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*"It feels a bit like imposter syndrome": Examining the issue of masculinity and depression in male college students*

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Abstract

This research seeks to examine the intersectional relationship between depression and identity development of male students at a liberal arts institution. The present study focused on the statistics of male students attending the university counseling center alongside multiple conversations with three counselors who help depressed male students and two students whose personal accounts detailed the interaction between their depression and male gender identity. The findings suggest male students' depression may be rooted in the incongruence between students' self-perceived identity and the culturally-demanding narratives of male behaviors and thought patterns. Students detailed their experience navigating shame, loneliness, comparison, and their hesitancy to share struggles with depression to peers. Campus climate for the university provided inconclusive results, dictating historic rises and falls within the percentage of male students who experience depression or are likely to see a counselor. The impacts of depression and male identity development on male students' willingness to see a counselor were also examined.

## Introduction

Beginning at an early age, males are taught the importance of assimilating into socially-accepted characteristics of masculinity. As they grow older, pressure to fulfill masculine ideals increases (Edwards & Jones, 2009). These pressures stem from familial and peer interactions, as well as messages from various entertainment mediums men absorb everyday (Clarke, 2009; Hatoum & Belle, 2010). Considering these narratives, male students enter the collegiate environment with formulated masculine ideals which further manifest themselves on college campuses. Since the majority of college students reside within on-campus residence halls, considering how to counteract potentially toxic masculine stereotypes is imperative for colleges and universities.

Current research chronicles the experiences of both depressive male students and university counselors who assist collegiate men struggling with depression. Examining male students' experiences concerning what triggers their depression, their specific episodes, and how they cope with their illness in relation to developing identity were predominantly important. These particular topics were emphasized because the campus climate data depicted environments where more male students may be feeling severely depressed but are not intentionally seeking out professional counseling. Data revealed an increasing number of male students experiencing depression. The American College Health Association-National College Health Assessment II (ACHA-NCHA I) (2017) found 32.7% of collegiate males "felt so depressed it was difficult to function" and 8.8% of students "seriously considering suicide" (p. 14). Institutions of higher education must emphasize the importance of mental health in their students, especially since incoming male students live with potentially decades-old narratives about how men should act or think.

## Gender Identity Development

Gender Role Theory defines gender as "the cultural and historical ways in which biological sex differences are played out at the individual and social level" (Branney & White, 2008, p. 3; Connell, 1995). Creating a set of gender role expectations is harmful to individuals, especially those who feel disconnected from the set of gender ideals to which they must subscribe. Consequently, men may internalize their masculine gender roles and avoid certain actions counterintuitive to what they believe is expected of them.

Hegemonic masculinity is the social representation of gender and the totality of socially accepted forms of masculinity and the way it is expressed (Branney & White, 2008; Connell & Messerschmidt, 2005). If men pursue hegemony, they must disassociate themselves with feminine characteristics or actions others may perceive as gay (Connell, 1995). Since hegemonic masculinity is most consistently depicted, men create specific male identities in order to properly navigate social expectations. Edwards and Jones (2009) describe three phases of masculine identity development: First, a person creates a "mask" resulting from a desire to represent a masculine image and conceal qualities not affirmed by culture as masculine; second, a person uses this mask as a catalyst for behavior "to overcompensate and prove their manhood to others and to themselves" (p. 216) out of fear their natural characteristics do not fulfill society's description of normalized gender beliefs; finally, a person recognizes stereotypical masculine ideals that may not appeal to the entire identity and, therefore, avoid hypermasculine ideals.

### The Problem of Depression

The *Diagnostic and Statistical Manual of Mental Disorders, 5th Edition* (2013) states depression is indicated when five or more symptoms occur over a two-week period: depressed mood most of the day, less interest in most activities, significant weight gain or loss, insomnia or hypersomnia, restlessness or slower body movement, fatigue, feelings of worthlessness or guilt, inability to think or concentrate, and recurrent thoughts of death or suicide. Feelings of depression may occur because men feel they are unable to meet expectations of their prescribed gender roles. Incongruence with a prescribed gender role has the potential to negatively impact someone who ultimately feels unable to fulfill his role as a male (O'Neil, Helms, Gable, David, & Wrightsman, 1986). Good and Wood (1995) found men with depression live in tension: While gender role conflict causes depression because men feel incapable of reaching a social standard, they avoid counseling because help-seeking does not fit into the masculine role.

### Depression and Masculinity Interacting

Mens' gender role conflicts may negatively impact their desires to seek counseling services for depression. However, counseling provides unique and positive barriers between men and their depression. When counseling "normal[izes] depression as well as emphasiz[es] the generally favorable outcomes of depression treatment," it becomes particularly

helpful—especially for men—because it provides them an opportunity to discuss their emotions (Rochlen et al. 2009, p. 8). However, some men may create self-stigmas, defined as “internalization of negative views of society toward mental illness and seeking help,” about seeking assistance for illnesses such as depression (Vogel et al, 2011, p. 369; McCusker & Galupo, 2011). Tang, Oliffe, Galdas, Phinney, and Han’s (2014) study on college men found participants were eager to deny their weakness and limit the self-disclosure of their illness. Men explained how denying an illness was effectively denying weakness because of the thought that self-disclosing an illness would lead others to label them as inferior or weak in relation to other men. Participants actively limited their self-disclosure in the interest of saving face in front of their peers.

The current study sought to examine how depression and masculinity intersect at a campus-wide level, as well as how male students navigated their identity development with episodes of depression. The research was guided by the following questions:

1. How does depression impact masculine identity development?
2. Does an individual’s view of masculinity influence their willingness to seek professional help for depression?

## Method

The study balanced looking at quantitative data from the university’s CIRP Freshmen Survey and College Senior Survey (CSS) alongside qualitative data collected from multiple interviews with students and counselors. The CIRP Freshmen Survey detailed information about incoming first-year college students based on survey results and the CSS was created as a survey for graduating seniors (CIRP Freshmen Survey, 2017; College Senior Survey, 2017). Two student participants (Student Participant A, or SPA, and Student Participant B, or SPB) were males who sought personal counseling for periods of depression. These participants discussed their personal experiences with depression while studying at the university and represented men with depression. Additionally, three participants (Counselor 1, Counselor 2, and Counselor 3) were female counselors at the studied university with a history of treating depressed male students. They acted as professionals whose experiences were based on history or patterns they recognized in depressed male students.

Interviews with students focused on several ideas: the notions of masculine ideals they learned at home; how living in a residence hall on a college campus impacted those teachings; and how depressive episodes impacted how they felt about themselves, their relationship

with peers, and their willingness to seek counseling. Components of the interviews with university counselors included the most common themes they noticed with depressed male students in counseling, how they perceived the college environment affects depressed male students, and the potential impact higher education staff and faculty may have on depressed men.

## Results

### Campus climate

The researcher examined potential trends in male students who felt “frequently” depressed and who reported there was a “very good” chance of seeking counseling from university counselors. As seen in Table 1, the number of first-year students at the university who consistently feel depressed has decreased. Although CIRP data shows an overall decreasing trend in those who would strongly consider utilizing the counseling center between 2009 and 2011, there was a 6.6% increase from 2011 to 2014.

Table 1. CIRP Respondents Feeling “Frequently” Depressed

	Percentage Feeling “Frequently Depressed	Percentage Indicating a “Very Good Chance” of Visiting the University Counseling Center
2009	8%	11.3%
2011	7.4%	4.3%
2014	5.4%	10.9%

There is no consistent relationship between CSS respondents who indicated feeling “frequently” depressed and the number of those who visited the counseling center. In Table 2, the number of students with frequent depression increased for two years, followed by a decline. However, there are more students who feel depressed than those who frequently visit the counseling center.

While interview participants did provide a positive opinion regarding campus counseling, there seems to be a difference when communicating about specific issues like depression. Counselor 2 concurs, stating, “You know, the counseling center and what people will think of you—there’s not that much [sigma] here.” However, both student participants

commented on the difficulty between balancing a cultural acceptance of counseling and a campus climate that may not fully understand the issues men experience. Student Participant A (SPA) agreed, stating, “I think the hardest thing is not having the general student population really be aware what it’s like to be dealing with [mental illnesses].” Furthermore, SPB believes, “Letting someone into [your struggles] is—it’s being defeated in some ways. Like, I don’t know, like, once you give up doing it all on your own is defeating for a guy.”

Table 2. CSS Respondents Feeling “Frequently” Depressed

	Percentage Feeling “Frequently Depressed	Percentage Indicating a “Very Good Chance” of Visiting the University Counseling Center
2010	6.5%	7.4%
2012	8.3%	9.1%
2013	12.5%	6%
2015	9.2%	7.7%

Incongruent identity

While all participants discussed how depression affects masculinity in some capacity, they dissected various components of the issue. Two participants discussed issues with culture’s understanding of masculinity and three participants explained how depression impacts one’s emotions. The emotional imbalance participants described creates a difficult reality for male students navigating depression and gender roles. For example, Counselor 1 indicated, “[Depression] leads to, I think, a really difficult intersection between ‘how do I balance what culture has told me and what depression leads me to [believe],’ because they are so incongruent often that that feels difficult to navigate.”

Both Student Participant A and Student Participant B recounted the evolution of incongruent identity into prolonged feelings of shame. SPA stated, “I think so many people who struggle with depression try to hide it, because they feel . . . I know for me, it’s made me feel very, like, inferior, if that makes sense.” Additionally, SPB articulated how he has withdrawn from some relationships because they feel “unsafe” and how depression has caused him to change behavior around specific people.

### Negative self-esteem and comparison

When coding participant interviews, a theme regarding depression's effects on self-esteem and men's tendencies to compare themselves surfaced. Counselor 2 believes, "Comparison definitely happens. I think it's from 'why?' or 'I don't understand, because this person seems to have it all together, and [a depressed man] is doing good to get out of bed.'" SPA discussed self-hatred from depression:

Self-esteem especially is really attacked. So, yeah, that was really difficult. Self-esteem is one of the biggest. Just a lot of pain, I guess, can be turned inward during depression. So it was like, I hate myself, [and] I hate how I'm feeling, so I hate myself.

Counselor 1 explained residence halls can be tricky environments for depressed men because they can compare themselves with large numbers of peers. Living with peers is a common component of the college experience, but it may create more difficult layers for depressed men to navigate in avoiding comparing themselves to others. SPA described the difficulty of living in his residence hall where he constantly sees male peers who "look like they have it all together" and "in general being so much more, like, more of a man," which increases negative self-talk.

### The Importance of Disclosing to Others

Counselor 3 believes relationships outside of the counseling center are important for depressed men because male students typically attend counseling after someone they are close to recommends seeing a professional. After discussing an experience where he shared about depression with a peer, SPA stated, "I think a lot of people with depression, being able to share, um, what you're going through, um, with someone who truly cares about you is an absolute step to being able to overcome it." Additionally, Counselor 2 noted individuals, specifically those in mentoring roles such as coaches or teachers, have positive impacts on depressed male students because they are able to recognize issues and refer students to the university counseling center. Finally, SPA communicated how positive relationships in his life assisted his recovery:

Especially [in my hall], I had no energy to reach out; not many people reached back. A few did, and those few made that [positive] impact. Sometimes you need a reason to work yourself out of that depression, [because] it's so much work.

However, participants spoke of potential obstacles to disclosing depressive feelings to others. SPA said, “A lot of [fear of disclosing] has to do with what other people might think of you.” Similarly, SPB’s female peers have provided a safer space for disclosure because there is not a fear of them perpetuating masculine stereotypes like male peers might. SPB believes male peers may not acknowledge issues because “[they] don’t want to look like [they] care too much” for male friends. Although male students may observe problems with their depressed friends, participants have experienced a lack of response. According to SPA, some of his male friends ignored signs of depression. “As a result,” he said, “the support I needed from those friends wasn’t there, because they just didn’t really get it. It’s easier for them to pretend nothing is going on.”

#### Barriers to Attending Counseling

Male students expressed hesitancy to meet with a university counselor because it represented an inability to overcome an issue on one’s own. Counselor 1 stated, “To come [to the counseling center] means there is something on a totally different level, there is something going on that is not going in a way you think it should be or desire it to be.” SPB concurs, articulating, “I look at counseling more as a place for weakness and not having everything together and more on the brink of something bad happening.”

#### Discussion

The study findings can be understood when examining the overarching statistics surrounding depressed men on college campuses. While both students and counselors articulated the struggle of depression and the hesitancy to address it with peers and professional counseling, both sets of participants described their hope for raising conversation and creating dialogue about mental health on college campuses.

#### Incongruence Between Depression and Masculinity

Exploring the interaction between depression and masculine characteristics is integral in understanding the perceptions of depressed men. Gender Role Theory creates specific, cultural expectations of gender, and students carry these lessons on gender roles with them as they enter college environments (Branney & White, 2008; Harris, 2010).

Most of the participants described how family expectations and rules about gender and disclosure began at a young age. Additionally, they

said face-to-face interactions dictated their thoughts concerning gender. For example, SPA said, "In the small community I grew up in, um, there were a lot of gender roles: the guy was the provider, the emotional stability, and the leader of the household." Similarly, Counselor 1 believes our society creates gender roles that dictate how people should behave, explaining, "We get rewarded or punished based on those [norms] based on our experience." As participants noted, male students enter the college environment with preconceived gender norms, which the college environment may exacerbate.

Emslie et al. (2006) described how men isolated themselves based on their sense of masculinity. Through isolation, they were able to navigate depression without others knowing. Specific participants in the current study described their experiences with isolation on their campus. For example, SPA said depression impacted the lens through which he saw the world, and he described depression as "pure and total loneliness" because others cannot physically see depressed thoughts.

Research shows depressed individuals tend to overestimate others' abilities and underestimate themselves (Beck, 1967). A number of participants expressed that depressed students wondered why other students seem to be collected and healthy, while they struggled to go about their day. SPA believes during his depression "any sort of confidence in who I was [got] pretty much sucked away." No participants detailed an exact process of how male students stop comparing themselves to others. However, some noted university counseling center attempts to cultivate positive self-talk based on the idea that depression is an illness not an identity.

### Barriers When Seeking Help

The current study identified a theme of the importance of disclosing depressive feelings to others in order to ensure a higher chance of successfully overcoming periods of depression.

Overall, while participants were aware of the benefits of disclosing their struggles to someone else, they did articulate the hesitations men have when considering telling others about depression. All participants affirmed the literature's findings that a counseling center can become a positive environment for depressed men. They made a distinction between the stigma of the counseling center and the stigma of disclosing to others about their visits to the counseling center (Kitzrow, 2009; Rochlen, et al., 2009).

Although the current study's participants had positive experiences

disclosing to others and to the counseling center, there are many personal stigmas men may attach to help-seeking. Student participants in the current study discussed their hesitancy to disclose with peers based on fears of being perceived differently as a result of disclosure and experiences watching peers ignore signs of depression. Additionally, participants discussed how male peers are likely to notice troubling signs while avoiding inquiring about them out of fear of appearing too caring.

The literature shows males create stigmas of counseling based on gender roles and the dissonance between confessing an issue and appearing strong for others (McCusker & Galupo, 2011; Addis & Mihalik, 2003). Participants affirmed these findings, discussing the fear of appearing weak when entering into a counseling center. Counselor 1 explained attending a counseling center is a sign there are unforeseen issues individuals are not able to handle themselves, and it takes time for men to admit this. Because men are likely to deny their issues based on avoidance of weak characteristics, men often enter counseling centers in more severe states than their female peers.

#### Implications

The current study affirmed depression's impacts on male students' understandings of masculinity. These beliefs influence male students' desires to seek either peer or professional help for their mental illnesses. Although depression can become a serious issue for male students, they are less likely to disclose their struggles with others out of fear of changing perspectives or appearing weak. Student affairs professionals should be aware male culture prominently influences students. Therefore, beginning conversations in areas on campuses, such as male residence halls, may combat damaging notions of hegemonic masculinity. Therefore, it is integral to show positive male role models to students who can create conversations surrounding topics of masculinity.

The literature illustrates how depression can detrimentally impact a student's academic performance. Therefore, colleges and universities should intentionally inform professors of signs of depression. Signs of depression within the academic setting include failing grades, sudden changes in academic performance, or prolonged periods of missed classes. In order to better alert professors, institutions should create educational seminars about mental health. These types of seminars should be ongoing development sessions regarding how to identify students with depression, paths to make other university staff and faculty aware,

and how to assist depressed students in academic settings. Participants articulated how professors are oftentimes considered lynchpins on university campuses, especially by first-year students. Professors should insert a section about mental health into their syllabi and provide on and off-campus resources for students struggling throughout the semester.

Student affairs professionals should consider how programmatic efforts on campus have the ability to raise awareness for particular issues or begin conversations amongst the student body. However, a tricky component of depression is a lack of energy, which may influence depressed students' abilities to engage with programs. Therefore, universities should consider campus-wide programming that discusses mental health issues such as depression without singling out individuals. If student affairs professionals desire to create inclusive spaces for depressed students, they must promote educational opportunities that raise awareness about issues affecting large portions of the student body.

#### Limitations

One of the potential limitations for this study was the low number of personal interviews. Although the participants provided their beliefs concerning the current university and the issue of depression on campus, more participants would have provided a more robust understanding of depression in male college students. Specifically, interviewing more male participants in the future will provide a larger pool of experience for what depressed male students believe about their own masculinity and their other male peers. A final limitation was researcher bias. Although the current researcher believes a hermeneutical approach to this study was integral, bias must be accounted for when examining the results and discussion. The current researcher identifies as a male who has had experience with depression and help-seeking from a university counseling center.

#### Conclusion

Although research is limited, it continues to identify how depression and negative masculine stereotypes can hinder a male student's college experience. Although participants in the study communicated a healthy experience thus far with depression and the college experience, many male students may feel uncomfortable sharing their stories. Such discomfort only increases the importance of continual efforts to raise awareness for mental health on college campuses. The findings of this study should encourage student affairs professionals to continually seek

new information regarding depression and the male student population in order to tailor helpful strategies to specific institutions and student bodies.

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