Psychosocial Factors Influencing Help Seeking Behaviors among Caregivers of Mental Health Patients in Public Hospitals: A Case of Gilgil Sub County Hospital, Nakuru County, Kenya

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ABSTRACT: The study sought to examine the psychosocial factors influencing help seeking behavior among caregivers of mental health patients in Gilgil Sub County Hospital, Kenya. The study was based on the ex post facto design. The study was carried out in Gilgil Sub County Hospital. The study population was caregivers of mental health patients in Gilgil Sub County Hospital. There were about 77 mental health care providers in Gilgil Sub County Hospital. The table recommended by Kathuri and Pals was used to determine the sample size of 66 respondents. Purposive sampling was used to select the study sample. The researcher utilized the semi-structured questionnaire for caregivers to collect data. A pilot study was carried out in Nakuru County Hospital. A reliability coefficient 0.7 and above was established using Cronbach alpha. The validity of the research instruments was also ensured by generating them in line with the research objectives. The instruments were adjusted according to the suggestions made. Data was analyzed using descriptive statistics which included mean, standard deviation, frequencies and percentages and inferential statistics which included correlation and regression analysis. Data was analyzed with the aid of the Statistical Package for Social Sciences (SPSS) version 25. The study concluded that help seeking behaviours (30.3%) among care givers of mental health patients was explained by caregivers’ attitudes. The study also concluded that 20.1% of help seeking behaviours was influenced by caregivers’ gender. Hence, it is concluded that attitudes and gender positively influenced help seeking behaviours among caregivers. In total 64.48% of the total variance in help seeking behaviours of caregivers of mental health patients was influenced by the selected psychosocial factors. Hence, the study recommends that the hospital should formulate programs for caregivers to overcome the psychosocial challenges that inhibit help seeking behaviour. The study findings are expected to provide relevant information on the influence of psychosocial factors on help seeking behaviours among caregivers of mental health patients.

Key words: Attitude, Caregivers, Help seeking behavior, Influence, Mental health patients, Mental health, Psychosocial factors

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I. INTRODUCTION

1.1 Background of the Study
Help seeking behavior is a form of social behavior emitted to seek support from others (Jorm, 2000). Attitude, culture and social networks are known to influence help seeking behavior (WHO, 2011). The ability to utilize services is determined by availability of resources, closeness to the health facility and treatment services. If health facilities are not accessible, it is likely that there will be no service delivery for health care. According to Bonita andMathers (2017) culture is often considered a barrier to help seeking behavior. It can influence knowledge and beliefs about help seeking and the course of mental health treatment. Combined with culture, social networks can also influence an individual’s help seeking behavior. Early identification of the signs and symptoms of burn out is important because immediate intervention is ideal for restoring competency of caregivers (WHO, 2006). However, caregivers’ beliefs and attitudes towards help seeking shape their help seeking behavior (Nguyen, 2017). According to Barker (2017) stigmatizing attitudes toward help seeking are also important barriers for people who work with mental health patients (Anderson, 2000).

Gender also plays an important part in help-seeking behavior. Research has suggested that customary gender roles affect professional help seeking by moving the level of concern about seeking help (Addis &Mahalik, 2017). The male gender role with its prominence on being independent and in control for example, may increase the apparent risks associated with low self-esteem among male caregivers (Addis &Mahalik, 2017). There may also be increased social stigma and decreased interpersonal relationship on the social norms.
associated with women and men seeking help for certain issues. According to Fischer and Farina (2015) women tend to have more positive attitudes than men regarding seeking professional help and, at least for mild cases of emotions such as depression, women tend to seek help more often than men. Hence, the reluctance of men to seek help is influenced by perceived significance of help seeking behavior.

Studies have reported poor practice of health seeking among caregivers mainly due to career concerns. Yet the logistics of being a caregiver can lead to problems such as absenteeism and work interruptions. These and other care-related stress factors can have an impact on caregivers’ health and the quality of care provided to the mental health patients (Quittner, 2006). It is therefore important to understand the psychosocial factors influencing help seeking among caregivers during the process of provision of mental health services.

Around the world, concerns have been raised about help seeking behaviour among care givers. In United States of America (USA) the challenges encountered by caregivers when seeking help have included time constraints and other external logistical challenges. In Asia, studies have shown that timely and appropriate help seeking behaviours can have a significant impact on patient recovery. In Canada management care practices have been reported as the primary factors contributing to problems related to caregiver’s help seeking behaviour. A study done in Saudi Arabia identified organizational factors as contributing to help seeking behaviour. In Nigeria, professional pride and cultural beliefs appear to be the main determinants of help seeking behaviour caregivers help seeking behaviour.

In Kenya little published literature on help seeking behaviour for caregivers is available and therefore psychosocial factors influencing help seeking behaviour is not well understood. Nevertheless, mental health services are offered in public hospitals to help patients realize improved balance, interpret, appropriately perceive, and respond to their environment, live as independently as possible and achieve the best possible of life. Given, the large numbers of mental health patients attended to the caregivers are often left deplete and stressed. The aim of this study therefore is to find out the psychosocial factors influencing caregivers help seeking behaviours.

1.2 Statement of the Problem

Every day, in every community around the world, caregivers provide care for mental health patients often putting their own lives at risk. While there are benefits in caring for the mental health patients, many caregivers soon find that they themselves are in need of help in order to cope with the challenges of providing mental health services. However, help seeking behavior among caregivers appear to be influenced by psychosocial factors. Yet little research has been conducted on these factors influencing caregivers’ help seeking behaviour. Thus, previous studies have not addressed the psychosocial factors influencing caregivers’ help seeking behaviour not only nationally but also in Gilgil Sub County Hospital. Therefore, the study sought to examine the psychosocial factors influencing help seeking behavior among caregivers of mental health patients in Gilgil Sub County Hospital, Kenya.

1.3 Objectives of the Study

i. To assess the influence of attitudes on help seeking behavior among caregivers of mental health patients in Gilgil Sub County Hospital, Kenya.
ii. To determine the influence of gender on help-seeking behavior among caregivers of mental health patients in Gilgil Sub County Hospital, Kenya.

1.4 Research Hypotheses

The study addressed the following research hypotheses

H01: There is no statistically significant influence of caregivers’ attitudes on help seeking behaviour among caregivers of mental health patients in Gilgil Sub County Hospital, Kenya?
H02: There is no statistically significant influence of caregivers’ gender on help seeking behaviour among caregivers of mental health patients in Gilgil Sub County Hospital, Kenya?

II. LITERATURE REVIEW

2.1 Theoretical Framework

This study was guided by two theories namely the threats-to-self -esteem model and the attribution theory.

2.1.1 Threats-To-Self-Esteem Model

The threats-to-self-esteem model was pioneered by Fisher et al., (1983). The model is based on the assumption that most help-seeking situations contain a mixture of both positive and negative elements. Whether the helping situation is perceived as positive or negative depends on the characteristics of the aid, helper, recipient and help seeking context. If recipients perceive the aid as highlighting their inferiority or dependency, they will view the aid as self-threatening. In contrast, if they see the aid as positive, they will perceive the assistance as self-supportive. If the helper is similar in age or status to the recipient, or has a higher status than...
that of the recipient, the recipient is likely to see the aid as highlighting their inferiority, and the helping situation becomes self-threatening (Fisher & Nadler, 1976). Recipient characteristics also can influence how the help-seeking episode can influence the perception of the help-seeking behavior.

![Figure 1: Threats-to-Self-Esteem Model](source: Adapted from Fisher et al. (1983))

As shown in figure 2, both the situation and the characteristics of the donor are self-threatening and most likely will therefore not seek help. Similarly, help-seeking situations are a combination of positive and negative perceived characteristics of the type of aid being provided, the person helping, the recipient, and the context.

2.1.2 Attribution Theory

The attribution theory was pioneered by Kelly. According to the attribution theory individuals formulate attributions to understand, predict and control their environment and help explain why certain events occur (Kelley, 1967). Individuals assign attributions to both internal and external factors to help them understand the occurrence of events or behaviors. According to the attribution theory, a recipient of assistance will want to know what motivated the helper’s behavior (Fisher et al., 1983). In deciding what the helper’s motive is, the recipient can attribute the helping person’s behavior to three possible motives and think that the person providing the assistance acted from genuine concern, acted for ulterior motives or performed the action because of or her role demanded it. These possible inferences readily apply to seeking assistance from helpers. If the person providing assistance does so because that person’s role requires it or that the helper acts from genuine concern, chances are that the helpee will be less hesitant about seeking assistance. Another application of the attribution theory is its use in answering the question why caregivers need help. In this regard if caregivers cannot explain their behaviors by external factors, then they will look inward for internal factors. In the process of trying to determine why they need help, they will look for three types of information: the distinctiveness of the behavior, consensus and consistency. The recipient assesses each of these dimensions in any help-seeking situation. This reasoning process is an important determinant in the decision to seek assistance. For example, if caregivers feel that they need assistance because of a personal inadequacy, then their self-perception will be low and help seeking may not occur. On the other hand, if they perceive that many other caregivers working with mental health patients need help or a similar condition, they will make an external attribution and will be more likely to accept assistance.

2.2 Attitudes and Caregivers’ help seeking behaviour

Attitude towards good health always plays a key role in predicting health promotion (Armitage & Conner, 2001). However, attitude remains a significant predictor of help seeking behaviour around the world. One of the noteworthy studies showed that young men in the USA have the most negative attitudes towards mental health treatment (Gonzalez & Prihoda, 2015). In the study males demonstrated reduced help seeking behaviour in order to avoid talking about distressing events, avoid feeling painful emotions and prevent social stigma (Deane & Chamberlain, 2015). Similarly, Vogel and Boysen (2015) noted that social stigma predicted help-seeking attitudes. According to Cusack and Ciarrochi (2014) remarkable studies showed that many people
consider the helpfulness help-seeking based on the attitude they hold. Sloan (2001) has demonstrated that in most parts of Africa, attitudes held towards mental illness are still strong determinants of remedies for all kinds of sicknesses. This often leads to an unhelpful response to mental illness, stigmatization of persons with mental illness as well as their helpers (Brandt, 2008). Such attitudes undermine the provision of care service for the needy (Makanjuola, 2017).

Different studies have revealed that negative attitudes towards mental illness affect patterns of help seeking behavior. A study conducted in Nigeria showed that negative attitude was aggravated by lack of knowledge on mental illness. Some people believe that mental illness occurred as a result of possession by evil spirit, curse or witchcraft (Chikomo, 2012). Hence, caregivers of mental illness patients too have become reluctant to disclose their mental health problems (Chikomo, 2012). In Malasia, studies have showed that people equated mental illness to evil possession. Other beliefs that facilitate treatment outcome include the perception that mentally ill persons are unpredictable, abnormal, violent and dangerous and unable to benefit from psychiatric treatment. These attitudes are known to affect help seeking behaviour of persons associated with mental ill patients (Khan& Khan, 2011).

Han (2018) evaluated the factors influencing professional help-seeking for suicidality. Published quantitative and qualitative studies were reviewed following the PRISMA. In all, 55 relevant studies were identified. Of these, 15 studies examined professional help-seeking intentions for perceived suicidal ideation, among people with or without suicidality, 21 studies examined professional help-seeking behavior among people with suicidality and 19 studies examined suicidal decedents’ health services use. Several potential important barriers were identified including high self-reliance, lack of perceived need for treatment, and stigmatizing attitudes toward suicide, toward mental health issues, and toward seeking professional treatment. The study observed that mental health issues was found to generally decrease help-seeking intentions for perceived suicidal ideation while facilitating actual service use. Although this study is relevant to the present study it did not focus on the influence of attitude of caregivers on help seeking behaviour in a hospital set up. Hence the present study sought to establish whether attitude influenced help seeking behavior among caregivers of mental health patients in Gilgil Sub County hospital.

2.3 Gender and Caregivers’ Help Seeking Behaviour

Gender differences relate to how people are perceived and required to conduct themselves irrespective of their biological differences and societal considerations. Recent studies have depicted socially constructed variances between men and women in roles and responsibilities and how status and power interact with biological difference to influence help seeking behavior and patterns (Amin & Bentley, 2012). In the USA, surveys undertaken showed that women reported higher levels of distress than men did, and were more likely to seek help for mental health challenges compared to their male counterparts with the same cluster of symptoms. It also revealed that once men realized they had a severe mental health problem they were as likely as women to seek mental health services. A recent study in Finland indicated that men tended to resort to the use of alcohol as a remedy for relief from temporary strain caused by external pressure and considered the use of psychotropic drugs as a loss of autonomy. Women, on the other hand, used psychotropic medicines to restore their ability to engage in the daily routines related to their private sphere.

Related studies have shown that women tend to use outpatient mental health services compared to men while it is the tendency for men to wait until it is late before coming out to seek help especially after the onset of symptoms (Ahmed & Adams, 2015). In addition, Masuda and Clay (2015) concurred that females tended to develop more positive attitudes toward seeking professional psychological help than males. According to Robertson (2001) counselling requires men to ignore much of their masculine socialization and come out to seek help. There are many gender based characteristics that determine when a person will seek help or not. Levant (2011) reported that men experienced difficulty admitting that a problem existed and found it difficult to ask for help or to distinguish between the various emotional states. It has previously been reported that men are trained from childhood to fear intimacy (Blazina, 2015). It is only when men’s values regarding appropriate roles become less pronounced that they will begin to view psychological help seeking with some positive lens (Blazina & Watkins, 2011).

In the United States and Japan where men have a say in many family issues there is a stronger gender difference in help-seeking behaviour compared to Nordic countries where men tend to take a back seat (Nam & Lee, 2010). Further studies have also presented evidence pointing out that women report a more positive attitude, increased help seeking behaviour and utilization of psychological services compared to men. For example, in a study of 219 black college students, Braksdale (2008) examined factors that influenced mental health help seeking behavior. The study employed ANCOVA and multiple regression analyses to explore and explain the relationship between the study variables. The results revealed that women had a more positive attitude towards help seeking than men. These finding are coherent with previous studies that came to the conclusion that females appeared to portray a more positive attitude towards help seeking than men (Greenley & Cleary, 2017).

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Similarly, Krogh (2007) presents complementary evidence in an investigation of intentions towards psychological counselling for alcohol and depression among 264 participants. In this study the researcher explored the factors that would predict intentions towards seeking counselling services. As in other studies the gender of the care worker was deemed to be a great determinant for promoting intentions to seek help. This study ascertained whether gender is a determinant factor is predicting help seeking among caregivers of mental health patients in Gilgil Sub County Hospital.

Biddle (2004) investigated the help-seeking behaviours of mentally distressed young adults. The study was based on a cross-sectional survey and employed a questionnaire to collect data from a sample of 3004 young adults aged 16-24 years. The results showed that helpseeking was more common in female than male and women with suicidal thoughts more commonly sought help than men with suicidal thoughts. Although this study did not focus on care givers, it shows that gender differences could be a significant psychosocial factor influencing helpseeking behaviour.

Ando (2018) analysed the factors promoting or inhibiting intention to seek help for depression in 10-year-olds, including trans-generational factors, and to investigate the sex differences in the effect of these factors. A cross-sectional study was conducted on a community of 4478 10-year-old children and their parents using self-report questionnaires and face-to-face interviews. The dependent variable was intention of seeking help for depression, which was assessed using a depression case vignette. Independent variables were demographic, psychological, and transgenerational/social factors including depressive symptoms, psychotic-like symptoms, tendency to help classmates, and parents’ help-seeking intention. The study reported that girls were more likely to seek help than boys and the factors promoting help-seeking intention included the recognition of a need for help, emotional openness, tendency to help classmates, parents’ positive intention of seeking help for depression, and the number of people to consult. The present study seeks to analyse help seeking behaviour among care givers of mental health patients.

Using the Behavioral Model of Health Services Use, Magaard (2017) reviewed the literature on the characteristics associated with help-seeking behaviour in adults with major depression. Articles and observational studies investigating the associations between individual or contextual characteristics and professional help-seeking behaviour for emotional problems in adults formally diagnosed with major depression were included. The quality of the included studies was assessed, and factors associated with help-seeking behaviour were qualitatively synthesized. Socio-demographic factors appeared to influence help-seeking behaviour.

Wendt and Shafer (2016) investigated gender differences seek professional help across characteristics such as age, race, ethnicity, and nationality. The authors used data from the 2006 General Social Surveys mental health module to suggest that the gender gap in help seeking may be rooted in attitudes regarding help-seeking behaviors generally. The results showed that Using structural equation modeling, the study linked type of help seeking from informal and formal sources. Analysis of the results showed support for informal help seeking regardless of the problem but were less likely to endorse formal help for depression. These results may help better understand the numerous barriers to men’s help seeking.Powell and Leslie (2016) tested the hypothesized model situating racial discrimination, masculinity norms salience, everyday racism, racial identity, sense of control, and depressive symptomatology were key barriers to men's health help-seeking. A total of 458 African American men were recruited primarily from US barbershops in the Western and Southern regions. The primary outcome was barriers to help-seeking which included gender differences and age.

2.4 Conceptual Framework

The theoretical framework of this study and the interaction between the independent variable intervening variables independent variables are conceptualized in figure 2.

![Figure 2: Interaction between Attitudes, Gender and Help Seeking Behavior](image)

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Figure 2 presents the variables that are involved in studying help seeking behavior towards the treatment of mental illness. The independent variables included attitudes and gender which were conceptualized as influencing help seeking behaviours among caregivers of mental health patients. The dependent variable is help seeking behavior and is indicated by psychiatric services, debriefing, consultation and counselling services. The intervening variable was availability of professional supervision.

2.5 Research Gaps
The literature review in this chapter has shown that caregivers’ help seeking is crucial in providing effective mental health services. This review has explored issues related to psychosocial factors influencing help seeking behaviours among caregivers of mental health services. A number of psychosocial factors that acted as barriers to help seeking behaviour have been discussed. This review also looked at the theoretical framework underpinning this study. The theories identified as suitable in explaining the determinants of help seeking among care givers are the threats-to-self-esteem model and the attribution theory. The literature reviewed has shown the contribution made by the studies done on care-givers help seeking behaviour particularly the role played by stigma, beliefs, gender attitude and perception in countries such as Latin America, Pakistan, India, Korea, Nigeria, Egypt, Uganda and Kenya. In the mental health hospital the caregiver’s role is very crucial. Therefore, caregivers need help so that they can handle mental health patients well. However, inadequate studies exist to ascertain the psychosocial factors influencing caregivers help seeking behaviour. Therefore, it was important to examine the psychosocial factors influencing caregivers help seeking behaviours in Gilgil Sub County Hospital, Kenya.

III. RESEARCH METHODOLOGY

3.1 Research Design
The research design adopted for this study was ex-post facto in nature since the phenomenon studied had already occurred. The ex post facto design was employed to examine the psychosocial factors influencing help seeking behaviour among caregivers of mental health patients. This design was suitable because the relationship between the variables under study had already occurred by the time the study was carried out.

3.2 Location of the Study
The study was carried out in Gilgil Sub County Hospital. The location was suitable because the facility focuses on treatment of mild and acute mental illnesses. Therefore, the location provided an environment that was conducive for mental health patients and their caregivers who were ready to provide information necessary for the study. It is also an assessment centre for introduction of pathologies to the patients.

3.3 Target Population
The study population comprised of all caregivers of mental health patients in Gilgil Sub County Hospital. Approximately 77 caregivers were involved in the study. The researcher purposively selected caregivers who attend to mental health patients in Gilgil Sub County Hospital at the time of the study. The distribution of caregivers according to different cadres is shown in table 1.

<table>
<thead>
<tr>
<th>Cadre</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychiatrist</td>
<td>1</td>
<td>1.3</td>
</tr>
<tr>
<td>Psychiatric Nurses</td>
<td>30</td>
<td>38.7</td>
</tr>
<tr>
<td>Hospital administrators</td>
<td>9</td>
<td>11.7</td>
</tr>
<tr>
<td>Ward administrators</td>
<td>8</td>
<td>10.5</td>
</tr>
<tr>
<td>Addiction counsellors</td>
<td>5</td>
<td>6.5</td>
</tr>
<tr>
<td>General practitioners</td>
<td>14</td>
<td>18.3</td>
</tr>
<tr>
<td>Pharmacologists</td>
<td>5</td>
<td>6.5</td>
</tr>
<tr>
<td>Psychologists</td>
<td>5</td>
<td>6.5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>77</strong></td>
<td><strong>100.00</strong></td>
</tr>
</tbody>
</table>

Source: Gilgil Sub County Hospital (2019)

3.4 Sampling Procedures and Sample Size
To determine the sample size from a population of 77 caregivers, the researcher used the table suggested by Kathuri and Pals (1983). The table recommends a sample size of 66 from a population of 77. Stratified random sampling was then applied in selecting the respondents of the study. The required sample size was further proportionately distributed to all the strata and simple random sampling applied in selecting the actual study participants as shown in table 2.
Psychosocial Factors Influencing Help Seeking Behaviors among Caregivers of Mental Health

Table 2: Distribution of the Sample Size

<table>
<thead>
<tr>
<th>Cadre</th>
<th>Frequency</th>
<th>Sample Size</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychiatric Doctors</td>
<td>1</td>
<td>1</td>
<td>1.6</td>
</tr>
<tr>
<td>Psychiatric Nurses</td>
<td>30</td>
<td>28</td>
<td>43.8</td>
</tr>
<tr>
<td>Hospital administrators</td>
<td>9</td>
<td>5</td>
<td>7.8</td>
</tr>
<tr>
<td>Ward administrators</td>
<td>8</td>
<td>4</td>
<td>6.3</td>
</tr>
<tr>
<td>Addiction counsellors</td>
<td>5</td>
<td>5</td>
<td>7.8</td>
</tr>
<tr>
<td>General practitioners</td>
<td>14</td>
<td>11</td>
<td>17.1</td>
</tr>
<tr>
<td>Pharmacologists</td>
<td>5</td>
<td>5</td>
<td>7.8</td>
</tr>
<tr>
<td>Psychologists</td>
<td>5</td>
<td>5</td>
<td>7.8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>77</strong></td>
<td><strong>64</strong></td>
<td><strong>100.00</strong></td>
</tr>
</tbody>
</table>

Source: Gilgil Sub County Hospital (2019)

3.5 Data Collection

The researcher adopted a questionnaire for caregivers of mental ill patients. The instrument was used to collect information from the sample based on the study objectives. The questionnaire contained both close ended and open ended questions. A pilot test was carried in Nakuru County PGH. To ensure content validity of the instrument, a variety of items was constructed on each objective. The questionnaire was scrutinized by the supervisors to ensure content validity is upheld. The output of the validation was used to enhance the quality of the instruments. The questionnaire was tested for reliability using Cronbach alpha to determine the internal consistency of items. The data collected from the pilot study was used to compute Cronbach alpha reliability of the questionnaire. Cronbach’s alpha reliability coefficient of 0.78 was obtained and considered acceptable.

3.6 Data Analysis and Presentation

The data was collected, organized, coded and analyzed with the aid of the statistical package for social Science (SPSS) for window version 25. Data was analyzed and interpreted in line with the research objectives. Quantitative data was analyzed using descriptive statistics, which included frequencies and percentages. The Likert scale was used to transform the subject responses to items into mean scores. The mean score were then transformed into an overall mean. The qualitative data was analyzed based on thematic content analysis.

IV. RESULTS AND DISCUSSION

4.1 Descriptive Statistics

Analysis of descriptive statistics was done to establish the respondents’ views on various study variables. Thus, respondents’ views were sought in regard to care givers attitudes and gender and help seeking behaviours.

4.1.2 Influence of Caregivers’ Attitudes

The study also sought to establish the respondents’ views in regard to care givers’ attitudes. The means and standard deviations were computed for all the responses and the findings are presented in table 3.

Table 3: Influence of Caregivers’ Attitudes

<table>
<thead>
<tr>
<th>Statements</th>
<th>N</th>
<th>Mean</th>
<th>Std. Dev</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seeking further help implies that there are better ways to handle mental illness</td>
<td>52</td>
<td>3.39</td>
<td>0.73</td>
</tr>
<tr>
<td>Mental health can be treated using professional help</td>
<td>52</td>
<td>3.42</td>
<td>1.15</td>
</tr>
<tr>
<td>There are no treatments for mental illness hence no need for seeking further help</td>
<td>52</td>
<td>3.22</td>
<td>0.88</td>
</tr>
<tr>
<td>There is little that can be done to control the symptoms of mental illness</td>
<td>52</td>
<td>3.09</td>
<td>1.02</td>
</tr>
<tr>
<td>People with mental illness can never recover fully</td>
<td>52</td>
<td>3.12</td>
<td>1.03</td>
</tr>
<tr>
<td>People with mental illness are dangerous</td>
<td>52</td>
<td>3.07</td>
<td>1.06</td>
</tr>
<tr>
<td>People with mental illness are to blame for their illness</td>
<td>52</td>
<td>3.42</td>
<td>1.15</td>
</tr>
<tr>
<td>Caregivers have all the knowledge to treat mental illness</td>
<td>52</td>
<td>3.11</td>
<td>0.92</td>
</tr>
<tr>
<td>Other professional fear being consulted on mental illness</td>
<td>52</td>
<td>3.32</td>
<td>1.12</td>
</tr>
</tbody>
</table>

As shown in table 3, majority of the respondents agreed that seeking further help implied that there were better ways to handle mental illness as revealed by a mean response of 3.39 with a standard deviation of 0.73. The results also showed that mental health could be treated using professional help as revealed by a mean response of 3.42 with a standard deviation of 1.15. This agrees with Gonzalez and Prihoda (2015) who noted that caregivers developed reduced help seeking behaviour in order to avoid talking about distressing events and
prevent social stigma. Chikomo (2012) also noted that caregivers too have become reluctant to disclose their mental health problems and the stigmatizing attitudes toward mental health issues often influence help seeking behaviour.

With regard to whether there were no treatments for mental illness hence no need for seeking further help majority of the respondents agreed as shown by a mean response of 3.22 and standard deviation of 0.88. The respondents also agreed that there was little that could be done to control the symptoms of mental illness as revealed by a mean response of 3.09 and a standard deviation of 1.02. It was also evident that caregivers believed that people with mental illness could never recover fully as revealed by a mean response of 3.12 with a standard deviation of 1.03. These findings concurred with Gonzalez and Prihoda (2015) who noted that caregivers demonstrated reduced help seeking behaviour due to perceived lack of treatment and stigmatizing attitudes toward mental health issues and toward seeking professional treatment.

Moreover, majority of the respondents observed that people with mental illness were dangerous as revealed by a mean score of 3.07 and a standard deviation of 1.06. The respondents furthered believed that people with mental illness were to blame for their illness as revealed by a mean response of 3.42 and a standard deviation of 1.15. It was also evident that caregivers believed that they had adequate knowledge on the treatmentof mental illness. This was revealed by a mean response of 3.11 with a standard deviation of 0.92. Finally, majority of the respondents observed that other professionals feared being consulted on mental illness as revealed by a mean score of 3.32 and a standard deviation of 1.12. Ideally, caregivers often spend hours on arduous tasks but it seems like many people forget that they need help. Nevertheless, caregivers hold paradoxical feelings towards help seeking as they recognize their need for help, but also find them more resilient to stigma. This could be interpreted to imply that caregiving role decreases one’s openness to help. The results further concurred with Gonzalez and Prihoda (2015) who noted that caregivers demonstrated reduced help seeking behaviour in order to avoid the distressing events social stigma associated with perceived wounded helper.

4.1.3 Influence of Caregivers’ Gender

The researcher further determined the respondents’ views regarding the influence of gender of caregivers on help seeking behaviour. The means and standard deviation values were computed to show the respondents’ views. The findings from the analysis are shown in table 4.

<table>
<thead>
<tr>
<th>Statements</th>
<th>N</th>
<th>Mean</th>
<th>Std. Dev</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender roles influence caregivers’ help seeking behavior</td>
<td>52</td>
<td>4.01</td>
<td>0.32</td>
</tr>
<tr>
<td>Female caregivers tend to seek further help on handling mental health</td>
<td>52</td>
<td>3.89</td>
<td>0.77</td>
</tr>
<tr>
<td>patients compared to female ones</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional stereotypes deny caregivers willingness to seek further help</td>
<td>52</td>
<td>3.69</td>
<td>0.97</td>
</tr>
<tr>
<td>Female caregivers have more coping strategies thus need no further help</td>
<td>52</td>
<td>3.67</td>
<td>0.83</td>
</tr>
<tr>
<td>in managing mental illness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men usually consider the gender of professional care giver before</td>
<td>52</td>
<td>3.79</td>
<td>1.15</td>
</tr>
<tr>
<td>deciding to seek further help</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female caregivers tend to seek further help irrespective of the gender</td>
<td>52</td>
<td>2.59</td>
<td>1.019</td>
</tr>
<tr>
<td>of the person they seek professional help</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ascribed gendered roles deny male caregivers the courage to seek further</td>
<td>52</td>
<td>3.67</td>
<td>1.031</td>
</tr>
<tr>
<td>help on managing mental health patients</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

As shown in table 4 the respondents agreed that gender roles influenced caregivers’ help seeking behavior as revealed by a mean response of 4.01 with a standard deviation of 0.32. The result show that female caregivers tended to seek further help on how to handle mental health patients compared to male ones as indicated by a mean response of 3.89 and a standard deviation of 0.77. Similarly, majority of the respondents agreed that professional stereotypes denied caregivers the courage to seek further help. This was revealed by a mean response of 3.69 with a standard deviation of 0.97.

These results clearly show that gender influenced men’s and women’s attitudes toward seeking mental health treatment. This indicates that more favorable attitudes toward seeking mental health services could be exhibited by women who generally display more positive attitudes toward seeing therapy than men. Judd, Komiti and Jackson (2008) concur that men often express high level of stigma associated with mental illness than women. This further suggests that gender role socialization is a major consideration in terms of its potential links to utilization of mental health services in the caregivers’ population. Addis and Mahalik (2017) agree that
men are less likely to report emotional distress and may perhaps be less able to recognize and articulate symptoms of mental illness than their female counterparts. Mackenzie (2006) determined that men exhibited less psychological openness than women with regards to both acknowledging mental health problems and seeking professional services.

The findings further show that majority of the respondents revealed that female caregivers had more coping strategies thus needed no further help in managing mental health patients as revealed by a mean response of 3.67 with a standard deviation of 0.83. Moreover, there was a higher response rate in regard to whether men usually considered the gender of professional care givers before deciding to seek further help while female caregivers tended to seek further help irrespective of the gender of the person from whom professional help was being sought as indicated by mean response of 3.79 and 2.59 with standard deviations of 1.15 and 1.019 respectively. Similarly, it is apparent that most respondents agreed that ascribed gender roles denied male caregivers the courage to seek further help on managing mental health patients as revealed by a mean response of 3.67 and standard deviation of 1.031. These findings are supported by previous studies by Amin and Bentley (2012) who found that socially constructed variances between men and women influenced help seeking behavior and patterns. Other researchers such as Masuda and Clay (2015) concurred that females tended to develop more positive attitudes toward seeking professional psychological help than males while Levant (2011) agrees that men experienced difficulty admitting that a problem existed and found it difficult to ask for help. Krogh (2007) concurred that the gender of the care worker was deemed to be a great determinant for promoting intentions to seek help. Ando (2018) reported that the factors promoting help-seeking intention among female care givers included the recognition of a need for help and emotional openness.

4.2 Inferential Statistics

The study sought to establish the underlying relationships between the study variables and the extent to which the independent variables influenced the help seeking behaviour among care givers of mental health patients. Correlation analysis and regression analysis were used to establish the association. The results on the relationship between psychosocial factors and help seeking behaviour are presented in table 5.

Table 5: Relationship between Psychosocial Factors and Help seeking behaviour

<table>
<thead>
<tr>
<th>Help seeking behaviours</th>
<th>Pearson Correlation</th>
<th>N</th>
<th>Sig. (2-tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attitudes</td>
<td>0.303</td>
<td>52</td>
<td>0.002</td>
</tr>
<tr>
<td>Gender</td>
<td>0.201</td>
<td>52</td>
<td>0.000</td>
</tr>
</tbody>
</table>

4.2.1 Relationship between Caregivers’ Attitudes and Help Seeking Behaviour

The second hypothesis sought to test whether there was any statistically significant influence of caregivers’ attitudes on help seeking behaviour among caregivers of mental health patients. As shown in table 5 the researcher established that there was a positive relationship (r=0.303, p=0.002) between caregivers’ attitudes and help seeking behaviour. The relationship was statistically significant at p<0.05. Therefore the null hypothesis H0 that stated that there was no statistically significant influence of caregivers’ attitudes on help seeking behaviour among caregivers of mental health patients was rejected. The researcher concluded that help seeking behaviour among caregivers of mental health patients in Gilgil Sub County hospital depended on caregivers’ attitudes. These findings are supported by Sloan (2001) who demonstrated that attitudes held towards mental illness were strong determinants of help seeking behaviour. Similarly, the results are supported by James (2002) who established a strong relationship between health seeking behaviors, perceptions of caregivers and the use of mental health care services in India and Pakistan.

4.2.2 Relationship between Caregivers’ gender and Help seeking behaviours

The study further sought to assess the influence of caregivers’ gender on help seeking behaviour among care givers of mental health patients. The findings indicated the existence of a positive relationship (r=0.201; p=0.000) between caregivers’ gender and help seeking behaviour. The relationship was also found to be statistically significant at p<0.05 level of significance. Therefore, the null hypothesis H0 which stated that there was no statistically significant influence of caregivers’ gender on help seeking behaviour was rejected. Therefore, the researcher concluded that help seeking behaviour among care givers of mental health patients also depended on caregivers’ gender. These results are supported by Nam and Lee (2010) in which women reported a more positive attitude, increased help seeking behaviour and utilization of psychological services compared to men. However, Wendt and Shafer (2016) established minimal support for help seeking regardless of the problem and the gender of the caregiver in the context of management of depression.
4.3 Regression Model
The researcher attempted to fit a regression model for the study to show the relationship between the independent variables and the dependent variable. Multiple regression analysis was performed and the results presented in table 6.

Table 4.3: Model Summary

<table>
<thead>
<tr>
<th>Model</th>
<th>R</th>
<th>R Square</th>
<th>Adjusted R Square</th>
<th>Std. Error of the Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>0.803&lt;sup&gt;a&lt;/sup&gt;</td>
<td>0.6448</td>
<td>0.0623</td>
<td>0.004984</td>
</tr>
</tbody>
</table>

<sup>a</sup> Predictors: (Constant), Caregivers’ gender, Care givers attitudes

The model summary indicated the presence of a positive multiple correlation (R=0.803) between the independent variables and the dependent variable. Further, the R-squared value of 0.6448 indicated that the independent variables accounted for 64.48% of the total variance in help seeking behaviour. Therefore, the researcher observed that the independent variables and the dependent variable were statistically related. The analysis of variances yielded the results in table 7.

Table 7: Analysis of variance of the interaction among the study variables

<table>
<thead>
<tr>
<th>Model</th>
<th>Sum of Squares</th>
<th>Df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regression</td>
<td>3.405</td>
<td>2</td>
<td>1.039</td>
<td>5.709</td>
<td>0.002&lt;sup&gt;b&lt;/sup&gt;</td>
</tr>
<tr>
<td>1 Residual</td>
<td>19.416</td>
<td>57</td>
<td>0.182</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>22.821</td>
<td>52</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<sup>a</sup> Dependent Variable: Help seeking behaviour
<sup>b</sup> Predictors: (Constant), Gender, Attitudes

The study established that the F-ratio (F<sub>(2, 57) = 5.709, p=0.002</sub>) was statistically significant at p<0.05 level of significance. This showed that the independent variables taken together significantly influenced help seeking behaviour among care givers of mental health patients. The model coefficient values from the regression are presented in table 8.

Table 8: Coefficients<sup>a</sup>

<table>
<thead>
<tr>
<th>Model</th>
<th>Unstandardized Coefficients</th>
<th>Standardized Coefficients</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Constant)</td>
<td>3.495</td>
<td>0.463</td>
<td>0.011</td>
</tr>
<tr>
<td>1 Caregivers’ attitudes</td>
<td>0.303</td>
<td>0.771</td>
<td>1.027</td>
</tr>
<tr>
<td>Caregivers’ gender</td>
<td>0.201</td>
<td>0.037</td>
<td>0.371</td>
</tr>
</tbody>
</table>

<sup>a</sup> Dependent Variable: Help seeking behaviour

From the model of coefficients table, the following model was fitted Y = 3.495 + 0.303X<sub>2</sub> +0.215X<sub>3</sub> + 0.201X<sub>4</sub> + 0.007. From the derived regression model, with all the other factors remaining constant, help seeking behaviour among care givers of mental health patients is a constant of 3.495. However, the influence of caregivers’ attitudes was a multiple of 0.303 units, and gender was a multiple of 0.201 units. This suggests that both the independent variables were directly linked to help seeking behaviour. This implies that holding other factors constants, caregivers’attitudes and gender influenced 99.3% of help seeking behaviour. Hence, the current study has elaborated the factors determining help seeking behaviour among mental health workers. Studies have predominately focused on the barriers that exist for health workers who may have a need for further treatment. However, favorable attitudes were exhibited by participants who reported that there was need for further assistance. According to Vogel (2007) health care workers are more open to receiving mental health treatment when someone from their social network admits they are not okay. It is evident that women displayed more positive attitudes than men. This is in line with the findings reported by Rickwood (2005) which provide evidence in support of a gender difference, with women being more willing to seek help than men. Taken together, the aforementioned findings suggest that beliefs and attitudes exercised the greatest influence on opinions of health workers.

V. CONCLUSIONS AND RECOMMENDATIONS

5.1 Conclusions
The purpose of this study was to investigate the influence of psychosocial factors on help seeking behaviour among care givers of mental health patients. Based on the results, the study concluded that 30.3% of help seeking behaviour among caregivers’ of mental health patients was influenced by caregivers’ attitudes. The
study also concluded that caregivers’ gender influenced help seeking behaviour by 20.1%. In general, the study concluded that caregivers’ attitudes and gender positively influenced help seeking behaviour among caregivers of mental health patients. The R-squared value of 0.6448 indicated that the independent variables accounted for 64.48% of the total variance in help seeking behaviour.

5.2 Recommendations

Based on the conclusions drawn from the study, several recommendations are made. This study gives unique insights into the perceptions of mental health workers on help-seeking behaviour. The results demonstrate aneed for awareness and sensitization programs for caregivers in particular about the neglected common illnesses like mood and anxiety disorders that caregivers experience. Programs should address treatment needs and should attempt to encourage caregivers to seek help. In developing such programs, beliefs, attitudes, perceptions and gender issues should be taken into account. The importance of help seeking should be acknowledged and efforts should be made to understand the needs of caregivers in order to provide support whenever necessary. The current trend in which we see a broadening of policies on mental health could create opportunities for development of successful mental health programs for caregivers. Moreover, the hospital management should become more proactive to the psychosocial factors that influence help seeking behaviours among caregivers.

In regard to practice, it is evident that help seeking behaviour among caregivers is influenced by different psychosocial factors. For this reason the hospital management should create an enabling environment that is void of inhibitions to encourage caregivers to easily unlock and unleash their potentials for the benefit of patients by seeking further help whenever they experience burnout and any other psychosocial challenges.

REFERENCES


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