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Gender Role Conflict and Attitudes Toward Seeking Help

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Gender Role Conflict and Attitudes Toward Seeking Help

by Jennifer Boisjolie
May 2013

MSW Clinical Research Paper

Presented to the Faculty of the School of Social Work
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St. Paul, Minnesota
in Partial Fulfillment of the Requirements for the Degree of
Master of Social Work

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The Clinical Research Project is a graduation requirement for MSW students at St. Catherine University/University of St. Thomas School of Social Work in St. Paul Minnesota and is conducted within a nine-month time frame to demonstrate facility with basic research methods. Students must independently conceptualize a research problem. Formulate a research design that is approved by a research committee and the university Institutional Review Board, implement the project, and publicly present their findings. This project is neither a Master's thesis nor a dissertation.

Abstract

This study examined how male gender role conflict related to attitudes toward seeking professional help in a sample of 68 men ages 24-75. The data was gathered using a self-administered survey. A quantitative, correlational research design was used to test the hypotheses that relationship exists between the stated variables. The results of this study showed no relationship between gender role conflict and attitudes toward seeking help. The population of this research study was mostly highly educated, Caucasian men. There was no statistical significance related to gender role conflict and attitudes towards seeking help. And so gender role conflict may not need as much attention in this population in terms of how it affects help seeking. For this particular population it may be beneficial to find other influences affecting men seeking help. Future research studies could also include more diverse populations.

Acknowledgements

I would like to dedicate this paper to my fiancé, Ryan for his patient and enduring support. His love, support, and encouragement helped me through this process. I would like to thank my parents – my mom, Carla, and dad, Paul. I am incredibly fortunate to have them as continual support and guidance throughout my life. My thanks also to: Andy, Kate, Jean, Dave, and to all my friends. I am blessed to be surrounded by amazing people who have continued to love and support me through this journey.

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Introduction

The feminist movement of the 1970s caused confusion and conflict between both men and women as they struggled to adapt to changing gender roles (O'Neil, 1981a). Society as a whole called for change in men. Young men today are expected to be more accepting of differences in people and more communicative and respectful of women (Levant, 1996). However, society is still expecting these same young men to maintain the traditional masculine traits that require them to be strong, ambitious, and independent. Understanding "appropriate" gendered behavior caused confusion and anxiety for men (O'Neil, 1981a). This gender role conflict is believed to cause behavioral patterns including low self-esteem, difficulties with intimacy, and psychological distress (O'Neil, 1981b). The literature review section explores the gender role conflict in more detail.

Masculinity has traditionally meant "strength" and "aggressiveness" Men are told by society to avoid "being feminine" at all costs (O'Neil, 1981a). According to O'Neil (1981b) being emotionally, psychologically and physically aggressive is important in defining masculinity. Emotional displays are viewed as weak and therefore unacceptable. Also, inherent to the masculine role is the expectation of success. Competitive success in monetary wealth can be a measurement of self-worth among men (O'Neil, 1981a). Self-reliance is also emphasized. This involves solving problems without the help from others and always maintaining emotional control. Not living up to these standards of masculinity can cause stress; this stress can cause physical and mental health problems (O'Neil 1981b).

O'Neil and Lujan, described the state of men in America as a "crisis" (2009). Men are at a higher risk of depression, anxiety, anger, and drug abuse (Blazina & Watkins, 1996). Men are found to be over-represented in prevalence statistics on substance abuse, crime, prejudice, and inattentive parenting (O'Neil & Lujan, 2009). The stress in meeting perceived expectations and refusal to seek help for mental health problems can further lead to internalized feelings and externalized behaviors like excessive drinking, violence, risk taking, and suicide, as a way to cope with distress (Addis & Cohane, 2005).

Given these stresses, one might expect men to receive more counseling services.

In contrast, they seek counseling approximately half as frequently as women (Willis & DePaulo, 1991). Even though mental illness affects both men and women similarly, men behave differently than women when it comes seeking help. Not only are men less likely to seek professional help, they are also less likely to recognize and label nonspecific feelings of distress as emotional problems (Addis & Mahalik, 2003). Golberstein, Eisenberg, and Gollust (2008) showed men attach higher levels of stigma than women towards seeking help. Davis et al. (2000) found men may feel that asking for help is not an acceptable “manly behavior.” This practice of ignoring emotional distress indicates a traditional masculinity ideology and can be viewed as a medium through which men establish their male identity and give social power and rank (Courtenay, 2000). This trend is found persistent across age, ethnicity, and social background (Addis & Mahalik, 2003).

Clinicians need to be aware that the expectation of men to pursue power comes at a price. Men experience traumas as boys as preparation for life in pursuit of power, and consequently, they experience pain, powerlessness, isolation and ill-health (Courtenay, 2000; Lisak, 2001). Better understanding men’s willingness to seek professional help may help professionals better access those men who might otherwise avoid counseling (Komiya, Good, & Sherrod, 2000). This study will further explore that hypothesis by posing the question, “Does gender role conflict affect men’s attitudes toward help-seeking help?” While help-seeking may be defined as reaching out to anyone for assistance, for the purpose of this study, it is limited to the context of seeking professional counseling.

Literature Review

Many authors have explored the topic of gender role conflict. From its definition and origination to its consequences for individual men and those attempting to help them, gender role conflict has been the focus of much research. This section highlights the published work around this topic, with a specific focus on the impacts on help-seeking behavior.

Gender Role

The gender role construct is defined as “behaviors, expectations, and role sets defined by society as masculine or feminine which are embodied in the behavior of the individual man or woman and culturally regarded as appropriate to males or females” (O’Neil, 1981b, p.203). As children develop, they form ideas about how they “should” act, think, and feel. These early life experiences may result in internalized cultural gender roles, norms, and expectations (Fragoso & Kashubeck, 2000).

According to Pleck (1995), society’s external values, expectations, and norms about masculine and feminine behaviors are powerful and influential. Men and women define their identity through cultural interaction. Gender roles, rather than biological constructs, are social structures created from social forces arising from parents, teachers, peers, and the media (O’Neil, 1981a).

From an early age, boys learn what are satisfactory and unsatisfactory masculine behaviors through reinforcement (e.g., praise for winning) and punishment (e.g., disapproval for crying). Boys are told to ignore their feelings. This emotion restriction may lead to the inability to recognize and process emotions. However, research demonstrates emotional experience is as important for men as women (Levant, 1995). Boys further learn to be self-sufficient by separating themselves from nurturing relationships – particularly from their mothers. This may produce values, attitudes, and behaviors that reinforce emotional distance and dominance (O’Neil & Egan, 1992).

As part of the socialization process, boys are exposed to messages such as “boys don’t cry,” and that they should become “powerful.” They thus learn to be assertive, strong, and brave. O’Neil (1981a) described part of this socialization as encouraging men to ignore or devalue emotions as “feminine” and thus unacceptable. In the extreme, men can come to believe that they are superior to women. As a result of this socialization, boys do not receive the same emotional skills training as do women (Levant, 1995). The consequence of this is that men are forced to channel other emotions into expressions of anger, thus inhibiting their ability to experience, address, or even develop other emotions (Levant, 1995).

In traditional western society men are socialized to be strong, confident, and independent. Extreme adherence to these characteristics can sometimes detract from personal well-being, physical health, emotional expression, and intimacy (Counoyer & Mahalik, 1995). The stronger the societal concepts are engrained, the more likely men can feel a discrepancy (Pleck, 1995). Nonconformity can lead to negative consequences for men's self esteem, psychological well-being, and social support. There has been a correlation between traditional expectations of men and depression (Good & Wood, 1995), alcohol use (Capraro, 2000), sexual assault (Kilmartin, 2001), and homophobia (Rhoads, 1995).

The male socialization process is to instill in men the socially defined masculine ideals of being emotionally stoic and interpersonally dominant to avoid being or appearing feminine. Men who do not fit the traditional definition of masculine because of class, race, sexual orientation, religion, age, or ability are often marginalized. A traditional idea of masculinity fosters a patriarchal social system (Edwards & Jones, 2009). Because of this, a man experiences any part of the self that he considers feminine with great conflict and anxiety, because he believes it threatens his manhood. As a result of this fear of femininity, men are believed to over conform to traditional male roles as a coping strategy to avoid femininity (Pleck, 1995) and, as a result, may develop gender role conflict (O'Neil, 1981a, 1981b).

Gender Role Conflict

As discussed, masculine gender role conflict is defined as psychological distress created by overly rigid adherence to traditional masculine norms (O'Neil, Helms, Gable, David, & Wrightsman, 1986). According to O'Neil (1981a) conventional male role socialization provides unrealistic and contradictory messages causing internal chaos. It may also result in other negative consequences. Men who attempt to fulfill the expectations of the male gender role, which are both restrictive (e.g., boys don't cry) and contradictory (e.g., be a successful economic provider but also an involved, sensitive father.) experience high levels of conflict (O'Neil, Helms, Gable, David, & Wrightsman, 1986). O'Neil (1981b) stated

that men with higher levels of gender role conflict "will have difficulty in self-disclosure, recognizing feelings, and processing the complexities of interpersonal life" (p. 206). O'Neil (1981a) stated that two possible outcomes can occur when gender role conflict arises: the man can either assimilate into cultural norms or he can deviate from this social construct. Either outcome will have adverse affects on the man.

Men who sanction traditional male ideas would be less likely to communicate emotions even when they believe it would be helpful (Good & Wood, 1995). According to Blazina, Eddins, Burrige, and Settle (2007), this lack of emotionality is the result of relational failures in the lives of men. Many men have been socialized to believe that emotions, self-disclosure, and intimacy with another person are feminine behaviors. If men avoid these "feminine" behaviors it makes it difficult to establish intimate relationships with women and even more difficult with men due to homophobia (O'Neil, 1981b). Homophobia creates great strain on men's ability to self-disclose and have companionship and affection (O'Neil, 1981b). Kimmel and Mahler state that homophobia is far less about the irrational fear of homosexuals but that homophobia is the fear that others will see one as gay, as a failed man, this underlies a significant amount of men's behavior, including their relationships with other men, women, and violence (2003). This fear can lead men to feel stress when they attempt to establish close male friendships. According to O'Neil (1981b), men often settle for superficial relationships, which can be destructive since these relationships may leave a man feeling alone and isolated. This lack of intimacy in male friendships leads to avoidance of intimacy and a competition among men (Blazina et al., 2007).

Gender role conflict behavior is also believed to reflect less mature masculine identity (O'Neil & Egan, 1992b). As a boy develops, he may identify with men he watches on television. These men are usually larger-than-life powerful such as Superman. If the boy is unable to integrate personal notions of masculine roles, as opposed to these stereotypical masculine roles, he may not be able to develop a more complex or mature self-identity (O'Neil & Egan, 1992b). According to O'Neil et al. (1986), when males do not live up to these masculine ideals, they experience guilt, disgrace, and apprehension.

Attitudes Toward Help Seeking

In terms of help seeking, American men are generally hesitant to seek counseling and do so about half as much as women do (O'Neil, 2008). It is indicated that men attach higher levels of stigma towards help-seeking than women (Komiya, Good, & Sherrod, 2000). Gonzalez et al. found that women with similar emotional problems seek help at a higher rate than men (2005). Women also admit the existence of a mental health problem more often than men, and are more open to the idea of seeking professional help (Gonzalez et al., 2005). Women were also more likely than men to recognize and label nonspecific feelings of distress as emotional problems (Addis & Mahalik, 2003). Furthermore, when men do seek help, they ask fewer questions than women (Courtenay, 2000a). Addis and Cohane (2005) found that gender role conflict has been associated with higher levels of alcohol abuse, anger, anxiety, and depression (Blazina & Watkins, 1996). Gender role conflict has also shown to increase relationship dissatisfaction and decrease intimacy (Blazina et al., 2007). Men with higher gender role conflict are more likely to engage in high-risk sexual activity (Courtenay, 2000), have increased job discontent (Dodson & Borders, 2006), and have aggressive behaviors and attitudes (Blazina & Watkins, 2000). According to Sharpe and Heppner (1991), masculine role conflict was associated with more severe symptoms of distress such as paranoia and obsessive compulsive disorder. Men who try to live up to unachievable expectations of traditional male gender roles may harm their mental health in the process (O'Neil, 1981a).

Although gender role conflict has been linked to higher levels of psychological distress, it has also been linked to lower help-seeking (Berger, Levant, McMillan, Kelleher, & Sellers, 2005). Men who are higher in gender role conflict may be at a greater risk of depression and also more likely to hold negative attitudes towards seeking help (Mahalik & Cournoyer, 2000). And so men experiencing more conflict from their gender role and therefore in need of the services the most are also least likely to use counseling.

One reason men may underutilize counseling services is that they have less positive attitudes about professional help than woman (Gonzalez, Alegria, & Prihoda, 2005). Men

also may experience social sanctions such “boys don’t cry” and so may be motivated to hide their feelings because they fear public stigmatization (Pederson & Vogel, 2007). Traditional masculine norms state that men should be controlled and self-reliant, behaviors generally conflicting with seeking help (O’Neil, 1981a). Davies, McCrae, Frank, Docknahl, Pickering, Harrison, Zakrzewski and Wison (2000), found that the male socialization process is the primary barrier to help-seeking. Men’s unwillingness to seek help may be due to a fear of losing control and independence. Blazina and Watkins (1996) stated that men may be afraid to yield their sense of power when attempting to seek therapy as “shifts in power occur in favor of the therapist, when the client begins to divulge information and expressed feeling” (p. 464).

Pederson and Vogel (2007) state that the relationship between gender role conflict and help-seeking is interceded by self-stigma, fear of disclosure, and attitudes towards therapy. Sue and Sue found similarities between men and persons of color in seeking help such as shame, stigma, fear that the clinician would not understand the client’s values, and a general unfamiliarity with how psychotherapy works, and the client’s role in therapy (2003). Men are less likely to seek counseling and in turn respond to gender role conflict by participating in more high-risk behaviors and psychological distress (Cournoyer & Mahalik, 1995).

Challenges to Modern Men

Men experience conflict about who they are as human beings and what gender socialization conditions them to be. Society is changing more rapidly today than at any other time in the history of mankind. The instability of gender roles causes ever changing expectations and demands on men.

The current literature suggests that the traditional attitudes toward men’s gender roles cause men both physical and psychological stresses. Men as a group experience more health and social problems than women as a group. Researchers have highlighted a ‘crisis

in masculinity' stemming from out-dated attitudes, reduced job security, men's emotional detachment and changing family structures (McDowell, 2002).

Men as the dominant sex are changing. This can be found in the current Recession, in which three-quarters of the 8 million jobs lost were lost by men (Rosin, 2010). As the economy crashed, news media began to run articles about the struggle for men to find or keep work while women outnumbered them for the first time in the workplace (Rosin, 2010). For the first time in American history, the balance of the workforce tipped toward women, who now hold a majority of the nation's jobs (Rosin, 2010).

Boys are struggling throughout elementary and high school with more frequent ADD diagnoses, increased suspension rates (Lewin, 2009) and increasing high school dropout rates (Blackhurst & Auger, 2008). Since 1982, fewer men than women enroll and graduate from college, reversing a longstanding structural gender difference (Diprete & Buchmann, 2006). Since 1982 the percentage of bachelor's degrees awarded to women continued to climb such that by 2004 women received 58 percent of all bachelor's degrees (U.S. Department of Education, 2004). Women also earn almost 60 percent of all Masters Degrees (U.S Department of Education, 2004).

The suicide rate for young men between the ages of 15 and 24 has almost doubled since 1976 and is far higher than the corresponding figure for young women (O'Donnell & Sharpe, 2000). Men represent more than 80% of the perpetrators of violent crime and are also the victims of the majority of that violence (Dorsey & Middleton, 2008). According to Kimmel and Mahler (2003) masculinity is the single greatest risk factor in school violence. Kimmel and Mahler found that media reports of school shootings from 1982-2001 all had stories of being constantly bullied, teased and threatened because they were different. They boys were described as shy, nerdy, artistic, non-athletic, or weird. The boys were marginalized based on criteria for adequate gender performance, specifically the enactment of codes of masculinity (2003).

When men cannot meet the often unrealistic and contradictory demands of the traditional male gender role they experience conflict. Men may constrict their own expression

of human need of out fear of feeling or behaving in any way considered feminine (O'Neil, 2008). The negative impact can contribute to psychological distress, the use of psychological defenses, restrictive affection and proneness to violence (Blazina & Watkins, 2000) The consequences of not seeking needed help can be severe and impact not only the well being of men, but also women, children, and society at large (Levant, 1995). Men today feel as though they have been caught in a storm of confusing and often contradictory messages of what is masculine and how men "should" be. Although in many ways society has changed, the range of acceptable masculine roles has changed comparatively little causing conflict and stress among men.

Conceptual Framework

The purpose of this section is to identify the lens through which this study has been carried out. The conceptual framework is the researcher's theoretical view of the main themes observed in the study. It influences how the researcher views the research question. This researcher has chosen social role theory as the theoretical framework as to which to evaluate the concepts.

Social role theory considers everyday activity to be result of socially defined categories. Each role is a set of rights, duties, expectations, norms and behaviors to fill. The model is based on the observation that people behave in a predictable way, and that an individual's behavior is context- specific and based on social position (Forte, 2007).

Social role theory is among the most influential explanations for gender stereotypes (Eagly, 1987). Social role theory suggests that one reason women and men validate gender stereotypes is because they act in accordance with their social roles, which are often separated along gender lines (Eagly, 1987). Women and men behave in gender-typed ways because the social roles that they perform are associated with different expectations and require different skills. According to Eagly, the "distribution of the sexes into specific social roles supports stereotypic sex differences because this distribution is an important source of people's expectations about female and male characteristics" (1987, p. 31). Therefore, the

roles that women engage (taking care of children) lead to perceptions of more nurturing traits, while men's roles (breadwinners) lead to perceptions of more leadership traits. Therefore, women and men confirm gender stereotypes in large part because the different roles that they perform place different social demands upon them (Eagly, 1987).

Methods

Research Question and Hypothesis

This research study proposed the following question: Does gender role conflict affect men's attitudes toward seeking help? The hypothesis for this research was: Men who report more conflict about their gender role will report less favorable attitudes toward seeking professional help. In other words, men with high scores on the male gender role conflict scale will report less favorable attitudes toward seeking professional help.

Design

This researcher used a quantitative design to compare gathered data and establish the strengths of the relationships among the study factors. This quantitative survey design was used to compare data gathered using standardized, self-administered surveys following a link on Facebook. Sue and Ritter (2007) stated, when compared to mail surveys, online survey response rates are higher, response speed is higher, and data quality is the same or better. The data collection method included the use of electronic surveys using close-ended questions. Because of the need to collect data from a large number of participants that fit the specific demographic, a quantitative study was beneficial. (Monette, Sullivan, & Dejong, 2011).

Quantitative methods are more objective and systematic, which allow replication. Surveys are also less expensive, take less time, and allow more precise answers. (Monette, Sullivan, Dejong, 2011). Also, because participants filled out the surveys individually, they were more likely to answer honestly (Monette, Sullivan, & Dejong, 2011). By using close-

ended questions this researcher was able to obtain clear and measurable data (Monette, Sullivan, & Dejong, 2011).

Instruments

In this study this researcher addressed the question, "Does gender role conflict affect men's attitudes toward seeking help?" This researcher used two scales the Gender Role Conflict Scale, and the Seeking Professional Psychological Help Scale-Short Form. Permission was granted from the author to use The Gender Role Conflict Scale (GRCS; O'Neil et al., 1986). This researcher also used an adapted version of The Attitudes toward Seeking Professional Psychological Help Scale-Short Form (ATSPPH-SF) (Fisher & Farina, 1995). The survey contained 47 questions that was electronically distributed. The two surveys were combined and presented as one survey.

Sampling

Convenience sampling was used for this study. Men were the only participants and women were intentionally omitted from the sample. Participation was not restricted on any other demographic variable such as age, socioeconomic status (SES), or education level. Utilizing Facebook this researcher invited 200 adult male Facebook friends to participate in the online study. While 200 men were given the opportunity to participate in the study, 68 males completed the survey. This researcher sent a message to their individual Facebook accounts that provided an explanation and motivations for the research (Appendix A). The message also contained a link to the survey. Interested participants clicked the link and were led externally to Qualtrics, an electronic survey program, to complete the anonymous survey. Participants did not sign a consent form, however by completing the electronic survey consent was assumed.

Participants also completed the demographic questions created by O'Neil et al. (1986) regarding: age, level of education, present marital status, and race. Table 1 shows the men's ages ranged from 24-75. Table 2 and Figure 1 show the educational background of the respondents in this study. Of the 68 respondents, only 6 completed less than 3 years in

Table 1: AGE: Descriptive statistics.

	N	Minimum	Maximum	Mean	Std Dev
21-30	18	24	75	37.3	15.1
31-40	11				
41-50	0				
51-60	1				
61-70	5				
71-80	1				

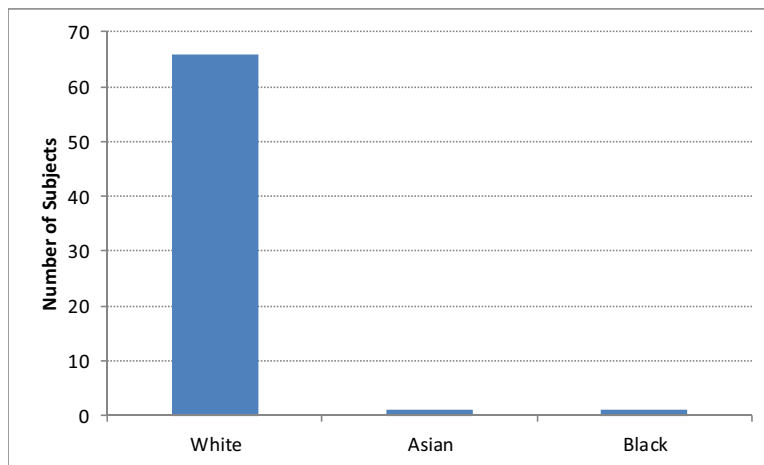


Figure 1. RACIAL characteristics of the participants.

college. The vast majority (62 of the 68) completed a four-year college degree. Figure 2 shows that out of 68 respondents, 66 respondents were Caucasian.

The link remained active for two weeks in order for participants to have maximum time for completion. Participation in the survey took participants less than 20 minutes. The completed surveys were returned electronically and saved in my Qualtrics account. Participation in the survey was not mandatory and could be stopped at any time without consequence. There were no risks or benefits to the subjects that participated in the research.

Table 2: EDUCATION: Descriptive statistics.

	N	Range	Minimum	Maximum	Mean	Std. Deviation	Skewness	
	Statistic	Statistic	Statistic	Statistic	Statistic	Statistic	Statistic	Std. Error
Education Level:	68	7	1	8	6.15	1.934	-1.222	.291
Valid N (listwise)	68							

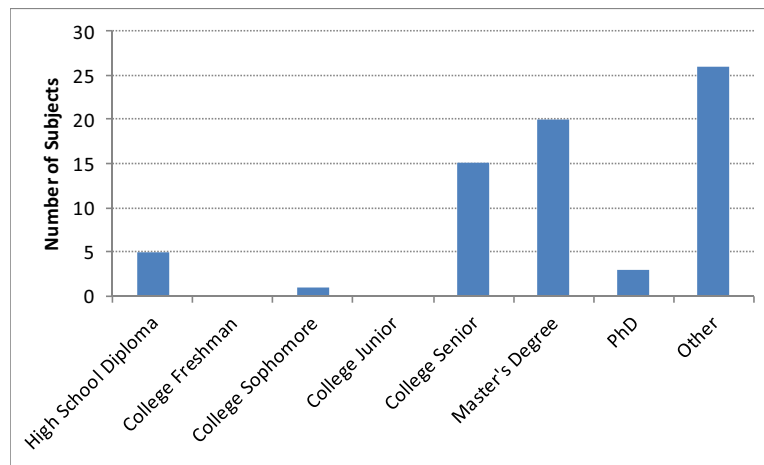


Figure 2. EDUCATIONAL characteristics of the participants.

Protection of Human Subjects

To ensure the use of ethical procedures, the purpose of the research project was explained to participants. Participants completed the online survey through the use of Qualtrics via a link on Facebook. Respondents' participation in the study was completely voluntary and presented no risk from participation. A clear clause stated that participation in the study was voluntary and confidential was included in the description of the study. Participants confirmed if they were at least 18 years of age. Individual identifiable information was not disclosed or published, and all results were presented as summary data. This researcher followed confidentiality guidelines by ensuring all data was permanently destroyed after analyzed. All University of St. Thomas IRB guidelines for informed consent and issues regarding confidentiality were followed.

Measurement

Gender role conflict was measured by the Gender Role Conflict Scale (O'Neil et al., 1986). To research the effect of gender role and gender role conflict on mental health O'Neil et al. (1986) developed an inventory the Gender Role Conflict Scale (GRCS) to assess men's thoughts and feelings about gender role conflict.

Gender Role Conflict Scale. The GRCS contains 37 items that assess men's thoughts and feelings about their gender role behaviors using a 6-point Likert scale ranging from strongly disagree (1) to strongly agree (6); higher scores on this scale mean greater gender role conflict experienced by the participant (Mahalik & Cournoyer, 2000). The scale comprised of four factors: (a) Success, Power, and Competition, (b) Restrictive Emotionality, (c) Restrictive Affectionate Behavior between Men, and (d) Conflicts Between Work and Family Relations (O'Neil et al., 1986).

The success, power and competition factor is defined as having a disturbing and persistent preoccupation with work and personal achievement while competing to be in position of superiority (O'Neil et al., 1986). This factor is comprised of 13 items (1, 5, 8, 12, 14, 18, 21, 23, 24, 28, 32, 34, and 37). It uses a 6-point Likert scale ranging from (1) strongly disagrees to (6) strongly agree. The items are averaged to arrive at the final score and a mean is obtained with high scores indicating high level of gender role conflict O'Neil et al., 1986). An example of an item from this section is, "Making money is part of my idea of being a successful man." (O'Neil, 2008).

Restrictive emotionality describes difficulty and fear about expressing one's feelings (O'Neil, 1981). This factor uses 10 items (2, 6, 9, 13, 15, 19, 22, 25, 29, and 30). It uses a 6-point Likert scale ranging from (1) strongly disagrees to (6) strongly agree. The items are averaged to arrive at the final score and a mean is obtained with high scores indicating high level of gender role conflict (O'Neil et al, 1986). An example from this section is "Expressing feelings makes me feel open to attack by other people."

Restrictive affectionate behavior between men describes inhibition towards sharing feelings and emotions with other men (O'Neil et al., 1986). Factor 3 is comprised of 8 items (Items – 3, 7, 10, 16, 20, 26, 33, 35). It uses a 6-point Likert scale ranging from (1) strongly disagrees to (6) strongly agree. The items are averaged to arrive at the final score and a mean is obtained with high scores indicating high level of gender role conflict. An example of an item from this section is "Affection with other men makes me tense" (O'Neil et al., 1986).

Conflicts between work and family relations relates to problems balancing responsibilities with work and family relations (O'Neil et al., 1986). Factor 4 is made up of six items (4, 11, 17, 27, 31, and 36). It uses a 6-point Likert scale ranging from (1) strongly disagrees to (6) strongly agree. The items are averaged to arrive at the final score and a mean is obtained with high scores indicating high level of gender role conflict O'Neil et al., 1986). An example from this section is, "My career, job, or school affects the quality of my leisure or family life."

Validity and Reliability. The GRCS has also been shown to be free from socially popular responses (Good, Robertson, O'Neil, Fitzgerald, Stevens, DeBord, Bartels, & Braverman, 1995). Good et al. (1995) found that GRCS has good internal validity; good construct validity, and confirmed the initial four factors proposed by O'Neil et al. (1986). Across eight studies on the GRCS the average total scale coefficient was .89 (Good et al., 1995). O'Neil et al. (1986) determined the GRCS to have good test-retest reliability, which was assessed over a four week period. Scores ranged between .72 to .86. Lastly, the GRCS has been found to be consistently reliable over the past several decades (O'Neil, 2008).

Attitudes Toward Seeking Professional Psychological Help Short Form

The Attitudes toward Seeking Professional Psychological Help Scale-Short Form (ATSPPH-SF) is one of the most relevant and widely used contemporary assessments of mental health treatment attitudes (Elhai, Schweinle, & Anderson, 2008). The ATSPPH-SF was adapted from Fischer and Turner's (1970) original Attitudes toward Seeking Professional Psychological Help Scale (ATSPPHS). To improve the reliability and validity of the scale, Fisher and Farina (1995) shortened the measure to a 10-item questionnaire. The ATSPPH-SF proposed to provide a brief (10 item) version of the original scale and produce a single score of the respondent's core attitude (Fisher & Farina, 1995).

The total scale score was obtained through averaging of scores on the 10 items. The items are responded to using a 4-point Likert-type scale with response options ranging from 1 (Agrees) to 4 (Disagree). Items are totaled for the ten items and could range from 0-30.

High scores, 14 or more reflect positive attitudes toward seeking professional help and low scores, 13 or less reflect negative attitudes toward seeking professional help. An example of an item from this section is, "The idea of talking about problems with a psychologist strikes me as a poor way to get rid of emotional conflicts" (Fisher & Farina, 1995).

Validity and Reliability. The 10-item measure was shown to possess an internal consistency of .84 and a one-factor structure reflecting general help-seeking attitudes (Fisher & Farina, 1995). Reliability using a 1 month interval, yielded a coefficient of stability at .80; and correlation among the modified and original version of the scale was .87, indicating positive convergent validity (Elhai & Simons, 2007). The scale's criterion validity has been confirmed by its ability to predict usage of mental health services (Elhai & Simons, 2007). Higher scores on the scale are related to decreased stigma regarding mental health treatment, as well as increases in emotional disclosure, intentions to seek treatment, social norms regarding treatment seeking, and patient satisfaction (Constantine, 2002).

Data Analysis. Data collected from the survey was transferred from Qualtrics to the Statistical Package for the Social Sciences (SPSS) software program. This data analysis included descriptive statistics including mean, mode, standard deviation, and frequencies of the survey responses. For subsequent analysis the survey responses are assumed to be interval level measurements. A correlation design was used to examine the relationship between attitudes towards seeking help (dependent variable), and gender role conflict (independent variable). The null hypothesis for this study is that there is no relationship between these two variables. This researcher hypothesized a positive relationship between gender role conflict and stigma. GRCS is scored such that a higher number means a higher gender role conflict. The ATSPPH-SF is scored such that a higher number means lower stigma. Therefore, this researcher hypothesized a negative correlation.

The correlational research design was the best-fit method for this study given that the variables involved are scaled at the interval level. Correlation design is appropriate for this

study because it allows the researcher to describe, explain, and analyze the data in depth by means of statistical techniques (Monette, Sullivan, & Dejong, 2011).

Findings

The purpose of this study was to quantitatively examine whether gender role conflict related to attitudes toward seeking professional psychological help. The formal hypothesis for this research was: Men who report more conflict about their gender role will report less favorable attitudes toward seeking help. This section summarizes the results of these analyses.

Descriptive Findings

Frequency Distribution. Table 3 shows the descriptive statistics for each of the measured scales. The interval variable "GRCS_Total" is a calculated scale based on the responses to the GRCS questionnaire as previously described. The research question for this study was: "Does gender role conflict affect men's attitudes toward seeking help?" A total of 68 respondents completed this study to completion. Respondents' total GRCS scores ranged from 1.27 to 4.89, with a mean score of 2.946 and a standard deviation of 0.669. According to O'Neil et al. this number indicated the respondents were in the middle range of responses (1986). In addition to measuring the total GRCS score table 1 also shows the results of the GRCS subsets (A-D) (see "Gender Role Conflict Scale" on page 14 for a description of these subsets).

Similarly, the interval variable "ATSPPH" is a calculated scale based on the responses to a questionnaire which seeks to identify attitudes towards help seeking as previously described. The same 68 respondents also completed these questions. Total ATSPPH scores ranged from 2.40 to 3.80, with a mean of 3.151 and a standard deviation of 0.286.

Central Tendency: GRCS. The interval variable "GRCS_Total" is a calculated scale based on the responses to the GRCS questionnaire as previously described. Figure 3 shows a histogram of the total GRCS scores. The histogram shows that the distribution of scores

Table 3: DESCRIPTIVE STATISTICS for the measured scales.

	N	Range	Minimum	Maximum	Mean	Std. Deviation	Skewness	
	Statistic	Statistic	Statistic	Statistic	Statistic	Statistic	Statistic	Std. Error
GRCS_Total	68	3.62	1.27	4.89	2.9463	.66931	.398	.291
ATSPPH	68	1.40	2.40	3.80	3.1505	.28605	-.011	.291
GRCS_A	68	3.77	1.23	5.00	2.6285	.74473	.702	.291
GRCS_B	68	3.67	1.22	4.89	3.0872	.89108	-.160	.291
GRCS_C	68	3.88	1.13	5.00	3.2316	.89705	-.349	.291
GRCS_D	68	4.00	1.00	5.00	2.8377	.94627	.214	.291
Valid N (listwise)	68							

was slightly positively skewed (skewness statistic 0.398), but overall an approximate normal distribution with the most common score range from 3.0 to 3.3. This histogram shows that respondents scored most commonly in the low to middle range on the scale.

Central Tendency: ATSPPH. The interval variable "ATSPPH" is a calculated scale based on the responses to a questionnaire which seeks to identify attitudes towards help seeking as previously described. Figure 4 shows a histogram of the total ATSPPH scores. The histogram shows that the distribution of scores was slightly negatively skewed (skewness statistic -0.11), but also overall an approximate normal distribution centered about the 3.00-3.125 range. This histogram shows that respondents scored most commonly in the middle to higher range on this scale.

Interferential Findings

Association. The independent interval variable in this study is the GRCS score, a measurement of gender role conflict as described. The dependent interval variable in this study is this ATSPPH score, a measurement of respondent's attitudes towards seeking help. The research question for this study is: Does gender role conflict affect men's attitudes toward seeking help? The hypothesis for this research is: Men who reported more conflict about their gender role will report less favorable attitudes toward seeking professional help.

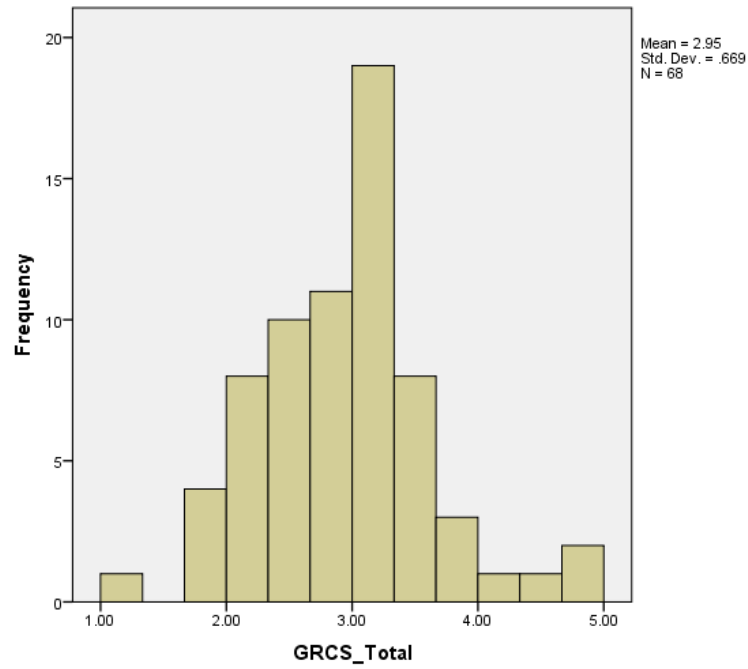


Figure 3. CENTRAL TENDENCY: GRCS

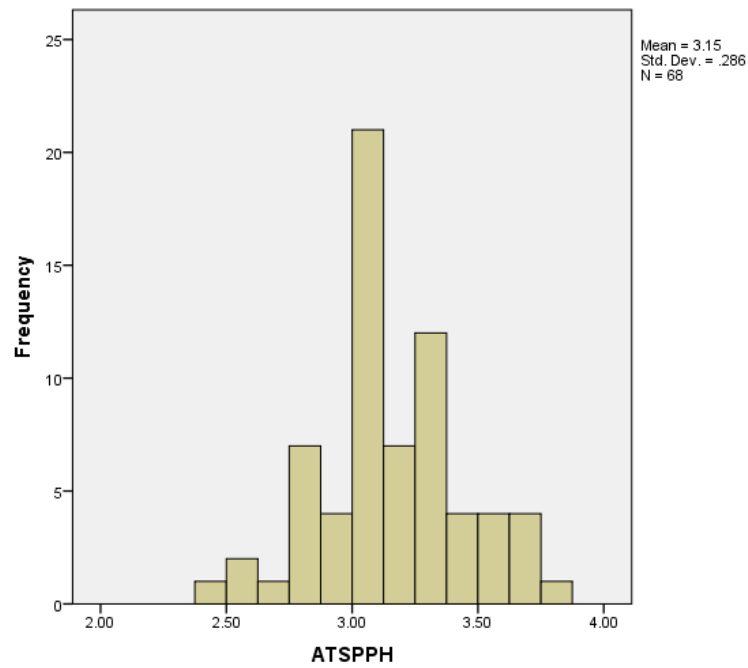


Figure 4. CENTRAL TENDENCY: ATSPPH

Table 4: INFERENTIAL STATISTICS for the relationship between GRCS and ATSPPH.

	ATSPPH	GRCS_Total	GRCS_A	GRCS_B	GRCS_C	GRCS_D
Pearson Correlation	1	.025	.165	.013	.047	-.117
ATSPPH Sig. (2-tailed)		.841	.179	.917	.703	.343
N	68	68	68	68	68	68
Pearson Correlation	.025	1	.730**	.816**	.741**	.784**
GRCS_Total Sig. (2-tailed)	.841		.000	.000	.000	.000
N	68	68	68	68	68	68
Pearson Correlation	.165	.730**	1	.452**	.285*	.582**
GRCS_A Sig. (2-tailed)	.179	.000		.000	.018	.000
N	68	68	68	68	68	68
Pearson Correlation	.013	.816**	.452**	1	.599**	.443**
GRCS_B Sig. (2-tailed)	.917	.000	.000		.000	.000
N	68	68	68	68	68	68
Pearson Correlation	.047	.741**	.285*	.599**	1	.361**
GRCS_C Sig. (2-tailed)	.703	.000	.018	.000		.002
N	68	68	68	68	68	68
Pearson Correlation	-.117	.784**	.582**	.443**	.361**	1
GRCS_D Sig. (2-tailed)	.343	.000	.000	.000	.002	
N	68	68	68	68	68	68

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

Table 4 and Figure 5 shows the inferential statistics of the relationship between the two interval variables GRCS_Total, and ATSPPH. The p-value is 0.841 for the correlation between the total GRCS and ATTSPH scores. Since the p-value is greater than 0.05 we fail to reject the null hypothesis. Therefore the data does not support the hypothesis that there is a significant relationship between the GRCS and ATTSPH scores in this population. Furthermore, the correlation between the GRCS_A score and the ATTSPH was 0.179. Since the p-value is greater than 0.05 we fail to reject the null hypothesis. The correlation between GRCS_B and the ATTSPH was 0.917. Since the p-value is greater than 0.05 we fail to reject the null hypothesis. The correlation between GRCS_C and ATTSPH was 0.703. Since the p-value is greater than 0.05 we fail to reject the null hypothesis. Finally, the correlation between GRCS_D and ATSPPH was 0.343. Since the p-value is greater than 0.05 we fail to reject the null hypothesis. Although not meeting statistical significance, there was a weak correlation between GRCS_A score and the ATSPPH score.

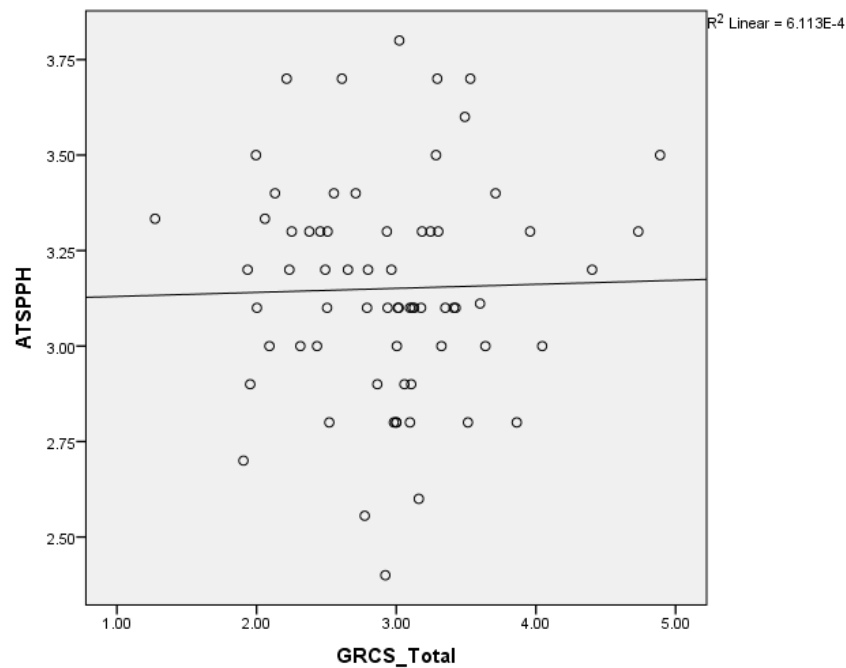


Figure 5. CORRELATION PLOT for the relationship between GRCS and ATSPPH.

Relationship. The first variable in this study measures participants' thoughts and feelings about their gender role behaviors. The variable in this study measures participants' attitudes towards seeking professional help. The research question for this study is: Does gender role conflict affect men's attitudes toward seeking help? The hypothesis for this research was: Men who report more conflict about their gender role will report less favorable attitudes toward seeking professional help.

Table 4 and Figure 5 show the inferential statistics of the relationship between the two variables, GRCS and ATSPPH. The calculated correlation ($r=.025$, $p=.841$) indicates no correlation. Since the p -value is greater than .05 we fail to reject the null hypothesis. Therefore, the results of the study do not support the hypothesis that men who report more traditional beliefs about their gender role will report less favorable attitudes toward seeking professional help. The scatter plot in Figure 5 shows no correlation.

Discussion

The purpose of this study was to explore how gender role conflict related to men's attitudes toward seeking professional psychological help. The formal hypothesis for this research was: Men who reported more conflict about their gender role will report less favorable attitudes toward seeking help. This was tested using a variety of statistical techniques.

The findings of this study did not support the hypothesis. It was predicted that gender role conflict would be associated with negative attitudes towards seeking help. However, all four aspects of the Gender Role Conflict Scale (success, power and competition; restrictive emotionality, restrictive affectionate behavior between men, and conflicts between work and leisure) and the overall score were not significantly related to men's attitudes toward seeking professional psychological help. This finding was surprising and not consistent with previous research.

Berger, Levant, Mcmillian, Kelleher, and Sellers (2005) found that gender role conflict has been linked to higher levels of psychological stress and lower help-seeking. Lane and Addis (2005) found that the GRCS aspect of success, power, and competition was significantly related to negative help-seeking attitudes. Rochlen, Land, and Wong (2004) reported that men with higher gender role conflict had less favorable views of face-to-face counseling. Several researchers have also found that men higher in gender role conflict report greater negative attitudes toward using counseling services (Berger, Levant, McMillan, Kelleher, & Sellers, 2005; Blazina & Watkins, 1996). Many other authors have found that men who are experiencing strain from their gender role, and therefore those who may be most in need of services, are also most likely to be at risk for underutilizing counseling (Good & Wood, 1995).

The populations tested in previous published studies were aimed at male college students for their convenience and predictive value (Good, Robertson, Fitzgerald, Stevens, & Bartels, (1996). Previous population studied differs from the population in this study. The youngest respondent in this study was 24 years old. Furthermore, the population

tested in this study was highly educated. People with more knowledge about mental illness tend to have more positive attitudes toward seeking psychological help than the general public (McCusker & Galupo, 2011). This study utilized Facebook, which differs from past published research. These factors may offer a possible explanation for the inconsistency with the existing literature of the finding of the present study.

Further, limitations of this study included a small sample size. While approximately 200 men were given the opportunity to participate in this study, only 68 males completed the survey. Therefore, those who participated were voluntary and self-selected. This may have limited generalizability because the responses may be characteristic of those willing to participate. Another concern for this study was that the sample was chosen via this researcher's male Facebook friends also limiting generalizability.

Potential bias may have been introduced by sampling from Facebook. In this study, there were considerable cultural limitations. The men in this study were Caucasian, between the ages of 24-75, and college educated. Studies have shown differences in men with regard to gender role conflict across culture (Vogel, Heimerdinger-Edwards, Hammer, & Hubbard, 2011). A sizable percentage of participants who responded to the survey generally had higher levels of education. One hypothesis is that men with higher gender role conflict may simply not participate. Their lack of participation could be explained by the sensitive nature of the survey questions.

The use of self-report surveys as the method of collecting data may also have limited the reliability and validity of the research. Responses may be vulnerable to error and bias. Surveys also make it impossible to distinguish between respondents who experience gender role conflict but do not want to disclose it. Social desirability may also be a factor in participants' responses or lack of participation. This researcher received several emails about concerns over the survey. Although not an official component of this study it was interesting to note that many participants commented after completing the survey that they felt discomfort with some of the questions and the disclosures required. The survey responses did not correlate to the concerned emails received. The quantitative method

used in the current study provided data to examine the variables of the study but did not allow a more in-depth examination or exploration of reasons for help-seeking behaviors or concerns. Further research should also include a qualitative methodology.

Conclusions and Implications

Although the present study did not find a relationship between gender role conflict and attitudes towards help seeking it is still important for mental health professionals to understand the impact of gender roles on men. Past research leaves little doubt that traditional helping services are underutilized by many men. It is also likely that a variety of masculinity ideologies, norms, and gender roles play a part in discouraging men's help seeking.

Men are mostly understood as generic human beings, rather than gendered beings (Kimmel, 2000). Research shows, that men's gender contributes to high statistics on substance abuse, crime, and inattentive parenting (O'Neil & Lujan, 2009). Underlying each of these social problems are expectations and rules, supported by society that expects boys and men to reject or avoid anything stereotypically feminine, to be tough and aggressive, suppress emotions (other than anger), and strive toward competition, success and power (O'Neil et al., 1986). Given the value placed on a strengths-based perspective in social work and its commitment to prevention and empowerment, it is also important to consider what resources men have that could be developed in efforts to address these challenges.

It is important for clinicians to understand men as a vital part of the multicultural competencies. The inclusion of men and issues related to masculinity in multicultural competency allows clinicians to understand male clients as multicultural persons (Liu, 2005). Men experience socialization in similar ways of women and persons of color. Society forces them into strict roles and behaviors for which there are consequences (Liu, 2005). If social workers and other professionals want to be able to effectively work with men in a culturally congruent manner, they must educate themselves on theoretical and research

literature and also receive clinical supervision for masculine-centered therapy. By becoming multi-culturally competent in therapy, men may seek out therapy more often (Liu, 2005).

The population of this research study was mostly highly educated, Caucasian men. There was no statistical significance related to gender role conflict and attitudes towards seeking help. And so gender role conflict may not need as much attention in this population in terms of how it affects help seeking. For this particular population it may be beneficial to find other influences why men may not be seeking help.

Future research studies could also include more diverse samples of men, and studies that use qualitative methodologies that allow for more in-depth exploration of help-seeking behaviors. Although gender role conflict was not found to affect attitudes towards seeking help in this population it is still vital for mental health practitioners to understand the various factors that may prevent men from seeking professional psychological services.

The lack of statistically significant findings for the relationship between the four aspects of GRC (success, power, and competition; restrictive emotionality; restrictive affectionate behavior between men; conflicts between work and leisure) and attitudes toward seeking professional psychological help among men suggest that these variables should be examined to further help-seeking behaviors. Future studies utilizing social media could reach a larger more diverse population from several states in different regions of the country which would provide more information and may produce different results.

When individuals are mentally healthy, society as a whole is healthier. By encouraging men to seek professional psychological help when needed, everyone will benefit from their ability to better cope with psychological stress and decrease behaviors and conditions associated with psychological stress.

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Appendix A: Explanation of Research

You are invited to participate in a research study of how male gender role conflict and traditional masculinity relates to attitudes towards seeking help. Requirements are that you be a male over the age of 18 years and with English reading proficiency to participate in this study.

Background Information The purpose of this study is to determine if there is an association between male gender role conflict, and attitudes toward seeking help.

The study is being conducted by: Jennifer Boisjolie under supervision of Kendra Garrett, LICSW, PH.D. from the University of St. Thomas Social Work Program.

Procedures If you agree to participate in this study click on the link and you will be taken to Qualtrics, an electronic survey program, to complete the demographics and the anonymous survey. You will be able to complete the survey in less than 20 minutes.

Confidentiality This researcher will assure confidentiality/anonymity of participants. No names will be asked for in the survey. The research study will be published in the University of St. Thomas Library. In the research study, this researcher will not include information that will make it possible to identify you in any way. This researcher will follow confidentiality guidelines by ensuring all data is permanently destroyed after analyzed.

Voluntary Nature of the Study Your participation in the study is voluntary and you are free to withdraw at any time during the process of completing the surveys

Risks and Benefits of being in the Study No inherent risks associated with participation in this study have been identified. The benefit result of this study will contribute to better understanding the relationship between gender role conflict, masculine ideology and attitudes toward seeking psychological help among men.

Contacts and Questions The researcher conducting this study is Jennifer Boisjolie. She can be reached by email at bois7889@stthomas.edu.