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The New Psychology of Men

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The new psychology of men has emerged over the past 15 years within the larger fields of men's studies and gender studies. Informed by the academic breakthroughs of feminist scholarship, the new psychology of men examines masculinity not as a normative referent, but rather as a problematic construct. In so doing, it provides a framework for a psychological approach to men and masculinity that questions traditional norms of the male role and views some male problems as unfortunate by-products of the male gender role socialization process. This article introduces this new field, covering the gender role strain paradigm, masculinity ideology, and the 3 varieties of male gender role strain—discrepancy-strain, dysfunction-strain, and trauma-strain. Implications for practice are presented.

Those not familiar with the new psychology of men sometimes ask, "Why do we need a psychology of men? Isn't all psychology the psychology of men?" The answer is, yes, men have been the focal point of most psychological research but in studies that viewed men as representative of humanity as a whole. Feminist scholars challenged this traditional viewpoint by arguing for a gender-specific approach, and in the past quarter century, they have rewritten the canon on the psychology of women. In the same spirit, men's studies scholars, over the past 15 years, have begun to examine masculinity not as a normative referent, but rather as a complex and problematic construct. In so doing, they have provided a framework for a psychological approach to men and masculinity that questions traditional norms of the male role (such as the emphasis on competition, status, toughness, and emotional stoicism) and views certain male problems (such as aggression and violence, devaluation of women, fear and hatred of homosexuals, detached fathering, and neglect of health needs) as unfortunate but predictable results of the male role socialization process. They have also provided a framework for creating positive new definitions of masculinity that support the optimal development of men, women, and children.

This new psychology of men is both overdue and urgently needed. Men are disproportionately represented among many problem populations: substance abusers; the homeless; perpetrators of family and interpersonal violence; parents estranged

from their children; sex addicts and sex offenders; victims of homicide, suicide, and fatal automobile accidents; and victims of life-style and stress-related fatal illnesses. A new psychology of men might contribute to understanding and solving some of these male problems that have long affected women, men, children, and society in negative ways.

Moreover, because of long delays in dealing with many of these problems, we are currently experiencing a "crisis of connection" between men and women (Levant, 1994a, p. 2). As a result, the pressures on men to behave in ways that conflict with various aspects of traditional masculinity ideology have never been greater. These new pressures—pressures to commit to relationships, to communicate one's innermost feelings, to nurture children, to share in housework, to integrate sexuality with love, and to curb aggression and violence—have shaken traditional masculinity ideology to such an extent there is now a masculinity crisis in which many feel bewildered and confused, and the pride associated with being a man is lower than at any time in the recent past. Many such men are gravitating to organizations such as the Promise Keepers (Promise Keepers, 1994) and the Fatherhood Initiative (Blankenhorn, 1995), which propose to return the man to his presumed rightful place as the leader of his family by rolling back the gains of the women's movement. A new psychology of men might help men find solutions to the masculinity crisis and the crisis of connection that enhance rather than inflame gender relations; also, it might provide them with tools for the reconstruction of the traditional male code (Levant & Kopecky, 1995).

The purpose of this article is to introduce this new field to professional psychologists. I cover the gender role strain paradigm, masculinity ideology, and the three varieties of male gender role strain: discrepancy-strain, dysfunction-strain, and trauma-strain.

The Gender Role Strain Paradigm

The new psychology of men views gender roles not as biological or even social givens, but rather as psychologically and socially constructed entities that bring certain advantages and disadvantages and, most importantly, can change. This perspective acknowledges the biological differences between men and

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women but argues that it is not the biological differences of sex that make for masculinity and femininity. These notions are socially constructed from bits and pieces of biological, psychological, and social experience to serve particular purposes. Traditional constructions of gender serve patriarchal purposes; nontraditional constructions, such as Gilmore (1990) described among the Tahitians and the Semai, serve more egalitarian purposes.

The gender role strain paradigm, originally formulated by Joseph Pleck in *The Myth of Masculinity* (1981), is the forerunner in the new psychology of men of social constructionism and of modern critical thinking about masculinity, having been formulated before social constructionism emerged as a new perspective on masculinity (Pleck, 1995). It spawned a number of major research programs that have produced important data that have deepened our understanding of the strain men experience when they attempt to live up to the impossibility of the male role.

Pleck demonstrated that the paradigm that had dominated the research on masculinity for 50 years (1930–1980)—the gender role identity paradigm—not only poorly accounted for the observed data, but also promoted the patriarchal bifurcation of society on the basis of stereotyped gender roles. In its place, Pleck proposed the gender role strain paradigm.

The older gender role identity paradigm assumed that people have an inner psychological need to have a gender role identity and that optimal personality development hinges on its formation. The extent to which this inherent need is met is determined by how completely a person embraces his or her traditional gender role. From such a perspective, the development of appropriate gender role identity is viewed as a failure-prone process; furthermore, failure for men to achieve a masculine gender role identity is thought to result in homosexuality, negative attitudes toward women, or defensive hypermasculinity. This paradigm springs from the same philosophical roots as the essentialist or nativist view of sex roles—the notion that (in the case of men) there is a clear masculine essence that is historically invariant.

In contrast, the gender role strain paradigm proposed the following: contemporary gender roles are contradictory and inconsistent; the proportion of persons who violate gender roles is high; violation of gender roles leads to condemnation and negative psychological consequences; actual or imagined violation of gender roles leads people to overconform to them; violation of gender roles has more severe consequences for men than for women; and certain prescribed gender role traits (such as male aggression) are often dysfunctional. In this paradigm, appropriate gender roles are determined by the prevailing gender ideology (which is operationally defined by gender role stereotypes and norms) and are imposed on the developing child by parents, teachers, and peers—the cultural transmitters who subscribe to the prevailing gender ideology. As noted previously, this paradigm springs from the same philosophical roots as social constructionism—the perspective that notions of masculinity and femininity are relational, socially constructed, and subject to change.

Masculinity Ideology

Thompson and Pleck (1995) proposed the term *masculinity ideology* to characterize the core construct in the corpus of re-

search assessing attitudes toward men and male roles. Masculinity, or gender, ideology is a very different construct from the older notion of gender orientation. Gender orientation arises out of the identity paradigm and “presumes that masculinity is rooted in actual differences between men and women” (Thompson & Pleck, 1995, p. 130). This approach has attempted to assess the personality traits more often associated with men than women, using such instruments as the Bem Sex Role Inventory (Bem, 1974) and the Personal Attributes Questionnaire (Spence & Helmreich, 1978). In contrast, studies of masculinity ideology take a normative approach in which masculinity is viewed as a socially constructed gender ideal for men. Whereas the masculine man in the orientation–trait approach is one who possesses particular personality traits, the traditional man in the ideology–normative approach “is one who endorses the ideology that men should have sex-specific characteristics (and women should not)” (Thompson & Pleck, 1995, p. 131). Thompson and Pleck (1995) adduced evidence to support the notion that gender orientation and gender ideologies are independent and have different correlates.

Masculinity ideologies. The strain paradigm asserts that there is no single standard for masculinity nor is there an unvarying masculinity ideology. Rather, because masculinity is a social construction, ideals of manhood may differ for men of different social classes, races, ethnic groups, sexual orientations, life stages, and historical eras. Following Brod (1987), I therefore prefer to speak of masculinity ideologies. To illustrate, consider these brief descriptions of varying male codes among four ethnic-minority groups in the contemporary United States:

African-American males have adopted distinctive actions and attitudes known as cool pose. . . . Emphasizing honor, virility, and physical strength, the Latino male adheres to a code of machismo. . . . The American-Indian male struggles to maintain contact with a way of life and the traditions of elders while faced with economic castration and political trauma. . . . Asian-American men resolve uncertainty privately in order to save face and surrender personal autonomy to family obligations and needs. (Lazur & Majors, 1995, p. 338)

Traditional masculinity ideology. Despite the diversity in masculinity ideology in the contemporary United States, Pleck (1995) pointed out that “there is a particular constellation of standards and expectations that individually and jointly have various kinds of negative concomitants” (p. 20). It is common to refer to this as *traditional* masculinity ideology, because it was the dominant view before the deconstruction of gender that took place beginning in the 1970s.

Traditional masculinity ideology is thought to be a multidimensional construct. Brannon (David & Brannon, 1976) identified four components of traditional masculinity ideology: that men should not be feminine (labeled by Brannon as “no sissy stuff”); that men should strive to be respected for successful achievement (“the big wheel”); that men should never show weakness (“the sturdy oak”); and that men should seek adventure and risk, even accepting violence if necessary (“give ‘em hell”). These dimensions are assessed by the Brannon Masculinity Scale (Brannon & Juni, 1984). More recently, Levant et al. (1992) developed the Male Role Norms Inventory (MRNI), which defines traditional masculinity ideology in terms of the

following seven dimensions: the requirement to avoid all things feminine; the injunction to restrict one's emotional life; the emphasis on toughness and aggression; the injunction to be self-reliant; the emphasis on achieving status above all else; nonrelational, objectifying attitudes toward sexuality; and fear and hatred of homosexuals. (See Thompson and Pleck, 1995, for other definitions of traditional masculinity ideology and the associated instruments).

Types of Male Gender Role Strain

Pleck (1995), in an update on the gender role strain paradigm, pointed out that his original formulation of the paradigm stimulated research on three varieties of male gender role strain, which he termed *discrepancy-strain*, *dysfunction-strain*, and *trauma-strain*. Discrepancy-strain results when one fails to live up to one's internalized manhood ideal, which, among contemporary adult men, is often a close approximation of the traditional code. Dysfunction-strain results even when one fulfills the requirements of the male code because many of the characteristics viewed as desirable in men can have negative side effects on the men themselves and on those close to them. Trauma-strain results from the ordeal of the male role socialization process, which is now recognized as inherently traumatic.

Discrepancy-Strain

One approach to investigating discrepancy-strain used a version of the old self-ideal self research paradigm in which participants were first asked, using adjectival rating scales, to describe the "ideal man," and then were asked to describe themselves. The discrepancy between the two ratings was used as an index of discrepancy-strain, which was then studied in terms of its correlations with other variables, such as self-esteem. As reviewed by Pleck (1995), this line of research has not been particularly productive.

Another approach has been more fruitful. This approach does not ask participants whether discrepancy-strain exists for them; rather, it inquires whether they would experience particular gender discrepancies as conflictual or stressful if they did exist. Two major research programs have used this approach: O'Neil's (O'Neil, Helms, Gable, Davis, & Wrightsman, 1986) work on male gender role conflict and Eisler and Skidmore's (1987) work on masculine gender role stress.

Male Gender Role Conflict

The centerpiece of this research program is an empirically derived measure of male gender role conflict, the Gender Role Conflict Scale I (GRCS-I; O'Neil et al., 1986), which is a 37-item scale in which respondents use a 6-point Likert-type scale to report the degree to which they agree or disagree with statements. The GRCS-I assesses four domains of gender role conflict in men: (a) Success, Power, and Competition (13 items, average alpha = .85; e.g., "Making money is part of my idea of being a successful man"); (b) Restrictive Emotionality (10 items, average alpha = .84; e.g., "I have difficulty telling others I care about them"); (c) Restrictive Affectionate Behavior Between Men (8 items, average alpha = .84; e.g., "Men who touch

other men make me uncomfortable"); and, (d) Conflict Between Work and Family Relations (6 items, average alpha = .80; e.g., "Finding time to relax is difficult for me"). The four-factor structure of the instrument has been confirmed in six factor analyses, including several conducted with college students, two conducted with adults, and one using confirmatory factor analysis (O'Neil, Good, & Holmes, 1995). Four-week test-retest reliabilities of the subscales ranged from .72 to .86.

O'Neil, Good, and Holmes (1995) summarized the results of 15 years of work on gender role conflict, which included 34 studies using the GRCS-I. The authors concluded that gender role conflict is a documented area of difficulty for men that is hazardous to their mental health and is associated with anxiety and depression; furthermore, they found that the four domains of gender role conflict vary in complex ways with demographic, personality, psychological health, and relational variables.

Masculine Gender Role Stress

Research using the Masculine Gender Role Stress Scale (MGRSS; Eisler & Skidmore, 1987), which is based on the cognitive stress model (Lazarus & Folkman, 1984), has focused on men's health. The MGRSS consists of a 40-item scale in which respondents use a 6-point scale to report how stressful various situations would be if they happened to them. Five subscales, derived by factor analysis, assess situations that are common in men's lives and that are hypothetically more stressful for men than women: (a) Physical Inadequacy (9 items; e.g., "Losing in a sports competition"); (b) Expressing Emotions (7 items; e.g., "Telling someone that you feel hurt by what they said"); (c) Subordination to Women (7 items; e.g., "Letting a woman take control of a situation"); (d) Experiencing a Threat to a Male's Intellectual Control (9 items; e.g., "Having people say you are indecisive"); (e) Performance Failures in Work and Sex (8 items; e.g., "Being unable to become sexually aroused"). In college student samples, the MGRSS has demonstrated a high degree of internal consistency (alphas in the low .90s) and test-retest reliability (Thompson & Pleck, 1995).

Eisler (1995) summarized the work on the MGRSS, describing the associations between the MGRSS, its component factors, anger, anxiety, health habits, health problems, and emotional expressiveness. Eisler also reviewed a series of studies that used cardiovascular measures of stress response to explore the relationships between men's vulnerability to masculine gender role stress and the gender relevance of the challenge. The author concluded that there is a significant relationship between masculine gender role stress and cardiovascular reactivity. Findings such as this one may play an important role in improving men's cardiovascular health and in reducing their mortality rates, which are significantly higher than those of women.

Dysfunction-Strain

The second type of gender role strain is dysfunction-strain. The notion behind dysfunction-strain is that the fulfillment of the requirements of the male code can be dysfunctional because many of the characteristics viewed as desirable in men can have negative side effects on the men themselves and on those close to them. Pleck (1995) reviewed some of the research that doc-

uments the existence of dysfunction-strain, which includes studies that find negative outcomes associated with masculine gender-related personality traits on the one hand and lack of involvement in family roles on the other hand. As examples of the latter, Barnett, Marshall, and Pleck (1991) found that the quality of men's marital roles and of their parental roles are both significant predictors of men's psychological distress. Furthermore, Barnett, Davidson, and Marshall (1991) found that the quality of men's parental roles, but not that of their marital roles, was a significant predictor of men's physical health.

Brooks and Silverstein (1995), in a far-reaching discussion of the dark side of masculinity, provided a taxonomy of the problems that result from dysfunction-strain. These are significant social and public health problems that Brooks and Silverstein (1995) argued result, through one pathway or another, from adherence to traditional masculinity ideology. These problems include the following: (a) violence, including male violence against women in the family, rape and sexual assault, and sexual harassment; (b) sexual excess, including promiscuity, involvement with pornography, and sexual addiction; (c) socially irresponsible behaviors, including chemical dependence, risk-seeking behavior, physical self-abuse, absent fathering, and homelessness-vagrancy; and (d) relationship dysfunctions, including inadequate emotional partnering, nonnurturing fathering, and nonparticipative household partnering.

Trauma-Strain

The concept of trauma-strain has been applied to certain groups of men whose experiences with gender role strain are thought to be particularly harsh. This includes professional athletes (Messner, 1992), Vietnam veterans (Brooks, 1990), and survivors of child abuse, including sexual abuse (Lisak, 1995). Researchers also recognize that gay and bisexual men are traumatized by male gender role strain by virtue of growing up in a heterosexist society (Harrison, 1995). Clinical work with male trauma-strain victims is enhanced by recent analyses of the role of shame in trauma (Krugman, 1995).

However, above and beyond the recognition that certain classes of men may experience trauma-strain, a perspective on the male role socialization process has emerged that views socialization under traditional masculinity ideology as inherently traumatic.

Contemporary adult men grew up in an era in which traditional masculinity ideology held sway. According to the tenets of the gender role strain paradigm, growing up as a male under these conditions was an ordeal that had traumatic consequences. Following is a brief review of this perspective that covers gender role socialization using the lens of social learning theory and that discusses certain associated normative developmental traumas using the lens of a gender strain paradigm-informed version of psychoanalytic developmental psychology.

Gender Role Socialization: The Ordeal of Emotion Socialization

Because of what seem to be biologically based differences, boys start out life more emotionally expressive than girls. Haviland and Malatesta (1981), reviewing data from 12 studies (11

of which were of neonates) concluded that male infants are more emotionally reactive and expressive than their female counterparts. Boys remain more emotional than girls at least until 6 months of age. Weinberg (1992) found that 6-month-old boys exhibited "significantly more joy and anger, more positive vocalizations, fussiness, and crying, [and] more gestural signals directed towards the mother . . . than girls" (p. vii). Despite this initial advantage in emotional expressivity, men learn to tune out, suppress, and channel their emotions, whereas the emotion socialization of women encourages their expressivity.

How can we account for this "crossover in emotional expression" (Haviland & Malatesta, 1981, p. 16), such that boys start out more emotional than girls and wind up, as adults, much less so? Using a social learning model, Levant and Kopecky (1995) proposed that four socialization influences result in the suppression and channeling of male emotionality:

1. Mothers work harder to manage their more excitable and emotional male infants (Haviland & Malatesta, 1981; Malatesta, Culver, Tesman, & Shephard, 1989).

2. Fathers take an active interest in their children after the 13th month of life (Lamb, 1977) and, from that point on, socialize their toddler sons and daughters along gender-stereotyped lines (Greif, Alvarez & Ulman, 1981; Lamb, Owen, & Chase-Lansdale, 1979; Schell & Gleason, 1989; Siegal, 1987).

3. Both parents participate in the gender-differentiated development of language for emotions. Parents discourage their son's learning to express vulnerable emotions (such as sadness and fear), and whereas they encourage their daughters to learn to express their vulnerable and caring emotions (such as warmth and affection), they discourage their expression of anger and aggression (Brody & Hall, 1993; Dunn, Bretherton, & Munn, 1987; Fivush, 1989; Fuchs & Thelen, 1988; Greif et al., 1981).

4. Sex-segregated peer groups complete the job. Young girls typically play with one or two other girls, and their play consists of maintaining the relationship and telling each other secrets, thus fostering their learning emotional skills of empathy, emotional self-awareness, and emotional expressivity. In contrast, young boys typically play in larger groups in structured games in which action skills, such as learning to play by the rules, teamwork, stoicism, toughness, and competition, are learned (Lever, 1976; Maccoby, 1990; Paley, 1984).

The suppression and channeling of male emotionality by mothers, fathers, and peer groups has four major consequences:

1. Men develop a form of empathy that I call *action empathy*, which can be defined as the ability to see things from another person's point of view and to predict what they will do (Levant & Kopecky, 1995). On the other hand, men do not develop (as fully as do women) emotional empathy, which can be defined as taking another person's perspective and being able to know how they feel (Brody & Hall, 1993; Eisenberg & Lennon, 1983; Hall, 1978).

2. Men become strangers to their own emotional life, and many develop at least a mild form of alexithymia, which literally means "without words for emotions" (Allen & Haccoun, 1976; Balswick & Avertt, 1977; Brody & Hall, 1993; Levant & Kopecky, 1995; Stapley & Haviland, 1989).

3. Men experience and express more aggression than women (Eagly & Steffen, 1986; Frodi, Macaulay & Thome, 1977) and also tend to transform their vulnerable emotions into anger that

is expressed aggressively (Levant & Kopecky, 1995; Long, 1987).

4. Men shunt their caring emotions through the channel of sexuality (Brooks, 1995; Hudson & Jacot, 1991; Levant & Kopecky, 1995).

Normative Developmental Traumas

There are certain additional traumas that so reliably occur as a part of male development that they must be considered normative (Pollack, 1995). These traumas include the early separation from mother and the unavailability of father.

Separation from mother. The gender role socialization of boys includes the requirement of an early and sharp separation from their mothers during the separation-individuation phase of early childhood. Girls, on the other hand, can prolong the symbiotic attachment with their mothers and avoid experiencing this emotional rupture (Chodorow, 1978). However, for the sake of balance, it should be pointed out that this prolonged attachment may leave some women vulnerable to enmeshment in later relationships.

At an early age, then, boys are given the prize of a sense of themselves as separate individuals; in return, they are required to give up their close attachments to their mothers. Hence, as boys grow up, yearnings for maternal closeness and attachment (which never completely go away) become associated with fears of losing their sense of themselves as separate. Thus, when such yearnings for maternal closeness begin to emerge into awareness, they often bring with them terrifying fears of the loss of the sense of self. Consequently, many adult men feel much safer being alone than being close to someone, a phenomenon that Pollack (1995) termed *defensive autonomy*. This may be experienced as a fear of engulfment, which often motivates the well-known clinical pattern of male distancing in marriage. On the other hand, those yearnings for maternal attachment also get expressed in marriages in the form of husbands' (often unconscious, certainly unacknowledged) dependence on their wives.

Pollack (1995) referred to the early separation of boys from their mothers as the "traumatic abrogation of the holding environment" (p. 41). This loss of the holding environment, which robs boys of the tranquility of childhood, is never acknowledged, much less mourned, leaving men vulnerable to developing what Boszormenyi-Nagy and Ulrich (1981) referred to as *destructive entitlement*—the unconscious belief that people in one's adult life are required to make up for what one didn't get as a child.

Father absence and the father wound. The socialization ordeal for boys also includes the requirement that they identify with their psychologically—if not physically—absent, emotionally unavailable fathers. The stress of this ordeal is further complicated by the fact that when the father is available, he is often very demanding of his son. Part of this has to do with the father feeling that he must take an active role in enforcing his son's compliance with gender stereotypes (Siegal, 1987).

The difficult father-son relationship leaves a deep impression on the man—referred to as the *father wound* in the men's studies literature (Bly, 1990; Keen, 1991; Lee, 1991; Osherson, 1986)—which is manifested in myriad direct and disguised forms of desperately seeking some contact, some closeness with

one's father (or his surrogate), or in being furious at him for his failures. Many men are burdened with feelings that they never knew their fathers, nor how their fathers felt as men, nor if their fathers even liked them, nor if their fathers ever really approved of them.

Implications for Practice

This article introduces the new psychology of men to professional psychologists, reviewing the gender role strain paradigm, masculinity ideology, and the three varieties of male gender role strain. It is my hope that this new work will open up new areas for assessment, intervention, and applied research in order to provide improved psychological services to men that might contribute to the solution of both the contemporary masculinity crisis and the crisis of connection between men and women.

Specifically, the clinician should be aware that some men have learned to measure themselves using the yardstick of traditional masculinity ideology and, as a result, may experience discrepancy-strain in either of two forms: gender role conflict, which has been associated with mental health problems such as anxiety and depression, or gender role stress, which has been associated with cardiovascular reactivity, a risk factor for cardiac illness. Patients suspected of suffering from discrepancy-strain could be assessed using the available instruments (the GRCS-I or the MGRSS). Treatment of discrepancy-strain might include an examination of the standards that the patient holds in measuring himself.

With regard to dysfunction-strain, it has been found that some aspects of traditionally prescribed male role behavior may have negative consequences that can be categorized under the headings of violence, sexual excess, socially irresponsible behaviors, and relationship dysfunctions. If a psychologist's patient presents with one or more of these forms of dysfunction-strain, treatment might include an examination of the patient's manhood ideals and the relationship between these internalized standards and the problematic behavior.

Finally, in regard to trauma-strain, I have already cited work directed toward particular groups of men whose gender role strain is likely to be severe. With regard to the normative trauma of growing up male, there are two new resources. First, psychoeducational techniques have been developed for the treatment of normative male alexithymia (Levant, 1994b) that may be useful in the beginning stages of treatment with men who cannot put their feelings into words. Second, an experience-near, male-empathic form of psychoanalytic psychotherapy has been developed (Pollack, 1995).

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