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Students' Perception of Unprofessional Conduct of Therapists in the University Community and Its Impact on their Help-Seeking Behaviour in Delta State

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Abstract

This study investigated students' perceptions of unprofessional conduct among therapists within university communities and its impact on their help-seeking behaviour in Delta State. Although therapists may act within their professional competence, students may still perceive their actions as unprofessional for several reasons. The research addressed two questions and tested two null hypotheses. Employing a correlational, ex-post-facto research design, the study population included all public university students and therapists in Delta State. The sample consisted of 50 therapists or counsellors and 950 students, selected using a stratified sampling technique. Data were collected using a self-developed instrument, the Perceived Unprofessional Conducts of Therapists and Impact on Help Seeking Behaviour of Students Questionnaire (PUCTIHSBSQ), which was validated and demonstrated reliability through a pilot study using the test-retest method, yielding a coefficient index of 0.85 or higher. Descriptive statistics, including simple percentages, mean scores, and standard deviation, addressed the research questions, while Pearson Product-Moment Statistics tested the hypotheses at a 0.05 significance level. The findings revealed students have certain expectations of therapists and have formed perceptions of unprofessional conduct by therapists, such as demeanor, attitude, reporting progress report to management, breaches of confidentiality, inappropriate boundaries, and observed or experienced unprofessional behaviour, significantly impacts students' willingness to seek help. These perceptions contribute to stigma, reduced trust, and discourage help-seeking. In conclusion, students' perceptions of unprofessional conduct among therapists can substantially deter students from seeking assistance, thereby compromising their mental health and well-being. Prioritising professionalism, confidentiality, and trust is essential for therapists to create a supportive environment that encourages help-seeking. The professionalism of therapists is therefore critical in shaping students' help-seeking behaviour, and universities should prioritise this to promote student mental well-being.

Keywords: Unprofessional, Conducts, Therapists, Help-Seeking, Behaviour Nigeria

Introduction

Professionalism is crucial across various sectors, particularly in educational contexts where professional identity and role modeling are essential. Yet, university students frequently encounter challenges like anxiety, depression, and stress, often intensified by academic demands, social changes, and environmental influences. Despite these difficulties, only a small percentage seek out professional assistance, revealing a significant gap in service utilization (Hood & Copeland, 2024). In university environments, therapists and counselors are vital for offering accessible mental health support, typically through on campus facilities aimed at encouraging help-seeking behavior and promoting overall well-being. These professionals are required to uphold ethical standards that stress competence, confidentiality,

and non-malfeasance, which are crucial for establishing trust and motivating student participation (Henderson & Dufrene, 2017).

However, many students hesitate to utilize counseling services, influenced by others' experiences and concerns about their privacy being compromised. Unprofessional behavior by therapists in university contexts includes actions that breach ethical guidelines, such as emotional instability, boundary issues, lack of clinical skill, discriminatory practices, stigmatization, dishonesty, and neglect of responsibilities, such as tardiness or poor record-keeping. Research in health professions education identifies these behaviors as prevalent, especially within the hierarchical structures of universities, including clinical misconduct, harassment, disrespect, and abuse of power. Unprofessionalism might appear as therapists ignoring clients' feelings, offering poor advice, or prioritizing their own financial or professional benefits over client care, which undermines the therapeutic relationship that is crucial for successful interventions (Brown-Rice & Furr, 2015).

Students' views on unprofessional behavior are shaped by both personal and vicarious experiences, observational learning, and their cultural environment, which often creates a gap between what professionalism should be and what is actually observed. In larger university communities, perceptions are further impacted by cultural stigma (Harrichand et al., 2022). The effects of perceived unprofessional conduct heavily influence students' willingness to seek help, acting as a significant obstacle that leads to underutilization of counseling and therapeutic services. Negative interactions with therapists, characterized by unapproachable attitudes or ineffective sessions, can result in increased distress, skepticism, and avoidance of future help (Akinyemi, 2020).

Giorgi, Giorgi, and Morley (2017) have noted that past negative experiences discourage individuals from seeking help again, perpetuating cycles of unmet needs. In university settings, this often translates into academic stress, including anxiety, loneliness, and decreased functioning, with affected students tending to rely on personal coping methods or informal support instead of professional help due to fears of negative repercussions or further harm.

Statement to the Problem

Unprofessional conduct by therapists in university communities—particularly within university counselling centres refers to behaviors that deviate from established professional ethical standards such as those outlined in ethical codes or equivalent professional guidelines,

which include boundary violations, breaches of confidentiality, unprofessional demeanor, practicing beyond one's competence, misrepresentation of credentials, or failure to maintain proper supervision and continuing education. In university settings, where therapists often work with young adults navigating high-stress environments may portray unprofessional conducts as a result of burnout, pressure, lack of training, emotional imbalance etc. These unprofessional conducts which may not appear to the therapists' impact help-seeking behavior of students which may cause further damages to an already bad situation. Thus, students are quick to engage in self-help and disengage from help-seeking behaviour to help navigate through academic success and life engagements. This gap between help-seeking behaviour of students and perceived unprofessional conducts of therapists needs to be addressed.

Research Questions

1. What are students' perception of unprofessional conducts of therapists in the university community and its impact on their help seeking behaviour in Delta State?
2. What are the approaches to curb perceived unprofessional conducts of therapists in the university community and improve help seeking behaviour of students in Delta State?

Hypotheses

1. There is no significant relationship on students' perception of unprofessional conducts of therapists in the university community and its impact on their help seeking behaviour in Delta State
2. There is no significant relationship on the approaches to curb perceived unprofessional conducts of therapists in the university community and improve help seeking behaviour of students in Delta State

Literature Review

Students' views on unprofessional behavior by university therapists significantly hinder their willingness to seek help, creating a critical barrier to accessing necessary mental health support. This reluctance primarily stems from a loss of trust, fears regarding confidentiality, and worries about the quality of care they might receive. Many students perceive therapists as sarcastic, condescending, or dismissive of their concerns, leading to

feelings of distrust, particularly regarding the potential for therapists to relay information to university authorities. This fear stems from concerns that what is shared during sessions might not remain confidential, allowing it to be disclosed to others in the university context (Dolph, 2024).

Situations where therapists focus on their own personal issues during sessions, display frustration towards clients, fail to respond to communications, provide partial information, or use inappropriate language can lead students to doubt therapists' training, experience, or professional dedication, especially if they appear rigid or unapproachable. Additionally, perceived biases based on students' gender, culture, ethnicity, or other personal traits can foster feelings of judgment or unsafety (Jain, 2022).

The existence of these perceived unprofessional behaviors poses a formidable obstacle to students seeking professional assistance, even when such services are available on campus. Negative encounters or circulating anecdotes about therapists' unprofessionalism can erode trust in the entire healthcare or counseling system. As a result, students may refrain from sharing personal details and might completely avoid counseling services, fearing negative assessments, insufficient support, or further emotional harm. Consequently, they may turn to friends, family, or untrained university personnel (like lecturers) for guidance, who are often unequipped to deal with complex mental health challenges (Smith, 2023).

However, neglecting to seek help can hinder early intervention efforts, potentially exacerbating students' mental health issues and negatively influencing their academic performance, well-being, and overall university experience. It is crucial for universities to promote positive attitudes toward help-seeking by ensuring that counseling services are viewed as effective, confidential, and compassionate, thereby fostering an atmosphere of trust and professionalism (Hunt & Eisenberg, 2010). Boundary violations are a serious issue, including inappropriate therapist-student relationships, gift exchanges, and seeking emotional support from students. Students often fear that private information shared during sessions may be disclosed to family, faculty, or peers, resulting in feelings of shame or academic and social repercussions (Dolph, 2024).

Curbing perceived unprofessional conduct and encourage student help-seeking, a comprehensive approach is necessary. This should encompass tackling systemic issues, enhancing professional accountability, and reducing stigma surrounding health and mental health support in university settings. It is essential to clearly delineate professional and unprofessional behavior in line with ethical guidelines, providing explicit policies on

confidentiality exceptions, boundaries, and conflicts of interest. Establishing confidential and accessible reporting systems for students and staff can encourage individuals to voice concerns confidently (Smith, 2023).

Ongoing, high-quality clinical supervision and peer consultation should be mandatory for all university therapists to help them navigate challenging cases and ethical dilemmas. Regular training sessions incorporating case studies and role-play should be conducted to help staff identify and tackle ethical complications and unprofessional behavior, with a focus on cultural competence and sensitivity to diverse student populations. Additionally, fostering a culture where leaders and senior staff exemplify professional conduct is vital, with accountability measures in place, ensuring that disciplinary actions are perceived as protective rather than punitive. Attention should also be given to the broader workplace culture, emphasizing manageable workloads, clear expectations, and open communication to combat burnout and disempowerment that can lead to unprofessionalism (Behnke, 2013).

Implement campus-wide initiatives utilizing various communication channels (emails, social media, and student organizations) to normalize the act of asking for help, depicting it as a strength or a smart choice. Integrating discussions and resources related to mental health into academic life—such as through course syllabi and orientation programs is important. Faculty and staff should be trained in identifying signs of distress and making appropriate referrals. Expanding counseling services can also help reduce wait times and provide diverse options, including virtual platforms, to better connect students with culturally competent professionals who understand their experiences (Jain, 2022).

To ease the help-seeking process, it is crucial to offer clear and concise information on how and when to access these services, including highlighting affordable or free options to alleviate financial concerns. Empowering student leaders, resident assistants, and club officers with training to support their peers can also be beneficial. Sharing testimonials from relatable students or public figures who have sought help might prove effective in reducing stigma. Lastly, counseling and health centers should create a welcoming atmosphere, offering a range of support beyond traditional one-on-one therapy, such as workshops on time management, stress reduction, and problem-solving, which may serve as initial engagement points for students hesitant about formal counseling (Roberts, 2019).

Methodology

This study is a correlational study adopting the *ex-post-facto* research design. The population for this study comprised all public university students and therapists in Delta State. The sample for this study was 50 therapists/counsellors and 950 students in Delta State universities. A stratified sampling technique was used in the study. A self developed questionnaire titled “Perceived Unprofessional Conducts of Therapists and Impact on Help Seeking Behaviour of Students Questionnaire (PUCTIHSBSQ”, validated and its reliability equally determined via a pilot study using test re-test reliability technique with a coefficient index of 0.85 and above was used. Simple percentages, mean scores and standard deviation provide answers to the research questions while Pearson Product Moment Statistics was used to test the hypotheses at 0.05 level of significance.

Table 1: Response to students’ perception of unprofessional conducts of therapists in the university community and its impact on their help-seeking behaviour in Delta State

S/N	Items	SA	A	D	SD	Remark
1	Therapist in my university maintain professional boundaries with students	333 (33.3%)	256 (25.6%)	196 (19.6%)	215 (21.5%)	Agreed
2	Comfortable seeking help from therapist	402 (40.2%)	320 (32%)	177 (17.1%)	101 (10.1%)	Agreed
3	Perceived unprofessional conduct by therapist discourage students from seeking help	259 (25.9%)	330 (33%)	196 (19.6%)	215 (21.5%)	Agreed
4	Therapists in the university community are approachable and respectful	281 (18.1%)	28 (2.8%)	321 (32.1%)	370 (37%)	Disagreed
5	Therapists’ unprofessional behaviour damage the reputation of counseling services	300 (30%)	390 (39%)	50 (5%)	260 (26%)	Agreed

Table 1 shows responses to students’ perception of unprofessional conducts of therapists in the university community and its impact on their help-seeking behaviour in Delta State. From the remark, the respondents agreed on items 1, 2, 3, 5 and disagreed with item 4.

Table 2: Response to the approaches to curb perceived unprofessional conducts of therapists in the university community and improve help-seeking behaviour of students in Delta State

S/N	Items	SA	A	D	SD	Remark
1	Regular training on professional boundaries should be mandatory for therapists	600 (60%)	129 (12.9%)	187 (18.7%)	84 (8.4%)	Agreed
2	Clear confidentiality policies	250 (25%)	300 (30%)	225 (22.5%)	225 (22.5%)	Agreed
3	Therapist should receive feedback from students to improve their service	121 (12.1%)	201 (20.1%)	428 (42.8%)	250 (25%)	Disagreed
4	Regular evaluation of therapists performance	163 (16.3%)	500 (50%)	307 (30.7%)	30 (3%)	Agreed
5	Anonymous reporting mechanism for unprofessional conduct	260 (26%)	167 (16.7%)	413 (41.3%)	160 (16%)	Agreed

Table 2 shows responses to the approaches to curb unprofessional conducts of therapists in the university community and improve help-seeking behaviour of students in Delta State. From the remark, the respondents agreed on items 1, 2, 4, 5 and disagreed with item 3.

Table 3: Pearson “r” on students’ perception of unprofessional conducts of therapists in the university community and its impact on their help-seeking behaviour in Delta State

Variables	N	X	DF	r-Cal.	r-Crit.	Level of Sign
Unprofessional conducts of therapists	1000	3.72	2	0.03	0.01	0.05
Impact on help-seeking behaviour of students		3.80				

Data in table 3 revealed Pearson product moment correlation coefficient analysis on students’ perception of unprofessional conducts of therapists in the university community and its impact on their help-seeking behaviour in Delta State. The mean was 3.72 and 3.80 respectively. The calculated r - value was 0.03 while the critical r-value was 0.01 with DF of 2 at 0.05 level of significance. Since the calculated r - value was greater than the critical r-table value, the null hypothesis is rejected.

Table 4: Pearson “r” on Response to the approaches to curb unprofessional conducts of therapists in the university community and improve help-seeking behaviour of students in Delta State

Variables	N	X	DF	r-Cal.	r-Crit.	Level of Sign	Decision
Approaches to curb unprofessional conducts of therapists	1000	2.92	2	0.02	0.04	0.05	Significant
Improve help seeking behaviour of students		3.56					

Data in Table 4 revealed Pearson product moment correlation coefficient analysis on the to the approaches to curb unprofessional conducts of therapists in the university community and improve help seeking behaviour of students in Delta State. The mean was 2.92 and 3.55 respectively. The calculated r - value was 0.02 while the critical r-value was 0.04 with DF of 2 at 0.05 level of significance. Since the calculated r - value was lesser than the critical r-table value, the null hypothesis is retained.

Discussion of Findings

The study spotlighted students’ perception of unprofessional conducts of therapists in the university community and its impact on their help-seeking behaviour in Delta State. The findings indicated that unprofessional conducts of therapists in the university community has significant impact on help-seeking behaviour of students such as breach of confidentiality, inappropriate boundaries, unprofessional behavior witnessed / experienced which result to stigma, decreased trust discouraged students from seeking help. This is in line with, Brown-Rice & Furr, (2015) unprofessional conduct among therapists in university settings encompasses a range of behaviors that deviate from these ethical norms, including emotional dysregulation, boundary violations, incompetence in clinical skills, discriminatory actions, dishonesty, and neglect of responsibilities such as excessive tardiness or inadequate record-keeping. More so, clinical misconduct, harassment, disrespect, and power abuse as common lapses, often in hierarchical environments. Unprofessionalism behaviour in therapy can show up as therapists ignoring clients’ emotions, giving wrong advice, prioritizing money over care or breaking confidentially which may damage the trust needed the profession.

The study established approaches to curb unprofessional conducts of therapists in the university community and improve help seeking behaviour of students in Delta State. The findings revealed that implementing strategies like regular training on professional boundaries, clear confidentiality policies and feedback mechanism can curb unprofessional conduct of therapists and boost students' trust. When therapists prioritize building trust, respect boundaries and engage in cultural sensitivity workshops, students feel more comfortable seeking help. This is in support of, Behnke, (2013); Smith, (2023) clearly define what constitutes professional and unprofessional behaviour in alignment with professional ethical guidelines. These policies should explicitly address boundaries, confidentiality exceptions, and conflicts of interest. Create straightforward, confidential, and easily accessible reporting systems for students and staff. This encourages individuals to come forward by improving their confidence and offering a neutral resource to triage concerns. Regularly conduct training sessions, including case studies and role-playing, to help staff identify and manage ethical challenges and unprofessional behavior. Training should emphasize cultural competence and sensitivity to diverse student populations. Foster a culture where leaders and senior staff model positive, professional behavior and are held accountable for their actions. Disciplinary actions, when necessary, should be consistently applied and seen as a measure to protect the community, not just punish individuals. Focus on the underlying workplace culture, not just individual. This includes ensuring reasonable workloads, clear roles, and open communication channels to prevent burnout and disempowerment, which can contribute to unprofessional behavior.

Conclusion

In conclusion, students' perception of unprofessional conduct among therapists in the university can significantly deter students from seeking help, compromising their mental health and well-being. However, by prioritizing professionalism, confidentiality and trust, therapists can foster a supportive environment that encourages students to seek help when it is needed. Therapist's professionalism plays a crucial role in shaping students' help-seeking behaviour and universities must prioritize this to support well-being. There is the need for university communities to address help-seeking behaviour of students by erasing negative perceptions associated with it and negative attitudes of therapists.

Recommendations

The study recommends that educational stakeholder should provide regular training on professional boundaries and cultural sensitivity for therapists. Establish clear confidentiality policies and communicate them to students. Implement feedback mechanism for students to report concerns or suggestions. Foster a culture of trust and respect between therapists and students. Prioritize student-centred care and support services.

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