

Canadian Men's Perspectives of Depression: Awareness and Intention to Seek Help

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Abstract

It is often presumed that men are generally unaware of depression being a serious health issue and are unlikely to seek professional help if they became depressed. To test this presumption, Canadian men's ($N = 452$) perspectives regarding awareness of depression and likelihood of seeking help for depression were solicited. While 78.7% of respondents recognized depression as a significant health issue for men, only 58.5% felt fairly or very well informed about depression. In terms of help-seeking intentions, 82.6% of respondents indicated that they probably or definitely would seek professional help if depressed. Contrary to popular depictions, the findings suggest that Canadian men are indeed aware of the seriousness of depression as a health issue, yet many are poorly informed about it. Furthermore, most men are well intentioned when it comes to seeking help if they became depressed. The findings imply that greater efforts are required to improve men's understanding of depression (symptoms, triggers, approaches to care), which may help translate intentions to seek help into concrete action.

Keywords

depression, mental health, men's health interventions

Introduction

The discordant relationship between men's low rates of diagnosed depression and high rates of suicide (Caryn, Janz, & Ali, 2013), coupled with men's low help-seeking rates (Galdas, Cheater, & Marshall, 2005), are often taken as evidence of men's lack of awareness of depression as a serious health issue and reluctance to discuss the topic of depression with others. Clinicians assert this perception (Smith, 2014), and commentators report it in the popular media (Kennard, 2012). Eventually, there seems little need to question it, because "everyone" knows it to be so. The data to substantiate such perceptions are lacking. A national survey on the topic of depression and suicide among men, examining issues related to stigma (Oliffe, Ogrodniczuk, et al., 2016) and mental health literacy (Oliffe, Hannan-Leith, et al., 2016), provided an opportunity to ask men directly about their perceptions of depression as an important health topic, how well informed they felt about depression, and the likelihood of them speaking with someone about depression.

Methods

Following university ethics approval, respondents were sourced from an online survey provider (Research Now

Canada) and screened to ensure they met survey eligibility requirements (were 18 years and older, had online access, and were able to read English). The survey topic was not disclosed in the initial survey invitation, and only potential respondents who went to the survey introduction page were advised that men's depression and suicide were the focus. Of the 2108 people who went to the introduction page, a total of 311 (14.8%) answered "no" to the opt in, and 1797 answered "yes" to opt in (and this was further reduced to 901 by post-opt-in screening/quotas etc.). Specifically, the sample was stratified and weights were employed to balance demographics, ensuring that the sample's composition reflected the general Canadian population (as per sex, age, and region of country) as determined by census data. Some potential participants were turned away based on geographic location, sex, and age if specific quotas had already been filled. Respondents

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Table 1. Responses to Survey Items.

| In your opinion, how significant are each of the following health issues in terms of their impact on Canadian men? (N = 452) | | | | | |
|--|--------------------|----------------------|------------------------|------------------------|--------------------|
| | Very significant | Fairly significant | Not very significant | Not at all significant | No opinion |
| Depression | 37.1 | 41.6 | 15.5 | 2.6 | 3.2 |
| How informed do you feel about the following men's health issues? (N = 452) | | | | | |
| | Very well informed | Fairly well informed | Not very well informed | Not at all informed | |
| Depression | 17.8 | 40.7 | 36.9 | 4.6 | |
| When thinking about men's mental health, how likely is it that you would: (N = 452) | | | | | |
| | Extremely likely | Somewhat likely | Not sure | Somewhat unlikely | Extremely unlikely |
| Be able to talk with a partner/spouse about men's depression | 21.5 | 42.4 | 24.5 | 8.6 | 3.0 |
| Be able to talk with a family member about men's depression | 17.5 | 42.4 | 24.7 | 10.7 | 4.6 |
| Be able to talk with a close friend about men's depression | 18.7 | 40.9 | 29.2 | 8.0 | 3.2 |
| How likely would you be to seek out professional help if you were experiencing serious emotional problems? (N = 451) | | | | | |
| | Definitely would | Probably would | Probably would not | Definitely would not | |
| | 32.7 | 49.9 | 16.5 | 0.9 | |

Note. All values are in percentage.

received an honorarium, either Air Miles or Research Now points, which could later be exchanged for various rewards. While sampling error cannot be estimated for nonprobability samples such as the current sample, a traditional unweighted probability sample of comparable size would have produced results considered accurate to within plus or minus 4.6 percentage points, 19 times out of 20.

Results

A total of 452 English-speaking Canadian adult males completed the survey. Respondents ranged in age from 18 to 83 years (mean = 45.61 years) and most were employed (70.6%). Almost two thirds (63.2%) of respondents were living with a partner, and over one fourth (28.9%) had children living at home. Most (81.9%) were educated beyond high school, and the majority (80.3%) were born in Canada. One fifth (20.4%) of respondents identified as belonging to a distinct ethnic or cultural group. Almost one fourth (23.1%) of men reported a history of depression.

Slightly more than three fourths (78.7%) of respondents indicated that they perceived depression to have a fairly significant or very significant impact on Canadian men, suggesting that most men regard depression to be a

serious health issue (Table 1). Only 58.5% of the respondents felt fairly or very well informed about depression, revealing that knowledge about depression itself is lacking among a considerable proportion of Canadian men. Regarding discussion of depression with others, 63.9% of respondents indicated that they would be somewhat or extremely likely to talk to their partner/spouse (Table 1). Similar proportions of respondents were somewhat or extremely likely to talk to a family member (60.0%) or close friend (59.7%) about depression. Finally, most respondents (82.6%) indicated that they probably or definitely would seek professional help.

Discussion

The findings of this secondary analysis of national survey data suggest that a significant proportion of Canadian men recognize depression as a serious health concern among men, challenging prevailing wisdom that most men lack awareness of depression being a major health problem (Canadian Mental Health Association, 2007). Despite recognizing the seriousness of depression, just over 40% of men felt that they were not well informed about the illness. About 40% of men reported that they were not sure, or unlikely, to talk to someone close to them about depression; yet slightly more than 80% of

respondents indicated that they would be reasonably likely to seek professional help for depression. These findings imply that many men are reluctant to disclose pain and/or vulnerability to those closest to them, but may do so with a health professional. Notable is the discordance between the finding that a majority of men cite intentions to seek help should they need it and reports of low mental health service utilization among men (Galdas et al., 2005). Evident are disconnects between intentions and actions when it comes to seeking professional help for depression among Canadian men.

Men are not as unaware about depression or reluctant to discuss it with others as is often suggested in the popular media, yet greater efforts are required to better educate men about this disabling illness, and how to avail themselves of effectual health services. The implications of these findings are that targeted public health initiatives are required to improve men's understanding of depression (symptoms, triggers, approaches to care), which may help translate men's strong intentions to seek help into concrete action should the need arise.

Limitations of the study include the use of survey items developed for the purpose of this study, and thus lacking previous empirical testing. Furthermore, there is a possibility that respondents may have been more interested in mental health compared with the general population in deciding to complete the survey. Additionally, the study did not inquire about actual help-seeking behaviors. Nevertheless, reporting these findings in a Canadian context provides much needed locale and sex specific insights about men's awareness of depression and intentions of seeking help should they become depressed.

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