe that people with mental illness are unable to revert into normal life after treatment.



This has led to less concern about issues of mental illness and wrong perception about it. Therefore, they did not know what kind of lifestyle can be a leading factor to mental illness then, when the mental illness occurs in the family; they panicked because they do not know the action that should be taken to resolve this issue. The concerns can give the signal to identify what kind of behavior leads to mental illness. According to Brown (2016), the latest learning environment is different from before because the students are learning in a hurry and the pointer has become the measurement in securing a job after completion of the study. It means that student's achievement has become a "life or death" issue because without good grades students are unable to secure a job, thus resulting in them not being able to repay their study loans such as PTPTN. This has been proven with the statistics of youngsters who were being declared bankrupt by financial institutions that has increased from 212 in 2008 to 635 in 2015 (Nik Nazmi,



Thus, the university should take into consideration on matters concerning students regarding the kind of support that is available in helping them to cope with mental health problem and to let them know it is not something to be hidden or kept. Hence, the concern of issues of mental illness will allow people to have an accurate attitude towards people with mental illness that is; did not set social distancing towards people with mental illness. Therefore, it will increase the sense of understanding about mental illness (Nik et al., 2015). On the other hand, Urias, Aday, Fuentes, Dora, Acosta and Guadalupe (2015) found that, the concern or sense of awareness on this type of illness can reduce negative stigma towards people suffered from mental illness as well as it can lead to new improvement in their lifestyle. To conclude, refuse to talk about mental illness, ignorance, concern more about physical health and prejudice among





have made the issues of mental illness as taboo and lastly, the distance towards people with mental illness will become very visible.

Furthermore, the statistics derived from American Psychological Association (2014) also shows that there is an increment especially in the attendance of counseling session for mental health, drug and medication usage on mental health, hospitalization for mental illness. (Refer appendix E). Evidently, this is a serious issue among university students and the first step that should be taken by the university is to reduce social distance or gap between people with mental illness and the society as the level of acceptance should be developed and practice. Looking at the scenario, the researcher intends to study the significant relationship of some factors affecting social distance towards people with mental illness among students in several public universities in the



1.2 Problem statement

Issues of mental illness should be taken seriously and ample consideration should be emphasized by every level of society, National Alliance on Mental Illness (NAMI) (2015). Sinar Harian (2012) reported that, cases of mental illness has become severe in Malaysia in which this has contributed to the increased in suicidal cases among Malaysians. This is proven by statistics on the risk of committing suicide among adults that show an increment from 7.9% in 2012 to 10% in 2018 (Nurul Izzah, 2018). Even though there is a law regarding suicide but, there is no significant proof that the implementation of this law can reduce the number of suicidal incidents among Malaysians (Tan, 2018), and it can be worsening (Fong 2018). Due to the social distancing created by society, most of the mental illness patients are reluctant to go for treatment thus this will lead to the increase of crime cases involving them. (Dzulkefly, 2018 & Wan Rushidi Wan Mahmud, 2018).

Furthermore, research regarding social distance toward people with mental illness has been conducted successfully abroad. In Japan, research on social distance was carried out by Yoshii et al. (2012), in Africa it was done by Crabb et al. (2012) and Tesfamariam et al (2018), whereas in Saudi, research on social distance was done by Abolfotouh et al (2019) and Alsahali (2021), while in United States, several researches have been done by Wahl et al. (2012), Smith & Cashwell (2011), Youssef et al (2012) and many more. To conclude, a great deal of research has been conducted to investigates on factors of social distancing on people with mental illness abroad. However, in Malaysia, the literature on factors influencing social distance towards people with mental illness in urban population is still lacking as it is known that only one study had been done which is Zubaidah & Norfazilah (2014) on social distance



towards people with mental illness that focus only on attitude and it was done in community of suburban in Tampoi, Johor. Yoishi et al (2012) also suggested that research regarding social distance should be carried out in other countries. Besides that, attitude of social distance on people with mental in Malaysia really does exist (Wan Azziah, (2018), Anita, (2018), Fatimah (2018) and Muksin, (2016). The current study attempts to fill this gap by investigating the factors of social distance on people with mental illness in Malaysia, especially in urban area.

Besides that, plenty of researches have investigated factors that influence social distance on mental illness patients. Attitudes toward people with mental illness, conception on mental illness and knowledge on mental illness, have shown to be the contributing factors that have led to the social distancing portrayed by society.

However, the literature is not yet reveal any attempt to structurally map out the reciprocal relationships between attitude toward people with mental illness, conception on mental illness, knowledge on mental illness and social distance towards people with mental illness in a single study. The current study attempts to fill this gap by analyzing reciprocal relationships between the three factors in the context of the university students. Specifically, it will investigate reciprocal relationships between attitude toward people with mental illness, conception on mental illness, knowledge on mental illness and social distance toward people with mental illness as well as to observe how prejudice influences the relationships among variables. Additionally, an article written by Kenny et al (2018), suggested that research regarding prejudice on people with mental illness should be carried out as it will bring benefits in terms of new scale and theoretical framework.

Based on the article that was written by Aruna et.al (2016) stated that prejudice towards people with mental illness still happens even though they have knowledge about the mental illness. Besides that, Moon et al (2008) stated that social distance will decrease when the knowledge increases but, social distance toward people with mental illness increase as well as the sense of prejudice increase. In addition, Jang et al (2012) found that prejudice is the moderator in identifying factors affecting social distance on people with mental illness. This shows that prejudice acts as an intermediate outcome and social distance toward people with mental illness acts as the actual outcome. Therefore, this study will also examine the prejudice on people with mental illness as a moderating factor in the relationships between attitude toward people with mental illness, conception on mental illness, knowledge on mental illness and social distance towards people with mental illness.

Research done by Shamsuddin et. al (2013), the prevalence of depression, anxiety and stress are 37.2%, 63.0% and 27.3% in Malaysia's public university respectively, this is much higher than research done in private university that indicates the prevalence of depression, anxiety and stress are 30.7%, 55.5% and 16.6% (Teh et al, 2015). Besides that, according to Saleem, Mahmood and Naz (2013) in their study it was found that universities' students are more vulnerable to mental health problem compared to general populations as students tend to show more significant negative attitudes thus it has created social distancing towards people with mental illness (Lundquist and Gurung, 2019, Follmer and Jones, 2017 & Afe & Ogunsemi (2016). Furthermore, according to Swed, shohib.. et al (2022) 47.80% of students was make social distance toward people that have depression. Taking this number into consideration, there is indeed a need for such study to be carried out in public university



especially in Selangor because it one of the major cities in Malaysia and provide the most comprehensive psychiatric care (Hanafiah & Van Bortel, 2015), yet it carry the highest percentage with 12.8 % students have shown the prevalence of these three types of mental disorders namely depression, anxiety and stress (NHMS, 2019). In addition, according to National Health Mobility Survey (NHMS, 2017), among peninsular state in Malaysia; Selangor was the highest prevalence of anxiety (43.2%), stress (12.6%) and depression (22.6%). Moreover it also can provide more systematic promotion and the understanding about mental illness with the aim is to avoid people with mental illness became a target in society from being stigmatize, discriminate and victimized for their illness (Corrigan et al., 2005).

Furthermore, 50-90 percent of patients that have mental illness did not get good treatment due to lack of awareness and negative attitude or stigma towards people with mental illness (Jadhav, Littlewood, Ryder, Chakraborty, Jain & Barua 2007) and the worse thing is the rejection towards people with mental illness among their peers among university students ranked in top two after alcohol consumption (Corrigan et.al, 2005). In addition to that, an article from Zolezzi et all (2017), found that university students have stated that people with mental illness is dangerous, people with mental illness could not have a regular job, it will be shameful if people know someone in their family has mental illness and they will not marry people that have a mental illness. This shows that there is clear rejection among university students towards people with mental illness. Research related attitude toward people with mental illness among university students were limited and most of the study were focused merely on medical students perspective (Mas & Hatim, 2002; Tan et al 2005) rather that university students from other courses. Besides that, university students frequently imposed “silence treatment”





towards issues of mental illnesses (Wynaden et al, 2014). Therefore, this study setting focuses on public university students in Selangor that not in medical courses.

In addition, research on determining knowledge on mental illness and attitude towards people that have mental illness is still lacking (Razzouck et. al 2008 & Zaharuddin, 2012). Only nineteen (19) studies regarding the attitudes on mental illness is available from 2004 until 2010 which all focus only on professionals (Wahl and Cohen, 2010). Wahl, Susin, Lax, Kaplan and Zatina (2012) and Blaise (2015), found that students are acquire a limited knowledge in terms of the symptoms of a specific psychiatric disorders, treatment and biological causes. Furthermore, most of the population is found to be suffering from any one of these mental disorders namely schizophrenia, depression and bipolar disorder (Jyothi, Bollu, Ali, Chaitanya and Mounika 2015). So, it is relevant for the researcher to use these two variables to determine the social distance due to lack of knowledge on mental illness and negative attitudes on people with mental illness which lead to rejection towards them within the society.

Next, the conception of a person regarding mental illness also gives impact in creating social distance on people with mental illness. There has been a conception and belief that mental illness is a punishment from God (Rossler, 2016). Besides that, the perception of mental illness also affects society belief system (Behere, Das, Yadav and Behere, 2013). This entire situation, makes society distant itself more from people with mental illness. Furthermore, the misleading understanding regarding people with mental illness make them refuse to seek professional help and fell shame to share their problem with other people.





Besides that, conception on mental illness, can develop from what we watching and receive from other resource. The particular reason for circumstance, it has sense of mind control whether the information is circulated and showed, they tend to believe in it (Wilson, Ballman & Buczek, 2017). So, it is relevant for the researcher to study this variable on social distance toward people with mental illness which is conception on mental illness.

The rationale of this research are; it will increase the number of people that suffers from mental illness (Fatimah, 2018), it does not help the process of recovery and reduce the social function in the country (Muksin, 2016). Besides that, social distance toward people with mental illness will underestimated people with mental illness and this can lead to unemployment of people with mental illness (Brouwers, 2020). Statistic from National Alliance on Mental illness (NAMI), 80% people with mental illness is unemployment. This situation will make people with mental illness fell useless and hopeless about their disease (Farre, Fasani & Mueller, 2018). This scenario; clearly indicates that attitude toward people with mental illness, conception on mental illness and knowledge on mental illness are some of important variables that can be utilized to reduce social distance because it can lessen the stigma as well as increase students' awareness on mental issues. Therefore, pertaining to this statement, the researcher wants to investigate to what extent that attitude toward people with mental illness, conception on mental illness and knowledge on mental illness as well as prejudice toward people with mental illness as moderator variable affect the social distance towards people with mental illness among students of public universities in Selangor, Malaysia.





1.3 Conceptual Framework

The conceptual framework is the researcher's own direction in doing the research. It means that, the researcher's own concept, belief, assumption and expectation in doing this research was supported by the theoretical framework. Below is the network on how these variables are associated with each other. It consists of dependent and independent variables that is believed to have a relationship with the research topic. The dependent variable is social distance toward people with mental illness among public university students, while the independent variables are attitude toward people with mental illness, conception on mental illness and knowledge on mental illness whereas the moderating variable is the prejudice towards people with mental illness.



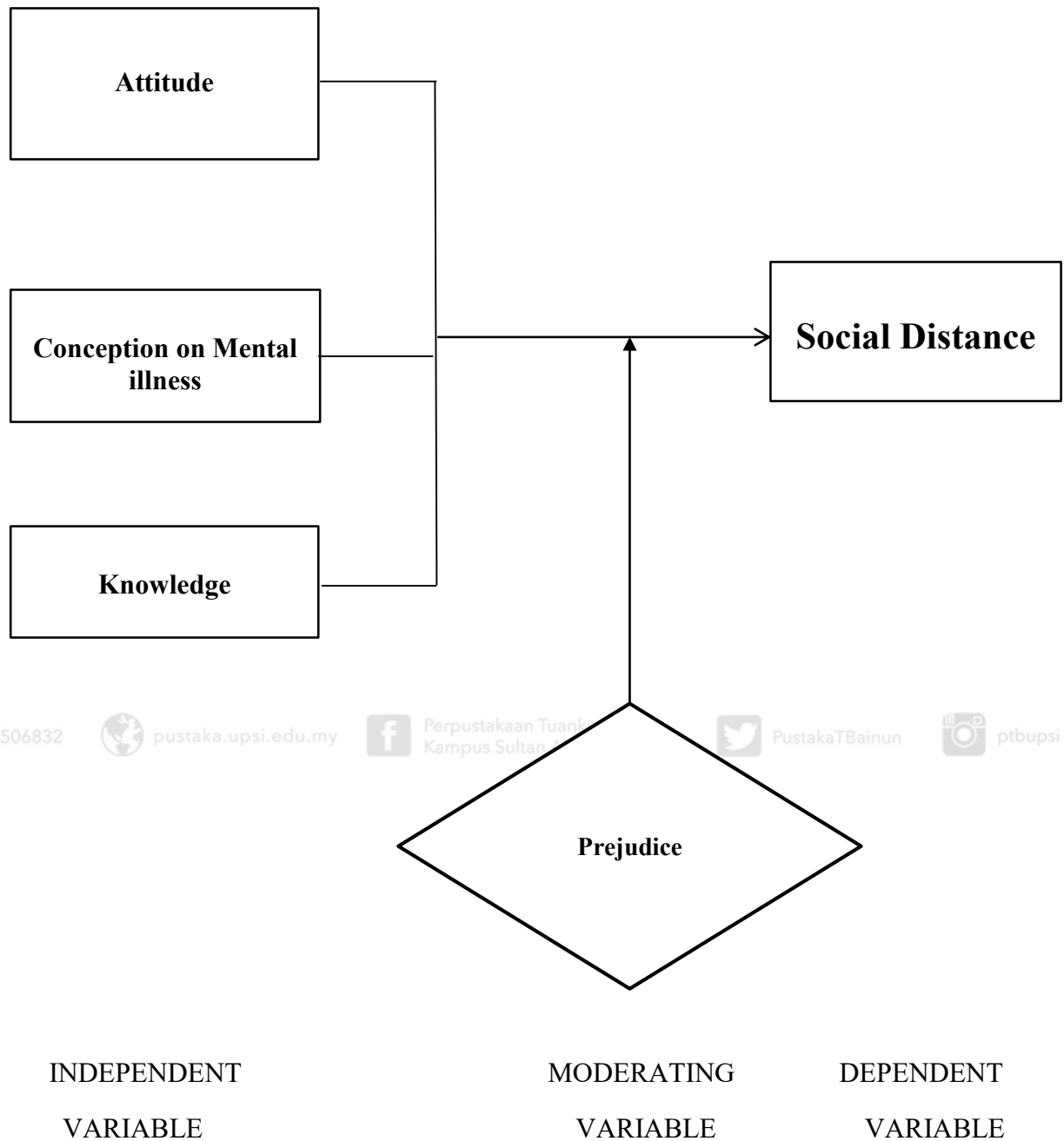


Figure 1.1. Research Conceptual Framework

Social distance towards people with mental illness can be defined as “a measure of social separation between groups caused by perceived or real differences between groups of people as defined by well-known social categories” (Cole, 2018). The conceptual framework for this study is shown in the paradigm above. The researcher’s primary interest in this research is the social distance on people with mental illness that becomes a dependent variable. This dependent variable attempted to be explained by the three independent variables which are attitude toward people with mental illness, conception on mental illness and knowledge on mental illness. Independent variable is the cause while the dependent variable is the outcome in any phenomena. The independent variable is expected to have a significant relationship with dependent variable. This means that, attitude toward people with mental illness has a significantly relationship with social distance, conception on mental illness has a significantly relationship with social distance and lastly knowledge on mental illness has a significantly relationship with social distance.

From this paradigm, the researcher intended to show the connections of every independent variables and dependent variable specifically as well as moderating variable that have an effect on the relationship between independent variable and dependent variable. The arrows are from an independent variable to dependent variable; attitude toward people with mental illness to social distance toward people with mental illness, conception on mental illness to social distance and knowledge on mental illness to social distance. The demographic factors only look at three areas that are; age, education level and gender of the respondents.



The researcher expected all independent variable; attitude toward people with mental illness, conception on mental illness and knowledge on mental illness have a significant relationship with dependent variable (social distance toward people with mental illness); social distance only occurred when there is high prejudice on people with mental illness so, from these assumptions researcher can make a hypothesis from all the relationship that will be explained in the next two subtopic.





1.4 Research Objectives

The main objectives of this research are:

- A) To identify the level of social distance, attitude, conception on mental illness, knowledge and prejudice on people with mental illness among public university students.
- B) To determine the significant relationship between attitude toward people with mental illness and social distance toward people with mental illness
- C) To determine the significant relationship between conception on mental illness and social distance toward people with mental illness
- D) To determine the significant relationship between knowledge on mental illness and social distance toward people with mental illness
- E) To examine the prejudice attitude as moderating factor between predictor variables and social distance towards people with mental illness.
- F) To develop a model to clarify the factors that contribute; attitude toward people with mental illness, conception of mental illness, knowledge on mental illness and prejudice to social distance towards people with mental illness among public university students.





1.5 Research Questions

A) What is the level of social distance, attitude, conception on mental illness, knowledge and prejudice on people with mental illness among public university students of Selangor?

B) Is there any significant relationship between attitudes toward people with mental illness and social distance toward people with mental illness?

C) Is there any significant relationship between conception on mental illness and social distance toward people with mental illness?

D) Is there any significant relationship between knowledge on mental illness and social distance toward people with mental illness?

E) Is prejudice attitude a moderating variable between predictor variables and social distance toward people with mental illness?

F) Is the model developed clarify the factors that contribute; attitude toward people with mental illness, conceptions on mental illness, knowledge on mental illness and prejudice to social distance towards people with mental illness among public university students?



1.6 Hypotheses

A hypothesis can be defined as a logically conjectured relationship between two or more variables expressed in the form of a testable statement. There are two (2) types of hypothesis; null hypothesis and alternate hypothesis. The null hypothesis means that there is no relationship between the two variables or no difference between the two groups, while the alternate hypothesis means that there is relationship between the two variables. According to Sekaran (2005), alternate hypothesis is use when the relationships have been never been previously explore and there have been conflicting finding in previous research study on the variable. So, researcher decide to use alternate hypothesis. The following hypotheses are formulated based on the problem statement.

In this study the hypothesis statements are:

Objective B

Hypotheses 1

Hal. There is a significant relationship between attitude toward people with mental illness and social distance towards people with mental illness among public university students.

Ha4 Attitude is the most predictor factor affecting social distance towards people with mental illness

Ha5 Attitude is the highest contribution level on social distance towards people with mental illness.

Objective C

Hypotheses 2

Ha2. There is a significant relationship between conception on mental illness and social distances towards people with mental illness among public university students.

Objective D

Hypotheses 3

Ha3. There is a significant relationship between knowledge on mental illness and social distance towards people with mental illness among public university students.

Objective E

Hypotheses 6

Ha6. Prejudice is the moderating variable in the hypothesized model.

Objective F

Hypotheses 7

Ha7. The hypothesis Model fits with the data sample.

Above are the hypothesis statements that are stated by the researcher in this study. Eight hypotheses have been formulated in this study. The researcher uses the entire statements as a way of alternate hypothesis for this study. It is important to state the hypothesis because they provide provisional predictions regarding the phenomena that been studied. Besides that, it can also provide statements for relationships or statements that can be tested directly. Apart from that, the hypothesis statement can served as guidance for the researcher because it also represented the objective of the study. In addition, a hypothesis statement can provide a prediction on the framework of findings and conclusion of the study. Below is the table of summary of the hypothesis.

Table 1.1

Summary of the Hypothesis

Research Objective	Hypothesis
	H _{A1} - There is a significant relationship between attitude toward people with mental illness and social distance towards people with mental illness among public university students.
	H _{A2} - There is a significant relationship between conception on mental illness and social distance towards people with mental illness among public university students.
Research Objective B, C,D & E	H _{A3} - There is a significant relationship between knowledge on mental illness and social distance towards people with mental illness among public university students.
	H _{A4} -Attitude is the most predictor factor affecting social distance towards people with mental illness.
	H _{A5} - Attitude is the highest contribution level on social distance towards people with mental illness.
Research Objective F	H _{A6} -prejudice is the moderating variable in the hypothesized model.
Research Objective G	H _{A7} - Model fits with the data sample.

1.7 Theoretical Framework

The theoretical framework is the foundation on which the entire research project is based on. It is logically developed and described in order to elaborate the network of association among the variable deemed relevant to the problem situation, which is identified through the process such as interview, observation and literature survey. This theoretical framework also explained the importance of variables that was also determined from the previous research. Not only that, it also explained the theories that were used to underlay the relationship between the variables. Besides that, theories are also used to explain, predict and understanding the phenomena of the study. Based on this theoretical framework, the researcher has selected three theories for this study.

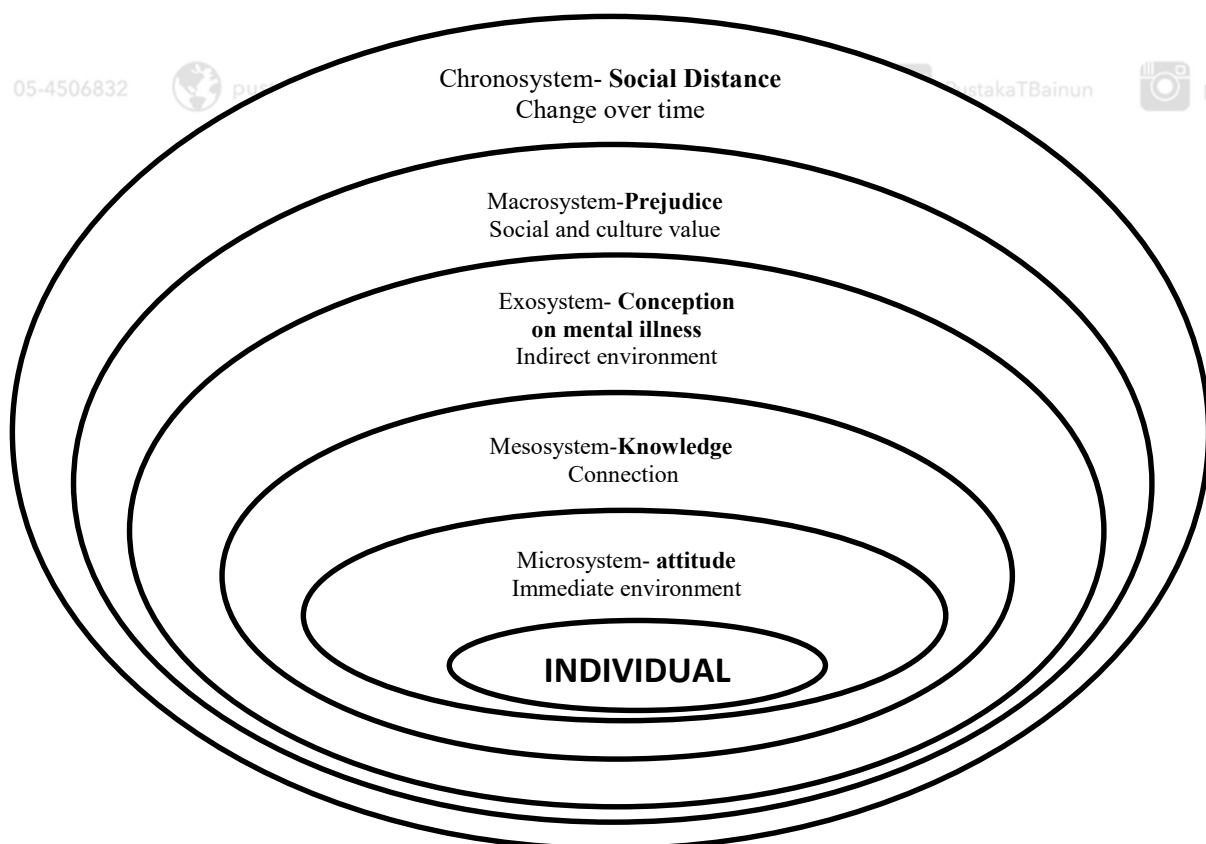


Diagram 1.1. Theoretical theory; Bronfenbrenner Theory



The theory chosen for this study is Bronfenbrenner's theory. This theory was developed by Urie Bronfenbrenner and was written between the years 1989 until 1995. According to Bronfenbrenner, children's development is affected by their environmental system. The behavior of children is complex, as it involves several developmental stages. This theory explained the interrelationship with environment which surrounded the children that affects their development. This environmental system was divided into five levels. The levels are Microsystem, Mesosystem, Exosystem, Macrosystem and Chronosystem. The first layer is the microsystem. This layer explained the interactions between the children with people that are close to them. For example, their parents, siblings, friends, teacher and many more. Parents who are more exposed to mental issues of mental illness will react differently in front of their children when meeting people with mental illness compared to parents who is not exposed to a similar situation. They may have a better attitude towards people with mental illness if they have ample exposure on the issues of mental illness and consequently, it will reduce the social distance towards person with mental illness. This was due to their perceptions that mental illness is not something new.

The next layer is Mesosystems. It is the connection between the microsystems. The link in the larger social environment, for example, between children and home, children and school or university, children and neighborhood, and many more are in the level of mesosystem. From the link; they will acquire an ample knowledge regarding mental illnesses. They gain information, from school (teacher), university (lecture), siblings, friends and many more. For example, students will obtain better knowledge about mental illness if there are frequent sessions held in discussing this issue, or if their friends from the field of psychology always share knowledge about mental illness with them and vice versa. In this layer, the connection between the microsystems and





mesosystems will affect the students' knowledge on this issue. If there is a strong interaction among the microsystem regarding mental illness, they will acquire ample knowledge on mental illness. This knowledge and understanding will eventually reduce the gap or social distant towards persons suffered from mental illness.

The third layer in the theory of ecological system is Exosystem. It is about the setting in which children do not get involve directly but it gives impact on them. For example, the parent's workplace, network of friendship including television and other mass media. Children are very affectionate and easily influenced from watching television and other mass media. Children who have visited their parents' workplace will have indirect effect on their views on mental illness, as it can affect their perceptions on the issues. Reports regarding the issues of mental illness on social media also have an impact on society's beliefs about mental illness. So, the frequency of social media kept reporting negatively about mental illness will lead them to reject and distant themselves from their family, peer or society that has connections with mental illness. Even though, student do not involve directly with this situation, it gave impact on social distance toward people with mental illness.

This situation happened because of the social media consumption that affects the behavior and interaction towards people with mental illness in the society (Riles, 2020). This means; the information that the society received or heard from social media, either in electronic or printed media regarding mental illness, will affect the general attitude of social distancing towards person with mental illness in the society. With the advancement of technology, the information can be gathered very quickly either by using hand phones or other gadgets. Not only that, most of the time is spent on electronic devices and gadgets, so, lots of information that they obtained from the





media regarding person with mental illness can also affect their acceptance and perceptions towards people with mental illness. To conclude that, even though, the individual did not involve directly with the environment, it still brings negative impact on the attitudes of social distancing to people suffered from mental illness.

This situation was create negative conception on mental illness. Besides that, the conception on mental illness can be shaped by what been showed in social media, it also can be shape by the religion of the individual. Religion is defined as a fundamental set of belief system and practice that is agreed upon by a group of people. The child's parents will affect the children's beliefs and attitude towards people with mental illness. Parents' religion or religious belief will affect the children perceptions and belief on mental illness issues. It is because every religion has its own conceptions regarding issues of mental illness (Behere, Das, Yadav & Behere ,2013). Besides that, religion is the most powerful variable in shaped a conception on mental illness (Okasha et al, 2012). Some religions believed that mental illness is a punishment of their sins from God. Due to this, the reaction towards people suffered from mental illness is quite severe and it also can lead to the ways of treatment used to cure it. For example, Muslims preferred to go to anyone who is considered pious such as Imams or Ustazs to get treatment rather than to seek for professional solution.

The fourth layer is the Macrosystem which includes the value, custom, law and resources of the culture at large. In Malaysian context, issues of mental illness get less coverage (Azizah, 2018) compared in the Western Countries where the issues of mental illness are largely covered and accepted by their community (Baxter...et. al, 2013). So, they are less prejudice to the person that suffers mental illness compared to Malaysia. Mental illness person or patients were alienated from Malaysian society and due to this,



the sense of prejudice exist without trying to understand the general problem faced by them. Our society like to label person with mental illness as “crazy” though not all mental illnesses can be categorized as such. Finally, the last level is Chronosystem, which explained on in what way the system was affected and interrelationship among them that changed over time. This is proven by an article that was written by Anthony and Elizabeth (2009) which stated that social distance on mental illness changed over time. The social distance on people with mental illness could be changed if these factors; attitude, conception on mental illness, knowledge enhancement, the role of social media and prejudice elimination are included in the awareness campaign on mental illness.

The researcher chose this theory because this multidimensional model applies to all domains of cognitive in social development (Broderick & Blewit, 2003). The unit analysis of this research is university students come from different backgrounds and environments. That means the personality and cognitive development is diverse. So, in terms of social distance and opinion about people with mental illness also differ. Therefore, this theory was chosen due to its ability to understand in general context and complexity from a holistic approach (Christensen 2016). Besides that, by implementing this theory; clear considerations of interactions between and within these systems can provide the most useful recommendation in guiding public health policy and practice (Eriksson et. all 2018).

Next, researcher will explain the second theory that was used in this study. First of all, researcher was use Maslow’s hierarchy of need as second theory in this study. This model was firstly conceptualized by Abraham Maslow in 1943 to understand the

categorical of human need that dictate an individual behavioral (Abraham Maslow, 1993). Below is the diagram for this theory.

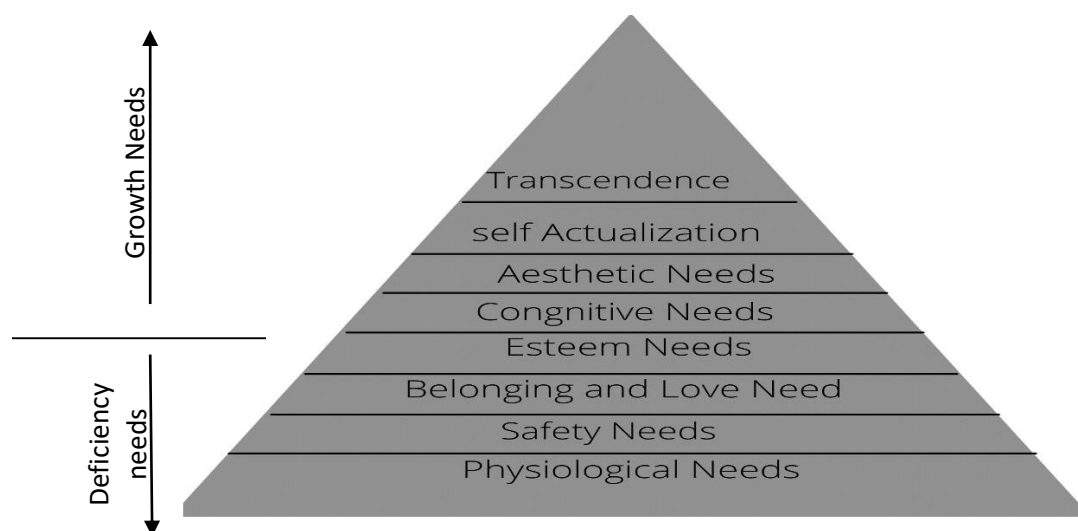


Diagram 1.2. Abraham Maslow Theory

Abraham Maslow theory explain the need of humans in their live. This needs will cause the action of an individual. In this theory, the human need, it have two aspects that are; (1) deficiency needs and (2) growth needs. In deficiency needs it have four type of needs, those are; Physiological needs, second Safety needs, third is Belonging or Love need and lastly is Esteem needs. For second aspect, that is growth needs it also have four (4) type of needs, namely (1) cognitive needs, (2) Aesthetic Needs, (3) Self Actualization and (4) Transcendence.

These needs importance to human to come out their full potential in their live. If one of the need not fulfill it can impact the behavior of an individual. Attitude of social distance toward people with mental illness was make mental illness person lose their belonging or love need. Belonging and love in was in the deficiency need. If in

the deficiency need their facing problem, it difficult to fulfill their other need. This means, self-esteem needs cannot be activated when belonging or love needs did not meet.

In this context of study, that is social distance toward people with mental illness, make people with mental illness will stuck in the belonging or love needs. It can be worse when mental illness person stuck in the belonging or love needs, as it can lead to lose their physiological needs and safety needs. It is because when society doing social distance toward people with mental illness, it is difficult for them to find job and full fill their physiological needs such as food and safety needs such as buying a house (Huey, Fthenos, Hryniewicz, 2013). The basic of physiological needs are the lowest needs for survival needs of an individual. In this case, social distance toward people with mental illness; these seems to be stuck in the belonging or love needs impact or effect their physiological needs and safety needs. So, people with mental illness will lose their meaning of life.

Besides that, belonging or love needs also include being acceptance. In this theory, it explain that being acceptance by the society is human nature. So, attitude of social distance toward people with mental illness showed that people with mental illness not accepted by society. Factor of social distance toward people with mental illness can come from many factor. This showed the social distance toward people with mental illness is a complex issues to tackle because it involve interdisciplinary teamwork so that it can improve the outcome. For the current study, it focus on attitude toward people with mental illness, conception on mental illness, knowledge on mental illness and prejudice that affect social distance toward people with mental illness. Furthermore, this theory also explain that mental illness person need a comprehensive



treatment to fully cure. It is because this theory explain the importance aspect of patient motivation of need to cure. According to Li (2020), with the application of the theory it can relief the symptom of mental illness (depression) in order to promote rehabilitation.

So, in order to give comprehensive treatment toward people with mental illness it must get belonging or love needs first. For example, let say that from biomedical side was good, but from social and physiological side such as support system network that have toward them and attitude toward them was not good, then, people with mental illness will not get comprehensive treatment. It because; it is the needs to people with mental illness to have supportive environment in the recovering process. If this situation happen, highest probability that the illness will come back to them. In simple word, it is not enough to focus only on illness itself because there have other needs that also need to be fulfill.

Besides that, this model also work as guide for psycho education to improve the quality of live people with mental illness (savarimalai et al 2021), because the treatment not only focus on biological only but also on psychological and social aspect of treatment. Furthermore, this theory offers strong theoretical may effect one recovery potential (Henwood, Derejko et al, 2015) because it focus on the needs of people with mental illness in the process of recover from mental illness. Maslow hierarchy of needs have direct and indirect impact to adolescent mental health (Crandall et al, 2020). So this theory is can be base in this study because factors affecting social distance toward people with mental illness can come from this three aspect, which are attitude toward people with mental illness, conception on mental illness, knowledge on mental illness and prejudice toward people with mental illness.



Lastly, researcher will continue with the third theory that was used in this study. The theory is Social Learning Theory (SLT). Below is the diagram for Social Learning Theory:

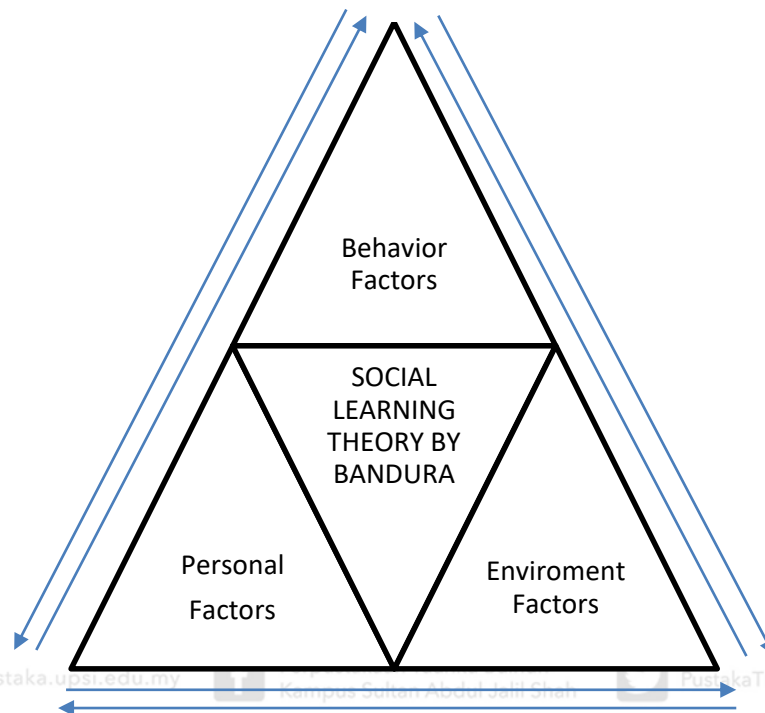


Diagram 1.3. Social Learning Theory (SLT)

Social Learning Theory (SLT) is a theory that purpose by Albert Bandura in the year 1977. It has three theme in this theory, there are; behavioral, personal and environment factors. In this theory it explains that human learning from each other from observations, imitation and modelling. Bandura explain further the meaning of observation by explored a “verbal” instruction model. For example, teacher patiently explain one topic in the ways of student will understand. Besides that, it also has live model and symbolic model. Live model is an individual doing observation of the behavior of persons that close to them. For example our parents, friends and family. It means, we observe how our close person act toward people with mental illness. From this observation, it will showed in the attitude toward people with mental illness. For



example, when we observed that our parent showed social distance towards people with mental illness, we also coping that attitude.

While for symbolic model, it is a real or fiction character that display the behavior online such as television. This means; it shows how society should react to people with mental illness; if showed social distance, so other people will showed social distance too. It prove that social media, giving an example of standard on how should the society react when facing with mental illness issues. According to Lee (2018) social media coverage on influencer people such as celebrity that have mental illness problem, was showed positive impact on seeking help behavior of people with mental illness. So, social media coverage can give impact on the attitude of social distance towards people with mental illness. This situation happen because social media give impact on perception toward people with mental illness.



For phase imitation and modelling is actual of reproduction from the observed motor activity. Besides that, it also change in mental process that demonstrate differences behaviors from observational learning. In this study context, social distance toward people with mental illness cannot be reduce event they have positive attitude, positive conception on mental illness, adequate knowledge on mental illness and positive view in social media because it depend on mental process regarding mental illness issues. The reason is the social learning only happen when attention, retention, production and motivation take place. It may has other consent that they look at; such as their safety, acceptance of society and readiness to accept people with mental illness. In this theory, it also explain that; one (1) people can learn from observation that called as observational learning, two (2) mental states are importance factor in learning and three (3) learning does not necessary lead to a change in behavior (Nabavi, 2012).



Besides that, this theory give better understanding in confluence of factor motivation of one's self-efficiency to doing social distance towards people with mental illness. For example, if they do information-seeking and get a lot of information or knowledge that not accurate information regarding mental illness, the feeling of fear toward people with mental illness will increase and lastly they will do social distance toward people with mental illness. So, this theory can give beneficial in understanding the behavior of people in doing social distance towards people with mental illness.

Furthermore, this theory also give known that, cognitive and environmental determinants yields a more adequate explanation on human behavior that only focus on environmental determinants (Bandura 1977). It give benefit to understanding attitude of social distance towards people with mental illness as it recognize the reinforcement contingencies on attitude of social distance toward people with mental illness. This situation can be happen because their fear on what extreme action that people with mental illness can do to them. In addition, an interaction of person's history of reinforcement and the context of which behavior happen force them to doing social distance toward people with mental illness. It is because of the false conception on mental illness and prejudice that they have toward people with mental illness.

As conclusion, these three theories that researcher used in this study is the foundation which work as base in this whole research. It because it explain the connection between variables choose and theories were been used.



1.8 Significance of the Research

This study is related to the factors affecting social distance toward the person with mental illness among university students; attitude toward people with mental illness, conception on mental illness and knowledge on mental illness. Understanding variables like attitude toward people with mental illness, conception on mental illness and knowledge on mental illness can help university in making certain strategies and policies to overcome problems that may arise in selected areas in the future. It means that, certain strategy and policy can be developed to overcome this problem as the level of attitude toward people with mental illness, conception on mental illness and the role played by knowledge on mental illness is understood in this particular field. Maybe, the lecturer needs to be given ample training and knowledge about mental illness, so they can educate their students about it in class. In addition, the university can come up with a policy in which before class started; a lecturer must talk about mental illness for 5 minutes. This strategy and policy can be said as the first step to design a complete and better rehabilitation program. Goodman (2017) stated that policy changes in university regarding mental illness is necessary to fully support students with psychiatric disability and mental illness concerns.

Not only that, this study also helped university to identify the most important and significant factors that contribute to social distance attitude towards people with mental illness among university students. This will help in focusing more on variables that largely contribute to social distant attitude towards people with mental illness. By having ample knowledge, students in Selangor will be less socially distance towards people with mental illness. By doing so, the university will not have to waste resources





and time in doing something that is not beneficial in improving attitudes of social distancing towards people with mental illness among their students. It means to say that; this research is significant because it can help university to develop the accurate strategies to curb this problem

Not only that, this research is also important to reduce the attitude of social distancing among university students and create sense of understanding the importance of managing mental health. So that, people with mental illness will not underestimate by society and especially with their peer. This research has revealed that it is important to take care of mental health to prepare them for the working environment after graduating from university. University students have the most risk of being affected by mental illness, so it is important to have a better understanding on the issue. Then, this research will assist in increasing the level of acceptance towards person with mental illness among university students and at the same time can reduce the stigmatization on people with mental illness.

Moreover, it would provide a reference for future study because the research on this particular issue is still very limited in Malaysia (Nik et al., 2015). Hopefully, with this research it will help researchers who are doing other research on this particular field to get relevant information. Besides that, the lack of quantitative and qualitative research makes it difficult for university to develop strategy and policy in order to solve the problem that occurs in the setting. Evidently, this research can serve as a guideline in constructing the best strategy and policy to overcome mental illness issue in campus.



1.9 Operational Definition of Terms

Social distance

Extent to how far people avoid from people with mental illness. In this study social distance is measure in two areas, those are: 1) social relationship 2) private relationship. Social relationship refers to communication, friendship, marriage and interaction towards people with mental illness. Private relationship refers to the willingness to establish closeness with people with mental illness like room sharing, working together and establishing a connection with them (Stuart. H, 2005). Score on response to the “social distance practice and mental illness” (standardize test).

Knowledge

Extent to which a person knowledgeable he/she regarding mental illness; score on “knowledge and attitude about mental illness (KAMI)”. In this study, measurement of knowledge refers to: 1) Illness identification and 2) factual knowledge. Illness Identification refers to the ability to identify the types, symptoms and causes of specific disease like schizophrenia. Factual knowledge refers to identifying the fact about people with mental illness in terms of attitude, feeling and treatment of mental illness (Wahl, et al, 2012).

Attitude

Extent to how a person react toward people with mental illness score on “knowledge and attitude about mental illness (KAMI)”. In this study, measurement of attitude refers to: 1) Benevolence 2) Stereotyping 3) Restrictiveness. Benevolence refers to the positive attitude towards people that suffer from mental illness like learning about the disease, helping them, do not make jokes about mental illness and showing

respect. Stereotyping refers to your own judgments toward other people that are different from you. Restrictiveness refers to the limit of acceptance towards people with mental illness (Wahl, et al 2012).

Prejudice

Extent to an unjustified negative attitude towards an individual based solely on that individual's membership in a group; score on "mental disorder prejudice scale (MDPS)". In this study, measurement of prejudice is conducted based on three aspects which are: 1) Rejection 2) Peculiarity 3) Human right alienation. Rejection refers to the distance that you create towards people with mental illness. Peculiarity refers to your own faith towards mental illness disease. Human rights alienation refers to your right on making decisions in separating people with mental illness from society (Tanaka, Inodomi et al, 2004).

Conception on mental illness

Extent to an understanding of a person regarding mental illness; score on "conception of mental illness score (CMI)". In this study, conception on mental illness refers to: 1) Western biological conception, 2) Traditional Islamic conception and 3) Spiritual conception. Western biological conception refers to the understanding on the causes of mental illness that must be accepted in intellectual logic and beliefs from the view of western countries. Traditional Islamic conception refers to Islamic beliefs in the causes of mental illness occurrences like drinking alcohol, sinful acts and views towards mental illness. Spiritual conception refers to a religious perspective on the causes of mental illness (Bagasra & Mackinem, 2014).

1.10 Conceptual Definition of Term

Social distance

Social distance is referring to the level of acceptance people have of other people outside of their own social group or class. Level of acceptance is defined by their general feeling towards others and the amount of social interaction they have with people whose characteristics are outside their social norm. Besides that, social distance is also referring to the norm that differentiates “us” and “them”. (Maria, n.d, & Karakayali 2009).

Mental illness

Mental illness refers to psychological dysfunction which causes distress or impaired functioning and deviates from typical or expected behavior according to societal or cultural standards. So, this definition has divided the mental illness into three components namely: 1) Dysfunction, 2) Distress/ impaired and 3) Deviates (Bridley & Daffin, 2018).

Attitude

It is a predisposition or a tendency to respond positively or negatively towards a certain idea, object, person, or situation that are influencing an individual's choice of action, and responses to challenges, incentives, and rewards (Lucinda & Boyd, 2015). Furthermore, attitude also can be defined as “psychological tendency that is expressed by evaluating a particular entity with some degree of favor or disfavor (Haddock & Maio, 2019).

Knowledge

This term refers to the general understanding and awareness garnered from accumulated information, tempered by experience, enabling new contexts to be envisaged (Bureel n.d). Knowledge also can be defined as characteristic of a person that influenced person's behavioral potential (Hunt, 2003)

Conception on mental illness

The word conception refers to an idea of what something or someone is like, or a basic understanding of a situation or a principle (Oxford English Dictionary). Besides that, conceptions also can be defined as an interaction of ideas that form more compressed knowledge structure (Scheiner, 2017). In short, it means the understanding and interpretation on the concept or issues regarding mental illness.

Prejudice

This refers to negative evaluation of a social group, or a negative evaluation of an individual that is significantly based on the individual's group membership (Crandall & Eshlemen, 2004). Currently, prejudice also can be defined as “bad feeling” that arises without the need for any associated with thoughts or believe (Marx, 2019).



1.11 Limitation of the Study

There is some limitation in carrying out the research. Here are the lists of the limitations of the current study:

1) The study only focuses on three independent variables

For this study, the researcher only looks at three independent variables which are; attitude toward people with mental illness, conception of mental illness and knowledge on mental illness. The factors affecting social distance towards the person with mental illness can come from various factors, for example, culture, nation, personality and many more, but the researcher only chose the above named three factors for this study. So, this is the limitation of the study as it only focused on these three variables.



2) This study only focused on social distance towards persons with mental illness among public university students in Selangor and this does not portrayed accurately in terms of general population as it only involved in a specific setting. So, the data may not be significant and relevant for other university students and location.

This study was only focusing on public university students in Selangor; it means the result only represented public university students in Selangor. The result may be different if the study is administered at other universities such as USM, UNIMAP, UiTM and many other IPTA within Malaysia. This is because there are other factors that need to be considered. Besides that, this study focus on public university students, the result may be different if study in private university.





3) Lack of research done on social distance towards persons with mental illness in the local setting.

Research regarding social distance towards people with mental illness among university students is still lacking in Malaysia. It shows by in Malaysia, specifically in Selangor research on factors affecting social distance toward people with mental illness is still lacking. As the knowledge of the researcher, it only have one research that done in Tampoi, Johor; regarding to this topic. Due to this, most of the reference are taken from overseas studies so the outcome is different as this study was done locally.

4) Conduct survey that covered all kind of mental disorder in term of mental illness.



In the current study, it covered all kind of the mental disorder of social distance toward people with mental illness. It include the general mental disorder such as anxiety, depression and stress. The perception might be different base on the kind of mental disorder. This make the different outcome when it study specifically on one disease only.

