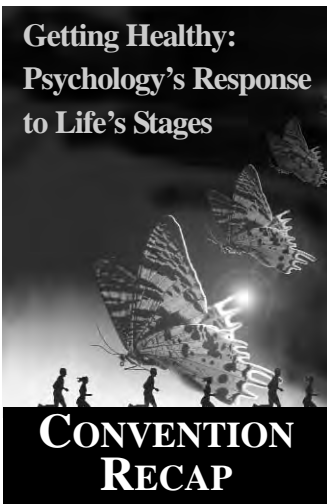


Men and Boys:

What Happened to Emotions?

Getting Healthy:
Psychology's Response
to Life's Stages



CONVENTION RECAP

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What does it mean
to be a man
today?

That question is one of the most persistent unresolved issues in the lives of many men.

Raised to be like their fathers, they were mandated to become the good provider for their families. They were to be strong and silent, and were discouraged from expressing vulnerable and tender emotions. They were required to put a sharp edge around their masculinity by avoiding anything that hinted of the feminine. Unlike their sisters, they received little, if any training in nurturing others, and in being sensitive to their needs and empathic with their voice.

On the other hand, they received lots of training in problem-solving, logical thinking, risk-taking, staying calm in the face of danger, and assertion and aggression. Finally, they were required at an early age to renounce their dependence on their mothers and accept the pale substitute of their psychologically, if not physically, absent fathers.

Many adult men
have had the

experience of attempting to fulfill the requirements of the masculine mandate in the midst of a rising crescendo of criticism. They feel that they're being told that what they have been trying to accomplish is irrelevant to today's world. Since women work and now earn their own living, there is little need for the "Good Provider." Society no longer seems to value, or even recognize, the tradi-

tional male way of demonstrating care, through taking care of family and friends, looking out for them, solving their problems, and being one who can be counted on to be there when needed.

Instead, men are asked to take on roles and show care in ways that violate the traditional male code and require skills that they do not have, such as nurturing children, revealing weakness, and expressing their most intimate feelings.

For many men, the net result is a loss of self-esteem and an unnerving sense of uncertainty about what it means to be a man.

We are in the midst of a "crisis of masculinity." Many men need psychological services, but few avail themselves of them.

While more men are entering therapy, we must remember that the process was originally developed to treat women. Hence, it is not surprising that therapy is often complicated by male traits, such as difficulties in identifying and speaking about emotional states, admitting vulnerability, and being comfortable with emotional inti-

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to assume that a staff member who comes from the same culture is necessarily an expert about the culture, despite the advantages mentioned above. Blending cultural issues with clinical practice requires the prerequisite training in mental health, as well as the study of one's own culture, the current culture, and the integration of the two. From observation, staff that are immigrants, especially new ones, work comfortably with patients as language fluency, cultural familiarity, and similarity in past experience helps with daily conversation and sharing of experiences during group therapy.

A beautiful example during group is the discovery that some of the common songs everybody knew were Communist

revolutionary songs that all were required to learn during the Cultural Revolution. Singing them with staff from the People's Republic became a nostalgic experience far distanced from politics.

The disadvantage of Chinese-speaking staff, especially new immigrants, is seen in the adjustment struggle with everyday function on the unit. While interpersonal relationships with American staff may not be hampered, comprehension of social rules and communication sometimes requires "extra work" for staff to fully understand the intended communication. Recent examples include Chinese staff handling patient problems privately, without documenting them in the logbook, because face-saving is important in the culture. In a psychiatric

unit, however, much of the communication between shifts occurs through the logbook. Failure to document information about patient problems occurred, not so much because staff tried to hide it, but because they handled it in a way that would not cause someone to lose face.

Also, many new immigrants do not study their own culture academically and from a perspective outside the culture. Unless one is trained in university classes or has attended conferences and seminars on cross-cultural issues, immigrants are often oblivious that cultural issues exist while, ironically, they run into cultural misunderstanding daily. However, when cross-cultural issues are pointed out, many immigrant staff readily comprehend, identify, and agree that they exist. A primary reason for the lack of identification of cross-cultural issues is that

new immigrants have not had to think about being from a different culture until they have arrived in the United States. To reflect on their personal cultural adjustments to the new culture is immediately relevant, but time is needed before one can fully be in the position to comment about one's own culture in the context of another culture, as immigrants have so much to integrate.

The parallel process between patient and staff member, in terms of cultural adjustment, is ongoing. The monolingual Chinese unit is an interesting context in which to study such a process. The current observations are by no means exhaustive or complete. The staff (both English- and Chinese-speaking) continues to learn about working with monolingual Chinese patients.

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macy. However, other male traits can be utilized to facilitate therapy, such as the male predilection for cognition, and men's willingness to take action.

At the NYSPA Convention, we discussed how the male role socialization process impacts many men's ability to identify and discuss

their emotions, introducing the idea of "normative male alexithymia", a milder form of alexithymia (which means literally, "without words for emotions") which is fairly widespread.

I offered some guidelines for the assessment of normative alexithymia in male patients, then pre-

sented a psychoeducational program for improving men's ability to identify and discuss emotional states and to find the vulnerable emotions underneath their anger. This program is useful at the beginning stages of therapy for many men, because it enables them to develop the skills of emotional self-awareness and emotional expressivity that will empower them to wrestle

with the deeper issues.

I welcome your thoughts on these issues (Rlevant@aol.com).

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