Factors Contributing to College Men's Help-seeking

William Caperton
Marquette University, william.caperton@marquette.edu
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Introduction

Until recent decades, popular conceptions of masculine traits have often been equated with mental wellness and health. Autonomy, independence, problem-solving and individual strength have all been described as typically “masculine”. However, recent research suggests that being male and possessing masculine traits is related to increased health concerns, psychological disorders, and related distress (Good, Sherrod, & Dillon, 2000; Hayes & Mahalik, 2000; Sabo, 2000; as cited in Rochlen, 2005). Whatever the pathways, men are significantly less likely than women to seek counseling for mental health concerns. Men's underutilization of counseling in comparison to women is a consistent finding in the help-seeking literature (Addis & Mahalik, 2003). However, major authors in the study of masculine mental wellness state that empirical data is needed to determine ways of improving men's willingness to seek help (Rochlen, 2005).

This study is focused on college men in particular, and the factors that may contribute to their decision to seek help for mental health concerns. Based on previous research on factors related to ethnic minority students decision to seek help from college counseling centers (Hayes, Youn, Castonguay, Locke, McAteavey, & Nordberg, 2011), this study sought to determine if the ratio of male counselors within a university counseling center affected male college students decision to pursue counseling. As masculinity can be seen as a unique cultural identity (Liu, 2005), it was postulated that similar factors affecting minority students may impinge on men's decisions to pursue counseling. Study design methods, results, and a discussion of limitations and future directions will follow.
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Model Development

The model for this study was driven by the recent development of the Center for Collegiate Mental Health (CCMH). This center, housed at Penn State University, collects data from over 140 college counseling centers throughout the United States on a variety of demographic and mental health related measures. They have recently begun to publish results of a number of studies examining mental health issues on college campuses. The vast network and robust sample provided by this data set provides a unique opportunity to examine variables in a more representative manner than has often been available in the past. A recent study examining factors contributing to ethnic minority student's decision to pursue counseling found a positive correlation between usage rates and ratio of similar-ethnicity counselor's within the counseling center (Hayes, et al., 2011). Given that strength of therapeutic alliance is the single best predictor or therapeutic outcome (Messer & Wampold, 2002), it seems possible that having a culturally similar counselor could contribute to deciding to seek services. Liu (2005), argues that facility with issues of masculinity can be considered a multicultural competency; it was thus theorized that there may be a positive correlation between representation of masculine counselors and percentage of men seeking counseling

Method

At this time, the data-set from CCMH was unavailable. Instead, the author utilized a convenience sample, collecting data from a single liberal arts college in the Midwestern United States. Employing a retrospective design, data from the last four years were
provided by the clinical director on counseling center professional staff make up by
gender, and number of clients seen broken down by gender. Additionally, enrollment data
by gender for the corresponding years was collected from the college's official website.
Chi-Square was performed to determine if there was a correlation between percentage of
male counselors and percentage of men from the total school population seeking
counseling services.

**Results**

In 2008, 2.3% of men utilized the counseling center, and 20% of the counselors
were male. In 2009, 2.3% of men utilized the counseling center, and 0% of the counselors
were male. In 2010, 2.5% of men utilized the counseling center, and 20% of the
counselors were male. In 2011, 1.7% of men utilized the counseling center, and 40% of
the counselors were male.

Pearson's Chi-Square analysis showed that 9 cells had an expected count of less
than 5, so an exact significance test was selected. Results indicated that male college
student utilization rates are not associated with the percentage of male counselors at the
center, $\chi^2(4, N = 8) = 10$, $p = .062$ (See Table 1)
Table 1

percentmaleclients * percentmalecounselors Crosstabulation

<table>
<thead>
<tr>
<th>percentmaleclients</th>
<th>00</th>
<th>20.00</th>
<th>40.00</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.70</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>2.30</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>2.50</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>2</td>
<td>4</td>
<td>2</td>
<td>8</td>
</tr>
</tbody>
</table>

Chi-Square Tests

<table>
<thead>
<tr>
<th></th>
<th>Value</th>
<th>df</th>
<th>Asymp. Sig. (2-sided)</th>
<th>Exact Sig. (2-sided)</th>
<th>Exact Sig. (1-sided)</th>
<th>Point Probability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Chi-Square</td>
<td>10.000a</td>
<td>4</td>
<td>.040</td>
<td>.052</td>
<td>.052</td>
<td>.052</td>
</tr>
<tr>
<td>Likelihood Ratio</td>
<td>11.090</td>
<td>4</td>
<td>.026</td>
<td>.086</td>
<td>.086</td>
<td>.086</td>
</tr>
<tr>
<td>Fisher's Exact Test</td>
<td>6.691</td>
<td>1</td>
<td>.086</td>
<td>.086</td>
<td>.086</td>
<td>.086</td>
</tr>
<tr>
<td>Linear-by-Linear Association</td>
<td>3.500b</td>
<td>1</td>
<td>.061</td>
<td>.071</td>
<td>.036</td>
<td>.014</td>
</tr>
<tr>
<td>N of Valid Cases</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. 9 cells (100.0%) have expected count less than 5. The minimum expected count is .50.
b. The standardized statistic is -1.871.

Conclusions

This study, analyzing a small sample from one liberal arts college in the Midwest, found no correlation between percentage of male counselors and male college students counseling utilization. However, several limitations should be noted. Chief among these is the small sample size utilized for this study; conclusions reached here are obviously not generalizable. Another limiting factor is the percentage of male counselors from this sample who were working as interns when data was collected. It is possible that their intern-status negatively impacted any potential propensity to increasing male student help seeking. It is also noted that this college has implemented a men’s development group.
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(M-PACT; Mentoring Men for Lives of Meaning and Making a Difference) which may have skewed the percentage of men seeking traditional therapy. Rochlen has noted that there are unique challenges when working with men, especially incongruence between culture of therapy and culture (rules) of masculinity, and that programs tailored to look less like traditional therapy and more like “problem solving” or coaching tend to attract more male clients (2005). Future research might examine the impact male development-oriented groups of this nature have on help-seeking and incidence of mental health concerns on campuses.

Future studies would benefit from examining more robust data sets in relation to factors impacting college men's decision to seek counseling. To that end, this author would like to perform future studies utilizing the data from the CCMH. This data set would provide further ability to perform more nuanced analysis of multiple factors related to help-seeking, including history of counseling, severity of presenting concern, types of typical presenting concerns, and average time spent in therapy, among others. Ideally, a clearer understanding of these factors will enable more college men to pursue and receive the help that they need.
References


