Help-Seeking Behaviors of African American Men

Leslie D. Holley
DePaul University

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Running Head: HELP-SEEKING BEHAVIORS OF AFRICAN AMERICAN MEN

By

Leslie Holley

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CHAPTER I
INTRODUCTION

There have been at least four decades of research that have suggested race and racism as critical factors in African American men’s psychological well-being and help-seeking behaviors. In an extensive review of the literature on African American men’s well-being, Tovar-Murray and Munley (2007) found that racism was a unique source of stress for African American men and was among one of the main reasons for them seeking out counseling. Other scholars had posited that the experience of racism was so pervasive for African American men that it was associated with a host of physical and psychological conditions such as high blood pressure, as well as feelings of anger, paranoia, frustration, helplessness and hopelessness (Clark, Anderson, Clark, and Williams, 1999; Harrell, 2000; Outlaw, 1993; Tovar-Murray and Munley, 2007; Utsey, Chae, Brown, and Kelly, 2002).

Research also concluded that racism negatively impacted African American men’s help-seeking behaviors. Over the past two decades, the help-seeking behaviors of African American men have been studied primarily with adolescents, college students, and families (Waites, 2009; Duncan, 2003; Whaley, 2001; Hill, 1998; Terrell and Terrell, 1993). The evidence has indicated that African American men have sought out psychological counseling at significantly lower rates than their African American women and European American counterparts. Although the reasons for African American men’s lack of participation in counseling varies, studies have found that perceived racism (Clark, et al., 1999; Jarrett, Bellamy, and Adeyemi, 2007), cultural mistrust (Terrell and Terrell, 1981), locus of control, and identity (Duncan, 2003) might be the sources behind
their underutilization of counseling.

Perceived racism refers to subjective interpretation of race-related interactions and can be viewed as a possible mechanism by which racism in the larger mainstream American society can have a detrimental effect on African American men’s helping-seeking behaviors (Williams, Neighbors, and Jackson, 2008). These experiences for African American men can cause race-related stress, which is stress that is caused by experiences in race related situations (Tovar-Murray and Munley, 2007). These experiences are perceived as a threat to individual and collective well-being and resources that existed. Moreover, Beirman (2006) posited that increased perceived racism can be associated with an increased risk for mental health problems and tended to lead African American men not to trust the helping profession. Additionally, due to the pervasiveness of racism, Terrell and Terrell (1981) have suggested that African American men developed a tendency to mistrust people of the majority culture and any or all institutions that might have been associated with them. This is defined as cultural mistrust.

According to Terrell and Terrell (1981) cultural mistrust was most evident in African American men’s’ interactions with Whites in the areas of education and training, business and work, interpersonal and social relations, and politics and law. Due to historical and contemporary experiences with racism and oppression, cultural mistrust, or what Whaley (2001) coined as cultural paranoia was viewed as a healthy form of skepticism to deal with living in an unjust society. This paranoia that African American men have experienced from interacting with members of the majority culture, was then reflected in how they sought out counseling. For instance, Keating and Robertson (2004)
made the assertions that cultural mistrust had a meaningful impact on the attitudes and behaviors of African American men, as they tended to view and interact with the helping profession with suspicion and trepidation.

In addition to cultural mistrust, *locus of control* had an effect on African American men’s help-seeking behaviors (Flowers, Milner, and Moore, 2003). The concept of locus of control was coined by Rotter, Seeman, and Liyertant (1962) to describe the expectations that people carry regarding their level of control over a situation. Locus of control can be delineated into two independent facets: *internal locus of control* and *external locus of control*. Internal locus of control represented the extent to which a person believed that he or she had control over events in his or her life. Conversely, external locus of control represented the idea that things that happened in one’s life were controlled by forces outside of oneself, such as a transcendental force or racism. Many researchers posited that African American men had an external locus of control (Flowers, Milner, and Moore, 2003; O’Hea, Moon, Grothe, Boudreaux, Bodenlos, Wallston, and Brantley, 2009) and attribute the causes of their psychological problems to external forces (Levine-Rasky, 2008). In other words, many African American men believed that Whites had control over their future outcomes, such as work promotions, job hiring, and home location, which forced them to behave as if they did not have personal agency over their life.

While African American men viewed their locus of control externally, many found comfort in a sense of commonality and connection with their racial and ethnic group (Duncan, 2007). For African American men, their racial and ethnic identity often served as a coping mechanism against racism and was related to their help-seeking
behaviors (Duncan, 2003; Utsey et al., 2002). In addition, African Self-Consciousness was also considered an important variable in African American men’s well-being and it was expected to function as a determinant of important psychological variables such as help-seeking behaviors (Baldwin, Brown, and Rackley, 1990). This point was explicitly made by Phelps, Taylor, and Gerard (2001) as they indicated that identity was based on life experiences, historical perspectives, and socio-cultural experiences and that identifying with one’s identity could be an essential variable in exploring the help-seeking behaviors of African American men.

Despite the consistent findings that African American men mistrust Whites and that they underutilized professional help, very little research had focused on how cultural mistrust, locus of control, and identity simultaneously impacted African American men’s help-seeking behaviors. Therefore, the purpose of the present study was to examine the extent to which cultural mistrust, locus of control, and identity were determinants of help-seeking behaviors among a community sample of African American men.

**Statement of the Study’s Purpose**

Given the prevalence of racism on African American men’s psychological well-being and their high level of cultural mistrust, understanding factors that may have influenced their help-seeking behaviors and attitudes can be an important area of inquiry. If counselors and other professionals highlight factors that influence African American men’s helping seeking behaviors they could develop outreach efforts to better serve this population and increase their counseling utilization rates. Existing literature has indicated that cultural mistrust, identity, and locus of control could play vital roles in the help-seeking behaviors and attitudes of African American men and has had implications
for the counseling profession (Phelps et al., 2001). However, the interplay among these variables on African American men’s help-seeking behaviors needed further exploration.

**Research Questions**

The present study added to the emergent literature on help-seeking behaviors by exploring the quantitative experiences of a homogenous group of African American men who have sought counseling services and their views on cultural mistrust, locus of control, and African Self-Consciousness as it relates to past and present help-seeking behaviors. The study investigated the relationships between cultural mistrust as measured by the Cultural Mistrust Inventory (Terrell and Terrell, 1981), identity as measured by the African Self-Consciousness Scale (Baldwin and Bell, 1985), locus of control as measured by Rotter (1966), and help-seeking behaviors as measured by Fisher and Farina’s (1995) Attitudes Toward Seeking Professional Help. Given the purpose of this study, this research investigation was designed to investigate the following research question:

**Research Question 1**: To what extent did cultural mistrust, African Self-Consciousness, and locus of control predict African American men’s help-seeking behaviors and counseling services history?

**Null hypothesis 1**: After controlling for the variables of age, education, and close-knit community the variables of cultural mistrust, African Self-Consciousness, and locus of control would contribute to African American men’s help-seeking behaviors and counseling services history.

**Definition of Terms**

*Cultural Mistrust*: Terrell and Terrell (1981) defined cultural mistrust as the
mistrust African Americans hold for Whites, which is most evident in the areas of education and training, business and work, interpersonal and social relations, and politics and law. Terrell and Terrell (1981) assume African Americans’ mistrust for Whites have developed as a result of exposure to racism or unfair treatment by Whites (Sahnani and Ponterotto, 1992).

**African Self-Consciousness.** Baldwin (1985) proposed a multifaceted Afrocentric theory of African American personality that is driven by both biogenetic and environmental factors and are shaped through experience. The African Self-Consciousness carried four functions: (1) Knowledge of one’s African heritage and identity; (2) Priorities being placed on African American/African survival, liberation and development; (3) Priorities being placed on self-knowledge and affirmation; and (4) defiance toward anti-African American forces (Baldwin, 1995). The theoretical foundation of the African Self-Consciousness included a general ideology of self-affirmation, self-determination, and liberation of self from anti-African forces (Baldwin et al., 1990).

**Locus of Control.** According to Rotter (1966) locus of control referred to individuals’ beliefs about how internal or external structures influenced their lives. In other words, these influences dictated a person’s worldview. For example, people who generally had an internal locus of control believed they had control over their future outcomes. However, people who had external locus of control believed or perceived that outside forces and events dictated their actions, decisions, and behaviors (Grable, Joo-Jung Park, and So Hyun Joo, 2009).
**Help-Seeking Behaviors.** Help-seeking behaviors can be defined as how a person has viewed seeking assistance from others, how they have reacted to assistance from others, and how likely they are to seek out assistance from others. According to Fisher and Farina (1995) help-seeking behaviors are related to masculinity variables. These variables include measures of gender role conflict, conformity to masculine norms, and traditional masculinity ideology (Levant, Wimer, Williams, Smalley, and Noronha, 2009). Studies have utilized these measures with the Attitudes Toward Seeking Professional Psychological Help (ATSPPH) Scale (Fischer and Farina, 1995; Fisher and Turner, 1970, as cited in Levant et al., 2009).

**Nature and Order of Presentation**

This thesis is comprised of five chapters. Chapter one provides the reader with an overview of the current study, statement of the research purpose, and identification and definition of key concepts. Chapter two reviews the literature pertinent to this study. Included in this chapter are detailed discussions of how cultural mistrust, locus of control, and African Self-Consciousness relates to African American men’s help-seeking behaviors. Chapter three includes a discussion on the research methods used for this study and a statement of the issues and questions are explored. Chapter four includes the results of the study and presents the findings relevant to the research question. Finally, chapter five consists of the conclusion of the study, followed by the discussion of implications for counselors and counselor educators working with African American men.
CHAPTER II
LITERATURE REVIEW

Introduction

The proposed literature review identified the constructs that are pertinent to the study of African American men’s help-seeking behaviors. Relevant research findings are included for the variables of interest in the study. This literature review summarizes the pertinent research on the cultural factors that are possible determinants of African American men’s attitudes toward seeking help, as well as their counselor preference. Additionally, theoretical perspectives, as they relate to African American men’s help-seeking behaviors, are explored and the interrelationships among the variables of interests to this study are discussed.

Chapter Two is organized into three sections. Section one focuses on the current literature on help-seeking behaviors of African American men as it is related to formal and informal sources of help. Section Two identifies cultural factors that are related to African American men’s utilization of formal counseling services. Literature on cultural mistrust and consciousness models were examined, as well as how they created counseling barriers. Lastly, Section Three discusses the research relevant to locus of control and its influence on African American men’s help-seeking behaviors. For example, psychological problems and how they are viewed externally are analyzed. Finally, this chapter ends with a summary and synthesis of the variables presented in this study.

Section 1: Informal and Formal Sources of Help

Attitudes Towards Seeking Psychological Help
Within the last two decades, there has been a considerable amount of literature focused on the help-seeking behaviors of African American men (Duncan, 2003). Attitudes toward seeking help are defined by (Fischer and Farina, 1995; Fischer and Turner, 1970) “the tendency to either seek or resist professional psychological aid during crises or after prolonged psychological discomfort” (Townes, Cunningham, and Chavez-Korell, 2009, p.331). Much of the counseling literature has indicated that African American men often seek out informal sources of help, rather than formal counseling services to cope with psychosocial concerns. Many scholars posited that the African American church, African American barbershop, and African American family are primary informal resources that African American men utilize to manage problems of living (Alexander, 2003; Bierman, 2006; Dilsworth-Anderson, Williams, Gibson, 2002; Duncan, 2005; Hill, 1998; Mills, 2005; Tovar-Murray, 2010; Waites, 2009). Therefore, this section is a synthesis of research about informal sources of help.

**African American Church**

Researchers have put forward the idea that the African American church is one of the most important forms of informal support for African American men (Bierman, 2006; Dilsworth –Anderson et al., 2002; Chatters, Taylor, Jackson, and Lincoln, 2008). The African American church has allowed pastors to be the first professional contact for dealing with emotional problems, therefore making it less likely for African American men to seek out help from other professionals (Beirman, 2006). The African American church has provided its worshipers a sense of support and promotes individual change. For example, in a study conducted by Tovar-Murray (2010), African American men cited religious resources as the most salient form of support. Bierman (2006) also noted that
the African American church has provided its members with an opportunity to recount sources of suffering and the use of the word “amen” by parishioners communicated to fellow members that they understood each other’s troubles. In other words, the African American church was seen as a safe place to share personal problems and gain direction through prayer.

Still, other authors have found that the African American church has provided informal coping resources for its members, the African American community, and the African American family (Lincoln and Mamiya, 1990; Taylor, Chatters, and Levin, 2004). In a focus group conducted by Taylor et al. (2004) it was found that prayer and other religious resources were commonly used coping mechanisms for African Americans to deal with everyday life problems. Lincoln and Mamiya (1990) and Hill (1998) found that the African American church provided its members with social services that strengthen the African American family and enhance positive development for children and youth. In particular, the African American church often provided the African American community at large with day care services, preschool programs, nurseries, parenting classes, family counseling, remedial education, family planning, mentoring, drug abuse prevention, rites of passage programs for males and females and job-training programs (Billingsley, 1992, as cited in Hill, 1998).

Thus, research has shown that African Americans have had more religious resources, which in turn has helped them gain more social support within their communities. In a comparative study conducted by Taylor, Chatters, Jayakody, and Levin (1996) it was concluded that African Americans were more religious than Whites. As compared to Whites, African Americans were shown to have more religious
attendance and were more likely to have positive attitudes towards religious commitment. It is important to also note that these differences persisted despite controls for demographic factors.

Overall, research on the African American church as an informal source of help for African Americans has shown that it continues to be one of the “preeminent self-help institutions in the African American community (Hill, 1998, p. 21). Research also found that African Americans have attended religious services more frequently (Sasaki, 1979), engaged in daily prayer more frequently, (Greeley, 1979) and felt strongly about their religious beliefs, when compared to Whites (Alston, 1973, as cited in Chatters et al., 2008). Finally, researchers have continued to find that African Americans tend to use prayer as a primary coping mechanism to deal with life concerns (Chatters et al., 2008).

**African American Barbershops**

Likewise, scholars (Cole, 2009; Magnus, 2004; Alexander, 2003) have noted that the African American barbershop is used another source of informal help for African American men. They noted that the African American barbershop has provided African American men with an avenue to deal with everyday life stressors and psychosocial concerns. In the African American barbershop men have found strangers and friends discussing political, social, and cultural issues (Mills, 2005). Alexander (2003) stated that the African American barbershop is an integral cultural site within the African American community and a place in which African American men have observed and listened to their elders engage in cultural exchange. In other words, the African American barbershop has provided a safe haven for African American men to unload their problems with racism and daily interactions with others.
Alexander (2003) described the interaction between the African American church and African American men as the confluence of banal ritualized activity where a centralized community has exchanged in cultural currency. Cultural currency refers to the different forms of cultural knowledge such as language and modes of social interaction and meaning (Alexander, 2003). Pierre Bourdieu (1984) also called this cultural capital. The African American barbershop is housed in cultural communities that have provided and circulated information in creative ways. African American barbershops have added to the collective knowledge of what has happened within the community, brought members up to date, and established relationships and orientations to people, space, and time (Alexander, 2003). These “imagined communities” have presented patrons with the opportunity to interact within a socio-cultural context (Alexander, 2003).

Research has found that the African American barbershop has represented an informal source of help that has provided a cultural space for African American men similar to a group-counseling environment (Alexander, 2003). In this cultural space, the older African American men set the tone by recognizing established friendships while broadening conversation borders. These men offered what Alexander (2003) called a unified resistance and a social exchange of communication through respecting one another’s differences. Additionally, the older African American men gave the young African American boys in the shop special attention by offering them jobs sweeping hair off the floor and working part time in the barbershops. In this way, African American boys are socialized in a meaningful interaction. In conclusion, Alexander found that there is a sense of caring for one another, one African American man caring for another
African American man that is salient in the African American barbershop. African American men are acknowledged as meaningful in these environments and there is a sense of unspoken trust. Alexander (2003) calls this “sanctioned trust of the engagement” (p. 113).

Studies have also shown that the African American barbershop has been so successful in retaining the presence of a large population of African American men, that they can be used to spread important information that largely affects this population within the African American community. This was especially noted in a study done by Magnus (2004) on prostate cancer awareness where a African American barbershop was targeted to increase the knowledge of this disease. The study measured whether African American men would retain their increased knowledge on prostate cancer and whether they found it useful, in the sense of becoming or continuing to be proactive about their health. The study found that 95% of the participants felt the outreach effort was “very useful” (Magnus, 2004). Other studies (Richard, 2001; Mills, 2005) that used African American barbershops as a way to disperse important health information to the African American male community have noted that these barber shops offered more than hair needs; they offered advice. African American barbershops have been used for community discussions on topics such as race in America and they have offered what Mills (2005) calls a “market exchange - an exchange of ideas” (p. 195).

**African American Family**

Additionally, scholars have posited that the African American family has provided a sense of connectedness and social interactions for African American men. Hill (1998) defined the African American family as “constellations of households related
by blood or marriage or function that provides basic instrumental and expressive functions of the family to the members of those networks” (pg. 18). Waites (2009) also stated that the African American family is a social network that is composed of three or more generations that provide its members with cultural values and practices, such as kinship ties and collectivism. This sense of collective kinship has been well documented in the literature (Billingsley and Morrison-Rodriguez, 1998; Hill, 1998, 1999; Schiele, 1996).

The African American family has been documented within the counseling literature as a source of informal help. For example, Hill (1971) has shown that the extended family has provided for African Americans a source of strength, as well as protection against isolation in the larger society. Other researchers (Mcadoo,1978) found that these extensive help systems offered African Americans emotional support, economic supplements, and protection from external forces. For example, in a study done by Pearson, Hunter, Cook, Ialongo, and Kellam (1997) it was found that African-American grandparents are often involved in direct parenting practices, especially in households where they are the primary parents or where they live with single mothers (Bean, Perry, and Bedell, 2002). Hunter’s (1997) study found that grandmothers were the most reliable person to provide child-care and parental guidance for many African American families (Bean et al., 2002). These recent studies have indicated that the benefits of cross-generational relationships in African American families have been well documented.

In short, the research on African American men’s help-seeking behaviors have identified the African American church, barbershop, and family unit as being strong and
effective, as well as a constant safe haven for this population. Because African American men seek out these informal options for mental health care, formal care is less promoted within the African American community. However, it is important to note that many African Americans use the church for formal care, as well, in the form of pre-marital counseling and marriage counseling. Many African Americans have a dual relationship with their church pastors as religious leader and mental health counselor. Likewise, the African American barbershop and African American family have provided an avenue for African American men to express themselves and to cope with life stressors and psychosocial concerns.

Section 2: Barriers to Seeking Counseling

In his recent article, Duncan (2005) conducted a review of the literature on barriers to seeking help and found that cultural mistrust and racial identity were determinants of African American men’s help-seeking behavior. This section identified how these variables are linked to counselor preferences for African American men. These variables are well researched in the counseling literature and can be used as a guide to understand African American men’s help-seeking behaviors. This section is a critical review of these barriers, and was explored along with an additional variable, African American Self-Consciousness. This additional variable is relevant to understanding why African American men seek out or deny professional help.

Cultural Mistrust and Counselor Preference

According to Terrell and Terrell (1981) cultural mistrust is defined as African American s mistrusting Whites in areas of education and training, business and work, interpersonal and social relations, and politics and law. Cultural mistrust is based off of
Grier and Cobb’s (1968) construct of cultural paranoia. Cultural paranoia is a healthy paranoia that African American people have developed to protect themselves from the psychological effects of racial discrimination and persecution. This high degree of suspicion can be turned into anti-White identity attitudes and can be defined by the tendency to mistrust White people and White culture (Cross and Vandiver, 2001, as cited in Townes et al., 2009).

The relationship between cultural mistrust and counselor preference is well supported and documented (Duncan, 2007) and many researchers have explored distrust as a determinant of African American men’s attitudes toward seeking professional help (Townes, et al., 2009; Snowden, 1998; Sue, 1998; Sue, Fujino, Hu, Takeuchi, and Zane, 1991; U.S. Department of Health and Human Services, 2001). A long history of racism-related events in the United States of America as it relates to the mental health field has created this mistrust of Whites. African Americans were exploited and denied basic human rights and this pattern of mistreatment manifested today in how African American men have viewed the mental health profession. Baker and Bell (1999) have noted that the helping profession has mistreated African American men. African American men were mistreated during the Vietnam War and labeled as “hostile” or with “poor motivation” when arriving home from the war.

Recent data from the National Institute of Health demonstrated that African Americans were more frequently diagnosed with severe mental illnesses than any other group when admitted to state hospitals (Myers, Young, Obasi, and Speight, 2003). Meyers and colleagues found that state hospitals diagnose 56% of their African American patients with schizophrenia, while only 38% of non-African Americans received a similar
diagnosis. Other scholars have also shown that within mental health treatment settings African Americans have received less comprehensive mental health care and were provided fewer follow-up services (Cusack, Grubaugh, Yim, Knapp, Robins, and Frueh, 2007). Researchers have found that African American men are more likely to spend less time with a health care provider, receive less extensive explanations of health issues and were more likely to view their communication with a health care provider as being less participatory, less informative, and less supportive (Jarrett et al., 2007). This research indicates that African Americans were more likely to report being treated with disrespect by their providers (Cusack et al, 2007) and that there is a running theme of cultural mistrust in the African American community.

For these reasons, African American men have preferred to see counselors that look like them. In research by Townes et al. (2009) and Atkinson, Jennings, and Liongson (1990) research it was found that African American participants might have preferred an African American counselor because of their mistrust of White people. Four decades of research (Atkinson, 1983; Coleman, Wampold, and Casali, 1995; Speight and Vera, 1997; Thompson, Bazile and Akbar, 2004) indicates these findings (Townes et al., 2009). Coleman et al. (1995) conducted a meta-analysis that assessed counselor preference and found that the number of choices offered to the participants for counselors impacted the preference on counselor race (Townes et al., 2009). The study found that when participants were not offered an option that expressed “no preference,” preference for a African American counselor increased. Duncan’s (2007) research has found that African Americans in counseling relate better to African Americans that have experienced similar experiences because of their “blackness”.
Researchers have also found that African American men may not utilize counseling services because they prefer African American counselors (Austin, Carter, and Vaux, 1990; Watkins and Terrell, 1988; Whaley, 2001, Townes et al., 2009). Whaley (1998, 2001) states that some African American people’s mistrust of White people and White-dominated systems, coupled with the limited number of African American counseling professionals may cause under-utilization of counseling services (Townes, et. al, 2009). For instance, the American Psychological Association (2007) indicates that 1.9% of doctoral-level psychologists self identify as African American (Townes, 2009).

Similarly, African American psychiatrists only represent 1.6% of the field, African American social workers 6.4%, and African American counseling professionals 3.8% of the profession (Center for Mental Health Services, 2004, as cited in Townes et al., 2009). When African American men do seek counseling, Nickerson, Helms, and Terrell (1994) note that high cultural mistrust of White people has created high termination rates for African Americans in these counseling settings (Townes et al., 2009). Whaley (2001) posited that African American’s mistrust of Whites in other settings is consistent with their mistrust of White people in counseling settings (Townes et al., 2009). Further, Thompson, Worthington, and Atkinson (1994) found that African American clients with high cultural mistrust of White people were less likely to self-disclose to White counselors (Townes et al., 2009).

In a review of the literature, it was uncovered that high rates of discrimination, coupled with a history of mistreatment has caused African American men to mistrust the helping profession and not seek out formal counseling. Whaley’s (2004) research stated that some mental health professionals have labeled this “paranoia” and have viewed it as
a symptom of psychopathology. However, Bogart’s (2004) research found that perceived negative stereotypes about Whites have caused anxiety to build for African American men. Therefore, when an interaction with Whites is anticipated, it is avoided all together. African American men are likely to have many negative perceptions and experiences of mental health care that reduce the likelihood of their seeking care even when it is available (Lindsey, Korr, Birotman, Bone, Green, and Leaf, 2006). In summary, the more mistrustful the African American male, the less likely he is to seek out formal counseling (Duncan, 2003).

**Racial Identity and Help-Seeking Behaviors**

Racial identity has been examined for the last four decades and from this concept Visible Racial Ethnic Group (VREG) theories have emerged. These theories have grown in the counseling literature from the influence of the sociopolitical climate of American society. In the past, race has been defined as a biological construct with genetic origins. However, through VREG theories, this thought has changed to defining race as a sociopolitical construct. Race based on a sociopolitical model of oppression takes into consideration one’s psychological response to being a member of an oppressed group (Carter and Qureshi, 1996).

Researchers have found that racial identity is related to African American men’s help-seeking behaviors (Helms, 1990, as cited in Townes et al., 2009). For example, research found that racial identity has caused African Americans to not seek out help (Lindsey et al., 2006). Lindsey and colleagues’ work was support by Townes (2009) who showed that an immersed African American racial identity might cause African American men to view White counselors as belonging to racially biased agents of the
Establishment. That is, African American men may feel that White counselors’ solutions have rejected their cultural values and perceived the counseling process as being part of an oppressive dominant system (Sue and Sue, 2003, as cited in Townes et al., 2009). Other researchers have noted that African American men feel too prideful to seek out counseling and talking to a mental health professional was perceived as a sign of weakness. Additionally, Ferguson, Leach, Levy, Nicholson, and Johnson (2008) indicated that for African American men their preference for African American counselors was significantly related to their racial identity (Townes et al., 2009).

Recently, within the counseling literature, Baldwin and Bell’s (1985) identity theory of African Self-Consciousness (ASC), has been theoretically linked to African American men’s help-seeking behaviors. One basic premise of ASC is that reality is based on social definitions in which human beings function. An Afro centric prospective is a paradigm that is grounded in the traditional African cultural value system, however, this has changed since the invasion and influence of European nations (Schiele, 1996). This framework has embodied the African value system which included (a) ontology: nature of humans that assumed that humans and everything in the universe is spiritual and created from a similar universal substance which connected them, (b) epistemology: a source of knowing which placed emphasis on an affective way of gaining knowledge through feelings that included rhythm and imagery, (c) axiology: importance of values which placed the highest value on maintained and enhanced interpersonal relationships, and (d) cosmology: worldview that defined human relationships as interdependent with all elements in the universe including nature and inanimate objects (Warfield-Coppock, 1995). White and Parham (1990) defined Afro centricity as a holistic perspective that
viewed a person’s affective, cognitive, mind, and body as interconnecting systems. This is the basis of Baldwin’s Afro centric theory on African American personality.

Baldwin’s (1985) ASC Theory is multifaceted. He posited that the African American personality is a collective communal spiritual and relational entity that is influenced by biogenetic and environmental factors. Therefore, the African American personality is therefore complex and is comprised of two components: African Self-Extension Orientation and African Self-Consciousness. African Self-Extension can be defined as the foundation of the African American personality and is operated on a spiritual unconscious level. It is biogenetically determined and is an inherited psychological disposition that is expressed in behavior characteristics and is shared among all African American people (Baldwin, 1985).

The second component, African Self-Consciousness, consists of both biological and socio-environmental factors. It is shaped and modified from experiences that have a profound impact in one’s life. Early childhood experiences and social institutions can cause a healthy or unhealthy African Self-Consciousness to be developed. Baldwin (1985) posited that socio-environmental conditions shaped the African Self-Consciousness as well. When an African American is born into a racially homogenous African American environment he or she is expected to have a stronger and healthier African Self-Consciousness, compared to an African American person born in a racially heterogeneous environment.

In summary, empirical research on ASC and African American men’s help-seeking behaviors is limited. For example, Duncan (2007) found that African American men with low ASC preferred male counselors to female counselors and African
American men with high ASC preferred African American, male counselors. Additionally and according to its theoretical foundation, ASC is an ideology of self-affirmation, self-determination, and liberation of self from anti-African forces and is expected to function as a predictor of important psychological variables such as help-seeking behaviors.

**Locus of Control and African American Men’s’ Helping Seeking Behaviors**

*Locus of control* refers to an individual’s beliefs about how internal or external structures have influenced their lives, which encapsulates their perceived control (Rotter, 1966). Locus of control includes five health constructs (O’Hea et al., 2009). The first construct, internal control, encompasses what an individual feels they could control. The other four constructs (chance, powerful others, doctor, and God) are external control factors (O’Hea et al., 2009). Grable et al. (2009) stated that people who have an external locus of control believed or perceived that outside forces and events dictated their actions, decisions, and behaviors.

Flowers et al. (2003) research has indicated that African American men’s life experiences, success, and failures have reflected their internal and external locus of control. For many African American men, life circumstances may have seemed uncontrollable and they felt their problems were directly a cause of external locus of control factors (Flowers et al., 2003). Themes of White privilege have informed African American men that they are less advantaged, which is out of their control (Case, 2007). Beliefs about God have also kept African Americans from seeking out mental health help (Bierman, 2006; Dilsworth –Anderson et al., 2002; Chatters et al., 2008). As stated earlier, the prevalence of spirituality in the African American community works as a
counseling outlet for some African Americans. A feeling that God is in control allows African American men to believe that going to their local pastor or attending church weekly can solve any mental health problems they may have (Chatters et al., 2008). Moreover, many times when African American men have received mental health services, external factors, such as court orders or persistence from family members has been the underlying reason. These powerful others are in turn perceived as the enemy that cannot be controlled (Hu, Snowden, Jerrell, and Nguyen, 1991). Hu et al. (1991) and Takeuchi and Cheung (1998) found that African American clients are more likely than Whites to receive mental health treatment under coerced and mandated conditions rather than seeking these services (Townes et al., 2009). Research has also indicated that when African American men do seek therapy and have perceived it as unsuccessful, they equated the experience with external locus of control factors (Flowers et al., 2003). African American men who are mandated from the court to receive mental health help have more negative attitudes toward counseling because they viewed themselves as having a low external locus of control (Bonner, 1997, as cited in Duncan, 2003). Hence, they perceived their circumstances as having control over their well-being. Therefore, African American men that viewed their external locus of control as low, in terms of education and individual problems, may not seek out counseling.

Research also found that how locus of control is viewed has a significant effect on a person’s educational outcomes and life choices. For example, Bonner (1997) found that African American men with high external locus of control believed they had control over their educational choices and individual problems (Duncan, 2003). When African American men perceived themselves as having a low external locus of control, they did
not want oppressive powers to control their mental well being. Taylor’s (2003) research found that society systematically tries to emasculate African American men, which perpetuated a low external locus of control in the African American community.

It is important to note that there is not enough research on locus of control as it pertains to help-seeking behaviors of African American men. However, the research does indicate that there could be a possible connection between locus of control and the collective values of African American men, therefore affecting their help-seeking behaviors. In conclusion, this study is searching to find if this link is valid.

**Conclusion**

Chapter Two contained a review of the literature related to the help-seeking behaviors of African American men. After the literature that was pertinent to the variables of interest was reviewed, several important findings were noted. First, the evidence is clear that African American men rarely frequent formal counseling and tend to use informal sources to deal with problems of living. Counselors who seek to work with this population must consider unique cultural experiences and how their help-seeking behaviors are generated out of those experiences, as well as their individual worldview. Next, the literature review found that cultural mistrust played a significant role in African American men’s view of counseling services. Thirdly, the relationship between ASC and African American men’s help-seeking behaviors was investigated in only a few studies and more research is needed. Also, locus of control needs to be researched further as it relates to the help-seeking behaviors of African American men. Therefore, this study will add to the nascent literature on African American men’s help-seeking behaviors by exploring the relationship between cultural mistrust, African Self-
Consciousness, and locus of control as they relate to help-seeking behaviors of African American men.
CHAPTER III

METHOD

Introduction

This chapter focuses on the research procedures and methods employed for this study. Included is a discussion on the description of the participants, measures, procedures, research methods and design. The arrangement of Chapter III is as follows: (1) description of the participants; (2) discussion of the instruments; (3) procedures used for data collection; (4) data analysis methods; (5) discussion of the research method and design; and (6) summary of Chapter III.

Participants

There were a total of 68 African America men recruited for this study from Management Planning Institute Counseling Agency (MPI) in Chicago’s south side community. All of the men resided throughout Chicago’s south and west side communities. All of the participants in the study had received some form of services from MPI (job skills and motivational workshops, group counseling, or individual counseling). Demographic information indicated that the age of African American men ranged from 20 – 62, with the average age being 39 (SD = 10.13). 32.4% (n = 22) were high school graduates or G.E.D. holders, 17.6% (n = 12) were graduates from an undergraduate program, 16.2% (n = 11) were graduates from Masters level programs, 13.2% (n = 9) had some high school education, 4.4% (n = 3) were undergraduate juniors, 4.4% (n = 3) were graduate students, 4.4% (n = 3) graduated from a doctoral program, 2.9% (n = 2) were undergraduate sophomores, 2.9% (n = 2) were undergraduate super
seniors (have spent more than 4 years in college), and 1.5% (n = 1) were undergraduate freshman. A total of 32 of the African American men were employed full time, 18 were unemployed and supported by some form of public assistance, 15 were employed part time, and three were unemployed and supported by a spouse, partner, friend, or family member. 61.8% (n = 42) of the participants felt they lived in a close-knit community and 38.2% (n = 26) did not feel they lived in a close-knit community. Of the participants, 66.2% (n = 45) were single and 33.8% (n = 23) were married. 61.8% (n = 42) have received counseling services outside of MPI services (group, individual, and workshops) and 38.2% (n = 26) did not receive counseling services (only MPI workshops and events). The sample of African American men self-reported counseling services as follows: 16 more than one type of counseling services, 10 substance abuse counseling, 7 mental health counseling, 7 marital and couples counseling, 1 court ordered counseling, and 1 other (see Table 1).

A total of 68 survey packets were completed and used for this study. The participants were recruited by verbal invitation with the use of a written invitation script (see appendix B). MPI workshops, walk in intakes, and group counseling sessions were used to recruit participants. The participants read and reviewed an anonymous consent form that described the purpose of this study. The anonymous information form was approved by DePaul University’s Human Subject Institute Review Board and the Illinois Institute Review Board (IRB) (see appendix D). A more detailed discussion of the procedures for recruiting participants will be presented in the procedure section.
## Table 1

*Frequencies and Percentages for Participant Variables*

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<th>Participant Variables</th>
<th>Category</th>
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<th>%</th>
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</thead>
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<td><strong>Education</strong></td>
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<td>9</td>
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<tr>
<td></td>
<td>High School Grad/G.E.D.</td>
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<td></td>
<td>Undergraduate Freshman</td>
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<td><strong>1.5</strong></td>
<td>Undergraduate Sophomore</td>
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<td>2.9</td>
</tr>
<tr>
<td></td>
<td>Undergraduate Junior</td>
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<td>4.4</td>
</tr>
<tr>
<td></td>
<td>Undergraduate Super Senior</td>
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<td></td>
</tr>
<tr>
<td><strong>2.9</strong></td>
<td>Graduated Undergrad Program</td>
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<td></td>
<td>Graduate Student</td>
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<td>4.4</td>
</tr>
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<td></td>
<td>Graduated from Masters Program</td>
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<td>16.2</td>
</tr>
<tr>
<td></td>
<td>Graduated from Doctoral Program</td>
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<td>Total</td>
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<td>100.0</td>
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<tr>
<td><strong>Employment Status</strong></td>
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<td>18</td>
<td>26.5</td>
</tr>
<tr>
<td></td>
<td>Unemployed/supported by spouse, partner, friend, or family member</td>
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<td>4.4</td>
</tr>
<tr>
<td></td>
<td>Employed Part Time</td>
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<td></td>
<td>Employed Full Time</td>
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<td>Not in a Close-Knit Community</td>
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<td>38.2</td>
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<tr>
<td></td>
<td>Total</td>
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<td>100.0</td>
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<tr>
<td><strong>Marital Status</strong></td>
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<td></td>
<td>Single</td>
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<td>66.2</td>
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<td></td>
<td>Total</td>
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</tr>
<tr>
<td><strong>Counseling Services</strong></td>
<td>No Counseling Services</td>
<td>26</td>
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</tr>
<tr>
<td></td>
<td>Mental Health Counseling</td>
<td>7</td>
<td>10.3</td>
</tr>
<tr>
<td></td>
<td>Marital/Couples Counseling</td>
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<td>10.3</td>
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<tr>
<td></td>
<td>Substance Abuse Counseling</td>
<td>10</td>
<td>14.7</td>
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<td></td>
<td>Court Ordered Counseling</td>
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<td>1.5</td>
</tr>
<tr>
<td></td>
<td>Other</td>
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<td>1.5</td>
</tr>
<tr>
<td></td>
<td>More than one type</td>
<td>16</td>
<td>23.5</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>68</td>
<td>100.0</td>
</tr>
</tbody>
</table>
Instrumentation

Cultural Mistrust Inventory (CMI)

The CMI (Terrell and Terrell, 1981) measures the level of mistrust that African American Americans have for White Americans, which is based on Grier and Cobbs’ (1968) concept of cultural paranoia (Townes et al., 2009). Grier and Cobbs (1968) defined cultural paranoia as a healthy paranoia that allows African Americans to develop and maintain a high degree of suspicion to protect themselves from racial discrimination, oppression, and persecution from Whites (Townes et al., 2009).

The CMI consists of 48 items that are scored on a 7-point Likert scale and takes roughly 15 minutes to complete. The Likert scale ranges from strongly disagree to strongly agree. Statements such as “African American parents should teach their children not to trust White teachers,” “African Americans should be suspicious of a White person who tries to be friendly,” and “African Americans have often been deceived by White politicians” are included items on the CMI (Townes et al., 2009).

When a principal-component factor analysis was conducted, the results supported the use of the total score rather than the scores from separate subscales (Whaley, 2002). In a previous study with psychiatric inpatients, coefficient alphas for the CMI were .85 for the total scale and ranged from .43 (Interpersonal Relations) to .71 (Business and Work) for the subscales. In another study with college students, internal reliability was reported as .89 (Nickerson et al., 1994).

African Self-Consciousness Scale (ASCS)
The African Self-Consciousness Scale (ASCS) was developed and based on Joseph Baldwin’s (a.k.a Kobi Kambon) Afro centric theory. According to Baldwin’s Afro centric theory, African Self-Consciousness is the core element of African American personality. There are four competency dimensions of the African Self-Consciousness:

“(1) Awareness/recognition of one’s African identity and heritage; (2) General ideological and activity priorities placed on African American/African survival, liberation and proactive development; (3) Specific activity priorities placed on self-knowledge and self-affirmation; and (4) A posture of resolute resistance toward anti-African American forces and threats to African American/African survival in general” (Baldwin and Bell, 1985, p. 9). These competency dimensions are expressed in six areas: family, education, religion, cultural activities, political activities, and interpersonal relations.

The ASCS was developed from approximately 130 original items. Baldwin and Bell (1985) eliminated 88 items, which made the total equal 42 items based on five judges’ ratings of the original 130 items. The 42 items on the ASCS are scored on an 8-point Likert type scale and are detailed as: Strongly Disagree, 1-2; Disagree, 3-4; Agree, 5-6; Strongly Agree, 7-8. The ASCS takes about 20 minutes to complete and can be administered either individually or in groups. Previous data has proven that the ASCS has internal consistency coefficients ranging from .70 to .90. In 1985, Baldwin and Bell reported a test-retest reliability of .90 with a 6 week test-retest interval. The ASCS has support for construct validity as well (Baldwin and Bell, 1985). For example, research found that students who attended historically African American colleges and universities reported a higher ASC level than students who attended White colleges and universities.

To score the ASCS, the mean is computed by finding the sum of all the item scores, then
dividing by the number of items. The higher the score indicates the higher the endorsement of items in the direction of African Self-Consciousness.

Locus of Control (LOC) Scale

Rotter developed the locus of control (LOC) scale in 1966. It is perceived as a way to track location of control over our lives. For example, one who makes their decisions and feels in control of these and their behaviors has an internal LOC (Weiner 1992, as cited in Ugauak, Elias, Uli, and Suandi, 2007). Rotter (1954) explained that people enter into situations with either an internal or external nature, which is determined through how they view the expectancy of the probable outcome of their behaviors. Shinn (1973) believed that people with extreme internal LOC think of the self as being responsible for their behavior. For people with extreme external LOC they see others, luck or circumstances beyond their control and responsible for self-behavior (Ugauak et al., 2007).

The LOC scale (Rotter, 1966) is comprised of a 29 item forced-choice questionnaire. Each item is followed by a set of two responses, which are alternatives, lettered A or B. Participants have to select one statement of each pair which they "more strongly believe to be the case" (Ugauak et al., 2007). The reliability coefficient for the LOC scale is 0.75 and its content validity has been found valid and accurate in measuring internal and external LOC (Ugauak et al., 2007). For each “external” statement selected one point is given and the higher the score the more external the individual will be regarded (Rotter, 1966, as cited in Ugauak et al., 2007). For each “internal” statement selected a ‘0’ is given, which results in the possible range of scores from 0 to 29. This
indicates that items on the LOC scale are on a yes or no (A or B) basis to find the degree of one's agreement with each statement.

**Fisher and Farina Attitudes Toward Seeking Professional Psychological Help Scale (ATSPPH), Short Form**

The Attitudes Toward Seeking Professional Psychological Help Scale (ATSPPH; Fischer and Farina, 1995) is used to assess one’s attitudes toward seeking professional psychological help. It consists of 10 items and each item is rated on a 4-point, Likert-type scale, ranging from 1 (disagree) to 4 (agree). Half of the items are reverse ordered so that an affirmative response indicates positive attitudes toward seeking professional help, and the rest of the items are reverse scored. For this study, the word “counselor” will be used in several of the item questions instead of “psychologist.”

Fisher and Farina’s (1995) research has provided evidence to support the strong psychometric properties of the ATSPPH. The test-retest reliability was taken over a 4-week period and was .80. Over an eight-week period the reliability was .84. The coefficient alpha was also .84. The construct validity of the instrument was obtained through examination of the point biserial correlations between the respondents who had sought help and those who had not. The correlations consisted of .24 (p < .03) for women and .49 (p < .0001) for men. The ATSPPH has been used with various populations, including studies with international students and with students from Asian American cultures.

**Participant Variables (Demographic Questionnaire)**

A demographic questionnaire was also used for this study and is presented in Appendix C. The participants were asked to complete background information on the
demographic questionnaire. The background information included age, education, employment, community status, marital status, and counseling services history. Specific codes were used for the demographic questionnaire. The codes were as follows: education (some high school = 1, high school graduate = 2, undergraduate freshman = 3, undergraduate sophomore = 4, undergraduate junior = 5, undergraduate senior = 6, undergraduate super senior = 7, graduate of an undergrad program = 8, graduate student = 9, graduated from a Masters level program = 10, Doctoral student = 11, graduated from a Doctoral program = 12), employment status (unemployed/supported by form of public assistance = 1, unemployed/supported by spouse, partner, friend, or family member = 2, employed part time = 3, employed full time = 4), community status (don’t live in a close-knit community = 1, live in a close-knit community = 2), marital status (married = 1, single = 2), received counseling services (no = 1, yes = 2), and types of counseling services received (mental health counseling = 1, marital/couples counseling = 2, substance abuse counseling = 3, court ordered counseling = 4, other = 5, more than one type of counseling = 6).

**Procedures**

The participants that were invited to partake in this research study consisted of MPI clients from the 100 Black Men Program, St. Leonard’s House job skills workshop, new African American men at the agency who were seeking individual counseling, and from the ex felon program on the south side of Chicago. After receiving approval for the research project through the IRB, Dr. George Smith, the clinical director of MPI, was contacted to recruit and administer potential subjects with surveys. Using the invitation script, the purpose of the study and the procedures for data collection were discussed.
Each potential participant was informed that the purpose of the study is to explore the relationships among cultural mistrust, locus of control, and African Self-Consciousness, as they relate to help-seeking behaviors of African American men. I let them know that these factors will aid in understanding factors that contribute to the well-being of African American men’s mental health. I also informed them that the research is on a volunteer basis and all of the participants’ information will be anonymous. Additionally, after completing the survey an informal debriefing was provided so that any negative emotions or reactions that may have been triggered could be addressed. Participants were told if they experienced any negative emotional reactions towards the questions after completion of the survey, MPI would provide them with a counseling session, free of charge, to address these concerns, as well as problem-solving tactics, formal and informal resources to address these needs. However, after these services were explained, none of the participants opted for a counseling session during the study.

Data for this study was collected April 2011– May 2011, over a period of one month. Potential participants were informed that the research consisted of completing several brief questionnaires and would take approximately 20-25 minutes. The participants were informed that the questionnaires included a demographic form and questionnaires concerning cultural mistrust, locus of control, help seeking questions, and the African Self-Consciousness scale. If the participants were interested in participating, they were given the option to take a packet to complete on site or complete the survey online at https://www.surveymonkey.com/s/AfricanAmericanHelpSeeking.

If the participants decided to complete the survey on site they were instructed to read the enclosed materials. The materials were arranged in the packets so that
participants read the anonymous information form first. If after reading the anonymous form the participants were still interested in participating, they were then asked to complete the questionnaires in the order found in the packet. The participants were instructed to place completed questionnaires back in the envelope, seal the envelope, and return the envelope to myself, on site upon completion. If the participants decided to complete the survey online they were asked to complete the survey in a timely manner. The participants were also provided with the information sheet.

The Invitation Script informed the participants that their participation in the research study was on a voluntary basis and that their information would remain anonymous. The participants were instructed not to put their names on any of the forms so there would be no identifying information that would link them to the completed questionnaires. If participants did not wish to participate in the study, they were informed that they could simply discard the packet or return it to myself. The order of administration of the basic research questionnaires was counterbalanced across the research packets to control for order effects.

All questionnaires were completed anonymously and there were no names or identifying information placed anywhere on the materials. After the data was collected, I reviewed the instruments for accuracy and completion. There were seven research packets with incomplete criterion research measures that will not be included in the analysis.

**Data Analysis**

The data analysis section includes descriptive statistics and Pearson r correlations among the variables of interest. To consider the research question to what extent does
cultural mistrust, African Self-Consciousness, and locus of control predict African American men’s help-seeking behaviors and attitudes, a hierarchical multiple regression analysis was performed. In the first analysis, help-seeking behaviors was the criterion variable; age, education, close-knit community, cultural mistrust, locus of control, and African Self-Consciousness were the predictor variables. In the first analysis of the series, age, education and close-knit community were entered together as a block of variables to predict help-seeking behaviors. In the second analysis in the series, cultural mistrust, African Self-Consciousness, and locus of control were entered together as a block of variables to predict help-seeking behaviors.

In the second multiple regression analysis, counseling services history was the criterion variable, and age, education, close-knit community, cultural mistrust, African Self-Consciousness, and locus of control were the predictor variables. In the first analysis of the series, age, education, and close-knit community were entered together as a block of variables to predict help-seeking behaviors. In the second analysis in the series, cultural mistrust, African Self-Consciousness, and locus of control were entered together as a block of variables to predict help-seeking behaviors. The change in $R^2$ and the F test ($p < .05$) for significance of change in $R^2$ was calculated between consecutive analyses in the series. The change in $R^2$ represented the proportion of variance in the criterion accounted for by the predictor variables.

**Summary of Chapter III**

The purpose of Chapter III was to describe the methods used for this study. This chapter reported the sample, instruments and procedures used for this investigation. In
addition, the research method and design were also reported. Next, Chapter IV will report the research findings.
CHAPTER IV

RESULTS

Introduction

Chapter IV presents the research findings of this study. First, the basic descriptive statistics on the variables included in the study are presented, followed by an analysis of the main investigation. The results are organized according to the research question investigated.

Relationships Among Cultural Mistrust, African Self-Consciousness, Locus of Control, and Help-seeking behaviors

Descriptive statistics and Pearson r correlations were calculated for the variables included in this study. Table 2 presents the means and standard deviations of each variable, along with the Person r correlations between the participant predictor variables and the criterion variables. As seen in Table 2, Pearson r correlation analysis indicated that there was a significant negative Pearson r correlation at the p < .01 level between age and Attitudes Toward Seeking Professional Psychological Help (r = -.30, p = .05). Table 2 also presents the Pearson r correlations among the participant predictor variables. Education had a negative correlation that was significant at the p < .01 level with counseling services history (r = -.26, p = .05), therefore indicating that African American men in the sample who had lower education were more likely to have received counseling services in the past. The Pearson r correlation also shows that education had a negative correlation that was significant at the p < .01 level with age (r = .31, p = .05), therefore indicating that the sample of African American men who had lower education
also tended to be younger. Lastly, close-knit community correlated positively and significantly with counseling services history (r = .31, p = .05). This indicated that the sample of men who believed they lived in a close-knit community also were more likely to have past experiences with counseling.

Table 2.
**Means, Standard Deviations and Pearson-Moment Correlation**

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<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<td>-</td>
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<td>.07</td>
<td>-.26*</td>
<td>-.31*</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>CKC</td>
<td>.08</td>
<td>.31*</td>
<td>-.19</td>
<td>.07</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Cultural Mistrust</td>
<td>.01</td>
<td>-.12</td>
<td>.15</td>
<td>-.03</td>
<td>-.11</td>
<td>1</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>ASC</td>
<td>-.06</td>
<td>.05</td>
<td>-.20</td>
<td>.12</td>
<td>.08</td>
<td>.16</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Locus of Control</td>
<td>-.14</td>
<td>.19</td>
<td>.05</td>
<td>.02</td>
<td>.18</td>
<td>-.04</td>
<td>-.01</td>
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</tbody>
</table>

N: 68
Mean: 2.57 2.61 39.35 5.53 1.38 3.43 4.12 1.60
SD: .35 1.00 10.13 3.97 .49 .61 .64 .11

*Note. ATSPPH = Attitude Towards Seeking Professional Psychological Help, CSH = Counseling Services History, CKC = Close-Knit Community, ASC = African Self-Consciousness. Correlations in **bold** typeface are considered significant. *p = .05, **p = .01, ***p = .001.*

**Research Question 1:** To what extent did cultural mistrust, African Self-Consciousness, and locus of control predict African American men’s help-seeking behaviors and counseling services history?

**Null hypothesis 1:** After controlling for the variables of age, education, and close-knit community the variables of cultural mistrust, African Self-Consciousness, and locus of control would contribute to African American men’s help-seeking behaviors and counseling services history.
To consider the research question and to test the null hypothesis 1, a hierarchical multiple regression analysis was conducted and the results are presented in Table 3. In the first model summary, the participant variables of age, education, and close-knit community were entered as a block of variables and accounted for 18.1% of the variance in attitudes towards seeking help. Education (p=.030) and close-knit community (p=.004) were the significant predictors in this model. In the second model of this analysis, cultural mistrust, African Self-Consciousness, and locus of control were added and were not significant. It should be noted that the beta weights for education were negative and the beta weights for close-knit community were positive, indicating that African American men with lower education and those who lived in a close-knit community report more positive attitudes towards seeking help.

Table 3. 
*Hierarchical Regression Analysis with Attitudes Towards Seeking Professional Psychological Help as the Dependent Variable*

<table>
<thead>
<tr>
<th>Model 1</th>
<th>B</th>
<th>Error</th>
<th>Beta</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Constant)</td>
<td>1.192</td>
<td>.334***</td>
<td>3.565</td>
<td>.001</td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>.003</td>
<td>.06</td>
<td>.072</td>
<td>.594</td>
<td>.555</td>
</tr>
<tr>
<td>Education</td>
<td>-.033</td>
<td>.015**</td>
<td>-.265</td>
<td>-2.223</td>
<td>.030</td>
</tr>
<tr>
<td>CKC</td>
<td>.340</td>
<td>.115***</td>
<td>.340</td>
<td>2.951</td>
<td>.004</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Model 2</th>
<th>B</th>
<th>Error</th>
<th>Beta</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Constant)</td>
<td>.305</td>
<td>.952</td>
<td>.321</td>
<td>.750</td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>.004</td>
<td>.06</td>
<td>.089</td>
<td>.716</td>
<td>.477</td>
</tr>
<tr>
<td>Education</td>
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<td>.015</td>
<td>-.273</td>
<td>-2.285</td>
<td>.026</td>
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<tr>
<td>CKC</td>
<td>.299</td>
<td>.118</td>
<td>.299</td>
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<td>.014</td>
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<td>Cultural Mistrust</td>
<td>-.093</td>
<td>.095</td>
<td>-.116</td>
<td>-.984</td>
<td>.329</td>
</tr>
<tr>
<td>ASC</td>
<td>.070</td>
<td>.091</td>
<td>.091</td>
<td>.768</td>
<td>.445</td>
</tr>
<tr>
<td>Locus of Control</td>
<td>.595</td>
<td>.508</td>
<td>.136</td>
<td>1.172</td>
<td>.246</td>
</tr>
</tbody>
</table>

**Model 1**
Multiple R = .425,   \[R^2 = .181,\]  
Adjusted R\(^2\) = .142,  \[R^2\] Change = .181,  
F = (3, 64) = 4.707, \[p = .005\]
Model 2
Multiple R = .465, \( R^2 = .216 \), Adjusted \( R^2 = .139 \), \( R^2 \) Change = .035, 
\[ F = (3, 61) = .914, \quad p = .440 \]

Note. CKC = Close-Knit Community, ASC = African Self-Consciousness. Beta weights in **bold** typeface are considered significant. *p = .10, **p = .05, ***p = .01.

In the second model summary seen in Table 4 the participant variables of age, education, and close-knit community were entered as block variables. In the first model the participant variables accounted for 9.4% of the variance in counseling services. Age (p=.030) was the only significant predictor in this model. In the second model of this analysis, cultural mistrust, African Self-Consciousness, and locus of control were added and were not significant. It should be noted that the beta weight for age was negative, indicating that younger African American men tended to have a history of seeking counseling services.

Table 4.
*Hierarchical Regression Analysis with Counseling Services History as the Dependent Variable*

<table>
<thead>
<tr>
<th>Model 1</th>
<th>B</th>
<th>Error</th>
<th>Beta</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Constant)</td>
<td>2.984</td>
<td>.252***</td>
<td>11.830</td>
<td>.000</td>
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</tr>
<tr>
<td>Age</td>
<td>-.011</td>
<td>.004*</td>
<td>-.309</td>
<td>-2.433</td>
<td>.018</td>
</tr>
<tr>
<td>Education</td>
<td>-.003</td>
<td>.011</td>
<td>-.031</td>
<td>-.245</td>
<td>.808</td>
</tr>
<tr>
<td>CKC</td>
<td>.016</td>
<td>.087</td>
<td>.023</td>
<td>.187</td>
<td>.852</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Model 2</th>
<th>B</th>
<th>Error</th>
<th>Beta</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Constant)</td>
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<td>.718</td>
<td>5.277</td>
<td>.000</td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>-.011</td>
<td>.005</td>
<td>-.331</td>
<td>-2.523</td>
<td>.014</td>
</tr>
<tr>
<td>Education</td>
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<td>.011</td>
<td>-.018</td>
<td>-.146</td>
<td>.885</td>
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<tr>
<td>CKC</td>
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<td>.089</td>
<td>.061</td>
<td>.492</td>
<td>.624</td>
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<tr>
<td>Cultural Mistrust</td>
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<td>.072</td>
<td>.079</td>
<td>.640</td>
<td>.525</td>
</tr>
<tr>
<td>ASC</td>
<td>-.079</td>
<td>.068</td>
<td>-.143</td>
<td>-1.150</td>
<td>.255</td>
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<tr>
<td>Locus of Control</td>
<td>-.411</td>
<td>.383</td>
<td>-.130</td>
<td>-1.071</td>
<td>.288</td>
</tr>
</tbody>
</table>

Note. CKC = Close-Knit Community, ASC = African Self-Consciousness. Beta weights in **bold** typeface are considered significant. *p = .10, **p = .05, ***p = .01.
**Model 2**

Multiple R = .363, \( R^2 = .132 \), Adjusted \( R^2 \) = .046, \( R^2 \) Change = .038,
F = (3, 61) = .888, \( p = .452 \)

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*Note.* CNC = Close-Knit Community, ASC = African Self-Consciousness. Beta weights in **bold** typeface are considered significant. *\( p = .10 \), **\( p = .05 \), ***\( p = .01 \).  

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**Summary of Chapter IV**

In Chapter IV, the results of the study were presented. The primary focus of Chapter IV was to present the findings regarding the relationships among participant variables, cultural mistrust, African Self-Consciousness, locus of control, and attitudes towards seeking help. A hierarchical regression analysis was employed to test Null hypothesis 1. This analysis found that after controlling for participant demographic variables there was no link between cultural mistrust, locus of control, or African Self-Consciousness as it relates to the attitudes towards seeking help of African American men. However, African American men in the sample with lower education and those who believed they lived in a close-knit community had a more positive attitude toward seeking out professional counseling. Additionally, younger African American men in the sample were more likely to have a history of seeking out counseling services.
CHAPTER V

DISCUSSION

Introduction

Chapter V includes a discussion and implications of the results that are central to the current study. Chapter V is arranged into five sections. The sections are as follows:

(1) Attitudes Toward Seeking Professional Psychological Help and African American Men with the subheadings (a) Demographic Variables and Attitudes Toward Seeking Professional Psychological Help, (b) Cultural Mistrust Inventory and Attitudes Toward Seeking Professional Psychological Help, (c) African Self-Consciousness Scale and Attitudes Toward Seeking Professional Psychological Help, (d) Locus of Control and Attitudes Toward Seeking Professional Psychological Help; (2) Counseling Services History and African American Men with the subheadings (a) Demographic Variables and Counseling Services History; (b) Cultural Mistrust Inventory and Counseling Services History, (c) African Self-Consciousness Scale and Counseling Services History; (d) Locus of Control and Counseling Services History; (3) Implications and Recommendations; (4) Limitations of the Current Study; and (5) Summary of Chapter V.

Attitudes Toward Seeking Professional Psychological Help and African American Men

This study highlights some important findings concerning African American men’s attitudes towards seeking professional help. As stated in chapter 4, the study found that African American men with lower education and African American men who lived in a close-knit community had positive attitudes toward seeking out professional
help. Additionally, younger African American men were more likely to have a history of seeking out counseling services. To further support the multiple regression analysis, when examining the results from the Attitudes Toward Seeking Professional Psychological Help scale, of the 68 African American men, 55.9% stated that if they thought they were having a mental breakdown their first inclination would be to get professional attention. Moreover, 50% and 26.5%, agree and partly agree, respectively, that they would want to get psychological help if they were worried or upset for a long period of time. This is consistent with prior research from Sanders Thompson, Bazile, and Akbar (2004) that found African American men do see the need for and benefit of psychotherapy in the African American community.

Demographic Variables and Attitudes Toward Seeking Professional Psychological Help

The multiple regression analysis indicated that African American men who lived in a close-knit community were more likely to have positive attitudes towards seeking out help. This significance supports the demographic questionnaire findings that show out of the 68 African American men in the study, 42% believed they lived in a close-knit community. All of the participants came from the surrounding south side community near MPI, therefore the significant data could indicate that the African American men in the study have had positive experiences with the counseling profession in that community.

However, out of the 68 African American men in the study, 54.4% believed on the Attitudes Toward Seeking Professional Help scale that talking about problems with a psychologist is a poor way of getting rid of emotional conflicts. Past research from Tovar Murray, 2010; Waites, 2009; Chatters et al., 2008; Cole, 2009; and Bean et al., 2007, to
name a few, indicate that informal sources of help provide coping resources for African American men. Findings from Musa, Schultz, Harris, Silverman, and Thomas (2009) found that African Americans also feel that information from informal sources is trustworthy. Further research on how the community and informal sources work together to provide counseling services could enhance these research findings.

Education was a significant independent predictor of Attitudes Toward Seeking Professional Psychological Help for African American men. The beta weight for education was negative, suggesting that African American men with lower education are more likely to have positive attitudes towards seeking out professional counseling. This finding is inconsistent with several prior studies that have found education to be a positive predictor of African American men’s help-seeking behaviors. Duncan (2003) and Townes et al. (2009) found that African American men with lower education are less likely to seek out counseling help. It is important to note that employment, marital status, and counseling services history do not predict Attitudes Toward Seeking Professional Psychological Help.

**Cultural Mistrust Inventory and Attitudes Toward Seeking Professional Psychological Help**

Current findings indicate that counselor mistrust did not predict African American men’s attitude toward seeking professional help. The results of this study are not consistent with past studies (i.e. Waites, 2009; Townes et al., 2009; Keating and Robertson, 2004; and Cunningham and Chavez-Korell, 2009) that found cultural mistrust plays an important role in the help-seeking behaviors of African American men. Work
from Zekeri and Habtemariam (2006) and Kennedy, Mathis, and Woods (2007) also
found that African American men do not trust the helping professions.

More than half of the African American men in the study believed that Whites are
trustworthy. On the Cultural Mistrust Inventory, 72.1% of the 68 participants stated that
there are some Whites that are trustworthy enough to have as close friends and 89.7% of
the sample did not believe that Whites take away what African Americans earn.
Additionally, 69.1% stated that whether you should trust a person is not based on race.
The men in this sample may have had positive experiences with the counseling
profession. MPI is a non-traditional agency that believes in helping their clients have a
voice and feel accepted. Additionally, Whaley (2004) found that high rates of
discrimination create mistrust. This could indicate that my research participants did not
feel high discrimination in their close-knit communities or in their experiences with
counseling at MPI.

Duncan (2003, 2007), Whaley (2001), and Townes et al. (2009) found a link
between counselor preference and cultural mistrust. Their work indicates that the higher
the cultural mistrust the more likely the African American men would prefer an African
American counselor. The sample of African American men in this study had received
services from a diverse counseling agency. Sanders et al. (2004) found in their research
that African American men look for subtle cues from Whites in the helping profession,
such as African American reading literature in the waiting room, ethnic minorities who
work in and for the therapist, and diversity of the art in the waiting rooms to indicate
whether they should be trusted. This could indicate that diverse counseling agencies are
more inviting to African American men.
On the contrary, there were several trends to consider in the sample. Out of the sample size of African American men, on the Cultural Mistrust Inventory 57.3% disagreed that a African American person can make a deal with a White person simply by a handshake and 55.5% believed that a White policeman will slant a story to make African Americans appear guilty. Moreover, 51.5% of the sample believed that White politicians cannot be relied on to keep promises they make to African Americans. This is consistent with the research of Howell, Perry, and Vile (2004) who found that African American men are more likely than Whites to report having experienced involuntary, uncivil, or adversarial contacts with police; to be stopped, questioned, and/or searched without cause or due process. Past research has also found that African Americans experience more verbal or physical abuse from the police than Whites (Howell, Perry, Vile 2004). Additionally, Sue and Sue (2003) and Lindsey et al. (2006) found that African American men feel Whites who are part of “the establishment” have rejected their cultural values and are part of the oppressive dominant system. However, it is important to note that this study did not measure African American men’s view on untrustworthy sources, therefore, research that could explore whether the counseling profession is viewed as part of “the establishment” is needed.

African Self-Consciousness Scale and Attitudes Toward Seeking Professional Psychological Help

Current findings indicate that African Self-Consciousness did not predict attitudes towards seeking professional help among a sample of African American men. Of the African American men in the study, 45.6% stated on the demographic questionnaire that they had received no more than a high school diploma or G.E.D. African Self-
Consciousness tends to be high among educated African Americans, making these findings consistent with African Self-Consciousness not being significant in the current study. Baldwin and Bell (1985) stated that the one of the six competency dimensions for African Self-Consciousness is expressed in education level. African American college students that are older, in upper level classes and have black studies backgrounds are more likely to have high African Self-Consciousness (Baldwin, Duncan, and Bell, 1987, as cited in Witherspoon and Speight, 2009).

**Locus of Control and Attitudes Toward Seeking Professional Psychological Help**

This study predicted that African American men have an external locus of control that affects their help-seeking behaviors. Current findings indicate that locus of control did not predict African American men’s attitude toward seeking professional help. This result is inconsistent with current research by Townes et al. (2009) and Hu et al. (1991) that found court orders, family influence, and other external “powerful others” cause African American men to seek out counseling services. These findings need to be explored further. The study did not measure the effects of court orders or family influence on the participants. More research needs to be done on the effects of locus of control on African American men’s help-seeking behaviors.

**Counseling Services History and African American Men**

**Demographic Variables and Counseling Services History**

Current findings indicate that age was a significant predict of counseling services history for African American men. The beta weight for age was negative, suggesting that younger African American men reported to have sought out professional counseling in the past. This finding is consistent with several prior studies that have found age to be a
predictor of African American men’s help-seeking behaviors. Duncan (2003, 2007) and Maulik, Mendelson, and Tandon (2011) found that younger African American men have a history of seeking out counseling services. Clearly, one of the most significant findings from the present study is that age continues to be a highly important variable in predicting African American men’s help-seeking behaviors. However, past studies from Williams and Justice (2010) and Givens, Kalz, Bellem, and Holms (2007) indicate that there is a stigma related to seeking out counseling services in the African American community. Further research needs to be conducted to determine the validity of these factors and how they relate to younger African American men.

**Cultural Mistrust Inventory and Counseling Services History**

Current findings indicate that cultural mistrust does not predict counseling services history. As stated earlier, all of the African American men in the sample had past experiences with participating in services at a counseling agency. Therefore, the findings are consistent with prior studies by Musa et al. (2009) that found trust was linked with past experiences and that African Americans are trustful of the health field. Sanders et al. (2004) found that African American men who have had successful encounters in therapy would continue to go back. Additionally, research from Lindsey et al. (2006) indicated that African American men who have more negative experiences in counseling are more likely to mistrust the helping profession and, therefore not seek out additional counseling services. Considering the trends of the current research, the African American men in the sample might have had positive experiences with the helping profession through their encounters with MPI counseling agency.

**African Self-Consciousness Scale and Counseling Services History**
Current findings indicate that African Self-Consciousness does not predict counseling services history. Stewart (2008) found that it is common for African American men to hold multiple identities. These findings highlight trends to consider in the current study. Out of the 68 African American male participants, 55.9% on the African Self-Consciousness scale did not believe that African Americans should uplift the African American race by any means necessary. Additionally, 55.8% of the sample believed that African Americans should have the option to view Africa or America as their homeland. However, 54.4% of the African American men believed that African Americans from other countries should be viewed as fellow brothers and sisters and not foreigners. Additionally, 52.9% on the African Self-Consciousness scale don’t believe that African American’s concern for self-knowledge and self-collective determination makes them treat White people badly. Research is limited on the relationship between counseling services history and African Self-Consciousness Scale. Further research needs to be explored to find out if African American men believe that African Americans with high African Self-Consciousness Scale should not treat or view Whites negatively.

Locus of Control and Counseling Services History

Current findings found that locus of control does not predict counseling services history. As stated earlier, more research needs to be done on the relationship between help-seeking behaviors of African American men and locus of control. Particularly, African American male viewpoints on the definitions of uncontrollable establishments need to be explored. In the sample, 83.8% on the Locus of Control scale believed that there will always be wars no matter how much we try to prevent them. Additionally, 61.8% believed it is difficult for people to have much control over the things politicians
do in office. These findings are consistent with past research from Warren (2011) who found that African Americans are twice as likely to hear negative stories about interactions with the police from their African American family and friends than Whites. Case (2007), Flowers et al. (2003), and Moon, Groethe, Boudreau (2009) argue that these establishments create an external locus of control. Research is limited and deserves further exploration.

**Implications and Recommendations**

The results for the current study are important for counseling professionals who are interested in working with African American men. In this study, education and close-knit community were identified as significant demographic predictors of Attitudes Toward Seeking Professional Psychological Help for African American men. Age also emerged as a consistent unique predictor of counseling services history of African American men. Additionally, understanding the changing trends for cultural mistrust, African Self-Consciousness, and locus of control as they are related to the counseling profession and African American men in the United States are critical to advancing mental health. Several recommendations emerged from the current findings that will enhance the work with African American men clients in the counseling profession.

The recommendations are as follows:

1. Counseling agencies should continue to make it a primary goal to break stigmas and build counseling agencies in close-knit communities where there is a high need, especially areas that house large numbers of young African American men with little education. Additionally, taken from the work of Tovar-Murray and Munley (2007), for African American men who believe they live in a close-knit community,
counseling professionals could provide treatment goals that strive to integrate both the individual and the community in the set treatment goals that focus on self-worth and community worth. In addition, counseling professionals could develop effective prevention programs that will allow their African American men clients’ to connect with their community to improve their mental health.

2. As part of working with the community at large, counseling professionals should develop program strategies in the African American community that integrate informal sources of help with the professional counseling industry. For example, counselors could do outreach services with the African American church and African American barbershops that assist with educational and social resources. This means that counseling educators and therapists need to be more proactive in developing interventions or interdisciplinary collaborations on behalf of African American men clients and their community by being a facilitator between African Americans and the larger socio-cultural environment.

3. The role of cultural mistrust and African Self-Consciousness in the African American male community needs to be explored further. Counseling psychologists and other professionals who provide counseling and health services should not assume that their African American men are untrustworthy of Whites or identify with their African heritage. Promoting a more individualized approach when working with African American men, as opposed to an Afro centric approach should be emphasized within the counseling community. To identify African American men identity views, an assessment that highlights issues around identity should be
implemented in counseling agencies, as well as questions about close-knit community views.

4. Current findings suggest that age is an important variable in the help-seeking behaviors of African American men. Future research studies in counseling may wish to include age, as well as employment, close-knit community, marital status, and counseling services history when the help-seeking behaviors of African American men are studied. Additionally, past research by Sanders et al. (2004) found that African American participants did not indicate high mistrust of Whites during quantitative research. However, during the qualitative piece, African Americans felt they could speak more freely about their mistrust of Whites. This could indicate that further research needs to be conducted on the help-seeking behaviors of African American men that include a quantitative and qualitative piece.

5. Unexpectedly, locus of control did not predict African American men’s attitude toward seeking professional help. However, additional research with different measures and different research designs indicated in the discussion may be important to understanding the relationships among these variables.

**Limitations of the Current Study**

For the following study, several limitations were recognized. First, the size of the sample studied was too small to be effective. There were only 68 participants available for the study. Future research may include a larger number of African American men. With the size of the study being so small it is hard to determine if the variables would have been affected, and therefore, if cultural mistrust, African Self-Consciousness, locus
of control, and attitudes towards seeking help would create a significant relationship
towards African American men’s help-seeking behaviors.

Another limitation of the study was that all of the African American men in the
study have experienced some type of interaction with a counseling agency prior to the
research study. Each participant had taken workshops, individual, and/or group
counseling sessions from Management Planning Institute. This may relate to the lack of
significant findings on the Attitudes Towards Seeking Professional Psychological Help
Scale. Future research may include more African American men, African American men
from multiple locations throughout various communities and in different states, as well as
African American men from different generations.

Another limitation of the study was that all the African America men in the study
had received services from an African American-owned, diverse counseling agency.
Therefore, there may have been no link with Cultural Mistrust Inventory and African
Self-Consciousness Scale simply because the participants live in a predominantly African
American community. Additionally, the population may have felt comfortable with the
counseling profession because they are not faced with using White counselors. Further
research may want to explore African American men who have experienced counseling
from predominantly White counseling agencies and African American men who live in
predominantly White communities so that counselor preference could be further
explored.

Finally, another possible limitation of this study may have to do with the age of
participants. The study was open to African American men ages 18 – 70 and the average
age of the sample for this study was 39. Therefore, future research may need to explore
the circumstances and characteristics underlying the help-seeking behaviors of African American men in smaller age ranges. For example, studies done on African American men ages 18 – 25, 25 – 35, 35 – 45, 45 – 55, 55 – 65, and 65 and older may indicate interesting results on the help-seeking behaviors of this population.

Summary of Chapter V

Chapter V included a summary of discussion of the results, implications, limitations and future research, and summary. Special emphasis was given to the role that age played on African American men’s help-seeking behaviors. Recommendations for future research were made, as well as suggestions for interventions with African American men.
Appendices

Appendix A

Information Sheet for Participation in Research Study

Help Seeking Behaviors of African American Men

You are being asked to participate in a research study being conducted by Leslie Holley, a graduate student at DePaul University as a requirement to obtain her Masters degree. Faculty advisor, Dr. Tovar-Murray, is supervising this research. We are asking you because we are trying to learn more about the mental health needs of African American men. Given the prevalence of racism towards African American men, understanding factors that may have influenced their help-seeking behaviors and attitudes can be an important area of research. This research hopes to highlight factors that influence African American men’s helping seeking behaviors so that outreach efforts can be developed to better serve this population and increase their counseling utilization rates. Therefore, we would like to find out to what extent cultural mistrust, African Self-Consciousness, and locus of control predict African American men's help-seeking behaviors. This study will take about 25 minutes of your time. If you agree to be in this study, you will be asked to fill out a survey. The survey will include a demographic questionnaire and questions about your trust and/or mistrust of Whites, your beliefs about Black life, what you believe you control and cannot control, and your attitudes towards seeking out professional psychological help. You can choose not to participate. There will be no negative consequences if you decide not to participate or change your mind later. Additionally, if you wish to complete the survey at another time you can do so online. If you would like to complete the survey online please let the receptionist know and she will provide you with website and login information.

If you have questions about this study, please contact Leslie Holley at 773-569-1827 or by email at leslieholley1@mac.com, and Dr. Tovar-Murray at 773-325-1672 or by email at dtovarmu@depaul.edu. If you have questions about your rights as a research subject, you may contact Susan Loess-Perez, DePaul University’s Director of Research Protections at 312-362-7593 or by email at sloesspe@depaul.edu.

Please note: After completing the survey an informal debriefing will be provided so that any negative emotions or reactions that may have been triggered can be addressed. While participating, if you feel any negative emotional reactions towards the questions please let your therapist know, as well, and we will provide one additional counseling session, free of charge, to address these concerns, as well as problem solving tactics and formal and informal resources to address your needs.

You may keep this information for your records.
APPENDIX B
Invitation Script - Research questionnaires to be completed and returned to the investigator.

The investigator will verbally present the following invitation script to potential participants.

“Hello. My name is Leslie Holley. I am a graduate student in the Counseling Department in the School of Education at DePaul University. I am conducting my Master’s thesis on the Help Seeking Behaviors of African American Men. Given the prevalence of racism towards African American men, understanding factors that may have influenced their help-seeking behaviors and attitudes can be an important area of research. This research hopes to highlight factors that influence African American men’s helping seeking behaviors so that outreach efforts can be developed to better serve this population and increase their counseling utilization rates. Since my research project is focusing on the experience of African American men, I am only recruiting African American males within the community, as well as, at DePaul University, who are willing to participate in this project. This research is anonymous. All the information collected is not connected in any way to personal identifying information.

This research consists of completing 5 brief questionnaires and will take approximately 20 - 25 minutes. The questionnaires include a demographic form, one measure of cultural mistrust, one measure of identity, and 2 questionnaires concerning control and help seeking behaviors. Your participation is completely anonymous and confidential.

If you think you are interested in participating, please take a packet. Read the enclosed materials and complete the questionnaires. Once you have completed the questionnaires, place them back in the envelope, seal the envelope, and place the materials in the box at the front desk. After completing the survey an informal debriefing will be provided so that any negative emotions or reactions that may have been triggered can be addressed. While participating, if you feel any negative emotional reactions towards the questions please let your therapist know, as well, and we will provide one additional counseling session, free of charge, to address these concerns, as well as problem solving tactics and formal and informal resources to address your needs.

If you do not wish to participate in this research project, you may return the blank research materials or you may discard them. Additionally, if you wish to complete the survey at another time you can do so online. If you would like to complete the survey online please let the receptionist know and she will provide you with website and login information.

Are there any questions?
“Thank you. I appreciate your participation in this research project.”
APPENDIX C
Demographics Questionnaire

Instructions: Circle or write responses to each. *(Time: less than 1 minute)*

1. What is your race or ethnicity?
   A. Black/African American
   B. Black International (specify nationality) ____________________

2. What is your age? ____________

3. Current Educational Class Level: (please circle one letter)
   | A. Some High School (did not graduate) | G. Undergraduate Super Senior (in a program more than 4 years) |
   | B. High School Graduate or G.E.D.     | H. Graduated from an Undergraduate Program |
   | C. Undergraduate Freshman             | I. Graduate Student |
   | D. Undergraduate Sophomore            | J. Graduated from a Masters Level Program |
   | E. Undergraduate Junior               | K. Doctoral Student |
   | F. Undergraduate Senior               | L. Graduated from a Doctoral Program |

4. Employment Status
   A. Employed (full-time)
   B. Employed (part-time)
   C. Unemployed/supported by spouse, partner, friend or family member or thru child support or alimony
   D. Unemployed/supported by form of public assistance

5. If employed, occupation? ________________________________

6. US Citizen? Yes/No (circle one)

7. Do you think you live in a close-net community (Do you know most of your neighbors and local businesses in your area)? Yes/No (circle one)

8. Are you disabled? Yes/No (circle one)

9. Are you (circle one)
   Married      Single

10. Have you ever received counseling services? Yes/No (Please circle one)
    If your answer is to yes, please indicate what type of counseling services you received.
    (Check all that apply)
    ______ Mental Health Counseling       ______ Court Ordered Counseling
    ______ Marital/Couples Counseling    ______ Other (Please describe):
    ______ Substance Abuse Counseling
APPENDIX D

Research Involving Human Subjects

NOTICE OF INSTITUTIONAL REVIEW BOARD ACTION

To:  Leslie Holley, graduate student, School of Education
     Tovar Murray, Ph.D., faculty, School of Education

Date:  April 20, 2011

Re:  Research Protocol #LH040611EDU
     “Help-seeking behaviors of African-American men”

Please review the following important information about the review of your proposed research activity.

Review Details
☐ Original Review
☐ Amendment
☐ Unanticipated Problem Report

☑ Exempt Review, under 45 CFR 46.101(b)

Your research project meets the criteria for an exemption as a study that will examine the correlation between predictor variables and perceptions of help-seeking behaviors of adult, African-American men in the local community and at a local university.

Exempt Category of Review:  2

(2) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior, unless:
(i) information obtained is recorded in such a manner that human subjects can be identified, directly or through identifiers linked to the subjects; and
(ii) any disclosure of the human subject's responses outside the research could reasonably place the subjects at risk of criminal or civil liability or be damaging to the subject's financial standing, employability, or reputation.

Approval Details
☐ Approved
☑ Approved (Previous contingencies have been resolved.)

Approval Date:  April 19, 2011

Number of approved participants:  200
Funding Agency:  Unfunded

Reminders
• Under DePaul’s current institutional policy governing human research, research projects that meet the criteria for an exemption determination receive administrative review. Once projects are determined to be exempt, the researcher is free to begin the work and is not required to submit an annual update (continuing review). As your project has been determined to be exempt, your primary obligation moving forward is to resubmit your research materials for review and classification/approval, before they are implemented in the research, if you propose substantive changes to the project. Substantive changes would include changes in the design or focus of the
research project, revisions to the consent/information sheet for participants, addition of new measures or instruments, and any change to the research that might alter the exemption status (either add additional exemption categories or make the research no longer eligible for an exemption determination).

* Once the project is complete, you should submit a closure report to the IRB.

The Office of Research Protections would like to thank you for your efforts and cooperation and wishes you the best of luck on your research. If you have any questions, please contact me by telephone at (312) 362-7497 or by email at kwalsh31@depaul.edu.

For the Board,

[Signature]

Kari Walsh
Assistant Director, Office of Research Protections
Academic Affairs, DePaul University
1 East Jackson Blvd.
Chicago, IL 60604

Office Location: 14 E. Jackson Blvd., Suite 1030
REFERENCES


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