

Integrated Behavioral Model of Mental Health Help Seeking Questionnaire (IBM-HS-Q)
Recommended 2026 Version

Note: For more help-seeking resources, including [theory](#), [constructs](#), and [measures](#), please visit HelpSeekingResearch.com.

Note: Visit <https://www.helpseekingresearch.com/measures/integrated-behavioral-model-of-mental-health-help-seeking-questionnaire-ibm-hs-q/> for information on how to administer, score, interpret, discuss the reliability and validity of, consider the limitations of, and obtain permission to use the IBM-HS-Q in its various formats, versions, and translations. Because the IBM-HS-Q is a synchronized battery of several measures, you can learn more detailed information about each measure by visiting the following webpages:

- [Mental Help Seeking Intention Scale \[MHSIS\]](#)
- [Mental Help Seeking Attitude Scale \[MHSAS\]](#)
- [Perceived Norm: Injunctive Scale \[PN:IS\]](#) and [Perceived Norm: Descriptive Scale \[PN:DS\]](#)
- [Personal Agency: Autonomy Scale \[PA:AS\]](#) and [Personal Agency: Capacity Scale \[PA:CS\]](#)

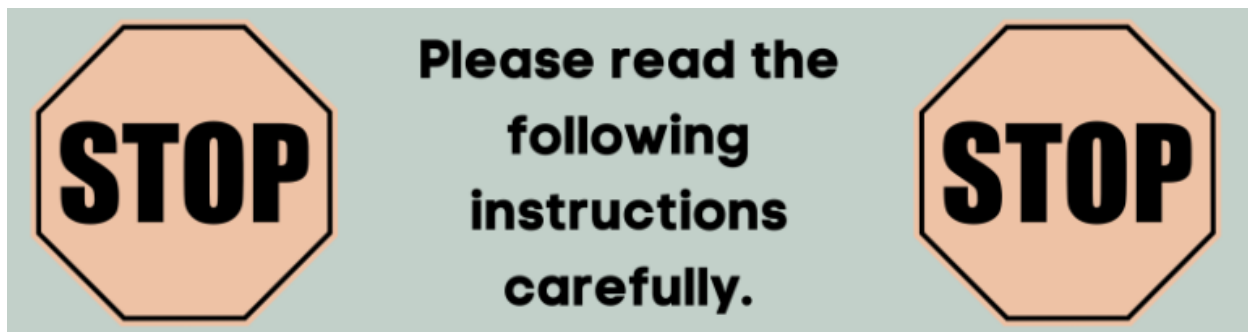
Please note that it is not advised to list the name of the scale for participants to view. That may bias their responses. It is better to list the abbreviation, if you must label the instrument for the respondents' eyes.

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Questionnaire Instructions

For the purposes of this questionnaire, “mental health professionals” include psychologists, psychiatrists, clinical social workers, and mental health therapists and counselors.

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As you answer the questions in this questionnaire, we would like you to imagine something.

Imagine that you have been experiencing a serious mental health concern for the last month. You feel significantly more nervous, restless, hopeless, and isolated, and are having trouble sleeping and concentrating on your work.

We're going to ask you some questions about how you—given your personal views and experiences to date—might feel about seeking help from a mental health professional **if you were dealing with this hypothetical mental health concern** right now.

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Imagine you have been experiencing a serious mental health concern for the last month with these symptoms:
Feeling more nervous, restless, hopeless, and isolated
Having trouble sleeping and concentrating on your work

MHSIS1

I would intend to seek help from a mental health professional in the next 3 months.

1 (Extremely unlikely)	2	3	4	5	6 (Extremely likely)
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MHSIS2

I would try to seek help from a mental health professional in the next 3 months.

1 (Definitely false)	2	3	4	5	6 (Definitely true)
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MHSIS3

I would plan to seek help from a mental health professional in the next 3 months.

1 (Very unhealthy)	2	3	4	5	6 (Very healthy)
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MHSAS1

My seeking help from a mental health professional in the next 3 months would be...

1 (Very useless)	2	3	4	5	6 (Very useful)
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MHSAS2

My seeking help from a mental health professional in the next 3 months would be...

1 (Very unimportant)	2	3	4	5	6 (Very important)
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MHSAS3

My seeking help from a mental health professional in the next 3 months would be...

1 (Very unhealthy)	2	3	4	5	6 (Very healthy)
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MHSAS4

My seeking help from a mental health professional in the next 3 months would be...

1 (Very ineffective)	2	3	4	5	6 (Very effective)
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MHSAS5

My seeking help from a mental health professional in the next 3 months would be...

1 (Very bad)	2	3	4	5	6 (Very good)
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MHSAS6

My seeking help from a mental health professional in the next 3 months would be...

1 (Very hurting)	2	3	4	5	6 (Very healing)
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MHSAS7

My seeking help from a mental health professional in the next 3 months would be...

1 (Very disempowering)	2	3	4	5	6 (Very empowering)
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MHSAS8

My seeking help from a mental health professional in the next 3 months would be...

1 (Very unsatisfying)	2	3	4	5	6 (Very satisfying)
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MHSAS9

My seeking help from a mental health professional in the next 3 months would be...

1 (Very undesirable)	2	3	4	5	6 (Very desirable)
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PN:IS1

Most people who are important to me would think that ____ seek help from a mental health professional in the next 3 months.

1 (I should not)	2	3	4	5	6 (I should)
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PN:IS2

Most people would expect me to seek help from a mental health professional in the next 3 months.

1 (Completely false)	2	3	4	5	6 (Completely true)
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PN:IS3

Most people who are important to me would want me to seek help from a mental health professional in the next 3 months.

1 (Strongly disagree)	2	3	4	5	6 (Strongly agree)
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PN:DS1

If they were experiencing a mental health concern, most people who are important to me would seek help from a mental health professional in the next 3 months.

1 (Completely false)	2	3	4	5	6 (Completely true)
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PN:DS2

If they were experiencing a mental health concern, the people in my life whose opinions I value would _____ from a mental health professional in the next 3 months.

1 (Not seek help)	2	3	4	5	6 (Seek help)
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PN:DS3

If they were experiencing a mental health concern, most people I know would seek help from a mental health professional in the next 3 months.

1 (Completely false)	2	3	4	5	6 (Completely true)
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PA:AS1

My seeking help from a mental health professional in the next 3 months would be up to me.

1 (Completely false)	2	3	4	5	6 (Completely true)
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PA:AS2

My seeking help from a mental health professional in the next 3 months would ____.

1 (Not be under my control)	2	3	4	5	6 (Be under my control)
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PA:AS3

My seeking help from a mental health professional in the next 3 months would.

1 (Not be up to me)	2	3	4	5	6 (Be up to me)
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PA:CS1

I am confident that I could seek help from a mental health professional in the next 3 months.

1 (Completely false)	2	3	4	5	6 (Completely true)
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PA:CS2

I would have the ability to seek help from a mental health professional in the next 3 months.

1 (Completely false)	2	3	4	5	6 (Completely true)
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PA:CS3

I would be capable of seeking help from a mental health professional in the next 3 months.

1 (Completely false)	2	3	4	5	6 (Completely true)
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Scoring Key and Suggestions for Valid Administration of the IBM-HS-Q Measures

- No reverse scoring is necessary.
- The **MHSIS**, **PN:IS**, **PN:DS**, **PA:AS**, and **PA:CS** each contain three items which produce a single mean score to measure a single dimension/factor for each construct.
- The **MHSAS** contains nine items which produce a single mean score to measure a single **attitude** dimension/factor.
- To calculate the mean score for a given measure, add the scores for all items for that measure then divide by three.
- The resulting mean score for each measure should range from a minimum of 1 to a maximum of 6.
- Regarding calculating mean scores in the presence of missing data:
 - Regarding the **MHSIS**, **PN:IS**, **PN:DS**, **PA:AS**, and **PA:CS**:
 - Do not calculate a mean for a participant who is missing any data on the 3 items.
 - Regarding the **MHSAS**:

- If a participant has provided data on *at least* 7 of the 9 MHSAS items, it is permissible to calculate a mean score using the scores on those 7 items. Thus, if a participant answered 8 of the 9 items, the total score is produced by adding together the scores of the 8 answered items and dividing by 8.
 - If a participant has provided data on *fewer than* 7 of the 9 MHSAS items, it is not permissible to calculate a mean score for this participant.
- When administering the items for multiple IBM-HS-Q measures using an online survey platform that permits randomization of the order of items/measures, it is best to intersperse the items for each measure among themselves in a nonsystematic order (see [Ajzen, 2006](#)). You can see this in action [in this preview of the IBM-HS-Q on Qualtrics](#). Therefore, when administering all six measures (24 total items), you can intersperse the 24 items randomly amongst themselves so that each participants see the 24 items in a random order. If you do not have the capability of randomizing items in this manner, just present the items for each measure in the traditional manner.
- If you are administering this measure alongside other *reasoned action tradition-based* measures, to ensure that all participants are interpreting the terminology in this measure and other TRA/TPB/IMBP/IBM/IBM-HS-Q measure items consistently, we recommend including the Questionnaire Instructions (see above) in the survey prior to participants completing any **IBM-HS-Q measure** items and other TRA/TPB/IMBP/IBM/IBM-HS-Q measure items, whether immediately prior, or toward the start, of the entire survey. When measuring these help-seeking constructs conditionally, such as by using a hypothetical mental health concern vignette scenario, it is important for responses to all TRA/TPB/IMBP/IBM/IBM-HS-Q measure items to reflect people's conditional perceptions. This consistency is important to ensure compliance the reasoned action tradition's TACT principle. Read Step 2 of the IBM-HS mixed-method protocol webpage (<https://www.helpseekingresearch.com/theory/ibm-hs/applications/mixed-method-protocol/>) for guidance on aligning the **IBM-HS-Q** and other *reasoned action tradition-based* measures with the TACT principle.