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Promotion of men's mental health

Abstract

Introduction: Despite the fact that the knowledge of health differences between males and females is more and more available, it does not always translate into the differentiation of health programmes. Undoubtedly, there is a need for innovative programmes promoting the mental health of men and accounting for male standards.

Material and methods: Review of scientific literature concerning mental health promotion, with special regard to recommendation to create programmes of promotion of men's mental health searched in Pubmed, Scopus and Google Scholar.

Results: Health promotion is a process enabling people to increase their control over health and to improve it. Mental health promotion is a rarely discussed branch of health promotion, and its characteristics differ from physical health promotion. Currently, no organised activities are conducted in Poland aiming at the promotion of men's mental health. Looking at suicide statistics, according to which men take their lives seven times more often than women, it seems essential to design comprehensive activities targeting this specific group. Male-specific determinants of mental health should constitute a reference point for health promoters in the process of designing programmes of mental health promotion.

Conclusions: It seems necessary to consider gender factor while designing activities related to mental health promotion. The activities directed to men should be planned according to specific principles. Their implementation may have a positive effect on male participation and involvement in the suggested programme of mental health promotion, and in turn on its efficacy.

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Introduction

The World Health Organization (WHO) defines mental health as a state of well-being in which the individual realises his or her abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community [1]. Mental health is a foundation of well-being and effective functioning of the individual in society. Therefore, mental health is much more than just a lack of mental

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disorders [2]. Mental health promotion is one of the challenges of contemporary public health. Currently, emphasising the importance of male mental health is especially important. Personal and social barriers in seeking assistance, turning to negative mechanism of handling problems and persisting high rate of suicides in this group generates the need to develop and implement programmes of prevention, which will be adjusted to the needs and possibilities of men, with regard to male-sensitive language [3].

Material and methods

Review of scientific literature concerning mental health promotion, with special regard to recommendation to create programmes of promotion of men's mental health searched in Pubmed, Scopus and Google Scholar.

Results

Despite the fact that the knowledge of health differences between males and females is more and more available, it does not always translate into differentiation of health programmes. Undoubtedly, there is a need of innovative programmes promoting the mental health of men and accounting for male standards, specificity of work-related stress, concerns about work security and male-specific stigmas related to the issues of mental health. It seems necessary to develop and assess new interventions regarding mental health promotion, which would be adapted to male needs and preferences (i.e. would refer to male ideals). Such activities could engage men more effectively that the approaches aimed at the general population [4]. Men are more willing to get involved in the activities regarding mental health promotion if the interventions focus on taking a specific action, and "talking about emotions" is limited to the minimum. Therefore, health programmes targeting men should include adequately selected activities and tasks which would require a considerable commitment of men and at the same time would be possible to achieve. This is primarily related to so-called activity-based programmes [5]. One must remember that the level of difficulty should be adequately determined in health promotion activities. Studies on the motivation psychology have revealed that with increasing motivation the performance increases and then starts to decrease. Therefore, it seems essential to select suitable activities [6]. This is confirmed by studies published by Taylor et al. [7]. The researchers developed a health promotion programme targeting mature males encouraging them to take up physical activity. The key feature of this programme was using physical activities which are not very complicated (e.g. working in the garden), so performing these activities was feasible and gave a feeling of causation. In the culture where men are perceived via the macho stereotype, inadequately selected level of difficulty would be counterproductive [8]. A task which is too difficult and complicated, and which is impossible to be done by a man, can lead to a reduced feeling of causation, reduced self-esteem and increased level of stress [9].

Importantly, health promoters should pay attention to two important issues. Firstly, it is of paramount importance to create a friendly and secure atmosphere, which is full of acceptance. Only such conditions will allow people to speak openly about their problems and to take up activities aiming at changing their current situation. Secondly, for men, it is very important to include the male

role model [5]. The primary goal is to strengthen the feeling of responsibility for one's health and showing the role of this feeling in relation to the man's surroundings, together with maintaining the aspects of traditional male identity and self-confidence [3].

Long experience in conducting health promotion programmes among men has allowed Oliffe et al. [5] to develop several important principles which should be taken into account while designing activities targeting this group:

- Manliness affects a number of social health determinants. It is advisable that the health promotion programmes directed to men take into consideration such variables as social and economic status, education and income, as well as male roles and relations in the society.
- Men prefer acting to talking. Activity-based programmes may appeal to various male ideals of physical activity, solving problems and competitiveness. The purpose of the activities is to use the existing social bonds and to engage them directly in the strategy of health promotion.
- 3. It must be emphasised that building solidarity in a group of men is based on their common action. Therefore, health programmes indented for men and based on group interaction, instead of individual interaction, should include activities creating bonds. Such mutual interaction may be achieved by common activities, e.g. common problem solving, interactive group work or constructive learning. Such specific tasks should be planned for each stage of the health programme. Undertaking such activities will be especially important in the case of creating new groups of support for men. Experience and learning about oneself through joint activity may encourage and motivate men to stay in this group. Additionally, this allows to shape the group structure and increases the chance of achieving the common goal, e.g. increasing responsibility for one's health. In the case of men, one should avoid a typical didactic approach and replace it with the above-mentioned programme concentrated on the action. Oliffe et al. [5] emphasise that such concentration on activities reduces fears of men related to mandatory conversation with others and a necessity to talk about oneself at the very beginning of the group formation.
- 4. Health programmes targeting men should also include a moment of silence and an opportunity to freely exchange ideas during common activities or group work. The group members should be provided with safety conditions. According to Milligan et al. [10], such as free conversations during common activities

- help to build a sense of belonging to the group, as well as camaraderie and bonds. Interestingly, such conversations are dominated by a sense of humour, which, in the opinion of Miligan et al., has an effect reducing anxiety related to difficult topics, e.g. concerning health. Therefore, while designing activities for men, one should not only consider group work, but also freedom for spontaneous conversations involving a sense of humour.
- 5. A health programme for men should include three elements: action, conversation and silence. All three elements should be balanced against one another. None of them should be dominant. Many people are not able to cope with silence, and they think that silence should be interrupted. But it must be remembered that silence gives an opportunity to consider a problem on one's own or to complete temporary distancing from this problem. In order to keep a balance between these three elements, the programme should not be overloaded with too many activities. In such a situation, the participants would be too busy and focused on fulfilling their tasks, which would leave them with no space for reflection and building mutual relations [5, 11].
- 6. It is possible to change male standards with the consent of other man. The success of male health promotion programmes largely depends on their leaders and participants, who are able to, by their participation, shift the line dividing behaviours perceived as "unmanly" and those meeting male standards. Using the image of famous men who talk about their mental health (e.g. the campaign "Twarze Depresji. Nie oceniam. Akceptuję." [Faces of Depression. I do not judge. I accept.] or the campaign #meskasprawa [male issue]) may have a positive effect on the attitude of men towards this topic. It is worth emphasising that leaders of the health promotion programmes should handle various stereotypes concerning male health. What is important, these stereotypes are believed to have shaped the unwillingness of men to talk about their challenges related to the disease [12].
- 7. A health programme for men should be constructed in such a way as to provide choice. Values and ideas may not be imposed on people against their will. As for men, stereotypes are a factor preventing change. Therefore, one must accept the fact that some men, especially those for whom traditional male stereotypes are very important, will not be willing to take part in these programmes. The programme should be presented to them in such a way as to encourage them to consider it and leave them the possibility to

- join the programme. Such a man may take part in one or two meetings, but they are not able to get involved in the group on a long-term basis. However, even one episode of participation in such initiatives may awaken a need to take care of one's health [5].
- 8. Men perceive low health literacy as a variable which may cause their stigmatisation. If the terms, language or assumptions used in the health promotion programmes are not clear for them, a feeling of superiority and stigmatisation occurs. In order to develop health literacy among men, health promotion programmes should include understandable contents which could have a direct effect on them and which would allow them to actively engage in the activities beneficial for their health. This can be also seen in the activities aimed at seeking medical help and constitutes a serious problem of public health. Men less frequently than women seek medical help and are treated for so-called "common mental disorders". This is likely to be connected with social stereotypes related to typically male behaviour, e.g. showing no weakness, and this, in turn, is manifested as the reluctance of men to interventions regarding mental health and well-being. Overcoming these stereotypes and modelling attitudes promoting health among men [13]. It must repeatedly be emphasised that seeking help is not a sign of weakness. It should be shown as something positive, which proves mindfulness, feeling of responsibility and emotional maturity.
- 9. Conducting health promotion programmes in man-friendly environments helps in their recruitment and active participation: familiar environment gives a sense of security. Places perceived by men as friendly are up to change, so it is important to conduct studies updating information regarding this issue. It is worth emphasising that the role of the place of work and environment, where the man functions, is highlighted in the literature as an important factor of health promotion [5]. A friendly environment gives an opportunity to quietly reflect upon one's health and possibly change the way you think in this context. It also gives a good opportunity to introduce activities based on positive psychology [4].
- 10. The programme should clearly state what benefits are predicted for someone who decides to get involved. Programmes designed to directly affect man's work productivity and his relationships seem to be especially attractive.
- 11. A common mistake is to assume that each programme will be successful on a large scale.

Additionally, the following factors appear to be important for mental health promotion:

- Screening tests, educating primary care physicians, psychiatrists and psychologists with regard to specific male problems with mental health.
- 2. Organising social campaigns concerning the most pressing problems. For example, in 2003, the National Institute of Mental Health (NIMH) in the USA organised a campaign "Real Men. Real Depression". Its objective was to raise social awareness concerning depression symptoms and therapy, and a risk of suicides of men, as well as to increase knowledge of family doctors with regard to this problem, as well its diagnosing and treatment. The campaign included such activities as broadcasting videos and information programmes, publishing leaflets, and running a website. People were informed e.g. about the course and symptoms of depression in men of different ages, and about advantages and disadvantages of undertaking psychotherapy and pharmacotherapy. There was a huge interest in the campaign issues, much higher than expected [14]. This is so much important also because it showed that man had a higher sense of stigmatisation, autostigmatisation, conflict of roles in the event of undertaking psychotherapy, fear of losing control over one's life, over self-steering and personality changes resulting from using medicines [15].
- 3. It is also important to provide on-line counselling and applications, especially for teenage and young men.
- 4. More attention should also be paid (in practice and studies) to a correlation between alcohol abuse (addiction) and suicide tendencies among men [16].

Conclusions

It is essential to conduct a reliable evaluation of health promotion programmes directed to men. It will allow to seek further answers to the question of an effective, based on resources and including gender issues, work with men regarding mental health promotion. In light of the presented data, it seems necessary to plan activities in the area of men's mental health promotion, with regard to their specific health needs. Introduction of adequate

activities may have a positive effect on the men's mental well-being, and in turn on the quality of life. From the perspective of public health, this may indirectly help to reduce the suicide rates.

References:

- World Health Organization. Promoting mental health: concepts, emerging evidence, practice (Summary Report).
- Gromulska L. Zdrowie psychiczne w świetle dokumentów Światowej Organizacji Zdrowia. Przegl Epidemiol. 2010; 1(64): 127–132.
- Robertson S, Gough B, Hanna E, et al. Successful mental health promotion with men: the evidence from 'tacit knowledge'. Health Promot Int. 2018; 33(2): 334–344, doi: 10.1093/heapro/daw067, indexed in Pubmed: 27543933.
- Seaton CL, Bottorff JL, Jones-Bricker M, et al. Men's Mental Health Promotion Interventions: A Scoping Review. Am J Mens Health. 2017; 11(6): 1823–1837, doi: 10.1177/1557988317728353, indexed in Pubmed: 28884637.
- Oliffe JL, Rossnagel E, Bottorff JL, et al. Community-based men's health promotion programs: eight lessons learnt and their caveats. Health Promot Int. 2019 [Epub ahead of print], doi: 10.1093/ heapro/daz101, indexed in Pubmed: 31603471.
- Łukaszewski W, Doliński D. Mechanizmy leżące u podstaw motywacji. In: Strelau J. ed. Psychologia. Podręcznik akademicki. GWP, Gdańsk 2000: 441–468.
- Taylor J, Cole R, Kynn M, et al. Home away from home: Health and wellbeing benefits of men's sheds. Health Promot J Austr. 2018; 29(3): 236–242, doi: 10.1002/hpja.15, indexed in Pubmed: 30511488.
- Stradomska M. Uwarunkowania prób samobójczych w grupie studentów program profilaktyczny prowadzony na uniwersytecie. Psychiatr Psychol Klin. 2019; 19(3): 293–307.
- Genuchi M, Mitsunaga L. Sex Differences in Masculine Depression. The Journal of Men's Studies. 2015; 23(3): 243–251, doi: 10.1177/1060826514561986.
- Milligan C, Neary D, Payne S. Older men and social activity: a scoping review of Men's Sheds and other gendered interventions. Ageing and Society. 2015; 36(5): 895–923, doi: 10.1017/s0144686x14001524.
- Mackenzie CS, Roger K, Robertson S, et al. Counter and Complicit Masculine Discourse Among Men's Shed Members. Am J Mens Health. 2017; 11(4): 1224–1236, doi: 10.1177/1557988316685618, indexed in Pubmed: 28068851.
- Courtenay WH. Constructions of masculinity and their influence on men's well-being: a theory of gender and health. Soc Sci Med. 2000; 50(10): 1385–1401, doi: 10.1016/s0277-9536(99)00390-1, indexed in Pubmed: 10741575.
- 13. Kingerlee R, Precious D, Sullivan L, et al. Engaging with the emotional lives of men. Psychol. 2014; 27: 418–421.
- Rochlen A, Whilde M, Hoyer W. The Real Men. Real Depression Campaign: Overview, Theoretical Implications, and Research Considerations. Psychology of Men & Masculinity. 2005; 6(3): 186–194, doi: 10.1037/1524-9220.6.3.186.
- Wahto R, Swift JK. Labels, Gender-Role Conflict, Stigma, and Attitudes Toward Seeking Psychological Help in Men. Am J Mens Health. 2016; 10(3): 181–191, doi: 10.1177/1557988314561491, indexed in Pubmed: 25504645.
- Conner KR, Pinquart M, Gamble SA. Meta-analysis of depression and substance use among individuals with alcohol use disorders.
 J Subst Abuse Treat. 2009; 37(2): 127–137, doi: 10.1016/j. jsat.2008.11.007, indexed in Pubmed: 19150207.