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Joseph L. Smith Jr.
Clark Atlanta University

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AN EXPLORATORY STUDY OF THE ATTITUDE TOWARD SEEKING AND UTILIZING MENTAL HEALTH SERVICES OF MALE AND FEMALE AFRICAN-AMERICAN COLLEGE STUDENTS IN THE ATLANTA UNIVERSITY CENTER

A THESIS
SUBMITTED TO THE FACULTY OF CLARK ATLANTA UNIVERSITY
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR
THE DEGREE OF MASTER OF SOCIAL WORK

BY
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ATLANTA, GEORGIA
MAY 2007
ABSTRACT

SCHOOL OF SOCIAL WORK

SMITH, JR., JOSEPH L. B.A. UNIVERSITY OF NEW ORLEANS, 2003

AN EXPLORATORY STUDY OF THE ATTITUDE TOWARD SEEKING AND UTILIZING MENTAL HEALTH SERVICES OF MALE AND FEMALE AFRICAN-AMERICAN COLLEGE STUDENTS

Advisor: Richard Lyle, Ph. D.

Thesis dated May 2007

This study described the attitude of African-American college students toward seeking and utilizing mental health services. One hundred and one survey participants were selected for the study utilizing purposive sampling. The survey participants were composed of African-American college students enrolled in one of the institutions of higher learning in the Atlanta University Center (AUC). The survey utilized a four-part continuum Likert scale. The findings indicated that both male and female college students in the AUC have a negative attitude toward seeking and utilizing mental health services. The test statistic was chi-square. The analysis indicated that there was not a statistically significant relationship between the variables attitudes toward seeking and utilizing mental health services and gender. However, the analysis indicated that there was a statistically significant relationship between the variables attitudes toward seeking and utilizing mental health services and past experiences with a mental health service provider at the 0.05 level of probability.
ACKNOWLEDGMENTS

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CHAPTER I
INTRODUCTION

According to the National Center for Educational Statistics (1999), African-Americans represent 11% of all students in higher education in the United States. African-American enrollment in United States colleges and universities is on the rise. The National Institute of Mental Health (2006) reported that an estimated of one-fourth of the United States population ages 18 and older suffer from a diagnosable mental disorder in a given year.

There are many factors that increase the likelihood of the development of a mental illness. Some of the factors include socioeconomic injustices, oppression, and internalized oppression. African-American college students face most of the conditions that are considered to increase the likelihood of physical and mental illness (Williams, 2005).

An individual's attitude toward mental illness guides their decision making in seeking and utilizing mental health services. African-Americans have a less favorable attitude of seeking and utilizing mental health services than other ethnic groups. African-Americans utilize mental health services at lower rates than other ethnic groups. Researchers equate the underutilization of mental health services by African-Americans to culture differences (Silva De Crane & Spielberger, 1981).

A study conducted by Castro, Furth, and Karlow (1984) found that people seek...
mental health services at greater rates if their belief system is consistent with mental health professionals. They found that compared to European Americans, African-Americans' belief systems are in contrast to those of mental health professional. African-Americans are more apt to believe in hot-cold forces as a cause for mental health illness.

In the same study by Castro, Furth, and Karlow (1984) it was found that the way a particular culture perceives mental illness will positively or negatively affect the attitude a culture has in seeking and utilizing mental health services. The findings of this study makes it evident that in order to increase the utilization of mental health service by African Americans college students, educational institutions and mental health professionals must study their attitudes toward seeking and utilizing those services.

Statement of the Problem

According to the National Institute of Mental Health (2006), mental disorders are common in the United States and internationally. An estimated of one-fourth of the United States population ages 18 and older suffer from a diagnosable mental disorder in a given year. Mental disorders are the leading causes of disability in the United States. A large proportion of individuals suffering from mental illness do not seek professional help (Kessler, Nelson, McGonagle, Edlund, Frank, & Leaf, 1996).

According to the World Health Organization (2006), only two in every five people experiencing a mood, anxiety, or substance abuse disorder seek mental health services within a year of the onset of the disorder. The aforementioned statistic is even lower when that statistic is disaggregated by race.
According to the World Tolerance Organization, the most common reason for
hospital admission nationwide is psychiatric disorder. Mental illness is an epidemic. The
incidence of mental illness is more common than cancer, heart disease, diabetes, or
arthritis. Mental illness is truly the silent killer (Williams, 2005).

College age African-Americans are constantly exposed to social conditions that
are considered to increase the likelihood of physical and mental illness. There are many
reasons why African-Americans do not utilize mental health services. The most apparent
reasons are stigma attached, isolation, and financial resources that cause them to suffer in
silence. They also do not recognize the seriousness of mental illness, know the
symptoms, or really understand the benefits of services (Williams, 2005).

The underutilization of mental health services by African-Americans could cause
for greater worries. If untreated, a mental disorder could lead to a more difficult illness to
treat or an individual could develop a concurrent disorder. Underserved groups such as
the elderly, racial/ethnic minorities and those with low income or without insurance have
the greatest unmet need for treatment (NIMH, 2006).

Purpose of the Study

The purpose of this study was to explore the attitudes of African-American
college students toward seeking and utilizing mental health services. Exploring the
attitudes of African-American college student toward seeking and utilizing mental health
services mental health professionals will become more aware of some of the reason why
African-Americans do not utilize mental health services at the same rate of other ethnic
The study explores the differences between male and female attitudes toward seeking and utilizing mental health services, and the effects of prior experiences with a mental health professional on the attitude toward seeking and utilizing mental health services among African-American college students. This study also analyzes the demographics of African-American college students regarding their search and utilization of mental health services.

**Research Questions**

The research questions addressed in this study are:

1. Is there a relationship between the attitudes of African-American college students toward seeking and utilizing mental health services and gender?

2. Is there a relationship between the attitudes of African-American college students toward seeking and utilizing mental health services and past experiences with a mental health professional?

**Hypotheses**

The null hypotheses of the study were as follows:

1. There is no statistical significant relationship between the attitudes of African-American college students toward seeking and utilizing mental health services and gender.

2. There is no statistical significant relationship between the attitudes of African-American college students toward seeking and utilizing mental health services and past experiences with a mental health professional.

**Significance of the Study**

African-Americans are more susceptible to develop a mental illness because of societal pressures. Men and women ages 18-25 have an increased risk in developing a mental illness. Even though African-Americans have an increased risk for developing a
mental illness; compared to other ethnic groups they underutilize mental health services. This delay in service use can lead to the development of concurrent disorders (Williams, 2005).

There are several variables that affect the availability of services and the use of services by African-Americans. Among the variables include stigmas that are attached to seeking mental health services, religious beliefs that impinge on the individual perception of mental illness, and access to mental health services. These variables negatively impact the seeking and utilization of mental health services by African-American college students.

According to the United States Census Bureau (2005) over four-fifths of all adults 25 years or older reported they had completed at least high school; over one in four adults had attained at least a bachelor's degree; both measures are all time highs. In 2003, the percentage of the adult population who had completed high school increased for the first time since 2000, when it was 84 percent. African-American college students make up a big part of United States population. Because of the added stress of college it is important that African-American college students utilize mental health services on or off their prospective college campuses (Williams, 2005).

The researcher believes that by exploring the attitudes of African-American college student toward seeking and utilizing mental health services will make mental health professionals aware of some of the reasons why African-Americans do not utilize mental health services at the same rate of other ethnic groups. This research will be significant for colleges and universities to use to help their African-American student population overcome their negative attitude toward seeking and utilizing mental health
services. This exploratory study will increase the small amount of research available on African-Americans and their attitude toward seeking and utilizing mental health services.
CHAPTER II
REVIEW OF LITERATURE

The purpose of presenting this review of the literature was to lay a scholarly foundation in order to establish the basis for performing this outcome evaluation. This chapter is a review of current relevant literature regarding recent efforts to increase the utilization rate and attitudes of African-American college students toward seeking mental health services. The review covers the current rate of utilization and the attitude of minorities toward seeking and utilizing mental health services and some of the barriers that prevent African-Americans from utilizing mental health services.

This literature review focuses on the impact of the attitude of African-American college students in seeking and utilizing mental health services. Numerous studies have shown that African-Americans have a less favorable attitude toward seeking and utilizing mental health services than other ethnic groups. There is a distinct difference in the attitudes of African-American in regards to seeking and utilizing mental health services (Gilbert & Romero, 2005).

There is a constant argument among mental health services providers for the discrepancy in the use of mental health services and the reason for the underutilization of services among college students. The reasons for these contradictions are contradictory research findings surrounding the issue of utilization. According to McMiller and Weisz (1996), the reason for this underutilization among African-Americans can be equated to
their coping mechanisms. The researchers noted that African-Americans are more apt to seek the advice from informal pathways, such as family or friends rather than a mental health professional.

In contrast to this study, Gonzalez, Alegria, and Prihoda (2005) found that African-Americans informal pathways in comparison to European Americans do not prevent their utilization of mental health services. This study found that there is no statistically distinct difference in the attitude African-Americans have toward seeking and utilizing mental health services than European Americans. This study found that African-Americans do not have a less favorable attitude toward seeking and utilizing mental health services when compared to other ethnic groups.

In a study conducted by Lindley et al (2006) found that attitude directly correlates with service use. In their investigative study of help seeking attitudes of African-Americans found that those with negative attitudes toward the preventative health procedure used preventive services at lower rates than those who held a positive attitude. Attitude can positively or negatively affect the seeking and utilization of mental health services by African-Americans.

According to Carl Jung (1921) attitude is defined as a readiness of the psyche to act or react in a certain way. Attitudes according to Jung often come in pairs, one conscious and the other unconscious. Within this broad definition Jung defines several attitudes.

Attitude in relation to the seeking and utilizing of mental health services would consider the impact of prior experiences, opinions, and socialization as a factor in developing a positive or negative attitude toward seeking and utilizing mental health
services. According to Jung’s definition of attitude, an individual who has a negative experience with a mental health professional will develop a negative attitude toward seeking and utilizing mental health services. In most cases that individual who has an negative experience with a mental health professional will not seek and utilize those services (1971).

Most people think of attitudes as something that is completely controlled by the individual. According to Greenwald and Banaji (1995), attitudes often exist outside of conscious awareness and control. These attitudes are called implicit attitudes. This implicit attitude is thought to shape people's automatic reactions to attitude objects and to thereby shape their subsequent interactions with them. The researchers compared attitudes to icebergs, with explicit attitudes residing above the surface of conscious control and implicit attitudes residing below it. Implicit attitudes, explicit attitudes, and attitude-related behaviors should all correlate with each other.

Wilson, Lindsey, and Schooler, (2000) argued that people may have dual attitudes toward objects, one implicit and one explicit. From this perspective, measures on attitudes may predict completely different aspects of behavior. The survey participant may have conscious and unconscious attitudes that are completely different from each other. One necessarily does not influence another.

According to Wikipedia online encyclopedia (2006) “attitude are positive, negative, or neutral views of an attitude object, behavior, or event.” In the review of literature the researcher found many tests that measure the attitude of individuals in regards to seeking and utilizing mental health services. The researcher developed his own
measure for measuring attitudes of African-American college students in seeking and utilizing mental health services.

For the purpose of this study, positive attitude toward mental health services will be defined as a student who would seek help from a mental health professional at his/her school or community. Secondly, attitude would be defined as positive toward mental health services if the student overall believes that mental health professional are qualified to serve them. Thirdly, positive attitude toward seeking and utilizing mental health services will be defined as a student who would disclose personal problems to a mental health professional.

Negative attitude toward mental health services will be defined as a student who will not seek help from mental health professional at his/her school or community. Secondly, attitude would be defined as negative toward mental health services if the student overall believes that mental health professional are not qualified to serve them. Thirdly, negative attitude toward seeking and utilizing mental health services will be defined as a student whom would not disclose personal problems to a mental health professional.

The researcher defined utilization by the extent to which a student believed that problem work themselves out, kept problems to themselves, and the extent to which a student feels they solve their own problems.

Historical Perspective

The treatment of the mental ill in the United States and the world has evolved over the last one hundred years. The Percy Act of 1957 laid the foundation for many acts
in the United States regarding the issue of mental illness. This act suggested that a mental
disorder should be regarded in much the same way as physical illness. The act laid the
foundation for hospitals for those with mental disorders to be run as close as possible to a
hospital for those with physical disorders (Percy Commission, 1957).

In 1959 the Mental Health Act sought to create a legal framework within which
the hospital treatment of mental disorders could approximate as closely as possible to that
of physical illness. It had two main objectives. The first objective of the Mental Health
Act of 1959 was to allow admissions for psychiatric reasons to be, wherever possible, as
informal as those for physical reasons. The second objective was to make councils
responsible for the social care of people who did not need in-patient medical treatment.
The 1959 Mental Health Act abolished the Board of Control (Department of Health,
2000).

The Community Mental Health Act of 1963 was an act to provide federal funding
for community mental health centers. It led to an increase amount of deinstitutionalization.
This act provides revenues for grants to assist in mental health awareness and treatment.
The purpose of the Community Mental Health Act was to provide for community-based
care, as an alternative to institutionalization. However, some states saw this as an excuse
to close expensive state hospitals without spending some of the money on community-
based care (National Association for the Mentally Ill, 2006).

A study conducted by Williams and William-Morris of the Department of
Sociology, Institute for Social Research, University of Michigan, Ann Arbor, Michigan
described the changes in racial attitudes over time, the persistence of negative racial
stereotypes and the ways in which negative beliefs were incorporated into societal
policies and institutions. According to the study the available scientific evidence that suggests that racism can adversely affect mental health status in at least three ways (2000).

The first way racism negatively affects an individual is by reducing socioeconomic mobility in institutions, differential access to desirable resources, and poor living conditions that can adversely affect mental health. Second, experiences of discrimination can induce physiological and psychological reactions that can lead to adverse changes in mental health status. Third, in race-conscious societies, the acceptance of negative cultural stereotypes can lead to unfavorable self-evaluations that have deleterious effects on psychological well being. These factors have a negative impact on help seeking behaviors (Williams & Williams-Morris, 2000).

Utilization of Services

Several studies have concluded that the use of health services varies among different racial and ethnic groups. Numerous studies have concluded that African-American college students often under-use outpatient mental health services such as counseling services, and over use inpatient and emergency inpatient mental health services. African-American college students use preventative mental health services at lower rates than other ethnic groups in the United States (Pumariega, Glover, Holzer, & Nguyen, 1998).

Gloria, Hird, and Navarro (2001) found that there is a disparity in the help seeking among African-Americans compared to their European counterparts. The study found that African-American college students, in particular report unwillingness to seek help for
psychological difficulties and more negative help-seeking attitudes, relative to their European-American same-aged peers (Gloria, Hird, & Navarro, 2001).

Alvidrez (1999) used a convenience sample from a women's clinic at a large, urban, public care hospital. Of the approximately 4000 women seen at this clinic annually, 42% Latina, 20% African-American, 18% European American, and 18% were Asian. The study examined the predictors of mental health service utilization among patients in a community women's clinic. The researchers interviewed the patients about their attitudes towards mental illness and mental health services. European-American women were much more likely to have a positive attitude and have made a mental health visit in the past. The study found that a positive attitude toward mental health increases the likelihood of patient compliance with treatment plan.

Availability and accessibility of mental health services are clearly factors in ethnic differences in utilization. Epidemiological studies show that ethnic minority and low socioeconomic status (SES) individuals perceive more instrumental barriers to using services, such as lack of insurance, time, and transportation, than European American and higher SES individuals (Leaf, Bruce, Tischler, & Holzer, 1987).

According to Gonzalez, Alegria, and Prihoda (2005), young adults reported the most negative attitudes toward seeking and utilizing mental health services, as compared to older adults. In college students European-American men reported the most negative attitude toward seeking and utilizing mental health services compared to females. The study found no differences in the attitude toward seeking and utilizing mental health services in comparing African-American males and females. African-Americans do not
necessarily demonstrate more negative attitudes toward seeking and utilizing mental health treatment than European-Americans.

Many studies have targeted income as a contributing factor in the seeking and utilization of mental health services. Researchers have hypothesized that an increase in income level will increase the likelihood that an individual will seek and utilize mental health treatment. Studies have found that regardless of socio-economic level and mental health needs, African-Americans in general are less likely than European-Americans to receive mental health services (Atkinson, Jennings, and Liongson, 1990).

Using a racial identity paradigm, some researchers have found that differences in African-American racial identity correlated with preferences for African-American counselors and that differences in cultural commitment among African-Americans and the availability of culturally similar counselors together affects counseling service utilization (Atkinson, Jennings, & Liongson, 1990).

Miller and Weisz (1996) examined the coping styles of African-Americans. The study compared the informal pathways of African-Americans compared to European-Americans. They are also more likely than European-Americans to seek help for psychological problems from family members or community or spiritual leaders.

A study by Surgenor (1985) compared education level to the willingness to seek mental health services. The study assessed the impact of education and age on predicting attitudes toward help-seeking behavior. The research suggested that the level of education generally indicates that that a higher level of education predicts more positive attitudes toward seeking help.
A study by Kligfeld and Hoffman (1979) supports the findings of Surgenor. The study found that male medical students exhibited increases in positive help-seeking attitudes as they progressed from the first to the fourth year of medical school. Both studies support the views that help seeking attitudes increase with higher educational attainment.

Culture as a Barrier

Culture plays a major role in a person's decision making. An individual's culture is the lens in which a person views the world. Utilizing mental health services is directly correlated with one's attitude about those who seek mental health services. Some cultures view individuals that utilize mental health services as weak. African-Americans utilization of mental health services correlates directly to their attitudes and beliefs (Castro, Furth, & Karlow, 1984).

Societal pressures create a greater need for the seeking and utilization of mental health services. Even though African-Americans face additional societal pressures, including immigration and racism, some students of color tend to underutilize mental health services because of the incompatibility between the nature of Western-psychotherapy and "minority" cultures (Atkinson, Morten, & Sue, 1998).

A cultural factor that may influence the use of mental health services is beliefs of the cause of mental illness. If a culture shares the same views of the causes of mental illness that is congruent with mental health professionals, they are more likely to seek mental health services. Compared to European Americans, ethnic minority populations more strongly endorse folk beliefs, such as the view that imbalance in hot-cold forces
causes illness. Culture-specific stigma of mental illness also reduces African-Americans' willingness to seek mental health services. African-Americans have been found to be less kind toward mental patients, and more likely to reject them and think they are inferior (Castro, Furth, & Karlow, 1984).

The core foundation of acceptable and unacceptable behavior is indoctrinated from the church. African-Americans traditionally rely on church doctrine to guide them in their decision-making. In most religions practiced by African-Americans mental illness is directly correlated with evil spirits. The belief in religious or supernatural causes of mental illness is associated with lower rates of mental health service use suggests that greater efforts are needed to address the belief that religious and mental health perspectives of mental health issues need not be mutually exclusive. Increased collaboration between mental health professionals with churches and religious organizations to provide information about services and greater accommodation of religious/spiritual values or practices in providing mental health services may be helpful (Alvidrez, 1999).

In a study of pathways to mental health utilization, McMiller and Weisz (1996) indicated that African-Americans, compared with Latinos and Caucasians, participated in a greater number of informal pathways, such as consulting friends and family, before contacting a formal agency to obtain services for their children. McMiller and Weisz also reported that African-Americans and Latinos, when compared to European-Americans, relied more on familial support networks when seeking advice for their children's problems rather than consulting professionals. This use of informal coping mechanisms indicates that African-Americans have a strong cultural emphasis on interdependence.
According to an exploratory study by Chiang, Hunter, and Yeh (2005) family members and friends play important roles for African-American and Latino college students. The findings support and expand current literature by highlighting the informal coping sources of African-Americans and Latinos in an empirical manner. This study provided empirical data that showed that these informal coping sources are used at higher rates than traditional mental health services.

Theoretical Framework

The theoretical basis for this study is the Social Cognitive Theory (SCT). An individual's past experiences shapes future experiences. The SCT defines human behavior as a triadic, dynamic, and reciprocal interaction of personal factors, behavior, and the environment. An individual's behavior is uniquely determined by each of these three factors (Bandura, 1989).

It contends that behavior is largely regulated antecedently through cognitive processes. Therefore, response consequences of a behavior are used to form expectations of behavioral outcomes. It is the ability to form these expectations that give humans the capability to predict the outcomes of their behavior, before the behavior is performed. In addition, the SCT states that most behavior is learned vicariously (Bandura, 1989).

The mind is an active force that constructs one's reality, selectively encodes information, performs behavior on the basis of values and expectations, and imposes structure on its own actions. Through feedback and reciprocity, a person's own reality is formed by the interaction of the environment and one's cognitions. In addition, cognitions change over time as a function of maturation and experience. An example of this
maturation over time is the maturation of the attention span, memory, ability to form symbols, and reasoning skills. It is through an understanding of the processes involved in one's construction of reality that enables human behavior to be understood, predicted, and changed (Jones, 1989).
CHAPTER III
METHODOLOGY

Chapter III presents the methods and procedures that were used in conducting the outcome evaluation. The following are described in this chapter: research design, description of the site, sample population, instrument and measures, treatment of data, and limitations of the study.

Research Design

Both descriptive and exploratory research was used in this study. The study was designed to obtain data in order to describe and explain the attitude of African-American college student toward seeking and utilizing mental health services.

The descriptive and exploratory research design allowed for the use of a descriptive analysis of the demographic profile of the survey respondents. The research design allowed for the explanation of the relationship between the attitude of African-American male and female students toward seeking and utilizing mental health services, and the relationship between those who sought mental health services in the past and those who did not.

Description of the Site

The study was conducted in the historic Atlanta University Center (AUC) in
Atlanta, Georgia. The site was selected because it encompasses five historically black institutions of higher learning. Schools that are included in the Atlanta University Center are: Clark Atlanta University, Interdenominational Theological Seminary, Morehouse College, Morris Brown College, and Spelman College. There has been a significant increase of African-American college students in this area. The significant increase in African-American college students in this area was a major determinant in the selection of this site.

Sample and Population

The target population for this research study was composed of African-American women and men who were enrolled in an institution of higher learning in the Atlanta University Center (AUC) in Atlanta, Georgia. The Institutional Review Board (IRB) at Clark Atlanta University approved the collecting of data from Atlanta University Center Students (Appendix A). One hundred and one students who indicated that they were enrolled in an institute of higher learning in the AUC were the target group of this study.

The sample was a purposive sample of African-American women and men ages 18 and older that enrolled in an institute of higher learning in the Atlanta University Center (AUC) in Atlanta, Georgia. There were no incentives given to the participants for participation in the survey.

Instrumentation and Measures

The study utilized a questionnaire as its assessment tool. The questionnaire was entitled *A Study of the Attitudes of African-American College Students Toward Seeking and Utilizing Mental Health Services in the Atlanta University Center*. The survey
questionnaire consisted of two sections. The first section was entitled “Section I,” and it solicited demographic data about the respondents. Section two of the survey was divided into sections that gauged the agreeability of the respondents to eight survey questions. A Likert Scale (1=Strongly Disagree, 2=Disagree, 3= Agree, 4=Strongly Agree) was used to generate frequency distributions in order to analyze student’s attitude toward seeking and utilizing mental health services in the Atlanta University Center.

The first section of section two was entitled “Attitude toward mental health services.” Questions one through three: I would disclose personal problems to a mental health professional (DISCLOSE), If needed I will seek help from a mental health professional at my school (SEEKHELP), and I believe that mental health professionals at my school are qualified practitioners (QUALIFIE) were used to gauge students attitudes toward seeking and utilizing mental health services.. Those three questions ([DISCLOSE + SEEKHELP + QUALIFIE] / 3) form the computed variable ATITUDE, that was used to rank students attitudes on a continuum of negative or positive toward mental health services.

The second section of section two was entitled “Attitude toward utilization of mental health services.” Questions five through eight: I tend to keep my problems to myself (MYSELF), I tend to resolve my own problems (RESOLVE), I believe that most problems work themselves out (WORKSELF), and I would rather seek advice from my pastor or friend than a mental health professional (PASTOR) were used to gauge students attitudes toward utilizing mental health services.. Those four questions ([MYSELF + RESOLVE + WORKSELF + PASTOR] / 4) form the computed variable UTILIZAT, that was used to rank students attitudes on a continuum of negative or
positive attitudes toward utilizing mental health services. The survey was designed to be analyzed by Statistical Package for Social Sciences (SPSS) for statistical evaluation.

A positive or negative attitude toward mental health services will be defined by a positive or negative computed variable of attitude toward mental health services (ATTITUDE). A positive or negative attitude toward seeking and utilizing mental health services will be defined by a positive or negative computed variable of attitude toward seeking and utilizing mental health services (UTILIZAT).

Treatment of Data

The Statistical Package for the Social Sciences (SPSS) was used to analyze the data. The analysis used descriptive statistics, which included frequency distribution and cross tabulation. The test statistic used for this study was chi squared.

A demographic profile which included questions gauged to find out the student’s gender, age group, racial category, marital status, family yearly income, academic classification, school, and if student received services from a mental health professional in the past, was developed using students responses. A frequency distribution was used to analyze the data. A cross tabulation was used to analyze the relationship between the two variables of the study.

Frequency distributions were used to analyze and summarize each of the variables in the study. A frequency distribution of demographic data was also used to gain insight about the respondents of the study.

Cross tabulations were utilized to demonstrate the statistical relationship between the variables of the study. Cross tabulations were conducted between the computed
variable attitude toward seeking mental health services (ATITUDE), gender (GENDER), the computed variable attitude toward utilizing mental health services (UTILIZAT), and those African-American college students of the Atlanta University Center that received services from a mental health professional in the past (SEENBFOR). Chi Square was used to test whether there was a significant relationship at the 0.05 level of probability among the variables off the study.

Limitations of the Study

There were many limitations of this study. The first limitation of the study was the number of surveys administered (101). The number of surveys administered does not adequately represent the vast majority of students on the campuses of the AUC. Secondly, by non-randomly selecting survey participants the results may be skewed. Every student did not have an equal chance of being selected because of the survey site and time. The researcher produced the survey used for this study. The survey has not been used in a previous study. The last limitation is the limited research available on the target population that focused on African-American attitude toward seeking and utilization mental health services.
CHAPTER IV
PRESENTATION OF FINDINGS

The purpose of this chapter is to present the findings of the outcome evaluation. The surveys were administered to African-American women and men who were enrolled in an institute of higher learning in the Atlanta University Center (AUC) in Atlanta, Georgia. The purpose of the survey was to explore the attitude of African-American college students toward seeking and utilizing mental health services. The findings of the study are structured into two sections: demographic data and research question and hypothesis.

Demographic Data

A demographic summary was developed of the study participants. The demographic profile included the following: age group, race, marital status, family yearly income, college classification, school attend, and history of mental health treatment.

The study population was composed of 101 surveys that indicated that their age group was under 18 (1), 18-21 (53), 22-25 (29) 26-29 (11), 30-33 (3), and over 34 (4). These survey participants were composed of 50 males and 51 females. The ethnicities of the students surveyed were African-American (95), Hispanic (3), Asian (1), and other (2). Participants indicated that they were married (92), divorced (2), and widowed (1). The yearly family income indicated were under 15,000 (14), 15,000-34,999 (23), 35,000-
54,999 (24), 55,000-74,999 (21), 75,000-94,999 (14), and 95,000 and above (4). The college classifications of the survey participant were freshman (7), sophomore (32), junior (20), senior (22), and graduate students (20). Participants indicated that they attended Clark Atlanta University (CAU) (75), Interdenominational Center (ITC)(3), Morehouse College (14), Morris Brown College (2), and Spelman (7).

Of the 101 surveys participants, the majority (72) indicated that they had not received services from a mental health professional. Table 1 is a profile of the study participants. It presents the frequency distribution of the demographic variables used for the study.

Table 1

Demographic profile of study participants (N=101)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under 18</td>
<td>1</td>
<td>1.0</td>
</tr>
<tr>
<td>18-21</td>
<td>53</td>
<td>52.5</td>
</tr>
<tr>
<td>22-25</td>
<td>29</td>
<td>28.7</td>
</tr>
<tr>
<td>26-29</td>
<td>11</td>
<td>10.9</td>
</tr>
<tr>
<td>30-33</td>
<td>3</td>
<td>3.0</td>
</tr>
<tr>
<td>Over 34</td>
<td>4</td>
<td>4.0</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>50</td>
<td>49.5</td>
</tr>
<tr>
<td>Female</td>
<td>51</td>
<td>50.5</td>
</tr>
<tr>
<td>Variable</td>
<td>Frequency</td>
<td>Percent</td>
</tr>
<tr>
<td>--------------------------</td>
<td>-----------</td>
<td>---------</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>African-American</td>
<td>95</td>
<td>94.1</td>
</tr>
<tr>
<td>Hispanic</td>
<td>3</td>
<td>3.0</td>
</tr>
<tr>
<td>Asian</td>
<td>1</td>
<td>1.0</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
<td>2.0</td>
</tr>
<tr>
<td><strong>Marital Status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>6</td>
<td>5.9</td>
</tr>
<tr>
<td>Never Married</td>
<td>92</td>
<td>91.1</td>
</tr>
<tr>
<td>Divorced</td>
<td>2</td>
<td>2.0</td>
</tr>
<tr>
<td>Widowed</td>
<td>1</td>
<td>1.0</td>
</tr>
<tr>
<td><strong>Family Yearly Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under $15,000</td>
<td>14</td>
<td>14.0</td>
</tr>
<tr>
<td>$15,000-34,999</td>
<td>23</td>
<td>23.0</td>
</tr>
<tr>
<td>$35,000-54,999</td>
<td>24</td>
<td>24.0</td>
</tr>
<tr>
<td>$55,000-74,999</td>
<td>21</td>
<td>21.0</td>
</tr>
<tr>
<td>$75,000-94,999</td>
<td>14</td>
<td>14.0</td>
</tr>
<tr>
<td>$95,000-above</td>
<td>4</td>
<td>4.0</td>
</tr>
<tr>
<td><strong>College Classification</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Freshman</td>
<td>7</td>
<td>6.9</td>
</tr>
<tr>
<td>Sophomore</td>
<td>32</td>
<td>31.7</td>
</tr>
<tr>
<td>Junior</td>
<td>20</td>
<td>19.8</td>
</tr>
<tr>
<td>Senior</td>
<td>22</td>
<td>21.8</td>
</tr>
<tr>
<td>Graduate Student</td>
<td>20</td>
<td>19.8</td>
</tr>
</tbody>
</table>
As indicated in Table 1, the typical respondent of the study was an African-American female who was never married, 18-21 years old sophomore, with a yearly family income of $35,000-54,999, who had not received mental health services in the past.

Table 2 is a frequency distribution of 100 college students enrolled in one of the AUC institutions of higher learning indicating whether they disagreed or agreed that they would disclose personal problems to a mental health professional. The majority of the respondents surveyed would disclose personal problems to a mental health professional. Of the 100 respondents, 29.0% indicated that they would not disclose personal problems to a mental health professional and 71.0% would disclose personal problems to a mental health professional.
Table 2

I would disclose personal problems to a mental health professional (N=100)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>29</td>
<td>29.0</td>
</tr>
<tr>
<td>Agree</td>
<td>71</td>
<td>71.0</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 3 is a frequency distribution of 100 college students enrolled in one of the AUC institutions of higher learning indicating whether they disagreed or agreed that if needed, they will seek help from a mental health professional at their school. As shown in Table 3, the majority of the respondents surveyed would seek help from a mental health professional at their school. Of the 100 respondents, 42.0% indicated that they would not seek help from a mental health professional at their school and 58.0% indicated that they would seek help from a mental health professional at their school.
Table 3

If needed, I will seek help from a mental health professional at my school (N=100)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>42</td>
<td>42.0</td>
</tr>
<tr>
<td>Agree</td>
<td>58</td>
<td>58.0</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 4 is a frequency distribution of 98 college students enrolled in one of the AUC institutions of higher learning indicating whether they disagreed or agreed that mental health professionals at their school were qualified practitioners. As shown in Table 4, the majority of the respondents surveyed believed that mental health professionals at their school were qualified practitioners. Of the 98 respondents, 32.7% indicated that they did not believe that mental health professionals at their school were qualified practitioners and 71% believed that the mental health professionals at their school were qualified practitioners.
Table 4

I believe that mental health professionals at my school are qualified practitioners (N=98)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>32</td>
<td>32.7</td>
</tr>
<tr>
<td>Agree</td>
<td>66</td>
<td>67.3</td>
</tr>
<tr>
<td>Total</td>
<td>98</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 5 is a frequency distribution of 98 college students enrolled in one of the AUC institutions of higher learning indicating whether they disagreed or agreed that they would prefer to get mental health services from sources outside of the AUC. As shown in Table 5, the majority of the respondents surveyed would prefer to get mental health services from sources outside of the AUC. Of the 98 respondents, 32.7% indicated that they would prefer to get mental health services from sources inside of the AUC and 67.3% would prefer to get mental health services from sources outside of the AUC.
Table 5

I would prefer to get mental health services from sources outside of the AUC (N=98)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>32</td>
<td>32.7</td>
</tr>
<tr>
<td>Agree</td>
<td>66</td>
<td>67.3</td>
</tr>
<tr>
<td>Total</td>
<td>98</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 6 is a frequency distribution of 100 college students enrolled in one of the AUC institutions of higher learning indicating whether they disagreed or agreed that they tend to keep their problems to themselves. As shown in Table 6, the majority of the respondents surveyed would prefer to keep their problems to themselves. Of the 100 respondents, 47.0% indicated that they do not prefer to keep their problems to themselves and 53.0% would prefer to keep their problems to themselves.

Table 6

I tend to keep my problems to myself (N=100)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>47</td>
<td>47.0</td>
</tr>
<tr>
<td>Agree</td>
<td>53</td>
<td>53.0</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100.0</td>
</tr>
</tbody>
</table>
Table 7 is a frequency distribution of 100 college students enrolled in one of the AUC institutions of higher learning indicating whether they disagreed or agreed that they tend to resolve their own problems. As Table 7 indicates, the majority of the respondents surveyed tend to resolve their own problems. Of the 100 respondents, 30.0% indicated that they do not tend to resolve their own problems and 70.0% tend to resolve their own problems.

Table 7
I tend to resolve my own problems (N=100)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>30</td>
<td>30.0</td>
</tr>
<tr>
<td>Agree</td>
<td>70</td>
<td>70.0</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 8 is a frequency distribution of 99 college students enrolled in one of the AUC institutions of higher learning indicating whether they disagreed or agreed that most problems work themselves out. As shown in Table 8, the majority of the respondents surveyed believe most problems do not work themselves out. Of the 99 respondents, 51.5% indicated that most problems do not work themselves out and 48.5% indicated that most problems do work themselves out.
Table 8

I believe that most problems work themselves out (N=99)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>51</td>
<td>51.5</td>
</tr>
<tr>
<td>Agree</td>
<td>48</td>
<td>48.5</td>
</tr>
<tr>
<td>Total</td>
<td>99</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 9 is a frequency distribution of 99 college students enrolled in one of the AUC institutions of higher learning indicating whether they disagreed or agreed that they would rather seek advice from a pastor or friend than a mental health professional. As shown in Table 9, the majority of the respondents surveyed would rather seek advice from a pastor or friend than a mental health professional. Of the 99 respondents, 35.4% indicated that they would not rather seek advice from a pastor or friend than a mental health professional and 64.6% indicated that they would rather seek advice from their pastor or friend than a mental health professional.
Table 9

I would rather seek advice from my pastor or friend than a mental health professional (N=99)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>35</td>
<td>35.4</td>
</tr>
<tr>
<td>Agree</td>
<td>64</td>
<td>64.6</td>
</tr>
<tr>
<td>Total</td>
<td>99</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 10 is a frequency distribution for the computed variable of attitude toward mental health services. Three questions from the instrument were used to form the computed variable attitude toward mental health services (ATITUDE): I would disclose personal problems to a mental health professional (DISCLOSE), If needed I will seek help from a mental health professional at my school (SEEKHELP), and I believe that mental health professionals at my school are qualified practitioners (QUALIFIE). Those three questions ([DISCLOSE + SEEKHELP + QUALIFIE] / 3) form the computed variable ATITUDE that was used to gauge student’s attitude toward seeking and utilizing mental health services.

As shown in Table 10, the majority of the respondents surveyed have a positive attitude toward mental health services. Of the 100 respondents, 46.9% exhibited a negative attitude toward mental health services and 53.1% exhibited a positive attitude toward mental health services.
Table 10

Student's attitude toward mental health services (N=98)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>46</td>
<td>46.9</td>
</tr>
<tr>
<td>Agree</td>
<td>52</td>
<td>53.1</td>
</tr>
<tr>
<td>Total</td>
<td>98</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 11 is frequency distribution for the computed variable attitude toward utilizing mental health services of college students enrolled in one of the AUC institutions of higher learning indicating whether they have a positive or negative attitude toward utilizing mental health services. Four questions from the instrument were used to form the computed variable attitude toward utilizing mental health services (UTILIZAT):

I tend to keep my problems to myself (MYSELF), I tend to resolve my own problems (RESOLVE), I tend to keep my problems to myself (MYSELF), I tend to resolve my own problems (RESOLVE), I believe that most problems work themselves out (WORKSELF), and I would rather seek advice from my pastor or friend than a mental health professional (PASTOR) were used to gauge students attitudes toward utilizing mental health services. Those four questions ([MYSELF + RESOLVE + WORKSELF + PASTOR] / 4) form the computed variable UTILIZAT that was used to gauge student's attitudes toward utilizing mental health services.
As shown in Table 11, the majority of the respondents surveyed have a negative attitude toward utilizing mental health services. Of the 99 respondents, 59.6% exhibited a negative attitude toward mental health services and 40.4% exhibited a positive attitude toward utilizing mental health services.

Table 11

Student's attitude toward utilizing mental health services (N=99)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>59</td>
<td>59.6</td>
</tr>
<tr>
<td>Agree</td>
<td>40</td>
<td>40.4</td>
</tr>
<tr>
<td>Total</td>
<td>99</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Research Questions and Hypothesis

Research Question 1: Is there a relationship between the attitudes of African-American college students toward seeking and utilizing mental health services and gender?

Hypothesis 1: There is no statistical significant relationship between the attitudes of African-American college students toward seeking and utilizing mental health services and gender.

Table 12 is cross tabulation of the gender by computed variable attitude toward utilizing mental health services among male and female students in the Atlanta University Center. It shows the relationship (0.87) between the two aforementioned variables and indicates whether there was a statistically significant relationship between gender and attitude toward seeking and utilizing mental health services. Of the 48 males surveyed 29
(29.3%) have a negative toward seeking and utilizing mental health services, and 19 (19.2%) have a positive attitude toward seeking and utilizing mental health services. Of the 51 females surveyed 30 (30.3%) have a negative toward seeking and utilizing mental health services, and 21 (21.2%) have a positive attitude toward seeking and utilizing mental health services.

Table 12

Cross tabulation of student's attitude toward utilizing mental health services by gender (N=98)

<table>
<thead>
<tr>
<th>Attitude Toward Seeking and Utilizing Mental Health Services</th>
<th>Negative</th>
<th>Positive</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>#</td>
<td>%</td>
<td>#</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>29</td>
<td>29.3</td>
<td>19</td>
</tr>
<tr>
<td>Female</td>
<td>30</td>
<td>30.3</td>
<td>21</td>
</tr>
<tr>
<td>Total</td>
<td>59</td>
<td>59.6</td>
<td>40</td>
</tr>
</tbody>
</table>

P= .87

Research Question 2: Is there a relationship between the attitudes of African-American college students toward seeking and utilizing mental health services and past experiences with a mental health professional?

Hypothesis 2: There is no statistical significant relationship between the attitudes of African-American college students toward seeking and utilizing mental health services and past experiences with a mental health professional.

Table 13 is cross tabulation of the responses to the questionnaire question; I have received services from a mental health professional in the past by computed variable attitude toward utilizing mental health. It shows the relationship (p=0.05) between the
two aforementioned variables and indicates whether there was a statistically significant relationship between the attitudes of African-American students who sought mental health services in the past and those who did not.

As indicated in Table 13, Of the 71 students who did not receive mental health services in the past 38 (38.4%) had a negative toward seeking and utilizing mental health services, and 33 (33.3%) had a positive attitude toward seeking and utilizing mental health services. Of the 28 students who have received mental health services in the past 21 (21.2%) had a negative toward seeking and utilizing mental health services, and 7 (7.1%) had a positive attitude toward seeking and utilizing mental health services.

Table 13

Cross tabulation of the computed variable (UTILIZAT) student’s attitude toward utilizing mental health services by rather or not a student has received services from a mental professional in the past (N=98)

<table>
<thead>
<tr>
<th>Attitude Toward Seeking and Utilizing Mental Health Services</th>
<th>Negative</th>
<th>Positive</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>#</td>
<td>%</td>
<td>#</td>
</tr>
<tr>
<td>I have received services in the past</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>38</td>
<td>38.4</td>
<td>33</td>
</tr>
<tr>
<td>Yes</td>
<td>21</td>
<td>21.2</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>59</td>
<td>59.6</td>
<td>40</td>
</tr>
</tbody>
</table>

P= .050
CHAPTER V
CONCLUSIONS AND RECOMMENDATIONS

The study was designed to describe and explore the attitude toward seeking and utilizing mental health services of male and female African-American college students. The study also analyzed the target population and answered two research questions about African-American college students seeking and utilizing mental health services.

The conclusions and recommendations of the research findings are presented in this chapter. Each research question is presented in order to summarize the significant findings of interest.

Research Question 1: Is there a relationship between the attitudes of African-American college students toward utilizing mental health services and gender?

In order to determine if there was a relationship between the attitude of African-American male and female college students towards utilizing mental health services a cross tabulation was conducted. The cross tabulation that included the variable gender and the computed variable attitude toward seeking and utilizing mental health services was conducted ([DISCLOSE + SEEKHELP + QUALIFIE] / 3).

The analysis indicated that out of 99 African-American male and female college students surveyed, 59 (59.6%) have a negative attitude toward seeking and utilizing mental health service, and 40 (40.4%) have a positive attitude toward seeking and utilizing mental health services.
The analysis indicated that out of 48 African-American male college students surveyed, 29 (60.4%) have a negative attitude toward seeking and utilizing mental health services, and 19 (39.6%) have a positive attitude toward seeking and utilizing mental health service. In comparison, out of 51 female African-American college students surveyed, 30 (58.8%) have a negative attitude toward seeking and utilizing mental health service, and 21 (41.2%) have a positive attitude toward seeking and utilizing mental health services. Both male and female students have a negative attitude toward seeking and utilizing mental health services.

The analysis further indicated that there is no relationship between gender and the attitude toward seeking and utilizing of mental health services. When the test statistic (chi square) was applied the results indicated that there was not a significant relationship (.872) at the .05 level of probability between the two variables.

The statistical measurement chi-squared was employed to test the relationship between the variable gender and the computed variable attitude toward seeking and utilizing mental health services was conducted ([DISCLOSE + SEEKHELP + QUALIFTE] / 3). When the test statistic (chi square) was applied the null hypothesis was accepted (0.87) indicating that there was not a statistically significant relationship between the attitude toward seeking and utilizing mental health services and gender.

Research Question 2: Is there a relationship between the attitudes of African-American college students toward seeking and utilizing mental health services and past experiences with a mental health professional?

In order to determine if there was a relationship between the attitude of African-American college who sought mental health services in the past and those who did not, a
cross tabulation was conducted. A cross tabulation which included the responses to the questionnaire question, “I have received services from a mental health professional in the past” by the computed variable attitude toward seeking and utilizing mental health services ([DISCLOSE + SEEKHELP + QUALIFIE] / 3).

The analysis indicated that out of 71 students that have not sought mental health services in the past 38 (53.5%) has a negative attitude toward seeking and utilizing mental health services, and, 33 (46.5%) have a positive attitude toward seeking and utilizing mental health services. It also indicated that out of 28 students that have sought mental health services in the past, 21 (75.0%) has a negative attitude toward seeking and utilizing mental health services, and 7 (25.0 %) have a positive attitude toward seeking and utilizing mental health services.

The statistical measurement chi-squared was employed to test the relationship between the response “I have received mental health services in the past” by the computed variable attitude toward seeking and utilizing mental health services ([DISCLOSE + SEEKHELP + QUALIFIE] / 3). When the test statistic (chi square) was applied the null hypothesis was rejected (p=0.05) indicating that there was a statistically significant relationship between the attitude toward seeking and utilizing mental health services and past experiences with a mental health service provider.

As a result of the findings of this study the researcher is recommending the following:

1. Social workers should engage in further research endeavors that will help to increase the likelihood of this population seeking and utilizing mental health services.
2. Programs should be developed to inform African-American college students of the benefits of seeking and utilizing mental health services.

3. Researchers should further research the attitude of African-Americans toward seeking and utilizing mental health services.

Implication for Social Work Practice

The results of this study presented an enhanced insight into the current knowledge deficit on the attitude of African-American college students toward seeking and utilizing mental health services. Utilizing the results of this study, mental health professionals can play a major role in removing some of the barriers that impede African-American college students from seeking and utilizing mental health services. The implementation of cultural sensitive best practices by social workers should play a pivotal role in increasing the utilization of services.

Mental health services are useful for college students to experience a state of well being during their matriculation through college. The findings of this study indicate that mental health services are necessary. Therefore, it is recommended that colleges and universities fully inform students of the services provided for their benefit.

The majority of the respondents surveyed use informal pathways such as seeking advice from a pastor or a friend. Social workers should work with predominately African-American churches to improve the attitude of African-American college students toward seeking and utilizing mental health service.
The results of this survey indicated a need for advocacy. Social workers should advocate for programs that target African-American college students to promote positive attitudes toward seeking and utilizing mental health services.
Appendix A: Survey Questionnaire

A STUDY OF THE ATTITUDES OF AFRICAN-AMERICAN COLLEGE STUDENTS TOWARD SEEKING AND UTILIZING MENTAL HEALTH TREATMENT IN THE ATLANTA UNIVERSITY CENTER.

Section I Demographic Information
Place a mark (X) next to the appropriate item. Choose only one answer for each question.

1. My gender is: 1) ___ Male 2) ___ Female

2. My age group is: 1) ___ under 18 2) ___ 18-21 3) ___ 22-25
   4) ___ 26-29 5) ___ 30-33 6) ___ over 34

3. Please choose the ONE racial category that best describes you:
   1) ___ African-American 2) ___ Caucasian 3) ___ Hispanic
   4) ___ Asian 5) ___ Other

4. My marital status is:
   1) ___ Married 2) ___ Never Married 3) ___ Divorced
   4) ___ Widowed

5. My family yearly income is:
   1) ___ Under $15,000 2) ___ $15,000-$34,999 3) ___ $35,000-$54,999
   4) ___ $55,000-$74,999 5) ___ $75,000-$94,999 6) ___ Above $95,000

6. My Classification is:
   1) ___ Freshman 2) ___ Sophomore 3) ___ Junior
   4) ___ Senior 5) ___ Graduate

7. I Attend:
   1) ___ Clark Atlanta University 2) ___ Interdenominational Theological Center
   3) ___ Morehouse College 4) ___ Morris Brown College
   5) ___ Spelman College
Appendix A: Survey Questionnaire continued ....

8. I have received services from a mental health professional (Counselor, Psychologist, Psychiatrist, Social Worker, or Physician) in the past.
1) _____ No 2) _____ Yes

Section II

Instructions: How much do you disagree or agree with the following statements?
Write the appropriate number in the blank beside each statement.

1 2 3 4
Strongly Disagree Disagree Agree Strongly Agree

Attitude toward mental health services

_____ 1. I would disclose personal problems to a mental health professional.

_____ 2. If needed, I will seek help from a mental health professional at my school.

_____ 3. I believe that mental health professionals at my school are qualified practitioners.

_____ 4. I would prefer to get mental health services from sources outside of the AUC.

Attitude toward utilization of mental health services

_____ 5. I tend to keep my problems to myself.

_____ 6. I tend to resolve my own problems.

_____ 7. I believe that most problems work themselves out.

_____ 8. I would rather seek advice from my pastor or friend than a mental health professional.
APPENDIX B: SPSS PROGRAM

TITLE 'A STUDY OF HELP SEEKING ATTITUDES OF COLLEGE STUDENTS'.
SUBTITLE 'Joseph L. Smith MSW Program'.

DATA LIST FIXED/
ID 1-3
GENDER 4
AGE 5
RACE 6
MARITAL 7
HINCOME 8
CLASIFIC 9
SCHATND 10
SEENBFOR 11
DISCLOSE 12
SEEKHELP 13
QUALIFIED 14
OUTAUC 15
MYSELF 16
RESOLVE 17
WORKSELF 18
PASTOR 19.

VARIABLE LABELS
ID 'Case'
GENDER 'Q1 Gender'
AGE 'Q2 Age Group'
RACE 'Q3 Race'
MARITAL 'Q4 Marital Status'
HINCOME 'Q5 Family Yearly Income'
CLASIFIC 'Q6 College classification'
SCHATND 'Q7 I Attend'
SEENBFOR 'Q8 I have received services from a mental health professional in past'
DISCLOSE 'Q9 I would disclose personal problems to a mental health professional'
SEEKHELP 'Q10 If needed I will seek help from a mental health professional at my school'
QUALIFIED 'Q11 I believe that mental health professionals at my school are qualified'
OUTAUC 'Q12 I would prefer to get mental health services from sources outside AUC'
MYSELF 'Q14 I tend to keep my problems to myself'
RESOLVE 'Q15 I tend to resolve my own problems'
WORKSELF 'Q16 I believe that most problems work themselves out'
PASTOR 'Q17 I would rather seek advice from my pastor or friend than a mental health'.

47
Appendix B: SPSS Program continued...

VALUE LABELS
GENDER
  1 'Male'  
  2 'Female'/
AGE
  1 'Under 18'  
  2 '18-21'  
  3 '22-25'  
  4 '26-29'  
  5 '30-33'  
  6 'over 34'/
RACE
  1 'African American'  
  2 'Caucasian'  
  3 'Hispanic'  
  4 'Asian'  
  5 'Other'/
MARITAL
  1 'Married'  
  2 'Never Married'  
  3 'Divorced'  
  4 'Widowed'/
HINCOME
  1 'Under 15000'  
  2 '15000-34999'  
  3 '35000-54999'  
  4 '55000-74999'  
  5 '75000-94999'  
  6 '95000-above'/
SCHATND
  1 'Clark Atlanta University'  
  2 'Interdenominational Theological Center'  
  3 'Morehouse College'  
  4 'Morris Brown College'  
  5 'Spelman College'/
SEENBFOR
  1 'No'  
  1 'Yes'/
DISCLOSE
  1 'Strongly Disagree'  
  2 'Disagree'  
  3 'Agree'  
  4 'Strongly Agree'/
Appendix B: SPSS Program continued ....

SEEKHELP
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/

QUALIFIED
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/

OUTAUC
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/

MYSELF
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/

RESOLVE
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/

WORKSELF
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/

PASTOR
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Strongly Agree'/.

MISSING VALUES
ID GENDER AGE RACE MARITAL HINCOME CLASIFIC SCHATND SEENBFOR DISCLOSE SEEKHELP QUALIFIED OUTAUC MYSELF RESOLVE WORKSELF PASTOR (0).

BEGIN DATA
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Appendix B: SPSS Program continued ....

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| 0581412121133324413 |
| 0591312243142242423 |
Appendix B: SPSS Program continued ....

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0611612151111114444
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0991212321233244333
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1012212531132233333
END DATA.

FREQUENCIES
/VARIABLES GENDER AGE RACE MARITAL HINCOME CLASIFIC SCHATNND SEENBFOR DISCLOSE SEEKHELP QUALIFIED OUTAUC MYSELF RESOLVE WORKSELF PASTOR /STATISTICS=.
Appendix C: IRB Approval Letter

CLARK ATLANTA UNIVERSITY
Institutional Review Board
Office of Sponsored Programs

January 23, 2007

Mr. Joseph L. Smith, <Lemont1914@yahoo.com>
School of Social Works
Clark Atlanta University
Atlanta, GA 30314

RE: An Exploratory Study of the Attitude Towards Seeking and Utilizing Mental Health Services of Male and Female African-American College Students.

Principal Investigator: Joseph L. Smith
Human Subjects Code Number: HR2007-1-198-1

Dear Mr. Smith:

The Human Subjects Committee of the Institutional Review Board (IRB) has reviewed your revised protocol and approved it as expedited and exempt from full IRB review in accordance with 45 CFR 46.101(b)(2). You may begin your study after January 26, 2007.

Protocol Approval Code is HR2007-1-198-1/A

This approval is valid for one year from the date of this notice. This permit will therefore expire on January 21, 2008. Thereafter, continued approval is contingent upon the annual submission of a renewal form to this office. Any reaction or problems resulting from this investigation should be reported immediately to the IRB, the Department Chairperson and any sponsoring agency.

If you have any questions, please contact Dr. Georgianna Bolden at the Office of Sponsored Programs (404) 880-6979 or Dr. Paul I. Musey, (404) 880-6829.

Sincerely:

[Signature]

Paul I. Musey, Ph.D.
Chair
IRB: Human Subjects Committee

cc. Dr. Richard Lyle <dylke@cau.edu>
Office of Sponsored Programs, Dr. Georgianna Bolden <gbolden@cau.edu>

223 James P. Brawley Drive, S.W. • ATLANTA, GA 30314-1901 • (404) 880-8000
Formed in 1988 by consolidation of Atlanta University, 1865 and Clark College, 1809
Appendix D: Informed Consent Form

We would like your participation in completing this survey. Your participation is important to us and will help us evaluate the attitudes of African American college students toward seeking and utilizing mental health services.

We will keep all of your answers confidential. Your name will never be included in any report and none of your answers will be linked to you in any way. The information that you provide will be combined with information from everyone else participating in this survey.

You do not have to participate in the survey. Even if you agree to participate now, you may stop participating at any time or refuse to answer any question. Refusing to be part of the survey will not affect you negatively.

If you have any questions about the survey you may contact Joseph L. Smith Jr. at (404) 678-4320 or e-mail Lemonte1914@yahoo.com.

By signing below, you confirm that this form has been explained to you and that you understand the consent form.

Please Check One:

_____ AGREE TO PARTICIPATE

_____ DO NOT AGREE TO PARTICIPATE

________________________________________________________
Participant's Signature

________________________________________________________
Date
REFERENCES


Retrieved Sunday, October 29, 2006 from the Academic Search Premier database.


