

Barriers In Seeking Mental Health Services Among Males: A Qualitative Study

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ABSTRACT

Masculinity has silently impacted men, leading to poorer mental health, underutilization of mental health services, and higher rates of suicide, violence, and substance abuse. This study aimed to explore the barriers males face in seeking mental health services. Qualitative research with thirty male participants was conducted through face-to-face interviews. The interviewees of this study were college students enrolled in an educational institution. Convenient sampling was used to select the interviewees. Content Analysis is the qualitative design that was used for the exploration of different barriers faced by males in seeking mental health services. The content of the interview was analyzed systematically. After analyzing the contents, items were generated which were repetitively coming up. Repetitive items were clubbed and codes were generated. Barriers were identified and categorized. The results revealed that there are significant barriers faced by males in seeking mental health services.

Keywords - mental health, male, barriers, help-seeking, stigma, stereotypes, qualitative

1. INTRODUCTION

Masculinity has silently impacted men, leading to poorer mental health, underutilization of mental health services, and higher rates of suicide, violence, and substance abuse. This study aimed to explore the barriers males face in seeking mental health services. Qualitative research with thirty male participants was conducted through face-to-face interviews. Content Analysis is the qualitative design used for the exploration of different barriers faced by males in seeking mental health services. The content of the interview was analyzed systematically. Barriers were identified and categorized. The results revealed that there are significant barriers faced by males in seeking mental health services.

The sub-part of health which is an important aspect of this study is "mental health." The term "mental health" encompasses physical, psychological, social, and spiritual well-being. It also considers one's ability to be a valuable and contributing member of society, as well as their resourcefulness and coping skills. According to the World Health Organization (WHO), mental health is "a state of well-being in which the individual realizes his or her abilities, can cope with the normal stresses of life, can work productively and fruitfully, and can make a contribution to his or her community" (WHO, 2004). According to Haddadi and Besharat (2010), "mental health plays an important role in the dynamism and efficiency of the community." People's mental health is an important component of their overall health and well-being.

Mental health talks have generally concentrated on women. The mental health of males is frequently ignored by society and not much attention is paid to the mental health of males. As a result, the mental health of males can be affected seriously. One of the leading causes of death for males worldwide is suicide. Men are seven times more

likely to complete suicide than their counterparts. The larger percentage of successful suicides by males in comparison to women is demonstrated by the fact that men are more inclined to use violent methods. (More Than a Mental Health Problem, 2018). Depression is another psychological disorder that men face as well as is one of the leading causes of suicide. Studies reveal that men who have Major Depressive Disorder have more chances of alcohol and drug abuse than women. Men are also more prone to abuse drugs at a rate of two to times higher than women. Societal expectations, gender stereotypes, and traditional masculine ideologies frequently prevent men from seeking help or discussing their problems (Emslie et al., 2006; Addis & Hoffman, 2017). Being a male comes with lots of responsibilities and expectations from society. The word "masculinity" become so closely linked with and promoted among men that masculinity has begun to silently affect them. Firstly, demanding characteristics that come with masculinity have resulted in males upholding their "tough" outer image. Secondly, restrict their emotional expression and help-seeking behavior to maintain the cultural label of a "real man". Masculinity refers to some typical attributes and qualities that are acceptable for males.

As previously said, being a man comes with a lot of responsibilities and societal expectations. The personal and cultural pressure to meet these standards causes men to adhere so strictly to the notion of 'manliness' that asking for help can be interpreted as a sign of weakness. Since the ancient time, males are seen as the major breadwinner of the house, though, and expected to be more emotionally regulated than females. These demand characteristics make it harder for the males to seek help for their mental health issues and open up emotionally in front of society.

India is a South Asian country with a diversified population of approximately 1.3 billion people. Mental health issues are a major public health concern in India, with an estimated 14% of the Indian population suffering from them. In 2017, one in every seven Indians suffered from a mental condition of different severity (Sagar et al., 2020). However, there are major gaps in providing and accessibility of mental health care. Stigma against persons suffering from mental illness persists in Indian culture (Venkatesh et al., 2015). These gaps can restrict people and specifically males from seeking mental health services for their psychological issues. In counseling and psychology, help-seeking is categorically described as a coping strategy; the desire to seek assistance is triggered when task demands exceed people's coping abilities or resources (Chan, 2013).

2. REVIEW OF LITERATURE

Lynch et al., (2018) researched young men titled "Young Men, Help-Seeking, and Mental Health Services: Exploring Barriers and Solutions". The study aimed to find the barriers faced by young men in seeking mental health services and their solutions. A qualitative approach was used. A total of 17 men aged 18 to 24 years were selected. Data were analyzed using thematic analysis. Results showed that stigma, personal challenges, cultural and environmental influences, fear of homophobic responses, and religious membership were discovered to influence help-seeking.

Mackenzie et al., (2019) conducted research on "Age and Sex Differences in self-stigma and public stigma concerning depression and suicide in men". The aimed to find out the sex and age differences in self-stigma and public stigma concerning depression and suicide in men. A total of 901 Canadian people aged 18 to 83 were chosen. A survey was used to obtain the information. The findings revealed that males were more inclined to support most parts of the public stigma associated with men's depression and suicide. The study revealed that young males endorsed the highest levels of public stigma. This study suggested increasing the anti-stigma efforts to increase the utilization of mental health services by men.

Clement et al., (2015) conducted a systematic review titled "What is the impact of mental health-related stigma on help-seeking? A systematic review of quantitative and qualitative studies. The study aimed to find the impact of mental health-related stigma on help-seeking for mental health problems. The electronic database method was employed for a study and five electronic databases were searched from the period of 1980 to 2011. Parallel narrative syntheses and subgroup analyses were conducted for analyzing the data. Results indicated 144 studies with 90,189 participants meeting the aim of the study and it was found that stigma is often connected with reduced help-seeking and was ranked the fourth highest barrier to seeking mental health services. They concluded their study by stating the findings which can be used to design effective interventions for increasing help-seeking behavior.

Furnham & Shaikh, (2000) conducted A Cross-cultural study of mental health beliefs and attitudes towards seeking professional help. The study aimed to examine the relationship between cultural beliefs about the causes of mental distress and attitudes associated with seeking professional help for psychological problems. The sample consisted of 287 participants belonging to three groups and they were asked to complete two questionnaires: the orientation to seeking professional help and the mental health explanatory model questionnaire. Results showed that men had fewer positive attitudes toward seeking professional psychological help as compared to women.

Gaiha et al., (2020) investigated the magnitude and manifestations of public stigma and synthesized evidence of recommendations to reduce mental-health-related stigma among young people in India. The study aimed to find out the public stigma associated with mental health problems specifically help-seeking among young people in India. A systematic review and meta-analysis of observational studies was conducted. A total of six thousand seven hundred and sixty-seven (n=6767) participants were selected who met the criteria. The findings revealed that in India common stigma is associated with mental health concerns which specifically affects help-seeking behavior among young people when compared to adults. Young men are reluctant to seek support or help due to some different factors and are unable to recognize mental health problems and lack awareness regarding psychological treatments and whether they will aid in recovery or not. Finally concluded by stating that among late adolescent males included in the study, 1/3rd had little awareness and negative attitudes, 1/5th had intended to or showed stigmatizing behavior against a person with mental health distress, and a large number of young people potentially recognized psychological problems only if they were acute.

Mahalik & Dagirmanjian, (2019) conducted a study on "Working-Class Men's Constructions of Help-Seeking When Feeling Depressed or Sad". The study aimed to identify the patterns of help-seeking in response to feeling depressed or sad. A total of 12 working-class men were selected to be a part of the study. A semi-structured interview was employed as a method of study to explore the study. The results showed that the weight of stigma has a detrimental impact on help-seeking since it contradicts the broad principles of masculinity in terms of gender role congruence and affects their standing as men.

3. METHOD

This study employed a qualitative research design to explore the barriers faced by males in seeking mental health services. Content Analysis is the qualitative design that was used for the exploration of different barriers faced by males in seeking mental health services. The content of the interview was analyzed systematically. In the content analysis, we closely look at the interview transcripts to identify and club common items which come up frequently. After that codes are generated relevant to each group of items. The interviewees of this study were college students enrolled in an educational institution. Convenient sampling was used to select the interviewees. A total of 30 male interviewees were included in the study. Inclusion criteria included being 19 years or above. To identify the barriers faced by males in seeking mental health services the semi-structured interview was employed and the content of the interview was analyzed. The data collection process for this study spanned over one week and involved recruiting interviewees through offline platforms. Before their participation, interviewees were presented with an informed consent form, which outlined the purpose of the study, the procedures involved, and their rights as interviewees. It clearly stated their responses would be kept confidential and their identity will remain anonymous. To gather the necessary data, interviewees were approached to complete an interview. The questions included basic details about the age, gender, educational qualification, and questions related to the study.

Overall, this data collection process was designed to gather comprehensive and reliable information regarding the interviewee's basic details and the research study topic. Before the interview, the interviewees were briefed about their voluntary participation, their right to withdraw from the interview at any time, and the potential benefits of taking part in a study. Data was collected in a manner that respected ethical considerations and provided interviewees with a secure and confidential environment to share their responses.

3. Results

ITEMS	CODES
Standards set by society for the male gender, societal expectations from male gender i.e., should be strong, less emotionally expressive, self-independent, should not ask for help as it is a sign of weakness which threatens male identity and men don't cry.	Gender Stereotypes
Lack of support, fear of judgment, mockery by the people, avoidance by the people and society, discriminatory behavior by society, fear of getting attached to a negative label (crazy, insane, and lunatic) by society, lessen employment opportunities due to mental illness.	Stigma

Table 1: Codes (n=30)

Table 1 illustrates the items that came up repeatedly throughout the content analysis of the interviews. Codes were generated for each common set of items after clubbing all the repeated items.

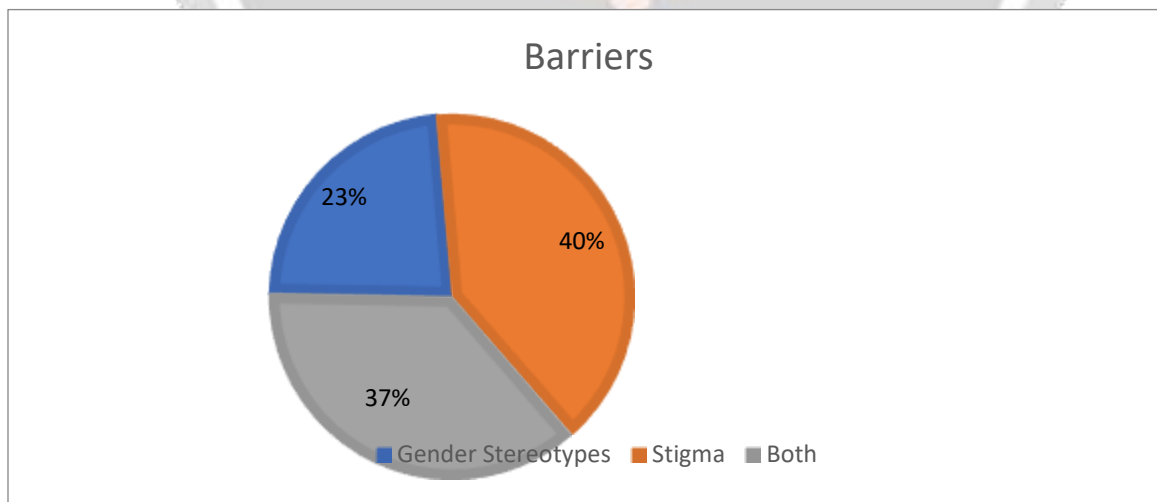


Chart 1: Barriers (n=30)

Chart 1 illustrates the barriers faced by males in seeking mental health services. 7 interviewees responded that it is the 'gender stereotypes' in society which prevent us from seeking mental health services i.e., 23%. 12 interviewees responded that it is the stigma around mental which hinders them from seeking mental health services i.e., 40%. 11

interviewees responded 'both' gender role stereotypes and stigma prevents them from seeking mental health services i.e., 37%.

4. DISCUSSION AND INTERPRETATION

This research aimed to find out the barriers faced by males in seeking mental health services. The study was qualitative and used content analysis as the method for analyzing the transcripts. After taking the interviews and analyzing the content we were able to identify some repetitive points. Repetitive points were clubbed and codes were generated. The majority of the points lead to the generation of two codes namely "Gender Stereotypes and Stigma".

Individuals we interviewed had mostly spoken firstly, about the social and personal pressure they feel to comply with the 'gender role expectations from the society.' "Men don't cry, they should be strong and brave, will be considered weak if ask for help regarding psychological issues, should have better control over their emotions, and most importantly be self-independent." These gender-stereotypical behavioral expectations from society hinder males from admitting, discussing, and seeking help for their mental health issues. Stereotyping implies that a person possesses a set of features that society presumes all members of the group possess. Masculinity is frequently associated with emotional repression. As a result, males may feel compelled to repress or ignore their emotional issues for fear of being viewed as weak resulting in the non-utilization of psychological help (Sagar-Ouriaghi et al., 2019). The barriers which we have found in our study also relate to another study which was done by Seidler et al. (2016). They found a linkage between conformity to traditional masculine norms and lower help-seeking behavior for depression or mental health illness. The study conducted by Emslie et al. (2006) on gender experiences of depression and their treatment preferences found that shame and weakness challenged gender role stereotypes (masculine ideals) like strength and control. These ideals or stereotypes often make it difficult for men to ask for help regarding their mental health as they will appear 'weak' in front of other men and will be ridiculed. The findings of our study also reveal the same barriers which were founded in the study done by Emslie et al. in 2006.

'Stigma' specifically public stigma around mental health is the second domain that the interviewees had spoken about which hinders them from seeking mental health services. Stigma has a profound impact on people's attitudes and behaviors toward obtaining mental health care. The unfavorable views, attitudes, and prejudices that society identifies with a certain characteristic or condition are referred to as stigma. Social stigma (sub-part of stigma) refers to negative attitudes and judgments of a person or group experiencing mental health illness, which stems from the erroneous assumption. These misconceptions can result in discrimination, avoidance, and rejection of people suffering from mental illnesses (Venkatesh et al., 2015). Interviewees have mentioned during the time of interviews that there is "not enough support from the society concerning mental health, fear of judgment, being discriminated, feeling ashamed, fear of getting labeled by the society as lunatics or mad and even a chance of losing employment opportunities". Stigma has a negative influence on men's mental health help-seeking and service utilization by hindering disclosures, and reducing social connectedness (McKenzie et al., 2022). Individuals with mental health issues may internalize negative attitudes about themselves, leading to self-stigma in addition to public stigma. They may feel embarrassed or believe that they are the ones to blame for their situation. Self-stigma is especially harmful because it undermines self-esteem and self-worth, generating further hurdles to help-seeking behavior. Mahalik & Dagirmanjian (2019) has found a negative relationship between stigma and help-seeking behavior. The higher the stigma lower the help-seeking behavior. The reason was founded that help-seeking behavior contradicts the broader and generalized principles of masculinity in terms of gender roles and affects their image as "men." We have also found the same barriers in our study which were stated by the interviewees who were interviewed for the research purpose. Gender socialization and masculine norms further discourage males from seeking care for mental health issues (Lynch et al., 2016). Some interviewees had spoken that both gender stereotypes and stigma prevent them from seeking mental health services. This makes one thing clear that both gender stereotypes and stigma have a significant role to play in the decision-making whether to seek mental health assistance or not.

According to the findings and supporting research stated above, males adhere to gender role norms more strictly than females and seek fewer mental health services. Every day numerous people in India commit suicide. Suicide is the death induced by intentionally harming oneself to die. In 2019, the age group 18-30 accounted for almost 35.1% of suicides in India. Majority of the suicides are occurring in this age group only making them the most vulnerable age group for suicide. If we talk about gender in 2021, the male-to-female ratio of suicide victims was 72.5: 27.4

indicating that male suicides are much higher in number than females (Pti, 2022). In 2021, NCRB data showed 13,089 students died because of suicide. 43.49% were females while 56.51% were male (National Crime Records Bureau, 2022). All of this data suggests that the mental health of male, in particular, need urgent attention. Based on the facts, there is an urgent need to focus attention on the mental health of males in our country. Boys are taught from an early age that they should be strong, independent, less emotional, resilient, and not cry easily in front of people. These male gender expectations and stigma around mental health are firmly ingrained in our society since many people believe that there are no such things as mental illness, anxiety, depression etcetera. All of the aforementioned factors have a big influence in discouraging males in our nation from seeking mental health services. To minimize stigma, the government should prioritize mental health awareness programs. Psycho-educational resources aimed specifically at men can provide crucial information about mental health and the benefits of receiving therapy. Help-seeking behaviors can be normalized by promoting positive male role models who have overcome mental health issues. Adapting treatments for mental illness to male preferences can help in creating a safe space for males to openly communicate their thoughts and concerns. The government and the people must work together to tackle the mental health epidemic and foster open communication among males.

5. CONCLUSION

The study's goal was to discover the barriers that males face when seeking mental health assistance. With a sample size of 30, the study adopts a qualitative research method. Participants were chosen via convenient sampling. The Content analysis method was employed to analyze the content of interviews. After evaluating the content of the interviews, codes were generated. The study's findings reveal that males encounter significant barriers when seeking mental health services. The main aim of the study was fulfilled. Although this study was completed successfully there are some limitations present in this study which are it is done on a few participants which makes it hard to generalize with larger groups and populations, sample was from an urban locality leaving the rural locality their chance of equal participation and voicing their thoughts. Lastly, the major limitation is that all the interviewees were literate leaving the illiterate people an equal chance of participating in the study and contributing. This research is both applied and valuable because it may help in the development of focused interventions for males, which can help in improving male utilization of mental health services. This study, first and foremost, may assist in the development of awareness programs and the dissemination of psychoeducation to minimize the stigma around mental health and, more especially, to support male mental health by demonstrating support rather than discrimination. Secondly, this study may also help in the development of social programs which can help males to discuss more openly and freely about their mental health issues by acknowledging them.

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