

Quality Network for Eating Disorders Annual Forum 2024

A systematic review of barriers and facilitators to/of men's formal help seeking for eating and body image pathology.

Context:

Men are underrepresented in healthcare services which deliver care for eating and body image pathology (EBP). Researchers have argued that men's experiences of these concerns may differ from current understandings which are based mostly on women. Men with lived experience of EBP have noted the exclusionary impact the "woman's illness" label has had on healthcare services. One example of the differences is the role of men's body image ideals, which often generate a pressure to be muscular as opposed to thin. Investigations into muscularity concerns have led to muscle dysmorphia being included in the DSM-5 as a specifier for body dysmorphic disorder. This nosological decision has led to controversy as many researchers claim that muscle dysmorphia should be understood as a form of eating disorder due to numerous shared symptoms and antecedents. A recent review summarised the barriers to help seeking for eating disorders in men but did not include papers referring to muscularity-oriented concerns, nor did it report related facilitators to help seeking. A new review is required to generate a more developed understanding of the barriers and facilitators to/of men's EBP related help seeking.

Method:

The presenter, and colleagues, undertook a mixed method systematic review of 1590 records which yielded 13 studies meeting the inclusion criteria (written in English, peer-reviewed, reporting barriers and/or facilitators to/of men's formal eating and body image related help-seeking). A set of "synthesised findings" (SF) were generated through a convergent integrated approach and meta-aggregation of the quantitative and qualitative data obtained from the included studies. This method is recommended to improve the relevance of findings for implementation into policy and protocol within healthcare services.

Findings:

The SFs are presented as barriers (n=6) and facilitators (n=2) to/of formal EBP related help-seeking. The barriers encompass: Social assumptions about who can experience EBP; men's view of the functional 'benefits' of EBP related behaviours; healthcare organisations' lack of male-inclusive resources; healthcare staff's insufficient knowledge about men's EBP experiences; and the misunderstanding of men's EBP symptoms. Facilitators included men's raised awareness and recognition of the impact of EBP following critical life events, and the active encouragement of help-seeking from family, peers and/or romantic partners.

Discussion:

This synthesis shows that barriers and facilitators to/of men's formal EBP related help-seeking are located at individual (e.g. self-stigma), organisational (e.g. lack of male-inclusive resources), and cultural (e.g. social assumptions) levels. The presenter will discuss these findings and highlight directions for future development within eating disorder services to address barriers and make further use of facilitators. Alongside the review's SFs, the presenter will also consider the limitations of the small number of studies in this field and future direction for academic investigations.