

From Taboo to Talk: The Importance of Parasocial Interactions in Starting Conversations about Mental Health

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INTRODUCTION

AIMS OF THE STUDY

- Investigate the effect of parasocial interactions on mental health and help-seeking behavior
- Explore the extent to which self-disclosure in video contents affects this interaction

DEFINITIONS

Parasocial Interaction (PSI)
Illusionary interaction between a media figure (e.g. an actor or influencer) and their audience (Hartmann, 2016)

Self-disclosure
"revealing personal or private information about one's self to other people." (American Psychological Association, 2022)

FINDINGS OF THIS STUDY

- Contribute to a better understanding of the mechanisms underlying the effect of parasocial interactions on help-seeking behavior
- Provide important implications for mental health professionals and content creators who seek to promote positive help-seeking behaviors through video content

HYPOTHESES

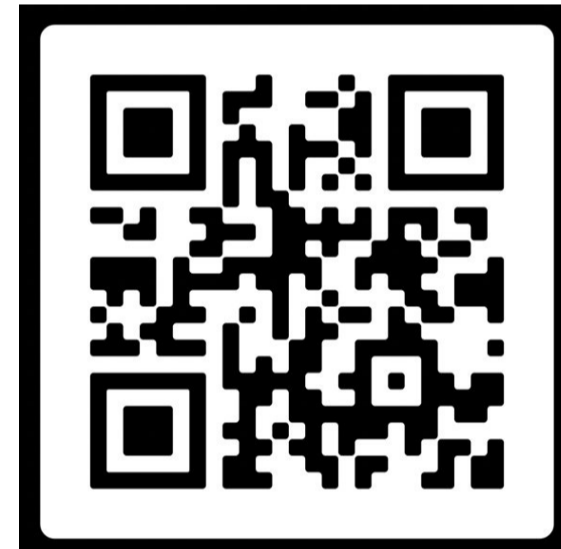
Hypothesis 1: The more deeply the parasocial interaction is the more positive the attitude towards professional help seeking is.

Hypothesis 2: In terms of our study the attitude towards professional help seeking should increase after parasocial interaction involving self-disclosure.

Hypothesis 3: The explicitly and implicitly measured attitudes should be significantly and positively correlated.

Hypothesis 4: The attitude towards professional help seeking should improve if the person already has had consulting experiences.

Pre-registered Report on AsPredicted



CONCLUSIONS

TAKE AWAY MESSAGE

- Persons with consulting experiences are more likely to take advantage of professional help than persons without
- E.g. regarding problems in romantic relationships or in friendships, problems regarding loneliness, sexuality, depression

STRENGTHS

- Double-blind-procedure ensures objectivity
- Two different measures (implicit and explicit)
- Own idea and design (bottom-up and peer-reviewed)
- Spontaneous and creative solutions in regards to many challenges during the process

LIMITATIONS

- Underpowered, appropriate sample size wasn't reached
- Homogeneous sample: mainly students between 20-30 years + gender bias towards female
- PSI-Items in control group not clearly worded



ACKNOWLEDGEMENTS

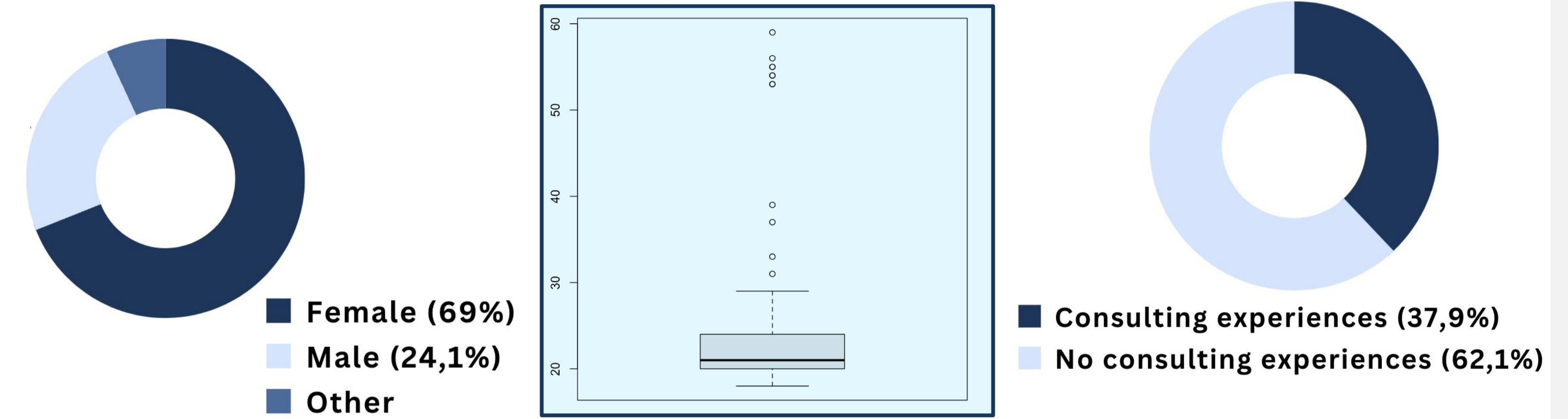
We would like to express our sincere gratitude to the actress for her outstanding dedication and invaluable assistance in creating the video material for this research project. We are also grateful to the Department of Biological Psychology for granting us access to their facilities, enabling us to carry out data collection.

REFERENCES

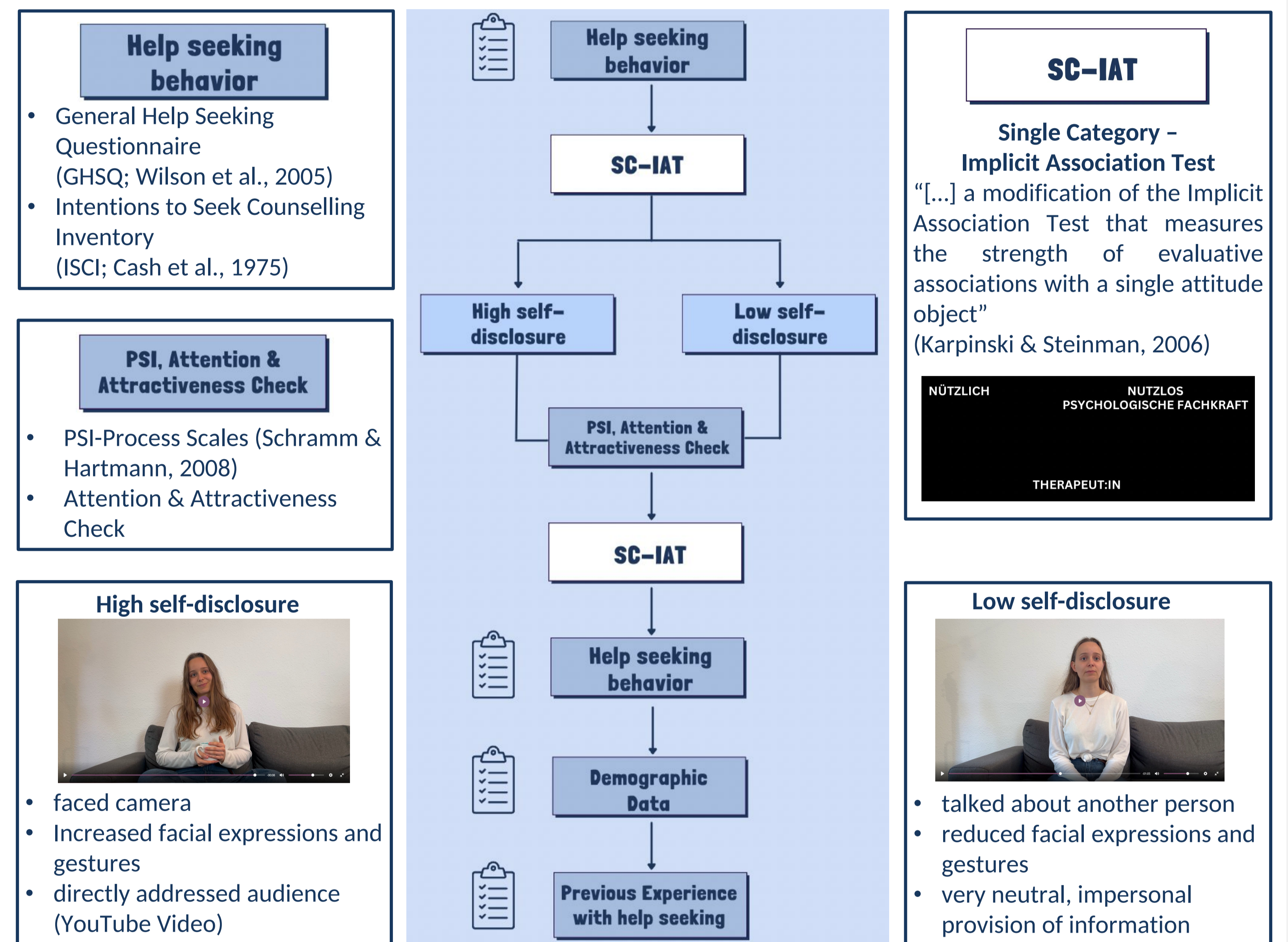
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METHODS

SAMPLE (n = 145)



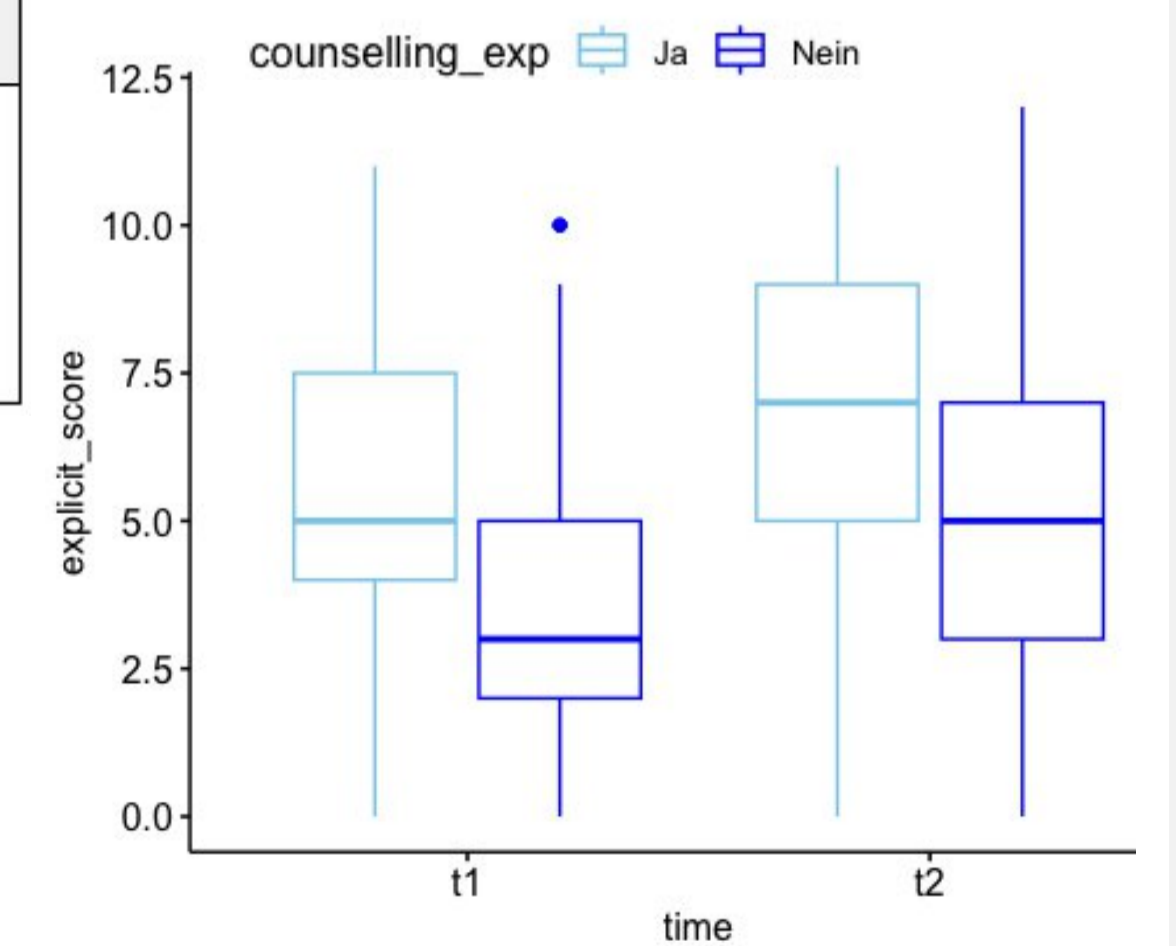
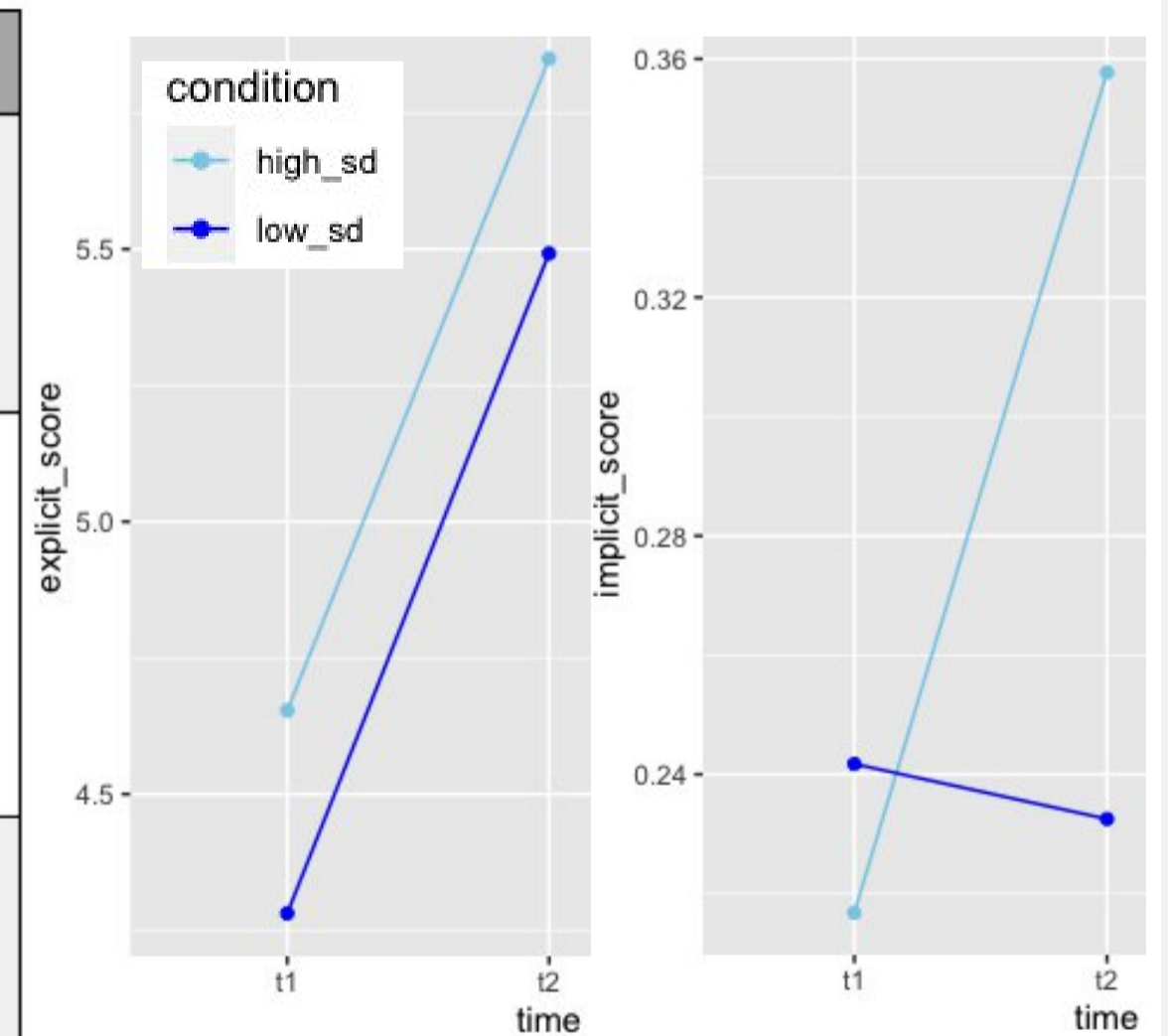
DATA COLLECTION PROCESS



Data was collected in presence (JenTower) & offline at home

RESULTS

	ANALYSIS PLAN	RESULTS	SIGNIFICANCE
H1	Correlation between the PSI strength and the differences in the attitude towards seeking mental health before and after watching the video (t2-t1)	Explicit: $r(129) = -.06, p = .48$ Implicit: $r(114) = -.03, p = .77$	Not significant Hypothesis rejected
H2	2 (Group) x 2 (Time) mixed ANOVAs with attitude towards professional help seeking as dependent variable	Explicit effects time: $F(1,129) = 40.46, p < .001^*$ condition:time: $F(1,129) = 0.26, p = .615$ Implicit effects time: $F(1,114) = 2.71, p = .103$ condition:time: $F(1,114) = 3.52, p = .063$	Not significant Hypothesis rejected
H3	Correlation between the implicit and explicit measures for the AMHS for each time of measurement	t1: $r(110) = .04, p = .6668$ t2: $r(106) = .07, p = .4564$	Not significant Hypothesis rejected
H4	2 (Consulting experiences: yes vs. no) x 2 (Time: before vs. after video) mixed ANOVAs with AMHS as dependent variable	Explicit effect of counselling experience $F(1,129) = 11.00, p = .001^*$ Implicit effect of counselling experience $F(1,114) = 0.002, p = .965$	Significant only for explicit measures Hypothesis partially accepted



QUESTIONNAIRE RESULTS

*Wie wahrscheinlich wäre es, dass Sie sich für eines dieser Probleme professionelle Beratung holen würden?
0 = "Sehr unwahrscheinlich" 6 = "Sehr wahrscheinlich"

	Prokrastination	Alkoholprobleme	Gewichtskontrolle	Drogenprobleme	Probleme mit Freunden	Studienfachwahl	Schlafprobleme	Partnersuche	Selbstkenntnis
Pre: Total	1,26	2,81	1,88	3,17	1,55	2,04	2,93	1,10	2,08
Condition									
Post: Low	1,46	3,57	1,91	3,72	1,67	2,04	3,18	1,34	2,10
Post: High	1,83	3,21	2,19	3,30	1,81	1,62	3,00	1,43	2,37
Therapy Experience									
Yes	1,70**	2,72	1,98	3,00	2,07**	2,23	2,98	1,26	2,53**
No	0,99**	2,87	1,82	3,28	1,22**	1,98	2,90	1,00	1,81**

Prüfungsangst, Beziehungsprobleme, Redeanxiety, Einsamkeit, Minderwertigkeit, Bedenken über Sexualität, Konflikte mit Eltern, Depression

	Prüfungsangst	Beziehungsprobleme	Redeanxiety	Einsamkeit	Minderwertigkeit	Bedenken über Sexualität	Konflikte mit Eltern	Depression
Pre: Total	2,00	2,22	1,97	2,10	2,29	1,85	2,11	4,51*
Condition								
Post: Low	1,88	2,39	1,82	2,28	2,37	2,07	2,00	4,51*
Post: High	2,36	2,22	2,22	2,54	2,88	1,70	2,13	4,13
Therapy Experience								
Yes	2,81***	2,93***	2,47***	2,80***	3,00***	2,16*	2,69***	4,47***
No	1,52***	1,79***	1,66***	1,69***	1,86***	1,66*	1,76***	3,64***

Significant effects are written bold *p < .06 **p < .05 ***p < .01 ****p < .001.

Wenn Sie ein psychisches und/oder emotionales Problem haben/hätten, wie wahrscheinlich ist es, dass Sie sich Hilfe von einer der folgenden Personen holen?
0 = "Sehr unwahrscheinlich" 6 = "Sehr wahrscheinlich"

	Intimer Partner	Freund/in	Eltern	Verwandte	Psychische Gesundheitsfachkraft	Telefonseelsorge	(Haus-)Arzt	Kirchenvertreter	Niemand	Andere
Pre: Total	4,93	4,72	3,50	1,92	2,82	0,82	1,72	0,46	1,61	1,36
Condition										
Post: Low	5,12	4,66	3,71	1,78	3,53*	1,03	2,03	0,44	1,45	1,36
Post: High	4,87	4,77	3,44	2,03	3,62*	1,28	2,29*	0,58	1,32	1,52
Therapy Experience										
Yes	5,11	4,82	3,09*	1,87	3,76***	1,04	1,77	0,42	1,64	1,58
No	4,82	4,66	3,74*	1,96	2,26***	0,69	1,69	0,49	1,59	1,23

Significant effects are written bold *p < .06 **p < .05 ***p < .01 ****p < .001.

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