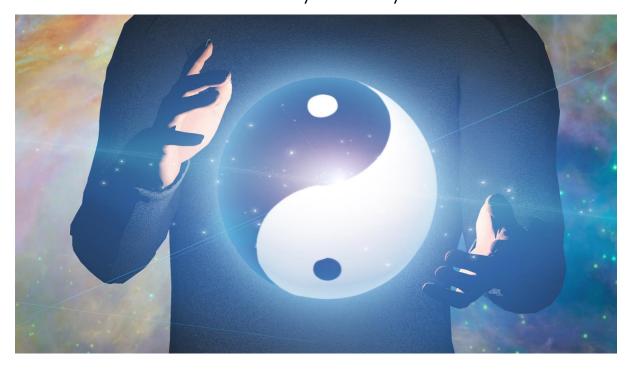
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Masculinity can be good for men's mental health, but thinking it's bad for you is related to bad mental health

Commentary / Research / Masculinity
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Question: Imagine it's a normal day, and you are taking your recycling bin outside. You notice one of your neighbours there. He sees you with your recycling bin and says: "Hello! Masculinity prevents me from recycling and doing other things for the environment". He adds: "In fact, masculinity prevents me from following Covid-19 precautions, stops me talking about my feelings, and makes me feel violent towards women". As you nervously back away towards your home, I want you to ask yourself a question: does

your neighbour have a positive mindset? Take a moment to think about it... Ok.

If you answered yes, then you might be one of the many people who has fallen for the popular view that masculinity is bad for you. That's understandable – it's the narrative we are exposed to in the media, in schools and universities, and many people don't question prevailing narratives.

If you answered 'no' to my question about your neighbour, then you are like the 80% or more of people in my survey who <u>expressed concern</u> that the 'toxic masculinity' narrative might be harmful to boys. In fact it seems likely that a large number of the general public believe <u>masculinity is a positive thing</u>.

Whether you answered yes or no, you might be interested in some new research <u>I presented at a conference recently</u>. I found in a sample of over 2000 men in the UK, the more that men believed – like your neighbour in the scenario above – that masculinity had a negative impact on their behaviour (regarding the environment, covid, expressing feelings, and violence to women) the less positive their mindset was, to a statistically significant degree. Being low on mental positivity is known to be <u>correlated</u> <u>with thoughts of suicide</u>, so this finding is concerning.

'But', you might say, 'this only one or two studies. There must be loads of studies proving that masculinity makes people do bad things'. Okay then, I have another question for you:

Let's say I describe to you a neighbour of mine who is independent, active, competitive, makes decisions easily, never gives up easily, is self-confident, feels superior and stands up well under pressure. My question: is my neighbour more likely to be depressed, or less likely to be depressed? If you answered 'less likely to be depressed', you would be right. And 40 years of research would back you up on this.

"...a review of 58 research studies conducted between 1978 and 2021 found that masculinity [...] is, in fact, linked to lower depression".

That's because a <u>review of 58 research studies</u> conducted between 1978 and 2021 found that masculinity – as defined in my neighbour's characteristics – is, in fact, linked to lower depression. This might be surprising, given the huge amount of negative press about masculinity in recent years.

According to the review (a meta-analysis) of 58 papers, masculinity is protective against depression. This was true to a statistically significant degree, and equally true for men and women. The study also looked at other aspects of gender, such as femininity (see below).

The definition of masculinity is key

The authors of the review, Jingyuan Lin and her associates in China, Boston and Amsterdam, focused mainly on studies which measured masculinity with the most commonly used questionnaires, the Bem Sex-Role Inventory (BSRI) and the Personal Attributes Questionnaire (PAQ). To give you some idea of what these instruments measure, the masculine traits on the PAQ were defined as: being independent, active, competitive, makes decisions easily, never gives up easily, self confident, feels superior and stands up well under pressure.

These measures are in stark contrast to the more recent constructions of masculinity that include negative traits in their definitions. Indeed some academics have shifted definitions of masculinity from being something normal to something deviant. One example is the Man Box, which incorporates being violent, homophobic and misogynistic into their definition of masculinity. This and other similarly negative instruments (e.g. the Male Role Norms Inventory (MRNI)) were not included in the review of 58 papers, because they were less commonly used than the BSRI and PAQ. As a side note, the importance of realistically defining the things you are measuring in research is a key – but often overlooked – issue in masculinity research, because negative definitions of masculinity tend to produce findings that give the unrealistic impression that men and masculinity are negatives.

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confident masculine outlook backed up with the social support and help-seeking related to a sensitive feminine outlook."

Better together: masculinity and femininity

The link between femininity and depression was also measured in the review. The <u>BSRI defines femininity</u> as being emotional, able to devote self to others, gentle, helpful, kind, aware of feelings of others, understanding of others and warm. The review found a weak but statistically significant protective association between depression and femininity for women in general, and for male and female students.

The authors of the review offer several explanations for the finding regarding the protective effect of femininity in male students. The most likely reason was those who scored high in femininity also scored high in masculinity, because this combination offered the protection of a confident masculine outlook backed up with the social support and help-seeking related to a sensitive feminine outlook. In contrast, people who scored low in both masculinity and femininity (so-called "undifferentiated") were at higher risk of developing depression.

If you read the review, you might find some of the definitions of terms confusing. For example, the review refers to people who score high in both masculinity and femininity as being 'androgenous', a term which has connotations of sexually ambiguous appearance or lifestyle. One of their conclusions was that "androgynous individuals reported the lowest level of depression" leading the authors to suggest that schools should "promote and encourage androgynous gender role [traits]". The idea of promoting androgeny in schools might be triggering for those already concerned about <u>Drag Queen Story Time</u> and similar initiatives in schools, as well as the fact that mental health problems are relatively high in people who identify as transgender, regardless of their stage of transition. I think what the authors were trying to say was that it would be good if traditionally masculine traits (e.g. being active and decisive) and traditionally feminine traits (e.g. being sympathetic and understanding) were promoted in schools and elsewhere to protect individuals against depression.

"With unflattering views of masculinity coming from places such as the World Health Organisation and the <u>United Nations</u>,

it's understandable that some men – perhaps lots of men – will take these ideas on board to some degree".

The findings of the review are of potential benefit to therapists, teachers and policy makers, and might allow them to design interventions that will have a positive impact on men, women and children. However a weakness of the review is that although the data in this study are very interesting, some of the interpretations of the data were derived from the <u>deficit model of masculinity</u>, an overly-negative view leading to some unlikely explanations. For example, the authors note that over the years the protective effect of masculinity against depression has lessened. They speculate on various reasons for this, but they omit the most obvious one: that increasing social pressure on men to be less masculine has taken an important coping mechanism away from men.

Another limitation of the review is the problem that impacts so much of research into masculinity – the preponderance of student samples and paucity of middle-aged and older participants. This situation means that findings from masculinity research reflect the masculinity of men in their early 20s, perhaps enjoying some wild years at university. Because research with mature men tends to find a link between good mental health and traditional masculinity, the bulk of masculinity research might be of little relevance to men in their 30s and older.

i.e. men might typically benefit on a mix that emphasises the masculine traits more than feminine, and *vice versa*. Of course other factors will have influence too, such as individual differences and cultural factors.

With negative views of masculinity coming from all sorts of places, including the World Health Organisation and the United Nations, it's understandable that some men – perhaps lots of men – will take these ideas on board to some degree, and – it is reasonable to speculate – potentially experience a drop in mental positivity and self-esteem as a result . It is therefore very welcome news that the American Psychological Association (APA) Division 51 (Society for the Psychological Study of Men and Masculinities) appears to be moderating it's view of masculinity, which I hope will influence the many organisations who look to the APA for guidance.

In conclusion, in recent decades masculinity research has been plagued by negative definitions of masculinity, which tend to cast men in a negative light. However there is potentially a mental health risk for men who start believing that masculinity is a bad thing, and we urgently need research on the extent of this risk. In the meantime, for those who insist that masculinity is bad for your health, please be aware that 40 years of research disagrees with that view.

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