

# The Relationship between Conformity to Masculine Norms, Coping Strategies and Male Help-seeking Behaviour: Achieving Better Health Outcomes for Men.

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## Abstract

This study explored the relationship between conformity to masculine norms, coping strategies, and help-seeking behaviour in men. A convenience sample of 88 males aged between 18 to 70 completed measures of coping strategies used, conformity to masculine norms, and anticipated professional and personal help-seeking. The hypotheses that the use of self-help coping would be positively correlated to help-seeking behaviour, and that both of these factors would be negatively correlated with conformity to masculine norms, were supported. The hypothesis that the relationship between conformity to masculine norms and help-seeking behaviour would be mediated by coping strategy was also supported. It was concluded that there is a clear link between conformity to masculine norms, coping, and help-seeking behaviour. These findings have clear implications for the effective evidence-based promotion and practice of a range of healthcare services for males.

## Method

### Participants

Participants were a convenience sample of males between the ages of 18 and 70 years.

### Materials

All participants received a participant pack, containing a plain envelope, an explanatory statement (Appendix A), written instructions on how to complete the questionnaires, a biographical data questionnaire, and three scales: the Conformity to Masculine Norms Inventory, the Brief COPE, and the Help Seeking Behaviour Scale.

*Conformity to Masculine Norms Inventory (CMNI; Mahalik et al., 2003).* This measure is intended to assess participants' conformity to 11 traditional masculine norms (Mahalik et al., 2003). The CMNI consists of 94 items, each rated on a 4-point Likert scale (0 = *Strongly disagree*, 3 = *Strongly agree*).

*Brief COPE (Carver, 1997).* This measure is designed to assess how participants cope with stressful events. The Brief COPE consists of 28 items, each rated on a 4-point Likert scale (1 = *I haven't been doing this at all*, 4 = *I've been doing this a lot*).

*Help Seeking Behaviour Scale (HSBS; adapted from Lane & Addis, 2005).* This measure is designed to assess how often participants anticipate that they will seek help over the next year. The HSBS consists of 10 items rated on a 5-point Likert scale (1 = *Not at all*, 4 = *Weekly or more*) and 30 items rated on a 4-point Likert scale (1 = *Not at all helpful*, 4 = *Very helpful*).

### Procedure

Participants were recruited conveniently from range of the researchers' family and friends. Participation was voluntary, and without compensation. Each participant was requested to read and tear off the explanatory statement and instruction page before completing the questionnaire, which took 20 to 25 minutes. Participants returned completed questionnaires, sealed inside the envelope, to the researcher. All participant data remained anonymous. Return of the completed questionnaire was treated as informed consent to participate. In the event that completing these questionnaires may cause distress, contact details of two counseling and referral services were provided on the explanatory statement.

## Results

Of the 109 participants, 21 were excluded from analyses due to missing data. Item level analyses were therefore performed on a sample of 88 participants. Means, standard deviations and zero order Spearman's correlations are presented in Table 1.

There was a significant negative relationship between conformity to masculine norms and anticipated help-seeking behaviour,  $r_s = -.26, p < .05$ . Anticipated help-seeking behaviour was also positively correlated with scores on the Self Help,  $r_s = .39$ , and Avoidance,  $r_s = .25, p < .05$ , subscales of the Brief COPE.

The data were then analysed by hierarchical, stepwise multiple regression, using as regressors conformity to masculine norms, self-help, approach, accommodation, avoidance, self-punishment, and anticipated help-seeking behaviour. The assumptions of multiple regression were met. Conformity to masculine norms was entered in Step 1, and explained a significant amount of variance in help seeking behaviour, adjusted  $R_s^2 = .06, F(1,86) = 6.40, p < .05$ . In Step 2, the five coping variables were entered. Variables retained by the model were conformity to masculine norms and self-help. This model explained an increased amount of variance in anticipated help seeking behaviour, adjusted  $R_s^2 = .18, F(1,85) = 10.83, p < .001$ .

With other variables being constant, anticipated help-seeking behaviour was negatively related to conformity to masculine scores and positively related to self-help coping. Only the effect of self-help coping was significant,  $t(85) = 3.78, p < .05$ . Standardised and unstandardised regression coefficients for each step are presented in Table 2.

Table 1

Means, Standard Deviations and Zero-Order Correlations Between Conformity to Masculine Norms, Coping Strategies and Anticipated Help-Seeking Behaviour

	1	2	3	4	5	6	7
1. Conformity to Masculine Norms							
2. Self Help	*	-.24†	-.11	-.11	-.03	-.07	-.26†
3. Approach		*	.45†	.02	.09	-.09	
4. Accommodation			*	.12	.21†	.14	
5. Avoidance				*	.39†	.25†	
6. Self-punishment					*	-.06	
7. Anticipated Help-seeking						*	
M	1.25	2.09	3.06	2.70	1.40	1.88	1.63
SD	0.25	0.60	0.65	0.57	0.44	0.83	0.41

N = 88, † = significant at  $p < .05$

Table 2

Standardised and Unstandardised Multiple Regression Coefficients

	B	SE B	Δ
Step 1			
Constant	2.17	0.22	
Conformity to Masculine Norms	-0.43	0.17	-0.26*
Step 2			
Constant	1.42	0.28	
Conformity to Masculine Norms	-0.26	0.16	-0.16
Self Help	0.26	0.07	-0.38*

Note.  $R_s^2 = .07$  for Step 1,  $\Delta R_s^2 = .13$  for Step 2 ( $p < .001$ ). \*  $p < .05$

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## Discussion

The aim of the present research was to investigate the relationships between conformity to masculine norms, coping strategies, and help seeking behaviour in men.

The hypothesis that conformity to masculine norms would be negatively correlated with help-seeking behaviour was supported. This is consistent with previous findings (Addis & Mahalik, 2003; Lane & Addis, 2005), and supports current theory that men who subscribe to traditional male gender roles are less likely to seek help for problems. The hypotheses that self-help coping would be positively correlated with help-seeking behaviour and negatively correlated with conformity to masculine norms were supported, providing support for the conceptual overlap between the construct of self-help coping and help-seeking behaviour.

The hypothesis that the relationship between conformity to masculine norms and help-seeking behaviour would be mediated by coping strategy was also supported, providing support for the inclusion of coping variables when studying the relationship between conformity to masculine norms and help-seeking behaviour. Although conformity to masculine norms was confirmed as a significant predictor of help-seeking behaviour when entered into the model alone, only self-help coping remained a significant predictor of help-seeking behaviour when all variables were entered into the model. These findings also suggest that the five-factor model of coping provides a useful and relevant framework for the study of coping in relation to health, predicting health outcomes with more specificity than two-factor models (Zuckerman & Gagne, 2003).

The current study analyses overall conformity to masculine norms and help-seeking behaviour. However, the types of masculine norms to which men subscribe and characteristics of potential helpers may affect how likely individual men are to seek help (Lane & Addis, 2005; Mahalik et al., 2003). Future research may benefit from an analysis addressing the individual subscales of the CMNI and the HSBS in relation to the five coping factors.

Nonetheless, the present findings clearly link coping strategies to conformity to masculine norms and help-seeking behaviour, with considerable implications for healthcare policy and practice. In particular, research has indicated that the coping strategies learnt during childhood and adolescence influence adult coping styles, and that the teaching of adaptive coping strategies to adolescents is more effective when these are differentiated by gender (Hess & Richards, 1999). By furthering our understanding of coping strategies, we may thus be better positioned to assist young males in developing strategies that are most adaptive in the context of the masculine norms they experience and construct during their development, and increase their likelihood of seeking help for problems throughout their lives.

A large body of research suggests that men are less likely than women to seek help for a diverse range of health issues (Galdas, Cheater & Marshall, 2005). This reluctance to seek help has been associated with poorer health outcomes for men when compared to women (Addis & Mahalik, 2003; Courtenay, 2000). However, the sex differences approach utilised in these studies fails to provide an explanation for variability in help-seeking behaviour between men (Galdas, Cheater & Marshall, 2005). A stronger understanding of his inter-individual variability is likely to assist researchers, policy-makers and practitioners in developing and implementing effective prevention and health intervention models for men (Addis & Mahalik, 2003), and a growing body of gender-specific research has focussed on factors that may influence male help-seeking behaviour (Galdas, Cheater & Marshall, 2005). One of the most widely-researched of these is conformity to masculine norms.

A number of researchers have pointed to the existence of socially constructed masculine gender role norms, which proscribe a 'traditional' male gender role associated with a variety of characteristics (Addis & Mahalik, 2003; Lane & Addis, 2005). A number of studies have found that conformity to masculine norms is negatively correlated with help-seeking behaviour in men (Lane & Addis, 2005). However, this may be mediated by further variables (Addis & Mahalik, 2003). One such potential mediator is the use of coping strategies, which have been found to influence the relationship between gender and health (Wilson, Pritchard & Revalée, 2005). To date, the relationship between coping style, conformity to masculine norms and men's help-seeking has not been explored.

The most widely-used model of coping strategies is the two-factor model (Evans, Hawton, & Rodham, 2004; Liu & Iwamoto, 2007). However, it has been suggested that these may not be specific enough to predict a range of health outcomes (Liu & Iwamoto, 2007). Zuckerman and Gagne (2003) developed a five-factor model of coping, allowing for greater conceptual depth in the analysis of coping strategies, conformity to masculine norms and help seeking behaviour.

The first of these factors, self-help, includes support-seeking (Zuckerman & Gagne, 2003), and has considerable theoretical overlap with the construct of help-seeking behaviour. As such, there is likely to be a positive relationship between the use of self-help coping strategies and help-seeking behaviour. Conversely, the use of self-help coping strategies conflicts with many aspects of the construct of conformity to masculine norms (Mahalik et al., 2003), suggesting a negative relationship between self-help coping and conformity to masculine norms.

The aim of the present study was to build upon previous research investigating the relationship between conformity to masculine norms and help-seeking behaviour, by exploring how this relationship varies as a function of the interaction between conformity to masculine norms and coping style. On the basis of previous research, it was hypothesised that there would be a significant negative correlation between conformity to masculine norms scores and anticipated help-seeking behaviour scores. On the basis of the conceptual overlap between self-help coping and help-seeking behaviour, it was also hypothesised that there would be a significant negative relationship between self-help coping and conformity to masculine norms, and a significant positive correlation between self-help coping and help-seeking behaviour. Given the complex inter-relationships between these variables, it was further hypothesised that the relationship between conformity to masculine norms and help-seeking behaviour would be mediated by coping strategy.

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