

Social Construct of Masculinity Towards Mental Health: A Literature Review

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ABSTRACT

Masculinity is trait that exist in both male and female. However, masculinity values develop into social constructs affecting various aspects of life, one of which is mental health. It is important to understand how individuals internalize the construct that contributes to their psychological dynamics. This study aims to determine the impact of masculinity construct and the role of mental health literacy on mental health through a literature review. The results show that some aspects in the construct of masculinity, such as self-reliance, dominance, and emotional restraint, inhibit people's mental health behavior, such as decreasing help-seeking behavior and self-disclosure, and increasing maladaptive coping. However, another study reports that the masculinity construct also affects women as well as men and the related studies remain very limited. It is imperative to improve mental health awareness that is sensitive to the influence of gender roles and its impacts on mental health.

1. Introduction

The study of masculinity has developed since Raewyn Connel published her works on masculinity which is still studied and influences the development of gender studies to the present. Based on the masculinity theory, *the construct of masculinity* covers hegemony, subordination, complicity, and marginalization of masculinity. The term does not describe the fixed characteristics of masculinity, but rather as a form of configuration practice resulting from a particular situation in the changing structure of the relationship (Connel, 2005). However, the current focus is on how the concept of masculinity develops into a standard of values expected by society for individuals to behave and live their lives based on these standards.

Previous studies on male psychology and masculinity showed that masculinity is a socially constructed construct (McDermott, Schwartz, and Rislin, 2016; Ross et al., 2020). Further, masculinity is the community demand for men, such as determining the boundaries of how men should behave, think, and express their feelings (Thompson and Pleck, 1995). Besides, conformity to masculinity values or standards is a form of individual behavior that meets

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society's expectations related to masculinity values, both in public and private life (Mahalik et al., 2003). Ross et al. (2020) revealed that this social construct influences the formation of a person's behavior, namely how a person behaves based on the framework perceived as something socially acceptable or not accepted by individual peers.

Thus, it is worrying if individuals cannot fulfill existing constructs in the social environment, such as behaving and showing personal characteristics based on existing standards in the environment. Previous studies showed that it affects the psychological dynamics and mental health of individuals. Previous research has also consistently proven that there is a great relationship between mental health and how young men interpret and display their masculinity (Harland, 2008). Empirical studies on the impact of social constructs of masculinity on mental health are limited. However, some studies have reported the impact of this construct on mental health in which masculinity norms contribute to the mental health of individuals, such as asking for help (Addis & Mahalik, 2003; Heath, 2019; Mahalik & Dagirmanjian, 2019; Seidler et al., 2016; Staiger et al., 2020; Wimer & Levant, 2011), depression (Iwamoto et al., 2018; Mahalik & Dagirmanjian, 2019; Oliffe & Phillips, 2008; Staiger et al., 2020) and problem coping ability (Mincey et al., 2015; Agbayani et al., 2018; Spindel, 2015). Besides, many studies have reported more impacts on men than on women. Further, it is supported by previous studies that reveal that the expected construct masculinity has a greater impact on men's well-being than women's (Ross et al., 2020).

Moreover, previous studies reported obstacles of individuals who experience mental problems, especially men. This is evidenced by the low attitudes of men in asking for help (Child Protection Committee, 2011; Mahalik & Rochlen, 2006) and the negative stigma from society when men ask for help (Staiger et al., 2020). Further, it becomes a barrier for men, especially when experiencing stressful situations and mental problems. Therefore, it is important to understand the community's beliefs, attitudes, and behavior on *masculinity constructs* and how they behave in everyday life, for example perceiving and placing men in the social relationship context. Moreover, Milner et al. (2019) reported that support for masculinity norms indicates a mismatch with the health literacy aspect, such as the ability to search health information. The present study also reported that conformity to masculinity norms showed a decrease in the health literacy aspect. It is supported by Jorm et al. (1997) that a person's beliefs, knowledge, and attitudes are important aspects in understanding mental health literacy. Therefore, it is necessary to understand how the *masculinity construct* that exist in the social environment affect changes in individual psychological dynamics which then affect mental health and well-being, and the role of mental health literacy in addressing the impact of masculinity on mental health.

2. Method

This study aims to determine the impact of masculinity construct on mental health and examine the role of mental health literacy in addressing the impact of toxic masculinity on mental health. This study uses a qualitative approach to examine the impact of *masculinity construct* on mental health and the role of mental health literacy to overcome the impact of toxic masculinity on mental health as well in social life. In particular, the technique that is conducted in this study is literature review, which examines previous empirical studies that examine the effect of masculinity norms on mental health. The previous empirical research that involved in this study is using qualitative and quantitative approach, which various research design to collect and analyze the data. The result of these studies become data that will be used to answer the research question and can help to see the progress of existing studies that focus

on the *construct of masculinity* and mental health to find research gaps for improvement and complement in the next study.

3. Result and Discussion

3.1. Masculinity: Theory and Practice

In her book entitled "Masculinities", Raewyn Connel explains that masculinity is the pattern of practice by which people both men and women engage in gender, and it affects physical experiences, personalities, and culture (Connel 2005, 71). Further, Connel (2005, 71) explains that masculinity cannot be viewed only as an object, focusing on natural character types, behaviors, and norms. Instead, masculinity concerns more on how the process and relationships between women and men in living a life (Connel, 2005, 71). Indeed, all societies have a cultural history about gender, but not all have the concept of masculinity. Besides, the definition of masculinity, in general, has used the cultural point of view but is followed by different strategies in categorizing or characterizing masculine people (Connel, 2005). Ross et al. (2020) revealed that masculinity is a phenomenon built through social constructs that can adapt and change over time. It means that each culture or society may have different ways of perceiving and showing the meaning or role of masculinity in everyday life. This is an accordance with Reeser (2010, 20) that masculinity is a construct built through ideology, practice, domination, language, and other elements.

A critical study of men views masculinity as an ideology and practice that has a dynamic pattern and develops through a process of interaction in the social environment (Thompson & Bennett 2017, 46). This shows that the interaction process acts as a medium for the formation and maintenance of the masculinity construct that is believed by the community and used as the basis for behaving and expecting others to behave in the social life. Ridgeway & Smith-Lovin (1996) explain that the process of interaction contributes to the differences and inequalities that exist in the social system. In addition, the social system is a complex system, which involves various things and interacts with each other, such as beliefs in certain cultures that are also involved in a social system. Cultural beliefs on gender are influenced by how gender is applied in the interaction process. It will develop, be contextually dependent, even diffuse, and persistent and also have an influence on various interaction processes. In addition, the interaction process involves specific behaviors that support and strengthen a gender identity and of course can vary from one setting to another (Ridgeway and Smith-Lovin, 1996). This shows that the interaction process becomes a medium that facilitate the development of certain gender beliefs in social environment, which will affect everyone involved in the interaction, for example supporting or strengthening certain gender beliefs.

Moreover, the formation of the *masculinity construct* in the social environment is seen as a heuristic process. The heuristic process is involved when individuals perceive, understand, interpret, and make decisions about the situation around them (O'neil et al. 2017, 84-85). The heuristic process is characterized by a process that makes decisions and conclusions quickly. In fact, heuristic processes are referred to as shortcuts in the thinking process to reduce cognitive load. In addition, the characteristic that describes a heuristic process is the assessment process that is not based on critical thinking on the available information but follows how similar it is to the framework of thought that already exists in a person. (Myers and Twenge 2018, 65-66) also explained that the heuristic thinking process is identical to the process of simplifying information. This simplification is carried out in several ways, such as drawing conclusions based on experiences that have just happened or have just been experienced, only based on certain information, generalizing information to groups of individuals based on the

behavior shown by others and limited information. When the heuristic process is often used, then a person will tend to produce errors in his cognitive processes, such as tending to do a confirmation bias (Mayasari, 2016; O'neil et al. 2017, 85-86), see and interpret information based on prejudice and tend to ignore other information and focus on certain information only (O'neil et al. 2017, 85). For instance, when someone uses a heuristic process, for example regarding beliefs about the male gender role, it will depend on the cues they feel and habits in the environment (O'neil et al. 2017, 85). In fact, the heuristic reasoning process can occur because of the need to reject things that are uncertain or tend to look for something that is already known. Meanwhile, information that is not familiar tends to be rejected or considered as a source of threat (Mayasari, 2016). Moreover, to reduce perceived uncertainty, individuals choose to reject something that is not clear to themselves, so they tend to draw conclusions prematurely and prefer something simple and related to stereotypes. This explains that there is a tendency for individuals to prefer, believe and side with things that are already believed by most people compared to information that is new to them. The more often individuals use heuristic processes, the greater what is believed to be activated. Especially thoughts and beliefs about gender that have become an inseparable part of our lives (O'neil et al. 2017, 85). This gives an idea that a person can have judgments and beliefs based on what was previously believed or tend to follow the consensus that is believed to exist in his environment or community.

In practice, masculinity standards are not merely built by society, but they have been socialized to individuals in everyday life, especially men, from childhood, adolescence to adulthood. It affects how men learn from childhood to grow and develop into strong figures by suppressing their emotions (Kurniawan, 2017). In addition, men are also expected to be hardy and unemotional to be considered a masculine man (O'neil et al. 2017, 77). Harland (2008, 6-7) explains that the role of masculinity forces young men to refuse to be feminine, so many men grow up believing that men should not display their emotions in public. It forces them to keep their emotions private. It is supported by McDermott, Schwartz & Rislin (2016) that socially, men are required not to express their sadness and perceived vulnerability. However, when men experience problems, it is more socially acceptable to channel their stress due to the problem through behavior, such as feelings of anger, drug abuse, and overwork. It is in line with previous studies in which when experiencing stress, men tend to take more risks and tolerate physical pain (Kirtley and O'Connor, 2012).

Harland (2008, 6) reveals that men feel great pressure when they must present themselves or even force themselves to conform to masculinity standards and they underestimate the pain and emotions. They are even afraid of being embarrassed if they present their weak side in public places. In the private space, men tend to internalize feelings and choose to hide their emotions, to learn that expressing feelings is a sign of weakness, and afraid of being stigmatized by the social environment about how to be a man. Moreover, Harland (2008, 7) added that understanding the male side in public and private spaces increases understanding of how men internalize the *masculinity construct* into mental processes and how it affects behavior and communication processes. It is to understand how the construct of masculinity affects men's changing psychological dynamics and mental health.

The negative impact due to the *masculinity construct*, which become a social norm in society can also be explained through the theory of gender role conflict. Gender role conflict explains the conditions when the socialization of gender roles has negative impacts and consequences on the psychological condition of individuals (O'neil et al., 1986). The theory of gender role conflict is one of the first theories to examine the negative impact on interpersonal and intrapersonal aspects when imposing the role of men on men, women, and society as a whole (O'neil et al. 2017, 75-76). The final impact of gender role conflict is the limitation of

individual potential, both individuals who experience it and those around them. There are four domains in gender role conflict, namely success, strength and competition, emotional restriction, restriction of affective behavior in men and conflict between work and family relationships. However, among these domains, the domain related to psychological aspects has serious implications for the emergence of psychological pressure on men. In fact, the domain in gender role conflict has been shown to affect men's psychological aspects, such as feelings, thoughts and cognition and it is significantly correlated with the emergence of psychological disorders in men, such as depression, anxiety, stress, low self-esteem, and health risk behaviors (O'neil et al. 2017, 80).

3.2. Social Construct of Masculinity and Mental Health

It has been widely known that men are reluctant to seek help, especially when experiencing mental problems. Some studies have empirically examined men's behavior in asking for help, such as asking for help from mental health professionals (Seidler et al., 2018), asking for help related to academic problems (Olanrewaju et al., 2019; Wimer and Levant, 2011), asking for help related to mental problems, such as depression (Seidler et al., 2016; Staiger et al., 2020) and anxiety (Clark et al., 2020). The Child Protection Committee (2011) reports that there is a large gap between the behavior of asking for help between men and women in which men have a low tendency to ask for help. Furthermore, men are reluctant to ask for help from mental health professionals (Seidler et al., 2018). Based on the review of some studies, men of various ages, social backgrounds, ethnicities tend to have a lower tendency to ask for help compared to women (Addis and Mahalik, 2003).

The behavior of asking for help is a form of coping through actively seeking help from others (Rickwood et al., 2005). The form of seeking help is characterized by communicating with others to get help, such as information, understanding, suggestion or advice, medication, and support when experiencing problems or difficult situations (Rickwood et al., 2005). It is an active seeking process by taking advantage of social relationships, both formal and informal forms, to address personal problems. Rickwood et al. (2005) explained some stages involved in the model of asking for help behavior including awareness, expression, availability, and willingness. The awareness stage is when the individual realizes the problem. Then, the individual can express the situation and his/her needs for help. The next stage is the availability of supporting resources. When help-seekers feel comfortable with helper sources and helper sources are easy to find, the help-seeker will have a willingness to ask for help.

The results showed that men who had a low willingness to ask for help showed higher adherence to masculinity (Vogel and Heath, 2016). It is supported by previous research in which men have a low tendency to ask for help when they are in a stressful situation or experiencing mental problems (Child Protection Committee, 2011). It can be caused by some factors, for example, individual attitudes and behavior towards asking for help. Previous studies have revealed that the behavior of asking for help is perceived as a weakness by men (Yousaf, Grunfeld & Hunter, 2013). This perception exists due to the influence of masculinity which has become the norm constructed by the social environment. It is in line with the previous study that there are ideologies of masculinity, gender norms, and roles that can contribute to discouraging men from seeking help (Addis & Mahalik, 2003).

Based on the results of this study, indeed, the *masculinity constructs* in the social environment affect men's behavior in asking for help which influences how men experience, respond, express, and overcome mental problems they experience. The specific effect can be seen from the psychological dynamics experienced by men which affect their mental health. Wimer & Levant (2011) found that there is an association between the ideology of masculinity and men

who avoid asking for help, especially in academic activities. It indicates that conformity behavior towards masculinity norms can predict men's avoidant behavior in asking for help. This is influenced by two aspects in the ideology of masculinity, namely dominance and self-reliance that have the greatest influence on men's avoidant behavior in asking for help (Wimer and Levant, 2011). Burns & Mahalik (2011) explained that self-reliance is a concept that suggests that men are not allowed to ask for help from others and they must find ways to independently solve problems. Wimer & Levant (2011) stated that men who conform to dominant norms and are reluctant to ask for help because of their perception and belief in which asking for help is considered weak. In the process of asking for help, the help-seeker gives power to someone who will assist so that the power is solely in the hands of the helper (Wimer & Levant, 2011). Besides, other findings show that self-reliance is a key factor preventing men from asking for help in various situations. It is supported by Furrer & Skinner (2003) in which men who are increasingly adjusting to the norms of self-reliance in masculinity tend not to feel connected to other people. It makes them feel increasingly isolated because of adjusting to masculine stereotypes (Furrer and Skinner, 2003).

Moreover, Seidler et al. (2016) explained that the masculinity norms can inhibit the behavior of asking for help and reinforce the occurrence of maladaptive coping styles. It is in line with Baron & Byrne (2004) in which men cannot solve their problems because they find it difficult to express their true feelings. Previous studies by Derlega et al. (1981) show that men express fewer personal problems than women and have difficulty sharing their problems (McKenzie et al., 2018). It is consistent in a meta-analysis study by Dindia & Allen (1992) which used using 205 studies in which gender differences show a significant difference in self-disclosure in which women have higher self-disclosure than men. Based on self-reports and observations, compared to men, women have greater self-disclosure to people who have close relationships with them, such as parents, spouses, and friends than men. However, based on observations, when communicating with strangers, and there is no difference in self-disclosure between men and women (Dindia and Allen, 1992). Furthermore, regarding maladaptive coping, it shows that men who adhere to masculine characteristics display maladaptive coping when experiencing negative feelings, depression, or suicidal tendencies, such as drug use, risk-taking, irritability, and emotional withdrawal (Whittle et al., 2015). Further, Whittle et al. (2015) further explained that maladaptive coping is intended as a means of avoiding and escaping from any places that are not directly related to the proposed problem.

In addition, Staiger et al. (2020) revealed that masculinity affects men's attitudes towards mental problems, such as depression and their decision to ask for help. The results of qualitative research by Staiger et al. (2020) show that respondents who adapt and meet the characteristics of the *masculinity construct* in society decide not to reveal the mental problems they experience and ignore their needs when experiencing mental problems. It is in line with Seidler et al. (2016) that there is a negative impact when men obey the norms of traditional masculinity in which men experience depression and ask for help with their situation. Men may have difficulty recognizing and communicating perceived mental problems as further explained by Whittle et al. (2015) that language characteristics in masculinity norms are emotionally poor. Thus, it is easier for men to express psychological or emotional stress. Therefore, how men meet the expectations of the masculinity norms formed in the social environment influence them in seeing, experiencing, and taking action on their problems, especially how they perceive the mental or emotional problems they experience and how they determine the right actions and solutions for the problem.

The current studies on the contribution of masculinity norms to a mental health focus more on the impact and influence on men. However, recent studies report that adherence to masculinity norms affects not only men but also women to an equal extent (Heath, 2019). Heath (2019)

reports that adherence to masculine norms, namely self-reliance and emotional control can predict high help-seeking self-stigma and the risk of self-disclosure. It is supported by previous studies that self-reliance and emotional restraint are two masculinity norms that mostly affect a person's psychology (Burns and Mahalik, 2011). Furthermore, Heath (2019) added that the higher the help-seeking self-stigma and the risk of self-disclosure, the more negative a person's attitude towards asking for help. The lower a person's desire to seek psychological or mental help, the less likely a person is to seek services or psychological services and to access information about mental health online. This study involved male and female subjects and there was no significant difference in the model or dynamics of men and women. On the other hand, studies of masculinity norms on female subjects are limited. Therefore, the study of the influence of *masculinity constructs* on mental health should be considered in which female subjects were involved to see and identify the extent to which these constructs affect human life, well-being, and overall psychological dynamics.

Depression is one of the mental disorders that can be experienced by both men and women. However, it is necessary to understand the dynamics differences in the emergence of depression between men and women and the possibility of specific causes that can indirectly trigger different depression dynamics in certain genders. McDermott, Schwartz & Rislin (2016) report that researchers from all over the world have developed measurements specifically designed to measure the level of depression in men. It is due to the possibility of differences in depression and anxiety experienced by men who support and practice traditional masculinity standards (McDermott, Schwartz, and Rislin, 2016). Seidler et al. (2016) found that conformity to norms of masculinity has a greater effect on men who experience depression, namely symptoms and expression of depressive symptoms, attitudes, intentions, and the actual behavior of asking for help and on the management process of perceived depressive symptoms.

Based on the results of this study, the masculinity construction in the social environment unconsciously influences one's mental health. It is supported by Ross et al. (2020) in which values in masculinity negatively affect mental well-being, especially for men. It is because men are the adult population who experience significant mental illness (Ross et al., 2020). Ross (2020) further explains that masculinity, gender roles, and the pressure from the social environment have prevented most men from seeking mental health care which later causes negative impacts. The negative impact is risky behavior, such as drug abuse, reluctance to seek care and treatment, and unsure of how to respond to and handle their need for help. Self-reliance, dominance, emotional restraint, and strong physical and psychological are some of the masculinity concepts that are socially accepted and cause negative experiences in men. Some of the negative experiences experienced by men, for example, risky behavior, depression, post-traumatic disorder, antisocial tendencies, reluctance to seek treatment, difficulty expressing personal problems, suicide, and domestic crimes, and other crimes. Further, other studies reveal the same results and effects of *masculinity constructs* between men and women. It indicates the need to examine the *constructs of masculinity* on mental health without limiting the focus on one sex. It aims to see and understand how *masculinity constructs* influence individual psychological dynamics holistically.

3.3. The Role of Mental Health Literacy to Overcome Toxic Masculinity

Cultural values and social environment can influence individuals in perceiving, understanding problems, and making decisions. It is reflected in how the masculinity construction contributes to changes in individual psychological dynamics and how individuals experience and overcome perceived mental problems. Ross et al. (2020) stated that the social pressures of masculinity and stereotypes attached to men have affected mental health and willingness to negatively deal

with mental problems. Besides, various works of literature have described the toxic role of this masculinity across cultures and ages. Current studies revealed that mental health education initiatives consider the impact and influence of masculinity have the potential to significantly increase male adolescent's help-seeking behavior (Clark et al., 2020). It also directly affects how men overcome problems and cope with situations when experiencing stress or mental problems.

Connection, support, and social relations are important in improving mental health and well-being (McKenzie et al., 2018). Cleary (2005) revealed that depressed young men crave close relationships and support from family and friends. However, they have a fear of being judged as weak, emotionally vulnerable, and not masculine. As a result, they are reluctant to ask for help and seek support when they need it. It puts them at high risk of committing suicide as a solution to their problems. Research shows that adherence to masculinity norms, such as independence can predict low levels of health literacy, particularly mental health literacy (Milner et al., 2019). Moreover, increased stigma against mental health (Magovcevic and Addis, 2005) and self-stigma against behavior asking for psychological help (Vogel et al., 2011) indicate the need to improve mental health literacy to minimize conditions and obstacles in achieving mental health.

Rickwood et al. (2005) stated that positive attitudes, past experiences, mental health literacy, and social influences were identified as sources that act as facilitators of asking for help. It is supported by Jorm (2000) in which if a person's mental health literacy does not improve, then many people with general mental problems experience resistance when effectively helping themselves and may not get support from others in the community. Jorm et al. (1997) explained that it is necessary to improve mental health literacy to help people recognize mental problems/disorders and the appropriate handling from an early age. Thus, to overcome the effects and impacts of the toxic masculinity construct and barriers for individuals to have the freedom to achieve psychological well-being, it is necessary to increase mental health literacy, both in society and individuals suffering from mental disorders.

According to Jorm (1997), mental health literacy is described in individual knowledge and beliefs in understanding mental disorders that help individuals recognize, treat, and prevent them. Furthermore, mental health literacy covers the ability to recognize specific mental illnesses, understanding how to seek mental health information, knowledge of risk factors and causes of mental illness, independent care and availability of professional help, and attitudes that encourage recognition as well as finding the best support. Moreover, McKenzie et al. (2018) concluded that it is important to deconstruct the belief that men should be socially and emotionally independent, not open-minded, and not talk to others about their feelings as well as the belief that men can solve their problems alone without help from others. Thus, it is necessary to have attitudes and beliefs that are fully supported by society and the social environment to change these beliefs and practices, particularly to provide a space for anyone, both men and women to build relationships with mutual support and acceptance as a foundation to realize mental health and well-being.

Indeed, how the environment responds to and treats men in social relationships is important. The behavioral approach, one of the ground theories in psychology, explains the dynamics in the formation of individual behavior that is strongly influenced by the environment (Kutlu and Yavuz, 2016). Ormrod (2016, 36-37) explained that behavior is formed from the learning process, which is mostly the result of events in the environment. Besides, the behavioral approach also explains that the learning process comes from one's experiences and often occurs outside of the individual. This approach explains how the relationship between events in the environment influences the formation of individual behavior through learning and

experience. Basically, this approach can be used to understand how society involves and treats men in the social environment, for example in socializing and interacting. This is because, this is related to how the values in the *masculinity construct* that are believed by society to influence a person in living a social life which also contributes to the process of internalizing the construct of masculinity in men which will later affect their beliefs and behavior as well as their psychological condition when experiencing problems in his life.

Related to the *masculinity construct* that is formed in community, Thompson & Bennett (2017, 47) explains that masculinity as an ideology is a set of ideas and beliefs about how a man should be and how men will be judged in their socially constructed community. The values and ideology of masculinity are finally formed into a social norm where the society expects men, for example, how they should behave and present themselves. This causes individuals in the same social environment to adapt and internalize agreed norms in the social environment. This also has an impact on the formation of strong norms of masculinity in the social environment. In social norm theory, social norms are explained in terms of the expectations that are believed in a group where these expectations are properties, attributes or identities that reflect a group (Bartholomew et al. 2006, 163-64). These expectations are explained in the form of what is appropriate and inappropriate in certain situations that become the standard of individuals when behaving in a group. Bartholomew et al. (2006, 163-64) explained further that norms are external determinants that form the basis of social influence felt by individuals in society. The norms and values that exist in the social environment are transmitted and internalized within the individual, such as through the process of socialization. The socialization process even occurs since the individual is in childhood through various socialization agents, such as the family as the first agent of socialization. Then, the socialization process develops which does not only occur in the family environment, but also in a wider context or environment, such as through institutions in the community, such as schools, churches, certain communities, and others that act as agents of socialization of norms in social environment.

In this study, some aspects of masculinity that have been identified as affecting men's psychological dynamics are self-reliance, emotional restraint, and dominance, and other constructs that prevent men from expressing emotions, asking for help from others and mental health professionals, low self-disclosure, and lack of adaptive problem resolution skills, particularly related to mental problems. They can cause problematic behavior and mental problems including depression and suicidal tendencies in men.

“althought we say we value kindness and compassion, we value them more in women than we do in men. Althought we say that we want men to talk about their emotions and share their these things, it also showed that it found that women tend not to value men who are emotional. Boys especially are not just hearing the messages we tell them, they're also seeing our behaviors. And that communicates something even more strongly” (DW Documentary, 2021).

This illustrates that self-belief is directly involved when someone interacts and establishes social relationships. Unconsciously, people do not mean to do it. However, the way people respond and behave increasingly reflects what they believe, especially in the masculinity construct that becomes the basis for social relations with a man. Several aspects of masculinity that have been mentioned previously affect the psychological dynamics of men due to the internalization and attribution of the beliefs in a person. This occurs through a process of interaction and social relations in which the social environment responds and behaves towards men and believes and expects men to behave in accordance with the construct of values believed by society. It makes men internalize the masculinity values and manifest them in the form of beliefs and behaviors that meet the expectations of the environment. Further, it is

strengthened by the response from the social environment that does not accept or does not show a positive attitude or approval if their response or behavior is not suitable with the existing constructs in the social environment. It makes men strengthen their behavior to meet the expectations of the social environment. This is evidenced in a study conducted by Staiger et al. (2020) in which before men seek help, they have been negatively affected by the internalized norms of masculinity. McKenzie et al. (2018) revealed that it can be strengthened by the negative experiences they receive when disclosing their personal problems. Ross et al. (2020) explained that when men fail to meet the expectations in the social environment, they perceive themselves as weak individuals and give heavier barriers to their problems. In line with Driscoll (2015), mental health problems, well-being, and dysfunction in the ability to express emotions occur due to the pressure in adjusting to masculinity. It shows that it focuses more on how other people perceive and respond to what makes a man 'man' to encourage the belief that it is okay for men to ask for help and express feelings (Ross et al., 2020) and it is not something wrong or an indicator of someone being labeled as vulnerable and weak. This can be started from how people change the beliefs and demands of a man, building a positive attitude and creating a positive environment that does not limit men in expressing their social needs.

“be more consistent in what we’re saying, we value in boys and men . it’s like valuing when men show up and bring themselves into the conversation, when they show up openly and honestly, . . . are we tolerant enough to really allow people to enter the conversation as they are?” (DW Documentary, 2021).

With the existence of mental health literacy in society, the social environment can understand the behavior and actions needed when dealing with individuals experiencing mental problems. Mental health literacy focuses on increasing people's knowledge and understanding of mental health, especially about the complexity of stereotypes and gender *masculinity constructs* on the psychological dynamics of individuals that can directly influence people's beliefs and behavior in social relationships. The knowledge and beliefs about mental health help people understand the risk and support to prevent mental problems or avoid mental problems getting worse. This is supported by Thompson & Bennett (2017, 58-61) in their study which reveals that the ideology of masculinity has impacts and implications that have reached dangerous levels on individual health, such as on health status, health behavior and health-related help seeking behavior. This is proven by the results of previous literature studies that support for the ideology of masculinity is the main cause of men who have poor health levels.

In mental health, some aspects of the masculinity construct affect the psychological dynamics and mental health of a person, both men, and women. It is supported by previous studies on the importance of mental health literacy to overcome the impact of conformity on masculinity constructs (Milner et al., 2019). Swami (2012) revealed that the initiation to consider the impact of gender stereotypes and the impact of individual differences can improve mental health literacy which ultimately increases the behavior of asking for help in individuals with mental disorders. Maintaining the belief that men do not talk or share personal problems and emotions can become a barrier for men to ask for help. It even makes them socially isolated and finds it difficult to get social support at critical times which finally threatens men's health and well-being (McKenzie et al., 2018).

Reducing the stigma and labeling “unmanly” that exists in the community for men with mental problems and providing training for health professionals concerning the effect of masculinity constructs on mental health are essential (Staiger et al., 2020). It is supported by Rice et al. (2018) that reducing stigma can increase men's attitudes towards mental health and behavior of asking for help. Besides, public campaigns can be useful to change people's negative views about mental illness, behavior of asking for help, mental health services for men and women

who experience depression (Staiger et al., 2020), as well as removes the labels attached to individuals who experience mental problems. Concerning the influence of the masculinity construct on men's psychological dynamics and mental health, it is important to change attitudes, beliefs, and behavior of the community not to limit and differentiate between men and women in establishing warm, supportive, and open social relationships when individuals are physically and emotionally vulnerable.

The result of this study has implications for the process of achieving the welfare of each individual, both men and women. Previous empirical studies prove that the masculinity construct involved in social life inhibits individuals from achieving a healthy, prosperous mental state and has limited individual freedom to show themselves and their true potential. In particular, the construct of masculinity has an impact on limiting individual psychological aspects, such as limiting individual need to express their feelings, thoughts, and behavior in everyday life. This is in accordance with the latest theory which explains that the limitations of gender roles on men and women have implications for the birth of efforts to control individual behavior, limit the potential of individuals and others and reduce actual human freedom (O'neil et al. 2017, 78). This impact will prevent individuals from achieving mental health and well-being in their lives. Because one aspect that helps individuals achieve prosperity and a healthy mental state is to have the freedom to develop their potential and abilities and be given the opportunity to contribute in their community (WHO, 2018). This shows that how much influence the *construct of masculinity* has on well-being, mental health and how individuals achieve a healthier mental condition and self-development when experiencing mental problems and how the involvement of people around them in supporting and strengthening the *construct of masculinity* in daily life. This study also has implications for the role of the community and mental health professionals in facilitating and providing treatment and services to support the attainment of mental health and development of each individual, both men and women without limiting their psychological needs with certain stigmas or labels that are believed by society for men and women. In fact, the results of this study also help mental health professionals to understand that there are differences in the psychological dynamics of men and women when experiencing problems in their lives. This will provide a fundamental knowledge for mental health professionals to help men and women to be more comfortable and involved with the health facilities and services that they need by understanding the barriers and characteristics experienced by men and women in seeking health assistance.

4. Conclusion

The results of this study indicate some aspects of masculinity, such as dominance, self-reliance, and emotional restraint affect an individual's mental health and well-being, such as reluctance to ask for help from others and mental health professionals, low self-disclosure, difficulty expressing emotions, and difficulty when experiencing mental problems, such as depression which engenders maladaptive coping. This study does not merely focus on gender roles, such as the masculinity construct in society, but on how people include the construct in social relations and daily life. Mental health literacy that sensitive to gender problem is required to fix and reconstruct the beliefs, attitudes, and behavior of society, especially when perceiving and responding to men who experience mental problems. It is expected that the community understands that every individual, both men, and women have primary needs, such as establishing warm social relationships, getting social and emotional support, and behaving and presenting themselves without being limited by stigma and labels due to gender differences, which negatively affects mental health and well-being. Furthermore, current studies on the construct of masculinity on mental health only focus on the impact felt by men. In fact,

empirical studies have found that the masculinity construct also gives the same impact on women's mental health as men. This shows that it is necessary to expand the focus of the study which also involves women to find out more deeply how the masculinity construct that exist in the social life contribute to the welfare and mental health of everyone.

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