Gender Differences in Parental Help Seeking Behaviors

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Abstract

Background: There is an increasing amount of research that suggests there are gender differences in help-seeking behaviors. Results often indicate that males tend to be more reluctant in seeking help than women.

Aims: To find if there are gender differences in parents seeking help for children with mental health needs.

Method: Interview protocol was developed and semi-structured interviews were conducted by phone or in person. A pre-developed codebook was used for data analysis.
The Literature

Previous Literature:
• Women are more likely to report mental health problems.
• Men’s help seeking behaviors are often influenced by societal gender roles.
• Mothers perceived the problem as more severe than fathers.
• Mothers are often more involved with children’s mental health problems than fathers.
• Girls tend to seek help from friends or a non-parent adult.
• Boys tend to solve problems themselves.
• Boys are more affected by stigma.

Areas where there were no differences:
• Parents tended to seek informal help (friend or family) more than professional help.
• Parents were most likely to contact multiple agencies in order to address different problems or to receive multiple types of treatment for one problem.

Study Aims

We wanted to know:

• What are the differences in help-seeking behaviors in mothers and fathers of children with mental health needs?

• What are the differences in recognizing that there is a problem?

• What are the differences what types of services parents utilize to seek help?

• How does a child’s gender and parent’s gender influence help seeking behaviors?
Procedures

• Sampling Process:
  • Participants from Success 4 Kids & Families and The Crisis Center of Tampa Bay.

• Developing Protocol:
  • An interview protocol was developed based on study aims and previous literature on gender differences in help seeking behavior.
  • Interview protocol included client confidentiality and protection guidelines.
  • Approval from USF IRB # 00011589

• Data Collection:
  • Data was collected through semi-structured interviews conducted with participants by phone or in person.

Participants

• Participation was open to any parent (mother or father) who is currently seeking or have sought help in the past for a child with a problem behavior or mental health needs.

• Participants: N=8

• Participants were parents currently receiving case management services from two local agencies, Success 4 Kids & Families and The Crisis Center of Tampa Bay.
Data Analysis

• Measurements:
  
  • Codebook was developed prior to conducting interviews, based on study aims and interview protocol.
  
  • Codebook was used for data analysis to find major themes in the data.
  
  • Inter-rater reliability reached an optimal 76%.

Demographics

• 12.5% Hispanic
• 75% Caucasian
• 62.5% Married
• 25% Divorced and 12.5% Widowed
• Mean Age: 44.5 years
• Highest level of Education: Masters Degree
• Lowest level of Education: 9th Grade
Theme: Signs Noticed

Both the mothers and fathers reported noticing behavioral signs of a problem more than emotional signs of a problem.

– “We first noticed she was really active.”- quote from a mother

– “At night she didn’t want to go to sleep at bedtime and was screaming like someone was beating her. Throwing temper tantrums.”- quote from a father

Theme: Parental Action

Parents reported both taking action and not taking action in response to signs of a problem.

– “We just tossed it off as being a typical 2/3 [year old]. Kindergarten was hard to hurdle.”- quote from a mother

– “First we went to the pastor and talked to him.”- quote from a father
Theme: Seeking Support

The fathers reported initially seeking support from their spouse, while mothers commonly reported initially seeking support from their mothers.

– “Umm, before the therapist, probably my mom.”- quote from a mother

– “I made statements to my wife about it all the time.”- quote from a father

– “We sat down and talked together.”- quote from a father

Theme: Parental Reaction

Mothers reported both negative (frustration and strain) and positive reactions to their child’s mental health needs. Fathers reported only a positive reaction to their child’s mental health needs.

– “I know it’s an illness, I take it very seriously…I felt very sad.”- quote from a mother

– “My response was, I was happy [be]cause she was getting help she needed.”- quote from a father
Theme: Knowledge and Barriers

Fathers reported having no knowledge of available services. Mothers reported having a range from zero knowledge to high knowledge. Access and Finances were common barriers to services reported by both fathers and mothers.

- “I knew [a] therapist and psychiatrist were there.”- quote from a mother

- “Getting the six year old help was very difficult, he was five at the time, it was a huge battle- CPS was a huge barrier.”- quote from a mother

- “Biggest issue was money.”- quote from a father

Theme: Fears

Fathers reported no fears to seeking help, while mothers reported fear of stigma and possible consequences of that the problem would worsen.

- “None, if you need help get it.”- quote from a father

- “Fears it would be a waste of my time... Even though I told police, I was still scared it would get turned on me.”- quote from a mother
Theme: Influence of Parent’s Gender

The results regarding whether parental gender influenced help seeking behaviors indicated similar results of previous literature.

• Mothers sought support from friends, family, and other parents, while males report seeking informal support from their spouse.

• Fathers reported often relying on the child’s mother to seek services for their child with mental health needs.

• While parents predominately sought help, mothers took action when noticing signs of a problem while fathers took time to gather facts.

• Mothers were also more likely to notice the problem as a mental health need and not a behavioral issue.

Participant Quotes

“Just a mother’s instinct, I could feel something was wrong. Dad’s are just like, ‘No, she’s OK.’” - quote from a mother

“To sit back and let my wife take care of it. Women know more than guys. I followed my wife [be]cause she can take care of my kid better than I can.” - quote from a father

“In the beginning it was hard for my husband to come to the conclusion that there was a problem. I guess you could actually say there was denial. I feel that the maternal instinct is different. The nurturing role compels you and drives you faster.” - quote from a mother

“I wanted to find more information first before we committed down a path. I wanted an outside perspective. My wife was more emotionally driven with her decisions.” - quote from a father
Theme: Influence of Child’s Gender

Both Mothers and Fathers commonly reported that their child’s gender had no influence in the way they sought help. Parents would have sought the same services if their child was the opposite gender.

- “I would have done the same thing. I love my kid and want her to have a good life.”- a quote from a father

- “Hard to say. Boys are always more rowdy than girls. That’s kind of hard. If it was a boy we would think it was normal.”- quote from a mother

Theme: Child’s reaction

Responses for the child’s reaction to being treated for mental health needs, children were willing, reluctant, and defiant. Mothers and Fathers commonly reported that their child’s reluctance was largely due to the gender of the therapist.

- “She hates male therapist[s]. It will clam her up.”- quote from a mother

- “The 15 year old holds back, pushes back a lot, sometimes gives me a hard time about going, after he goes he is often very angry.”- quote form a mother

- “He was mad, He’s still mad. He feels labeled I guess.”- quote from a father
Theme: Responses from Others

Fathers reported a positive (understanding and supportive) reaction from others regarding their child’s mental illness. Mothers reported both negative and positive reactions from others regarding their child’s mental illness.

– “More or less like ‘don’t do it, don’t do it, she’s okay.’” - quote from a mother

– “They thought it was a good choice, don’t be ashamed, [I was] doing the right thing.” - quote from a mother

– “Other people were glad like I was, that she would be able to have a normal life.” - quote from a father

Barriers

Parents reported some barriers to seeking help such as, financial barriers, limited access and low knowledge of services available supports.

– “My biggest barrier is certain teachers. He has been really lucky to have certain teachers but some aren’t all educated on his disability. You have to be proactive.” - quote from a mother

– “I remember I got on the phone and I said, I am not going to eat or anything until I get help.” - quote from a mother

– “They didn’t teach my anything. I had to talk to other people and parents and they would tell me what to say and where to look. I fought a battle until S4kids.” - quote from a mother
Stigma

Parent’s reported that others responded to their child’s illness as non-understanding or stigmatizing the child.

– “Our initial fear was that it would go into his school chart and that he would be permanently labeled.” – quote from a mother

– “Some people I could hear their comments, like it’s so easy to control their behavior. They aren’t the ones going through it.” - quote from a mother

Conclusions

In General...

1. Behavioral and emotional problems were among the most common signs noticed by parents regardless of gender.

2. In response to the signs, parents chose to seek help more predominately than not.

3. Mothers tended to have a mixture of responses to their child’s mental health needs while fathers had a predominately positive reaction.

4. The child's gender did not appear to influence the parent's help seeking behaviors. However, language, ethnicity, and the therapist's gender were reported to have an impact in the decision making process.
Conclusions

5. Parents reported a range of low to no knowledge of available services.

6. Mothers believed their gender had a positive influence on how and when they sought help for their children.

7. Fathers were reluctant, took time to gather facts, and often relied on the child’s mother to seek services.

Limitations

• Small Participation

• Unrepresented Race/ Ethnicity in the Participants

• Under Represented Gender in Participants

• Time Constraints

• Participant sample from one from local region
Implications for Research and Policy

- Larger sample
- More males
- More service providers
- More racially/ethnically diverse sample
- Future research on parent’s attitudes regarding stigmatization of their child by others
- Policies to inform parents of services available
- Policies to inform teachers about collaborative efforts in addressing mental health needs

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References