## Appendix 1. Description of Life History Interview on Help-Seeking

A life-history interview assessment was developed as a supplement to the College Life Study, with the purpose of understanding individual experiences of psychological distress and consequent help-seeking behaviors. The interview consisted of three sections capturing "episodes," "steps," and "barriers." In section one, we asked participants how many times in their lives they or someone else thought they needed any help or treatment for problems with their emotions, nerves, or mental health. Participants were urged to consider "help" broadly to include both informal and formal resources. Herein we refer to each instance of perceived need for help as an "episode." For each episode, a series of follow-up questions detailed the circumstances surrounding the onset of the episode, the person(s) who thought the participant needed help, the type of help suggested, and the participant's age (see Figure 1, Box A).

Section two assessed the steps participants took to obtain help for each episode, starting with the first episode and continuing sequentially for all episodes mentioned in section one. For each step (see Figure 1, Box B), we asked participants whether or not formal treatment was received and details about formal treatment (e.g., type, duration, frequency of service). After documenting each step for episode one, the interviewer asked questions about steps for episode two, and so forth.

Section three assessed potential barriers to obtaining treatment, beginning with "Was there ever a time when you thought you needed help or treatment, or you thought you needed more help or treatment for problems with your emotions, nerves, or mental health, but you did not get it?" An affirmative answer prompted presentation of a response card listing examples of barriers (e.g., lack of health insurance, difficulty locating appropriate resources or affording care, and negative perceptions), adapted from the National Comorbidity Survey (1-4). Multiple responses were permitted. Section three was administered regardless of responses in the first two sections, and therefore is not depicted in Figure 1.

## References

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