

# Effects of Gender and Sex Role Orientation on Help-Seeking Attitudes

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This study investigated the effects of gender and sex role orientation (masculinity and femininity) on attitudes toward seeking professional psychological help in a sample of 163 student trainee teachers (52 males and 111 females) in Singapore. The mean age of students was 25.39 years ( $SD = 3.80$ ). ANOVAs revealed statistically significant main effects for gender and femininity on attitudes toward help-seeking. Specifically, females were reported to have more positive overall attitudes toward professional help-seeking and were more willing to recognize a personal need for professional help compared to males. Femininity significantly influenced students' level of stigma tolerance. These findings suggest that both gender and sex role orientation play an independent role in influencing help-seeking attitudes. In addition, these variables appear to have a differential impact on different aspects of help-seeking.

Research has consistently shown that members of non-Caucasian ethnic groups underutilize professional psychological help services (Leong, 1986; Sue, 1977; Yamamoto, 1978). Specifically, while Asian Americans and Asians experience psychological and social problems, they continue to underutilize formal sources of help, preferring to use informal channels instead (Atkinson, Lowe, & Matthews, 1995; Leong, 1986; Tracy, Leong, & Glidden, 1986; Yeh, 2002). In fact, Sue (1994) argued that it is a myth to consider Asians as a group who experience few adjustment difficulties. For example, in Chang and Kuo's (1984) survey, only 3.8% of Taiwanese undergraduate students indicated that they had sought formal psychological help when they encountered mental health problems. Similarly, in another study, only 2.17% of Taiwanese undergraduates reported that they would initiate formal help-seeking from the university counseling center only if they were to suffer from severe psychological problems and when they have exhausted all informal helping resources (Cherng, 1989).

Researchers have sought to explain Asians' underutilization of professional psychological services despite their obvious need for professional help. Three major reasons have been postulated: (1) lack of trust in helping professionals and their services (Nu, 1987; Pan, 1996); (2) lack of knowledge about the availability of services (Leong, 1986; Morrissey, 1997); and the stigma associated with formal help-seeking (Cherng, 1988; Hsiao, 1992; Leong, 1986; Mau & Jepsen, 1988). For example, Cherng (1988)

found that Taiwanese undergraduates had a tendency to wait until problems escalated out of control before initiating the process of formal help-seeking. Furthermore, because such a strong social stigma is attached to seeking professional help, many Taiwanese would prefer to obtain help from their social support network such as friends, parents, or siblings (Lin, 1998). There is a dearth of peer-reviewed published research on help seeking attitudes and behavior using Asian samples (Fukuhara, 1986; Yeh, 2002).

Fischer and Turner's (1970) research on help-seeking behavior in the late 1960s and early 1970s resulted in the development and validation of the Attitudes Toward Seeking Professional Psychological Help (ATSPPH) scale. The ATSPPH scale has subsequently become one of the most widely used instruments for measuring attitudes toward professional help-seeking. Fischer and Turner (1970) discovered strong gender differences in help-seeking, with females having more positive attitudes toward professional help-seeking. Gender differences in help-seeking is one of the most consistent findings in the literature. Komiya, Good, and Sherrod (2000) found American female college students more willing to seek professional help compared to their male counterparts. Johnson (2001) also found gender to significantly influence help-seeking attitudes with females being more likely to have positive attitudes toward help-seeking.

Gender differences in help-seeking attitudes have also been replicated across national boundaries and ethnic groups. Females were significantly more likely than were males to have positive attitudes toward seeking professional psychological help and this was found for white Americans (Leong & Zachar, 1999), Chinese Americans (Tata & Leong, 1994), African Americans (Neighbors & Howard, 1987), Taiwanese (Yeh, 2002), Jordanians (Al-Samadi, 1994), and Kuwaitis (Soliman, 1993). In addition, Garland and Zigler (1994) found that the gender differences observed among adults can also be shown to exist for children and adolescents between the ages of 10 and 19. Likewise, Rickwood and Braithwaite (1994) found similar results for adolescents in Australia. The same pattern of findings has also been shown for white American and African American elderly people (Husaini, Moore, & Cain, 1994).

In addition to using the ATSPPH total score as an indication of attitudes toward help-seeking, some researchers have used the subscale scores as well. Leong and Zachar (1999) found gender to be a significant predictor of all ATSPPH total and subscales except stigma tolerance. Females had more positive attitudes toward help-seeking overall, were more willing to recognize the need for psychological help, were more open about their problems, and had more confidence in the mental health practitioner. However, gender bore no significant relationship to stigma tolerance. In another study, Johnson (2001) found gender to significantly predict overall help-seeking scores as well as scores on the recognition of need for psychological help and interpersonal openness. Specifically, females were found to be more willing to recognize the need for professional help and more willing to be open regarding personal problems or difficulties (Johnson, 2001).

While the relationship between gender and help-seeking attitudes has been extensively investigated, the influence of sex role orientation on help-seeking attitudes has yet to be directly examined using Asian samples. Bem (1974, 1979) originally formulated the construct of psychological androgyny and argued that masculinity and femininity represented independent clusters of socially desirable instrumental and expressive

traits, and the individual who possessed comparable levels of both masculine and feminine qualities was perceived as relatively advantaged in comparison with sex-typed individuals in terms of flexibility and psychological well-being. One reason androgyny research continues to be controversial is due to the psychometric criticisms of the Bem Sex Role Inventory (BSRI) (see reviews by Cook, 1987; Lorenzo-Cioldi, 1996; Taylor & Hall, 1982). Ward (2000) constructed the Singapore Androgyny Inventory (SAI), a culturally appropriate measure of masculinity and femininity, based on Bem's (1974) procedure, taking into consideration the criticisms of the BSRI (e.g., the relative desirability of the masculinity and femininity items), in an attempt to extend research in the area of psychological androgyny.

Very few empirical studies to date have examined the relationship between sex role orientation and help-seeking attitudes. A literature search in major databases such as PsychINFO, Web of Science, EBSCOhost yielded only two studies (Fischer & Turner, 1970; Johnson, 2001) that directly examined the link between sex role orientation and help seeking for both males and females. A cognate study (Sipps & Janeczek, 1986) of expectancies for counselors in relation to sex role orientation was also found. Most of the other empirical studies reviewed (e.g., Addis & Mahalik, 2003; Good, Dell, & Mintz, 1989; Good & Wood, 2001; Mahalik, Good, & Englar-Carlson, 2003) focused solely on men's help-seeking attitudes which involved investigating primarily masculinity and traditional masculine gender-role socialization and their impact on men's attitudes toward professional help-seeking.

Johnson (2001) used the BSRI and ATSPPH scales to examine the effects of sex role orientation on help seeking in college students. He found femininity to be associated with confidence in professionals' abilities to help with psychological problems. As was found in Sipps and Janeczek's (1986) study, femininity significantly predicted participants' attitudes about psychological help. Sipps and Janeczek (1986) concluded that the differences in counseling expectations typically found between genders in the literature may actually be due to femininity rather than to gender. About three decades ago, Fischer and Turner (1970) found masculinity to be unrelated to ATSPPH scores for both males and females. However, Fischer and Turner (1970) used a unidimensional masculinity-femininity scale obtained through personal contact with another researcher, Elmer L. Struening in 1969. Unidimensionality of the masculinity-femininity construct implies that a person has to be either masculine or feminine but not both. The use of this unidimensional masculinity-femininity scale predates Bem's (1974, 1979) BSRI and the concept of masculinity and femininity as independent and orthogonal clusters of traits; as well as Ward's (2000) SAI which was a subsequent refinement of the BSRI appropriate for use in Asian settings. It is plausible that early conceptualization of masculinity and femininity as bipolar ends of a single continuum could obscure important results pertaining to sex role orientation and help-seeking attitudes.

Taken together, it appears that both gender and sex role orientation influence attitudes toward professional help-seeking. While there is ample research on the influence of gender on help-seeking attitudes, empirical research on the influence of sex role orientation on help-seeking has been limited and inconclusive. There is an urgent need to investigate directly the effects of gender and sex role orientation in the same study

among Asians. Based on the literature reviewed, there is limited published research in this area using Asian samples. A better understanding of Asian's attitudes toward professional help-seeking could provide the crucial first step in addressing various barriers to help-seeking among Asians and for the subsequent development and design of effective counseling outreach programs which are acceptable and cater to the needs of the Asian community.

The purpose of the present study was to examine the effects of gender and sex role orientation on attitudes toward professional help-seeking. Based on the robust association between gender and help-seeking in the literature, we hypothesized that females will have more positive attitudes toward professional help-seeking compared to males. Because of the limited research on the subscales of the ATSPPH and the influence of sex role orientation on help-seeking, no other specific hypotheses were formulated.

## METHOD

### *Participants*

A sample of 163 student trainee teachers (52 males and 111 females) in Singapore participated in the study. The mean age of the participants was 25.39 years ( $SD = 3.80$ ). Self-reported ethnic identification for the sample was as follows: 80.4% of the participants were Chinese, 4.9% were Indian, 10.4% were Malay, and 4.3% endorsed Others (which includes all other ethnic groups not listed). Of the 163 students, 60.8% were university graduates completing a postgraduate diploma in Education, 37.4% were either completing their Bachelor's degree in Education or a diploma in Education, and 1.8% did not provide this information.

### *Consent and Procedures*

The purpose of the study was explained to the students and consent to participate in the study was obtained from all participants involved. Participation was strictly voluntary and students' responses were kept anonymous and confidential. Participants were also informed that they could refuse or discontinue participation at any time. All students voluntarily participated in the study. All questionnaires were administered in English in an organized classroom setting. No translation was needed as English is the medium of instruction for all schools and universities in Singapore.

### *Measures*

*Singapore Androgyny Inventory (SAI)*. The 45-item SAI (Ward, 2000) consists of 15 masculine items, 15 feminine items, and 15 gender-neutral items. The 15 gender-neutral items served as "fillers" to disguise the nature of the inventory as only the masculine and feminine subscales were required for subsequent analyses. A total score for masculinity and a total score for femininity can be calculated. Participants were asked to indicate the accuracy of the trait description on a 7-point Likert scale from 1 (*Never or*

almost never true) to 7 (Always or almost always true). The SAI's masculine and feminine subscales were found to have good internal consistency with estimates when used with undergraduate samples from Singapore (Ang & Ward, 1994; Ward, 2000). The Cronbach alphas for the masculine and feminine subscales in the present sample were .88 and .83 respectively.

*Attitudes Toward Seeking Professional Psychological Help (ATSPPH)*. The 29-item ATSPPH Scale (Fischer & Turner, 1970) consists of four subscales: Recognition (awareness or recognition of the need for psychological help), Tolerance (tolerance of stigma associated with seeking professional psychological help), Interpersonal (interpersonal openness), and Confidence (confidence in mental health professionals). The scale has 11 positively-worded items and 18 negatively-worded items. Participants were asked to rate these items using a 4-point Likert scale from 1 (*Disagree*) to 4 (*Agree*). The relevant negatively-worded items on each subscale were reverse scored and then summed. A total score can also be obtained by summing all the item scores. High scores indicate a positive attitude toward help-seeking. Fisher and Turner (1970) reported acceptable reliability estimates for total and subscales of ATSPPH: Total (.85), Recognition (.67), Tolerance (.70), Interpersonal (.62), and Confidence (.74). The ATSPPH scale has been used extensively by Chinese-American and Japanese-American students (e.g., Atkinson & Gim, 1989; Tata & Leong, 1994) as well as by Taiwanese students (e.g., Yeh, 2002) and has demonstrated acceptable psychometric properties even when used with non-American samples. All the scales in the present sample yielded acceptable reliability estimates and were comparable to those found in previous studies; the Cronbach alphas were as follows: Total (.81), Recognition (.67), Tolerance (.63), Interpersonal (.58), and Confidence (.63).

## RESULTS

The means, standard deviations, skewness, and kurtosis of the measures used in this study are shown in Table 1. An examination of the data set did not reveal significant departures from normality nor were any outliers found. Consistent with Hall and Taylor's (1985) recommendations, a median split procedure was applied to the SAI's masculinity and femininity subscales. Based on the recommendation of the American Psychological Association (APA) Task Force on Statistical Inference, effect size estimates will be computed for all analyses when reporting a *p* value (Wilkinson & APA Task Force on Statistical Inference, 1999). In the present study,  $\eta^2$  will be used to report effect size estimates for values obtained from ANOVAs.

A series of 2 X 2 X 2 (Gender X Masculinity X Femininity) ANOVAs was applied to the ATSPPH overall and to subscale scores. A statistically significant main effect of gender was found for overall help-seeking,  $F(1, 131) = 4.93, p = .02, \eta^2 = .04$ , with female ( $M = 77.48, SD = 10.37$ ) students having more positive overall help-seeking attitudes compared with male ( $M = 74.35, SD = 8.33$ ) students (see Table 2). Similarly, a statistically significant main effect of gender was also found for the subscale "Recognition,"  $F(1, 139) = 6.29, p = .01, \eta^2 = .04$ , with female ( $M = 20.79, SD = 4.00$ ) students more willing to recognize the need for professional help compared with male ( $M = 19.36, SD = 3.17$ ) students (see Table 3). There was also a statistically significant

**TABLE 1**  
Means, Standard Deviations, Skewness and Kurtosis of Variables in Study

Variable	<i>M</i>	<i>SD</i>	Skewness	Kurtosis
MAS	63.31	12.32	-.04 (.19)	-.21 (.38)
FEM	71.47	11.12	-.37 (.19)	.71 (.38)
Overall	76.59	9.88	-.09 (.20)	-.09 (.40)
Recognition	20.39	3.81	-.24 (.20)	.05 (.39)
Tolerance	13.69	2.68	.07 (.20)	.16 (.39)
Interpersonal	18.51	3.21	.29 (.19)	.45 (.39)
Confidence	23.88	3.72	-.18 (.20)	.81 (.39)

*Note:* The numbers within parentheses are standard errors. MAS = Singapore Androgyny Inventory's masculinity scale. FEM = Singapore Androgyny Inventory's femininity scale. Overall = Attitude Toward Seeking Professional Psychological Help (ATSPPH) – Total Score. Recognition = ATSPPH subscale measuring recognition of the need for psychological help. Tolerance = ATSPPH subscale measuring stigma tolerance. Interpersonal = ATSPPH subscale measuring interpersonal openness. Confidence = ATSPPH subscale measuring confidence in mental health professionals.

**TABLE 2**  
Effects of Gender and Sex Role on Overall Help-Seeking Attitudes

Source	<i>SS</i>	<i>df</i>	<i>MS</i>	<i>F</i>	<i>p</i>	$\eta^2$
Gender	488.85	1	488.85	4.93 *	.02	.04
MAS	240.95	1	240.95	2.43	.12	.02
FEM	74.84	1	74.84	0.76	.39	.01
Gender X MAS	45.42	1	45.42	0.46	.50	< .01
Gender X FEM	73.39	1	73.39	0.74	.39	.01
MAS X FEM	245.63	1	245.63	2.48	.12	.02
Gender X MAS X FEM	0.21	1	0.21	0.01	.96	< .01
Error	12984.18	131	99.12			
Total	13824.73	138				

*Note:* MAS = Singapore Androgyny Inventory's masculinity scale. FEM = Singapore Androgyny Inventory's femininity scale.

\*  $p < .05$ .

TABLE 3

Effects of Gender and Sex Role on Recognition of the Need for Psychological Help						
Source	SS	df	MS	F	p	$\eta^2$
Gender	90.81	1	90.81	6.29 *	.01	.04
MAS	21.16	1	21.16	1.47	.23	.01
FEM	14.51	1	14.51	1.01	.32	.01
Gender X MAS	11.34	1	11.34	0.79	.38	.01
Gender X FEM	27.00	1	27.00	1.87	.17	.01
MAS X FEM	32.46	1	32.46	2.25	.14	.02
Gender X MAS X FEM	4.97	1	4.97	0.35	.56	< .01
Error	2006.57	139	14.44			
Total	2152.67	146				

Note: MAS = Singapore Androgyny Inventory’s masculinity scale. FEM = Singapore Androgyny Inventory’s femininity scale.

\*  $p < .05$ .

main effect of femininity on the subscale “Tolerance,”  $F(1, 140) = 5.52, p = .02, \eta^2 = .04$ , with students high in femininity ( $M = 13.31, SD = 2.72$ ) being less tolerant of the stigma associated with professional help-seeking or less positive about help-seeking because of what others might think, compared to students low in femininity ( $M = 14.15, SD = 2.63$ , see Table 4). Neither gender nor sex role orientation had any statistically significant impact on the subscales of “Interpersonal” and “Confidence.” There were no statistically significant interactions or statistically significant main effects for masculinity for all the analyses.

### DISCUSSION

The purpose of the present study was to examine the effects of gender and sex role orientation on attitudes toward professional help-seeking. As hypothesized, females had more positive overall attitudes toward professional help-seeking compared to males. In addition, females were also more willing to recognize a personal need for professional help compared to males. Males and females did not differ in the following three aspects of help-seeking: stigma tolerance, interpersonal openness, and confidence in mental health professionals. With respect to sex role orientation, femininity significantly influenced students’ level of stigma tolerance. Compared with students low in femininity scores, students high in femininity scores had less positive attitudes toward professional help-seeking specifically with regard to being less tolerant of the associated stigma and

TABLE 4

Effects of Gender and Sex Role on Sigma Tolerance						
Source	SS	df	MS	F	p	$\eta^2$
Gender	22.89	1	22.89	3.22	.08	.02
MAS	12.07	1	12.07	1.70	.20	.01
FEM	39.21	1	39.21	5.52 *	.02	.04
Gender X MAS	0.41	1	0.41	0.06	.81	< .01
Gender X FEM	1.38	1	1.38	0.19	.66	< .01
MAS X FEM	25.42	1	25.42	3.58	.06	.03
Gender X MAS X FEM	2.19	1	2.19	0.31	.58	< .01
Error	995.54	140	7.11			
Total	1081.19	147				

Note: MAS = Singapore Androgyny Inventory's masculinity scale. FEM = Singapore Androgyny Inventory's femininity scale.

\*  $p < .05$ .

more sensitive about the opinions of others. Masculinity did not significantly impact help-seeking attitudes. Likewise, there were no interaction effects indicating that gender and sex role orientation did not appear to act conjointly to influence help-seeking attitudes.

Consistent with and replicating results from previous research studies both in North America (e.g., Komiya et al., 2000; Neighbors & Howard, 1987) and elsewhere (e.g., Al-Samadi, 1994; Yeh, 2002), females in the present sample held more positive overall help-seeking attitudes compared to their male counterparts. Females had more positive help-seeking attitudes than males on only one other subscale—"Recognition" but not on any other subscales. This finding is a little different from Johnson's (2001) and Leong and Zachar's (1999) findings. Johnson (2001) found females to possess more positive help-seeking attitudes on the "Recognition" and "Interpersonal" subscales while gender differences were reported for the "Recognition," "Interpersonal," and "Confidence" subscales in Leong and Zachar's (1999) study. The variability in findings pertaining to the ATSPPH subscales may be due to the fact that the present study utilized an Asian sample while primarily white American samples were used in the other two studies.

These present findings, together with findings from previous studies, can be interpreted in the light of the relational-interdependent self construal generally found among Asians, and first defined by Markus and Kitayama (1991). Markus and Kitayama (1991) described an interdependent self-construal as having self-representations that rely on, closely inter-connected with, and obligated to close social relationships. Therefore, in-



terdependence entails having one's feelings, emotions and behaviors intimately linked to the feelings, emotions, and behaviors of people close to the self, which in most cases include family members, relatives, and close friends. Thus for many Asians, regardless of gender, coping with personal problems in the context of close social relations may be preferable to seeking professional help. Analyzing the items in the four subscales of the ATSPPH, it appears that gender differences are not be a significant influence for "Interpersonal," "Confidence," and "Tolerance" subscales; rather, cultural differences may have had a significant impact instead. Items from the "Recognition" subscale on the other hand, appear to be relatively independent of cultural nuances. Future research could investigate help-seeking attitudes using Asian as well as white American samples in the same study to examine if cultural differences would differentiate some of these aspects of help-seeking.

Gender was not significantly associated with the "Tolerance" subscale of the ATSPPH in the present study, nor was it a significant predictor in either of the previously reviewed investigations with the ATSPPH and its subscales (Johnson, 2001; Leong & Zachar, 1999). Instead, femininity was significantly associated with "Tolerance": those scoring higher in femininity were less resistant to and less tolerant of stigmas associated with seeking professional help. This finding reinforces Sipps and Janeczek's (1986) argument that sex role orientation, and in particular femininity, plays a part in determining an individual's attitudes toward counseling and psychological help. Likewise, Johnson (2001) found femininity to be associated with confidence in professionals' abilities to help with psychological problems. Fischer and Turner's (1970) early finding that masculinity was unrelated to ATSPPH scores could be relevant and related to the present discussion as the unidimensional masculinity-femininity scale they used may have obscured important results pertaining to sex role orientation and help-seeking attitudes. Subsequent studies such as Sipps and Janeczek's (1986), Johnson's (2001) and the present study were conducted after Bem (1974) challenged the then prevailing view that masculinity and femininity were bipolar ends of a single dimension.

Given the absence of an interaction between gender and sex role orientation in the present study, taken together, findings from the present study suggest that both gender and sex role orientation play an independent role in influencing help-seeking attitudes. In addition, these variables appear to have a differential impact on different aspects of help-seeking. Effect sizes obtained for all three main effects were small and explained about 4% of the variance ( $\eta^2 = .04$ ) but this may not necessarily be insignificant. Kline (2004) argued that  $\eta^2$ , a variance-accounted-for effect size, is a squared metric and "squared correlations can make some effects look smaller than they really are in terms of their substantive significance" (p.100). Thus, some methodologists prefer to use unsquared correlations (Rosenthal, Rosnow, & Rubin, 2000). However, both Hunter and Schmidt (1990) and Rosenthal (1994) cautioned readers not to overlook some of these seemingly unimpressive effect sizes as they described some examples in education and in other areas where potentially valuable findings were overlooked because of the misinterpretation of variance-accounted-for effect sizes.

A few limitations warrant comment. The present study investigated only the impact of gender and sex role orientation on help-seeking attitudes. Future studies could inves-

tigate cultural variables in addition to gender and sex role orientation and their differential impact on various aspects of help-seeking. A larger sample size would also be helpful to ensure adequate power to detect hypothesized effects. Finally, as this sample is a student trainee teacher sample, somewhat similar to undergraduate and graduate students from North American universities, caution should be exercised when generalizing these findings to the general population until these findings have been replicated across samples of different ages and across different settings.

These limitations notwithstanding, this paper extends previous research and contributes to the existing literature base. In examining the influence of gender and sex role orientation on students' overall and specific help-seeking behaviors, it adds to a limited but gradually expanding research base on studies using Asian samples in Asia. This has the potential to inform to improvements in the development and provision of culturally appropriate counseling services for the Asian community.

## NOTES

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