



# Relationship Between Masculine Role Expectations, Emotional Suppression And Mental Health Stigma Among College Men

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**ABSTRACT:** Stigma around mental health remains a major hedge to help seeking among men. The present study examined the relationship between mental health stigma, emotional suppression and masculine role norms among college male students (N= 100). Standardized measures including SSOSH, ERQ-S and MRNI-SF were used. Results revealed a significant positive correlation between emotional suppression and mental health stigma, indicating that individuals who suppress feelings are more likely to hold stigmatizing beliefs toward seeking help. Although masculine role norms showed a positive association, it wasn't statistically significant. Regression analysis linked emotional suppression as the only significant predictor of stigma. The findings punctuate the significance of addressing emotional suppression to reduce mental health stigma and promote help-seeking among youthful men.

**KEYWORDS:** Masculine Role Expectations, Emotional Suppression, Mental Health Stigma, College Men

## I. INTRODUCTION

Mental health is a fundamental aspect of overall performance and emotional stability, particularly in young adulthood. This phase of development is characterized by greater autonomy, the formation of identity, and encounters with academic and social expectations. Academic performance pressures, peer comparisons, financial difficulties, and career planning expose college students to significant risks of psychological distress, such as anxiety, stress disorders, and depressive symptoms.

Research shows that young men are notably less inclined than women to seek assistance or talk about their emotional challenges (Greene & Banerjee, 2006). This trend cannot be solely blamed on individual hesitance; instead, it reveals ingrained cultural and traditional standards concerning masculinity. From a young age, boys are frequently taught to value power, authority, self-sufficiency, and emotional stoicism. Demonstrating vulnerability can be viewed as a sign of weakness, hindering candid conversations about mental health challenges.

This socialization influences the way young men connect with their feelings. Expectations regarding behaviour that stress dominance, resilience, and self-sufficiency often hinder emotional expression and dependence on others, thereby making emotional suppression a prevalent coping strategy. While society frequently values emotional restraint, studies show that profound suppression of emotions leads to psychological distress, diminished emotional awareness, ineffective coping strategies, and heightened mental health stigma.

Society upholds particular notions regarding how men ought to think, feel and act. From a young age, boys absorb these expectations from media, peers, family and culture. They are frequently anticipated to be self-sufficient, emotionally stable, robust, assertive, competitive and able to solve problems on their own. Asking for support or sharing feelings is often seen as a lack of strength. According to Joseph H. Pleck, masculinity is influenced less by biological factors and more by societal expectations that men feel compelled to meet. When men recognize that they are not fulfilling these expectations, psychological unease can emerge as stress, frustration or guilt, strengthening the notion that they are “not masculine enough”. Ronald F. Levant’s concept of Normative Male Alexithymia explores how cultural influences hinder men’s ability to recognize and express emotions not due to biology, but because of consistent messages regarding societal expectations of masculinity.

Emotions assist people in comprehending themselves, relating to others and reacting to their surroundings. Although emotional regulation is crucial for psychological health not every regulatory approach is equally beneficial. A commonly used yet intricate approach is emotional suppression. As defined by James J. Gross, suppression is a response-oriented approach where people try to diminish the visible expression of emotions once an emotional reaction has begun. In contrast to cognitive reappraisal, which changes the evaluation of a circumstances, suppression focuses on controlling outward displays of emotions like tears, obvious anxiety or anger. While suppression might promote social harmony in the short run, its long-term effects on mental health can be detrimental. Conventional gender expectations have historically associated emotional control with strength leading young men to often be taught to refrain from expressing emotions and to rely on others.

While emotional suppression might seem to assist people in keeping control, studies indicate that regularly hiding emotions has detrimental psychological effects. Emotions play crucial roles in aiding individuals to comprehend experiences and manage stress. When frequently overlooked or stifled, they can build up and lead to heightened mental stress. For men in college, academic demands, challenges to handle, and students may resort to unhelpful methods like avoidance, withdrawal, or over-involvement in their studies.

### **Review of Literature**

A significant amount of studies has explored how masculine standards influence men’s perspectives on mental health and their willingness to seek help. Schaub and Williams (2007) discovered that men who highly supported conventional masculine standards and faced greater gender role conflict were more inclined to question the effectiveness of therapy and fear showing vulnerability. Biddle et al (2004) likewise discovered that young adults experiencing mental distress frequently favoured handling issues on their own instead of pursuing professional assistance, mentioning concerns regarding judgement and unease with sharing emotions as major obstacles.

A systematic review by Seidler et al. (2016) investigated the impact of masculinity on men’s readiness to seek assistance for depression, highlighting that traditional masculine norms aren’t always detrimental – when presented positively, they can inspire men to take charge of their health. Chatmon (2020) delved deeper into the impact of mental health stigma on men, contending that emotional vulnerability is frequently viewed as a sign of personal failure, resulting in internal turmoil that causes men to suffer in silence.

Vogel et al. (2011) discovered that men who strongly adhered to conventional masculine norms were more prone to experience self-stigma regarding seeking professional assistance, highlighting the connection between masculinity and stigma.

Health et al. (2017) discovered that men who exhibited high self-compassion encountered fewer obstacles to seeking counselling despite having a strong identification with traditional masculine ideals. Mahalik et al. (2003) created the Conformity to Masculine Norms Inventory (CMNI), demonstrating that masculinity includes various dimensions –such as emotional control, self-sufficiency, and assertiveness –each linked to different psychological outcomes. Wong et al. (2017) performed a meta-analysis that verified restrictive emotionally and self-reliance were regularly lined to poorer mental health results and decreased use of mental health services.

Studies consistently show that suppressing emotions correlates with adverse psychological effects. Ciarrochi et al. (2014) discovered that people who often inhibit their emotions generally face more psychological distress and diminished flexibility, since suppression obstructs emotional processing and results in psychological rigidity. Peters et al. (2011) utilized experience sampling methods to demonstrate that frequent suppression correlated with a greater number of negative and fewer positive emotional experiences in everyday life, suggesting that suppression intensifies internal distress over time. Levant et al discovered that a greater adherence to traditional masculine standards especially those highlighting

emotional control and resilience- was notably associated with increase alexithymia, hindering men's ability to recognize and express their internal emotional state

This study seeks to investigate how masculine role expectation and emotional suppression affect mental health stigma in male college student. It aims to: (a) evaluate the link between masculine role and mental health stigma; (b) evaluate the connection between emotional suppression and mental health stigma; and (c) identify if masculine role expectation and emotional suppression are significant predictors of mental health stigma among college men.

### **Research Gap**

Although extensive research has separately explored masculine norms, emotional suppression, and mental health stigma, there is a scarcity of studies that have concurrently analyzed the joints impact of masculine role expectation and emotional suppression on mental health stigma in college men. It is still uncertain if emotional suppression influence the link between masculine ideology and stigma. This study addresses this gap by analyzing these variables collecting in a sample of male college students in India.

### **OBJECTIVE**

This study seeks to investigate how masculine role expectation and emotional suppression affect mental health stigma in male college student. It aims to: (a) evaluate the link between masculine role and mental health stigma; (b) evaluate the connection between emotional suppression and mental health stigma; and (c) identify if masculine role expectation and emotional suppression are significant predictors of mental health stigma among college men.

### **Hypotheses (H<sub>1</sub>)**

H<sub>11</sub>: Higher masculine role expectation will be associated with higher mental health stigma among men in college.

H<sub>12</sub>: Higher emotional suppression will be associated with greater mental health stigma among male college students.

H<sub>13</sub>: Expectations of masculine roles and the suppression of emotional will significantly influence mental health stigma among men in college.

### **METHODOLOGY**

The current study utilized a correlational research design with a quantitative cross- sectional approach. Variables were assessed quantitatively using established psychological measures. The cross- sectional approach involved gathering data from all participants at one moment in time, enabling the analysis of present levels of masculine role expectation, emotional suppression, and mental health stigma among college men. The correlational approach allowed for the analysis of relationship between these variables without any experimental intervention.

### **Sample**

The sample included 100 male college student aged 18 to 26 years , chosen through purposive sampling from various colleges and universities. Undergraduate and postgraduate students were both included. Participants were excluded if they were not currently registered in a college program, were not male, had a diagnosis of a significantly psychiatric disorder, or provided incomplete responses to the questionnaire

### **MEASURES**

The following measures were used in this study:

#### **Masculine Role Norms Inventory Short Form (MRNI-SF)**

The MRNI-SF is a self-assessment tool aimed at assessing how much individuals supporting traditional, frequently limiting, masculine beliefs in areas like aggression, self-sufficiency, Limited emotional expression, dominance, and resilience. The scale shows strong internal consistency, with Cronbach's alpha values between 0.85 and 0.93.

#### **Emotional Regulation Questionnaire Short Form – Suppression Subscale (ERQ-S)**

Created by James J. Gross and Olives P. John, the ERQ-SF evaluates how individuals generally handle and regulates their emotions in everyday situations, focusing on two main strategies: Cognitive Reappraisal and Expression Suppression. The current study utilized solely the Suppression subscale. Internal consistency is satisfactory to strong, with Cronbach's alpha generally falling between 0.75 and 0.85.

### Self-Stigma of Seeking Help Scale (SSOSH)

Created by Patrick W. Corrigan, the SSOSH assesses how much individuals adopt negative views regarding the pursuit of professional psychological assistance. It emphasizes the self- assessment element of stigma – particularly, to what extent a person expects a decline in self- worth from accessing mental health care. The measures show robust internal reliability, with Cronbach’s alpha generally indicates to range from 0.86 to 0.90.

### RESULT AND DISCUSSION

The current research exploring the connection between expectation of masculine roles, emotional repression, and mental health stigma in college men involved data analysis through SPSS. The group included 100 male individuals. The analysis consisted of descriptive statistics, Pearson product- moment correlation, and multiple linear regression.

#### Descriptive Statistics

Table 1. Summary Statistics for all three Variables (N=100)

| Variable           | N   | Minimum | Maximum | Mean   | Std. Deviation |
|--------------------|-----|---------|---------|--------|----------------|
| MRNI_TOT           | 100 | 49      | 206     | 139.06 | 32.769         |
| ERQ_SUP            | 100 | 18      | 48      | 33.31  | 5.088          |
| SSOSH_TOT          | 100 | 14      | 41      | 25.39  | 4.888          |
| Valid N (listwise) | 100 |         |         |        |                |

The mean score on the Male Role Norms Inventory (MRNI-SF), which means support for traditional masculine standards, was 139.06 out of 206, suggesting that participants exhibited a moderate to moderately strong belief in traditional masculine values like toughness, emotional restraints, and self-reliance. The mean score on the Emotional Regulation Questionnaire – Suppression Scale (ERQ-S) was 33.31 out of 48, indicating a slight tendency to suppress emotions. The mean score on the Self- Stigma of Seeking Help Scale (SSOSH) was 25.39 out of 41, reflecting a moderate level of stigma- respondents were neither completely against, nor fully to ease with, seeking assistance. Interestingly, MRNI scores varied between 49 and 306, indicating significant difference among individuals in their acceptance of traditional masculine norms.

## Correlation Statistics

Table 2. *Pearson Correlation Matrix between Research Variables*

| Variable  | Statistic           | MRNI_TOT | ERQ_SUP | SSOSH_TOT |
|-----------|---------------------|----------|---------|-----------|
| MRNI_TOT  | Pearson Correlation | 1        | -.057   | .123      |
|           | Sig. (2-tailed)     |          | .575    | .221      |
|           | N                   | 100      | 100     | 100       |
| ERQ_SUP   | Pearson Correlation | -.057    | 1       | .218*     |
|           | Sig. (2-tailed)     | .575     |         | .029      |
|           | N                   | 100      | 100     | 100       |
| SSOSH_TOT | Pearson Correlation | .123     | .218*   | 1         |
|           | Sig. (2-tailed)     | .221     | .029    |           |
|           | N                   | 100      | 100     | 100       |

The results indicating a statistically significant positive relationship between Emotional Suppression (ERQ-S) and Mental Health Stigma (SSOSH) ( $r = .218$ ,  $p = .029$ ). This suggests that men who represses their feelings were also more likely to possess greater stigma regarding the pursuit of professional mental health assistance. In practical terms, the more a man restrain his emotional expression, the more uneasy he became about the idea of pursuing therapeutic help.

The relationship between masculine role norms (MRNI-SF) and Mental health Stigma (SSOSH) was positive yet not statistically significant ( $r = .123$ ,  $p = .221$ ) suggesting that although a slight positive trend existed, it was not strong enough to be deemed statistically valid. The relationship between emotional suppression and masculine role norms was nearly non- existed ( $r = -.057$ ,  $p = .575$ ) indicating that within sample a man's degree of emotional suppression was mostly unrelated to his support for traditional male norms.

## Multiple Linear Regression

Table 3. Model Overview - Multiple Regression Forecasting Mental Health Stigma

| Model | R                 | R Square | Adjusted R Square | Std. Error of the Estimate | R Square Change | F Change | df1 |
|-------|-------------------|----------|-------------------|----------------------------|-----------------|----------|-----|
| 1     | .257 <sup>a</sup> | .066     | .047              | 4.773                      | .066            | 3.429    | 2   |

Table 4. Regression coefficients- Predictors of mental health Stigma

| Model | Predictor  | B      | Std. Error | Beta | t     | Sig.   | Zero-order |
|-------|------------|--------|------------|------|-------|--------|------------|
| 1     | (Constant) | 15.340 | 3.873      |      | 3.960 | < .001 |            |
| 1     | ERQ_SUP    | .217   | .094       | .226 | 2.297 | .024   | .218       |
| 1     | MRNI_TOT   | .020   | .015       | .136 | 1.386 | .169   | .123       |

The comprehensive regression model was statistically significant ( $F(2, 97) = 3.429, p = .036, R^2 = .066$ ) suggesting that the two predictors collectively account for a notable amount of variance in stigma levels. Emotional suppression was identified as a statistically significant predictor ( $\beta = .226, p = .024$ ) indicating that men who exhibit more emotional suppression indicated elevated mental health stigma even when accounting for masculine roles norms. Masculine role norms did not appear as a statistically significant predictor ( $\beta = .136, p = .169$ ), even though the relationships direction stayed positive. No problems with multicollinearity were found suggesting that the two predictors made independent contributions to the model.

**H1:** anticipated that men possessing more rigid masculine role expectations would indicate greater mental health stigma. This hypothesis was unsupported; although the relationship aligned with expectations, it lacked statistical significance in both correlation and regression analyses.

**H2:** suggested that men who hid their feelings would indicate greater mental health stigma. This hypothesis was supported; both the correlation and the regression indicated a notable positive association between emotional suppression and stigma.

**H3:** anticipated that the combination of both predictors would notably forecast mental health stigma. This hypothesis received partial support; the overall regression model showed significance, with emotional suppression being the main factor, whereas masculine role norms alone did not significantly contribute.

The current investigation examined the connection between expectations of masculine roles, emotional inhibition, and mental health stigma in college men. The results offer significant understanding of how emotional regulation patterns can influence men's perspectives on professional psychological assistance.

The most consistent finding of the study is that there is a significant correlation between emotional suppression and mental health stigma. Men who were inclined to hide or suppress their emotions showed increased resistance to pursuing professional help. This finding was consistent in both the correlation and regression analyses, establishing it as the study's most robust and practically significant conclusion. This discovery aligns with established psychological studies: researchers like James Gross have shown that avoiding emotions is a major barrier to seeking help. A man who has dedicated years linking emotional expression to weakness might struggle profoundly to accept that he requires psychological help. The stigma, consequently, goes beyond how one views mental illness in others - it is closely linked to self-identity and self-perception. The practical implication is evident efforts to lessen mental health stigma among young men must tackle fundamental patterns of emotional repression, rather than just the awareness of seeking help.

The discovery that masculine role norms did not significantly influence mental health stigma might first seem at odds with current literature. Nevertheless, multiple reasonable explanations deserve attention. College settings often provide students with greater opportunities for open conversations about emotions, gender, and mental wellness compared to other environments. Numerous participants might have already been affected by advanced campus standards, possibly weakening the immediate impact of conventional masculine ideology.

This study investigated if emotional suppression and male role expectations in college men impact mental health stigma. The findings present a complex yet substantially significant perspective.

Emotional suppression became an evident and important indicator of mental health stigma. Men who regularly bottle up their feelings tend to face stigma when considering professional psychological help. This was the study's most consistent result and its most significant practical consequence.

Both predictors collectively explained about 6.6% of the variance in mental health stigma. Although this ratio is modest, recognizing emotional suppression as a consistent factor within a complex and multifaceted outcome signifies a significant advancement in the field.

Future research should explore if emotional suppression acts as a mediator between masculine role norms and mental health stigma, utilize longitudinal design to observe the progression of these elements, and examine broader and more varied samples. Qualitative research that enables men to articulate their help-seeking choices in their own language may offer insights that survey methods alone cannot uncover.

In the end, this research adds to a larger and essential discussion about men's mental well-being. The results validate what clinical experience has often indicated: for numerous men, the main obstacle to seeking assistance is not ignorance, but a deeply ingrained conviction that requires help is a source of shame- a belief perpetuated, in significant measure, by a long history of stifling true emotional experiences.

## REFERENCES

- [1] Biddle, L., Sharp, D., Gunnell, D., & Donovan, J. L. (2004). Factors influencing help-seeking in mentally distressed young adults: A cross-sectional survey. *British Journal of General Practices*, 54(501), 248-253.
- [2] Booth, N. R., McDermott, R. C., Cheng, H.L., & Borgogna, N. C. (2019). Masculine gender role stress and self-stigma of seeking help: The moderating roles of self-compassion and self – coldness. *Journal of Counseling Psychology*, 66(6), 755-762.
- [3] Chatmon, B. N. (2020). Males and mental health stigma. *American Journal of men's health*, 14(4). <https://doi.org/10.1177.157988320949322>
- [4] Ciarrochi, J., Scott, G., & Deane, F. P. (2014). Emotional competence and willingness to seek help for mental health problems. *British Journal of Guidance & Counselling*, 32(4), 483-497.
- [5] Gough, B. (2021). Engendered expressions of anxiety: Men's emotional communications with women and other men. *Psychology of Men & Masculinities*, 22(3), 471-482.
- [6] Greene, D., & Banerjee, S. (2006). Attitudes towards mental illness: A study of college students. *Psychiatric Rehabilitation Journal*, 29(3), 235- 237.
- [7] Heath, P. J., Brenner, R.E., Vogel, D.L., Lannin, D. G., & Strass, H. A. (2017). Masculinity and barriers to seeking counselling: The buffering role of self-compassion. *Journal of Counselling Psychology*, 64(1), 94-103.
- [8] Iwamoto, D. K., Brady, J., Kaya, A., & Park, A. (2018). Masculinity and depression: Longitudinal associations among college men. *Psychology of Men & Masculinities*, 19(4), 503- 512.
- [9] Levant, R. F., Wimer, D. J., & Richmond, K. (2011). The role of traditional masculine ideology and masculinity in men's emotional functioning. *American Journal of Men's Health*, 5(1), 72-82.
- [10] Mahalik, J. R., Locke, B.D., Ludlow, L.H., Diemer, M. A., Scott, R. P. J., Gottfried, M., & Freitas, G. (2003). Development of the Conformity to Masculine Norms Inventory. *Psychology of Men & Masculinity*, 4(1), 3-25.
- [11] Peters, J. R., Reddy, S., & Siemer, M. (2011). Trait suppression and negative emotional experiences in daily life. *Emotion*, 11(2), 350-357.
- [12] Schaub, M., & Williams, C. (2007). Examining the relations between masculine gender role conflict and men's expectation about counselling. *Psychology of Men & Masculinity*, 8(1), 40-52.