

Men's greater reluctance to seek mental health care

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Sara Blom. Credit: University of Gothenburg

Many men with mental health problems do not seek treatment for their symptoms. Both knowledge of and attitudes toward mental ill health play their part, as does the men's educational level. These findings emerge

from a thesis from the University of Gothenburg.

Previous research has indicated that some 10% of all men in [high-income countries](#) are affected by depression or anxiety disorder at some stage in their lives. The new thesis by Sara Blom, Ph.D. at Sahlgrenska Academy, University of Gothenburg, shows that men encounter obstacles that make it harder for them than for women to get the care they need.

Blom's thesis is based on questionnaire surveys among population samples in two Swedish regions, Västra Götaland and Stockholm, in 2008, 2014, and 2019. In total, there were 8,697 respondents, both male and female. Some of her findings:

- Of the men who had symptoms of depression, 40% felt they had no need of mental health care (against 25% of the women).
- Even if they acknowledged their need of mental health care, the men refrained from seeking care more often than the women (36% and 26% respectively).
- After seeking mental health care, the men were also somewhat more dissatisfied with the care they had received (29% thought it had not been what they needed, against 26% of the women).

Multilevel barriers

Blom's thesis thus shows that, to a greater extent than women, men are impeded by obstacles at various stages in the care-seeking process.

"On several levels, men seem to face impediments to a higher degree than women. First, they realize less often that they need mental health care. Second, even when they know they need it, they seek it to a lesser extent. And third, they more often think afterwards that they haven't received the care they needed. Since men face obstacles every step of

the way in the care-seeking process, many of them fall by the wayside and do not get treatment they need," Blom says.

Knowledge and attitudes

The thesis points not only to gender differences, but to differences among the male respondents, with certain subgroups facing especially substantial barriers. Those who had not studied in [higher education](#) and those with a low level of knowledge about mental ill health were found to be the most reluctant to seek care.

The men also had more negative attitudes than the women toward depression in others. For instance, more men than women stated that they would not employ a person who they knew had been depressed. The men were also more skeptical than the women about [sick leave](#) for someone with symptoms of depression, partly because of the men's more negative attitudes.

Unequal consequences

Under the Swedish Health and Medical Services Act, care must be provided according to need, but the thesis shows that many men do not seek mental health care although they need it.

"This is problematic, since it could lead to more severe consequences of mental ill health in the groups that don't seek care, such as [alcohol problems](#) and suicide," Blom says.

Her thesis indicates that the path to mental health care for men with mental ill health could be facilitated with greater knowledge and a decrease in negative attitudes.

"The fact that many don't perceive their own mental health care needs,

despite their symptoms, indicates that the care services should work on an outreach basis and to build trust. Knowledge of how barriers to care interact with masculinity norms—among individuals, in the healthcare services and in society at large—is also required. A combination of wide-ranging efforts at population level and more targeted measures aimed at men with relatively low educational attainment, for example, is probably necessary."

More information: Sara Blom, Unmet need for mental healthcare among men Sweden: Gendered pathways to care.

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Provided by University of Gothenburg

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