



# **Psychological Help-Seeking: Understanding Men's Behaviour**

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March 2010

Submitted in partial fulfilment of requirements for the degree  
Combined Master of Psychology (Clinical)/ Doctor of Philosophy.

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Nicole Bevan

A sincere thank you to all who participated in the studies presented here, particularly to the eighteen men who generously shared their valuable time and very personal life experiences. I was and am humbled by your graciousness.

I would like to express my immeasurable gratitude to Dr. Aspa Sarris, for her continued commitment, humour, and remarkable ability to make everything make sense. Thank you also to Dr. Neil Kirby for his welcome comments and support.

Thank you to Joy for being my hug lady, to my unique and extraordinary friends Brooke and Kathy who have shared so much in this process and elsewhere, and to Selina, for everything, always.

Lastly, thank you to the remarkable men in my life; Andrew, whom I cherish and who will forever make me laugh; Alan, my secure base who is amused by grammatical misfortunes; Chris, who is far away but close to my heart; and Jeremy, who, no matter how old he gets, will always be my cheeky little monkey.

Sometimes I know I become  
All that's weak in a man, and weak in a boy.  
But I keep trying and I won't quit  
And that must be worth something more  
Than a strong man who believes  
That there's nothing left to try for

***Lines On Palms* by Josh Pyke (2007)**

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## **ABSTRACT**

Men have been shown to seek psychological help at lower rates than women (Kessler, Brown, & Broman, 1981). Recent research has demonstrated that much mental illness among men may go unidentified and untreated (particularly depression, Brownhill, 2003). The aim of this research was to identify the barriers that may exist to the identification of mental health concerns among men and to men seeking appropriate professional treatment.

The first study investigated the impact of prior help-seeking, gender-role conflict, mental health locus of origin, personality, and gender on attitudes to psychological help-seeking. Internet based surveys were completed by 635 participants, the majority of whom were university students. Results showed that each of the variables specified above was associated with attitudes to help-seeking.

The second study examined the mental health literacy of university students using vignettes developed by Jorm, Korten, Jacomb and colleagues (1997). Results showed that mental health literacy was lower amongst men than women, and was higher for depression than schizophrenia. Men recommended lay help-seeking for depression whilst women advised seeing a psychologist. Results also indicated that some participants would be unlikely to seek intervention for mental health issues even when they considered this to be the best course of action.

A third study was undertaken to investigate barriers to men and women seeking help for physical and mental concerns. Barriers to help-seeking for physical and mental concerns

were similar. For men barriers included self-reliance, the stigma of being labelled mentally ill, and fear of outcome. The indicators that one was suffering from mental illness and predictions of subsequent action were explored and found to differ between genders. Participants identified education as likely to improve men's help-seeking behaviour.

For the fourth study, 66 general practitioners and mental health professionals from rural and metropolitan locations completed a survey regarding men with mental illness and their psychological help-seeking. Practitioners reported beliefs that men's experience of mental illness differed from that of women. Such differences included that men denied problems, were prompted to seek help, did so as a last resort, and that rural factors impacted negatively on men's help-seeking behaviour.

In order to provide a comprehensive understanding of men's help-seeking behaviour, the fifth study utilised in-depth interviews to investigate the experiences of men from rural and metropolitan locations who had sought professional assistance. Thematic analysis highlighted means of recognition of mental health problems, barriers and facilitators to seeking psychological intervention and associated rationale. Findings suggest that the ability to recognise a psychological problem and beliefs regarding appropriateness of seeking assistance may impede men's help-seeking behaviour.

A number of common themes identified throughout this research were consistent with previous research on men's mental health and help-seeking. These included men's negative attitude towards psychological help-seeking, low mental health literacy, lack of psychological language, stigma, denial of the problem, delay of help-seeking, and the importance of the role of others in men's mental health. Many major themes which emerged throughout this research



can be viewed as aspects of and responses to the pervasive and constrictive nature of 'hegemonic masculinity' (Connell, 2002). Implications for working therapeutically with men are discussed.