

**Stress, Emotion, and Mental Health in African American Men**

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Mental health is a person's condition regarding their psychological and emotional wellbeing, when a person's mental health becomes difficult for them to manage, and becomes a mental health disorder it can be for a variety of different things and understanding those differences can begin to help a person shift their mental health into a better place. Though mental health concerns happen often, it becomes an illness when “ongoing signs and symptoms cause frequent stress and affect your ability to function” ( Mayo Foundation for Medical Education and Research). Mental illness can cause a variety of symptoms as well including; feeling sad, feelings of guilt, mood changes, sex drive changes, changes in eating habits, and many others, and often times this illness can only be treated by a doctor as it can begin to cause you to harm yourself and have suicidal thoughts. Due to this research you may begin to think about a specific demographic of people where mental illness may be prevalent in their communities, a specific community where mental health issues are prevalent is African American men in any and or varying demographics. African American men are told constantly to “man up” (Harold “Woody” Neighbors, PhD,2019) and society doesn’t see how it can tear a man down, not build him up. When they come to their family about their mental health they’re told that “mental health” is a facade and that in short terms “I can’t help you”(Harold “Woody” Neighbors, PhD,2019). In African American society we teach our men to barely care about their mental, or emotional health, hence why only 26.4% of African American men running from 18-44 won’t seek help for their mental health (Tori DeAngelis). African American men believe that being a “man” is to focus on their career and being a provider. However, due to this African American men are raised and grow up being emotionally unavailable and lack the ability to communicate or ask for help with what they’re going through. In the following article “Black Men's Mental

Health Matters” it speaks on how if we focused less on “why black men are resistant to therapy” and focus more on culturally comfortable therapy options that allow them to feel more open with the idea of asking for help and accepting that they need help, however this can be a struggle as only 4% of black men make up the PhD level of psychology. In another article speaking on stress it says that “we African American men advise each other to “man up” to personal problems. “Handle your business,” we say.” it then continues to emphasize how unhealthy and unethical this response is. The importance of accepting and realizing the drastic effects of these 3 major topics will help society begin to shift its focus and make the important changes needed to improve the health of the African American men in our society. With this previous knowledge , why isn’t mental health in black men researched more in depth?

#### Literature Review

In a study called “Black And African American Communities And Mental Health” it states how over 7 million (13.4%) people in the United States identify as African American (Mental Health America). The study then states how out of that 16% of that population report having a mental illness. This study focuses less on comparing mental health of African Americans and whites but where mental health comes from when it comes to African Americans, which is through a history of trauma and violence (Mental Health America). This history of trauma and violence then leads to heavy impacts of the mental and emotional health of African Americans. During the study they noticed that African Americans weren’t willing to open up and become vulnerable and or acknowledging that there were psychological issues going on revolving around their mental health, it was recognized due to beliefs in “stigmas” when it comes to seeking help, and psychological openness. A stigma is when theres “negative attitudes or discrimination against someone based on a distinguishing characteristic such as a mental illness,

health condition, or disability” (Jenev Caddell, P. D.) However, African American men specifically were more concerned about the stigma about accepting help, or seeking help. They also noticed that compared to results from previous studies that African Americans were apprehensive about seeking help (Mental Health America). Limitations to this study are that it's not specific to a certain gender, specifically African American men. Due to this there isn't enough research to support the impact mental health has on African American men, and emphasize a growing problem in the United States.

In a study by Chung et al., (2014) they collected open-ended responses from 295 African American men at a festival. In these responses they found that stress was reported by 93.2% of men. A little over 60% (60.8%) stress was based on finances or money, and 43.2% reported that racism was a big part of their stress. Most of the participants (92.1%) used their religion and family as coping mechanisms. They then asked the 295 participants if help was the answer to their various causes of stress or drama and 187 (63.4%) said yes, however a percentage of that group also said that money and the location of “help” is a barrier for being able to get help. While the remaining 23.4% stated no, there is no help in dealing with the stress they experience. As a result of this study it was concluded that future research and program development to engage African-American men could be beneficial to this community to help aid in stress such as finances and racism, as well as incorporating culturally appropriate sources of support such as religion and family (Chung et al.). The limitations of this study is it lacks control, the men they collected information varied in culture, age, and a consistent area or population. However, it shows how stress and anxiety are widespread through the African American male community no matter the location, culture and or age.

In an article by Harold “Woody” Neighbors, PhD.,(2018) speaks on “Manning Up” and how it affects black men and actually can tear them down, not make them stronger. The study in the article is based on 25 focus groups of African American men from 6 different cities, they were asked what it meant to be a “real man”, most of their answers fit the stereotypical response on what a man is, which is a provider of the house, finances, etc. But also being “tough and self sufficient”. It then discusses how common African American men with depressive symptoms are misdiagnosed by medical providers, when they should be diagnosed with Major Depressive Disorder (MDD). African American men are far more impacted by MDD than any other race, and African American men (37.2%) experience more work related stress that is also highly impactful on their health than their white counterparts (28.9%). It emphasizes in the article that telling a man to man up or handle your business (Harold “Woody” Neighbors, PhD.,) also tells them that you can't help them and basically leaves them to figure it out on their own. Limitations will be that it is missing data in this area which is prevalent in many studies on African American male mental health. It shows strengths in explaining how African American males are widely misdiagnosed and how this affects them as a community.

In a study from the National Library of Medicine where it speaks on “exploring strategies men use to cope with stress, (...)” (National Library of Medicine). In this study they emphasize how stress is a contributor to poor health, but lack the studies behind how African American men can describe their coping mechanisms for the stress that is presented to them. They collected the responses from 154 African American men and proceeded to see a consistent list of “coping mechanisms” , though many men in the study did not believe they were examples of coping mechanisms, as if they were naturally supposed to exercise, consume calorie dense foods, etc. They concluded the study by stating that there needs to be further interventions and further

research about stress, coping and health which the study also lacks but continues to emphasize the importance of gaining more information and doing more research. Limitations on the study isn't lack of data, but lack of interventions options, and research specifically for finding the proper interventions.

In an article by (Tori DeAngelis,) it speaks on how black men are not receiving the proper or necessary help for the trauma they're experiencing. It states in the article that only 24.6% of black and hispanic men that are diagnosed with or experience daily anxiety and or depression will seek help, compared to their white counterparts. Then it states how black men who do want to seek help, most likely would like to seek help from another person of color or another African American man, which can be difficult due to the fact that black men only make up 4% of psychologists. The article goes deeper into just how african american men treatment is conducted and how it is based off of "structural racism and Black men's unique history in this country" (Tori DeAngelis,) and how their mental health and treatment are tied to biased medical providers, high poverty rates, and low access to quality psychological and psychiatric services. Limitations to this article are how there's a lack of mental health resources that are formulated for African American men, and how this affects African American men in society and further research on how racism and the history of African Americans trauma can be passed down and affect further generations.

These various factors lead Doctors and researchers to believe that due to racism and internalized masculinity it discourages black men from seeking medical help for their mental health (Tori DeAngelis,) . After reading the articles and studies it shows that mental health in African American men is highly prevalent and needs to be studied further for more in depth information.

The theory that will be used to help shift the behavior of the African American male communities stress, emotional and mental health is the Transtheoretical Model (TTM) a model proposed by Prochaska, DiClemente and Norcross in 1992, in an attempt to treat drug and alcohol addictions. This theory has been studied across 12 health behaviors, and has shown consistent patterns between the pros and cons of changing and the stages of change (Prochaska, J. O., & Velicer, W. F. ). This model consists of 6 stages in order to achieve a change in behavior and those are as follows; precontemplation which is when a person doesn't see change and or want to change. Contemplation which is when a person may begin intending to start healthy behavior. Preparation or determination is when people are ready to take action within the next 30 days, they may begin to take small steps towards changed behavior. Action is when people have recently changed their behavior and they intend to keep pushing towards the behavior change. Maintenance is when people have sustained their behavior change for a while and they intend to maintain their behavior change and use it in variations of their life. Lastly, we have termination which is when a person is confident in their behavior changes and has no signs of a relapse (Behavioral change models) . All 6 of these stages would be used to make a shift in the African American community in helping African American men with their stress, emotional and mental health. In a study by the National Library of Medicine, it states how this specific model uses "stage-matched interventions", and how its largest and more promising outcomes have come from computer-based individualized and interactive interventions. The outcome they saw by using this theory is that if it can be replicated in other ways that health promotion would then be able to make widespread behavior shifts and changes in high-risk populations and areas.

Though the theory has proved its effectiveness in various studies it will take the entire community in order to be effective in fixing the mental health of African American men. This

theory can be effective in this population because it will start with giving the community the option to participate in therapy, mental health programs and coping skills forums which will give them time to pre contemplate and contemplate how these can be effective towards their mental health. Once they have looked at all of their options they would then begin to prepare for these and also prepare for what behavioral changes they may have to make as well for it to be as effective as possible. Their action would be going to the therapies, forums, and programs and allowing it to shape them and heal them, they would keep up with these programs and forums and maintain a consistent attendance in whichever suits them best and then watch their stress levels deteriorate, their mental health become positive, and their emotional health become balanced. In order to keep up with maintenance, after they have found a therapy, program and or forum that fits them and fits their specific needs, they would check in with their designated person on a bi-weekly basis and keep a journal as well in order to document their progress and keep track of their mental health. Afterwards they would go through the termination phase so after about a year of their designated pick and them showing a consistent improvement in their mental health and have developed various ways to control their mental health and heal from any past traumas they would be free to go as they please but know they still have the option to come back. In this they will build networks, create genuine and pure relationships, have a feeling of acceptance knowing they aren't alone, build trust with a reliable source that will help them all throughout life, and lastly they would heal, thrive and become the best version of themselves.

A specific program I would create for mental health in African American men, due to the obvious lack of knowledge and research on African American men's mental health and the lack of comfortability that African American men have with therapy is a "Therapist Adoption" program. This program would take place in community neighborhoods, it would be a program



that allows African American males to not only make a new friend, but gain a therapist that has background knowledge of them already. Starting again with how one of the main issues with African American men and mental health is a lack of trust and comfortability with therapists and doctors, This program would be adopted by a community where the majority is African American males ranging from the ages of 18-45. African American male therapists would be assigned to a specific household and or person for a year and build and bond and understanding of the household and or person they're assigned to and begin to also help them in self awareness and self growth and bring a form of comfortability to the idea of therapy or seeking help. While the therapist is with the person(s) everyday, the therapist would be able to notice and document the person(s) mental health changes, triggers, trauma, and stressors and from there build a plan with the person(s) to begin working on shifting their mental health and giving them the proper tools to allow them to also guide themselves. The incentive of the program would be gaining not just a new friend but a therapist as well to help guide you as they navigate through their healing process. Therapists can be "adopted" by the specific person who needs them, or a family member/friend who notices the mental health signs. I believe the program would be effective because it would give African American men a chance to naturally become vulnerable and trust in a therapist because they took the time to build a bond with them and there is a sense of cultural comfortability as well.

In conclusion, after researching these various articles and or studies, it is proven that the mental health, and wellbeing of African American men in the United States should be researched more and spoken on heavily so a shift can begin in improving this community's mental health. These studies have also shown that in order for there to be a change in African American men's

mental health, there has to be a focus on the cause of their mental health issues but also how to make various mental health resources accessible and comfortable for African American men.

### Abstract

This research paper is to give a breakdown of mental health and how it affects a specific demographic, in this case African American men. The dominant explanation for this mental health issue in African American men is the lack of research, culturally available mental health solutions (black therapist), and lack of specific studies in order to find a beneficial and efficient resolution. In this paper you will see various sources filled with personal testimonies, data, statistics and studies, all based on the mental health of African American men, the studies venture into various demographics and age ranges while keying the points of how mental health affects African American male communities and the reason why mental health issues in this specific demographic is highly prevalent. Disregarding the lack of more in depth studies, you will find major points in the paper where it states how common it is for African American men with Major Depressive Disorder (MDD) and or depressive symptoms to be misdiagnosed by medical providers (Harold “Woody” Neighbors, PhD.), also how mental health issues don't always stem from current events but also from racism and trauma (Tori DeAngelis.). It also emphasizes the importance of pushing for more research, studies and solutions for this prevalent issue in society. You will also see a behavioral theory regarding the transtheoretical model and a program that is meant to break down how African American men can be helped, give a possible solution to the issue and show the efficiency of both the theory and program. Conclusions reached in this paper is that not enough research is done in order to properly help the African

American male community, and due to this doctors, and therapists have not found a way to help this community.

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