ORIGINAL PAPER

A Community Psychology of Men and Masculinity: Historical and Conceptual Review

Eric S. Mankowski · Kenneth I. Maton

Abstract This paper introduces the special section by presenting a historical and conceptual review of theory and research on the psychology of men and masculinity and then introducing the section's papers. Men have power because of their gender, but differ in access to power based on other individual characteristics such as social class, income, education, ethnicity, sexual orientation, or physical strength. Men typically have been studied as generic rather than gendered beings in psychology. In contrast, a gendered analysis of men highlights the ways in which men's experience, masculinity, and behavior contribute to health and social problems and to resources commonly addressed by community psychologists. Our gendered analysis suggests ways of working with men in group, organizational, and community settings to create positive individual and social change. Crucial to this analysis is the paradox that enacting masculinity both privileges and damages men. A second paradox stems from men having power as a group over women while individual men feel powerless or victimized by women as a group. The papers in this volume illustrate key themes of our historical and conceptual review through studies of adolescent and adult men as fathers, patients, partner abusers, support group participants and community members, and through examination of the impact of their gendered identities and behavior on health, well being, and justice.

E. S. Mankowski (✉)
Department of Psychology, Portland State University,
P.O. Box 751, Portland, OR 97207-0751, USA
e-mail: mankowskie@pdx.edu

K. I. Maton
Department of Psychology, University of Maryland Baltimore
County, 1000 Hilltop Circle, Baltimore, MD 21250, USA
e-mail: maton@umbc.edu

This special section of the *American Journal of Community Psychology* brings together scholarship on men and masculinity from multiple disciplinary perspectives. Our aim is to highlight how analyses of men's gender and masculinity can improve community psychologists' ability to promote wellness, health and social justice. For hundreds of years, masculinity has been an influential and dynamic cultural force in American life (Kimmel 1996), but until recently the construct has been largely invisible and taken for granted within the social sciences. Over the past three decades, spurred by the changes women have made in their lives as part of second wave feminism, masculinity has undergone substantial critical analysis across academic disciplinary perspectives and other sectors of society. As a result, many social, health, and environmental problems now are understood in terms of definitions and practices associated with masculinity, and men increasingly are being engaged by global organizations in efforts to address these problems, especially violence against women (Lang 2003; World Health Organization 2007).

Definitions of masculinity in US popular culture (Kimmel 1996) and academic theories about its origin and function (Kilmartin 2006) have shifted over time. Generally speaking, psychologists first conceived masculinity as a static, biologically based individual personality trait (Terman and Miles 1936), then more commonly as a social role (Pleck 1981), and most recently as a dynamic, socially constructed and institutionally backed form of power, independent of an individual's sex (Connell and Messerschmidt 2005). Supporting this latter definition, various expressions and forms of masculinity (or "masculinities") have been identified and described in specific communities

and subcultures (Kimmel and Aronson 2003). Rather than being a static and singular trait, diverse masculinities develop as contextually specific responses to local conditions, in part because the dominant, hegemonic (i.e., traditional) form of masculinity cannot be enacted by individuals who lack the necessary resources (e.g., money, appearance).

But despite differences in theories about its origin and function, traditional masculinity is commonly associated with stress and conflict; poor health, coping and relationship quality; and violence (Courtenay 2000; Lee and Owens 2002). Given these associations, we believe that many social and health problems (e.g., sexual and other forms of violence, substance abuse, HIV/AIDS, unemployment) could be transformed by challenging the destructive qualities of masculinity or strengthening the positive aspects of masculinity in appropriate contexts, through interventions at the level of the individual, community, and society.

In this paper, we provide a brief historical review and conceptual analysis of the literature on men's gender and masculinity—broadly in the social sciences and specifically in community psychology. Our analysis addresses four main themes: men as gendered beings, the privilege and damage of being a masculine man, men as a privileged group, and men's power and subjective powerlessness. The second and fourth themes are described as paradoxes that have created difficulty in efforts to analyze and understand men's gender and masculinity. Following this analysis and review, we introduce the set of papers in this special section. The papers employ a range of conceptual frameworks, epistemologies, and methodologies in their research with diverse populations of men who differ in their access to male privilege and power, their subjective experience of being male, and in how they enact masculine identities and ideologies.

Historical and Conceptual Background of Men and Masculinity

Men as Gendered Beings

Feminist analysis in community psychology has raised awareness of gender as a crucial dimension of power (Bond and Mulvey 2000), but an analysis of men's gender largely is missing from community psychology's efforts to understand wellness, oppression, and social systems change. Men are largely understood as generic human beings, rather then gendered beings (Kimmel 2000). Many of the social problems and phenomena that community psychologists have addressed—HIV/AIDS, interpersonal violence, mental health, the structure and form of social

support and helping—have been analyzed without sufficient attention to how masculinity and men's gender shapes their behavior or experience.

Recent research demonstrates, however, that men's gender contributes to their high-risk sexual behavior (Barker and Ricardo 2005), their involvement in parenting (Marsiglio and Pleck 2005), their violence toward intimate partners (Anderson 2005), and their abuse of alcohol (McCreary et al. 1998). Underlying each of these social problems are social expectations and norms, supported by social and organizational systems and practices that expect boys and men to reject or avoid anything stereotypically feminine, to be tough and aggressive, suppress emotions (other than anger), distance themselves emotionally and physically from other men, and strive toward competition, success and power (Brannon 1976; O'Neil et al. 1986). In particular, the anti-femininity component of masculinity and the resulting homophobia it produces form the core of what traditional masculinity means (Kimmel 1994). Given the value placed on a strengths based perspective in community psychology and our commitment to prevention and empowerment, it is also important to consider what resources men have that could be developed in efforts to address these challenges. Men possess many qualities that likely facilitate positive adaption in certain contexts (e.g., a "can do" attitude, perseverance in the face of challenge, decisiveness, and analytic capacity), although these general human qualities are stereotyped as representing masculinity in particular (Levant 2008).

The Privilege and Damage of Being a Masculine Man

Paradoxically, men both benefit from the status of being male and are harmed by masculine socialization and the results of many stereotypical masculine behaviors. This paradox confounds simplistic analyses of men and masculinity as only either negative or positive. On the one hand, men as a group have significant economic and social privilege over women as a group. For example, the powerful and influential positions in government, business, and media sectors historically have been held predominantly by men. Many individual men benefit from this power structure, especially white, highly formally educated, heterosexual men.

At the same time, men and women are damaged both as a group and individually by this power structure and the social processes necessary for its maintenance. That is, men are damaged by masculine socialization and men also cause damage to themselves and others as a result of behaviors resulting from that socialization (Miller and Bell 1996). Characteristics stereotypically associated with masculinity such as competition, stoicism, aggression, and homophobia are implicated in a number of social and

health problems including intimate partner violence, homicide, environmental degradation, unemployment, aggressive driving (Krahé and Fenske 2002), and heart disease (Helgeson 1995). During the last 30 years, a sizable body of theory and research has accumulated on men that takes their gender into account. This research demonstrates that men have poorer attainment of quality of life than women—in physical and mental health, in safety, in education. Many of these outcomes have been linked not to gender per se, but to the extent to which individual men endorse beliefs and behaviors that define traditional or hegemonic masculinity. The research does not simply compare outcomes for men and women but rather measures differences among men in traditional masculinity, which is characterized by anti-femininity, restricted emotions (except anger), and a focus on success, power, achievement, toughness and aggression (Brannon 1976; O'Neil et al. 1986). Men who more strongly endorse or are more conflicted about these masculinity expectations experience decreased well being and increased problem behaviors (see O'Neil 2008 for a review), including abusing alcohol and other substances (McCreary et al. 1998), feeling anxiety and depression (Sharpe and Heppner 1991), perpetrating violence (Moore and Stuart 2005), using controlling behaviors with relationship partners (Mahalik et al. 2005), using aggressive and projective psychological defenses during conflicts (Mahalik et al. 1998), and not seeking physical and mental health care (Addis and Mahalik 2003).

Because of this association between masculinity and health-related and social behaviors, men as a group also experience many health and social problems more commonly than women as a group. Men in the United States now live on average 5.2 fewer years than women (Kung et al. 2008). Two generations ago, the difference was only 2 years (Kilmartin 2006). Ethnic group differences exist, such that, for example, life expectancy for African American men is 6.2 fewer years than for white men (Kung et al. 2008). Men represent more than 80% of the perpetrators of violent crime and are also the victims of the majority of that violence (Federal Bureau of Investigation 2007; US Bureau of Justice Statistics 2008). Men have a 27% greater rate of high school drop out than women (National Center for Educational Statistics 2007). Since 1982, fewer men than women enroll in and graduate from college, reversing a longstanding structural gender difference (DiPrete and Buchmann 2006). Completed suicide rates are more than 4 times greater for men than women (Centers for Disease Control and Prevention 2005).

Researchers have developed various constructs to describe the reality that men are both privileged and hurt as men. For example, O'Neil et al. (1986) describe the "gender role conflicts" that men experience between who they are as human beings and what gender socialization

conditions them to become. Men who attempt to fulfill the expectations of the male gender role, which are both restrictive (e.g., "big boys don't cry") and contradictory (e.g., be a successful economic provider but also an involved, sensitive father) experience high levels of role strain (Pleck 1981), role stress (Eisler 1995), and role conflict (O'Neil et al. 1986). Analyses of men as gendered beings and quality of life statistics suggest that great costs are associated with fulfilling traditional gender role expectations. Consequently, men's quality of life and the quality of life of people with whom they interact might be improved through at least three different kinds of interventions addressing masculinity. First, the definitions, norms and ideals for various forms of masculinity could be transformed into more healthy forms. Second, interventions could also increase enactment of aspects of masculinity specifically in contexts or situations where these would facilitate adaptation or health, for example, increasing men's sense of responsibility during sex by associating condom use with strength and masculinity (see DiIorio et al. 2007). Alternatively, a third type of intervention would attempt to end altogether the concept of manhood and masculinity (Stoltenberg 1989; Jensen 2007)—that is, to degender society (Lorber 2000)—as a way of transforming the unequal distribution of power on which the privilege of masculinity is based.

While the associations between masculinity and poor social and health outcomes are not often addressed in our work as community psychologists, several conceptual frameworks central to the field including empowerment (Riger 1993) and oppression and liberation (Prilleltensky 2003) incorporate an analysis of gender and masculinity. These suggest opportunities for continued, deeper analysis of masculinities to further our work on social problems. The relatively substantial analyses of masculinity in other subfields of psychology tend to emphasize individual level analyses and approaches to change (e.g., male attuned psychotherapy; see Pollack and Levant 1998) over contextual analysis focused on the influence of organizational and institutional forces (Melluish and Bulmer 1999). Community psychologists can build on this work using our distinct values, conceptual frameworks, and approaches, in hopes of thereby affecting the social and health problems, and building upon the positive potential, associated with masculinity.

Given this background, it is reasonable to ask why community psychologists have to date not developed more fully an analysis of masculinity. We identify three possible reasons. First, masculinity has been conceptualized most often as an individual personality variable in psychology, with less attention to how groups, organizations and institutions create and are reflections of gender processes. Second, male community psychologists, as members of a

privileged group in society, may have difficulty in turning a critical eye inward toward masculinity and its privileges. Third, feminist community psychologists have advanced a critical analysis of gender and the way in which gendered power has affected women, but have not widely pursued a detailed analysis of masculinity in this work.

Men as a Privileged Group

By fulfilling the social expectations for the male role, men exercise power over women and other men who are not able to or choose not to enact hegemonic masculinity (Kivel 1998). Men use power and control over themselves to fulfill these expectations and against other boys and men to enforce the expectations. The oppressive dynamic of these expectations and their enforcement has been likened to a tight container ("Act Like a Man Box"; Kivel 1998) inside which men must either trap themselves or, in violating expectations, risk being the target of threats, bullying, and other forms of violence.

As Jackson Katz (2000) and others have pointed out, one of the ways in which privilege functions is to deflect analysis onto those with less power or to obscure from view those with more power. When we think of race, for example, we think of people of color; when we think of sexual orientation, we think of gays and lesbians; when we think of gender, we hear *female*, not male. In the realm of scholarly research, this means that scientists frame questions about women, people of color, gay and lesbians, and poor people, rather than men, white people, heterosexuals, and wealthy persons. One manifestation of this invisibility is that social problems linked to masculinity are analyzed in gender-neutral terms, for example, when "random school shootings" are named as a social problem, popular media accounts fail to discuss how *males* perpetrated all of the shootings (1982–2001), instead describing them in gender-neutral terms such as "teen violence" or "gang violence", and failing to note that most of the boys had been routinely teased or bullied about their manhood (Kimmel and Mahler 2003).

This blindness applies not only to popular media accounts and constructions of social problems, but also to our own field's scholarly work. Very little research or theory in our field focuses on gendered dimensions of oppression. Theory and research that does examine the role of gender often focuses exclusively on women as victims or on problems perceived to be theirs, for example, rape or domestic violence, rather than on how men's subjectivity and behavior relate to these problems. In our analyses of gender-related behavior, we tend still to focus on the oppressed or victim, rather than the oppressor or system of oppression (Ryan 1971). Our intervention, prevention and empowerment efforts are aimed mostly at women,

minorities, or youth, but not on men. Theory on the functioning of oppressive systems (Prilleltensky 2003) has developed, but surprisingly given the consciousness of our field, we have not pursued the logical extension of this framework into research or action that addresses how men's gender affects those systems. One function of oppressive systems is to obscure from analytic view the privilege of groups benefitting from the system. Turning attention to this privilege should lead us to engage men, not only women, in solving social and health problems associated with masculinity, such as male violence (World Health Organization 2007).

Men's Power and Subjective Powerlessness

A second paradox that routinely confounds the analysis of masculinity is that men hold power in society because of their gender but often feel powerless (Kaufman 1994). Consequently, many men express anger, confusion, or disbelief in response to analyses of their privilege, often defining their power in terms relative to women.[1] Individual men's experience of powerlessness likely stems in part from a lack of access to power that is organized through systems and structures other than gender, such as race, class, sexuality and education. As a result, many individual men possess relatively little ability to control and determine their life conditions. Viewed from this perspective, these men may justly strive for greater empowerment in their lives, even while they perceive being victims, in some cases, of women's power and equality. For other men who are privileged by resources and power they access because of additional characteristics (e.g., being white, wealthy, educated, straight), an analysis of the dynamics of oppressive systems can illuminate their paradoxical experience of powerlessness.

Systems of oppression are more complex than suggested by a simple zero sum model in which oppressors and victims struggle against each other for power. In addition to the harms that less powerful groups experience, power also damages those who consolidate, use and in part benefit from it (New 2001). There are costs to gaining and maintaining power; one cost is that those in power must do violence to themselves in order to maintain a position of privilege. In Kivel's terms, by fitting into the Act Like a Man Box, men exert power and control over themselves,

---

[1] More generally, men may tend to define power more in comparison to others than as shared with others (i.e., 'power over' instead of 'power with'), and as an external rather than internal capacity. Social psychology research on attribution and on social comparison (Olson et al. 1986) suggests that feelings of powerlessness may be greater when making external attributions and relative comparisons. This may help explain why men use violence more than women.

Table 1 Topics and problems for research and action suggested by a community psychology analysis of men and masculinity

Design, implementation, and evaluation of batterer intervention programs
Empowering alternatives to the criminal justice system
Community based programs for fatherhood involvement
Men's support groups as an alternative to dyadic counseling or therapy
Community based HIV interventions for men's high risk behavior
Job training programs' impact on men's identity and health
Impact of rape prevention education on men's behavior
Self help/mutual aid groups for addiction, substance abuse, prostate cancer, and other diseases
Health promotion and prevention among boys and men
Cultural transformation initiatives related to the meaning of masculinity

denying expression to their whole being. Kaufman (1985) believes that men's violence is maintained by the interdependency among three forms of violence—violence to self, violence to other men, and violence to women. Each form of violence supports and perpetuates the other two. Denial of emotion as a form of violence against self-expression contributes to men's violence against women and other men by rendering men less empathetic and blunting their sensitivity to others' needs and experiences. In summarizing male gender role socialization, Pleck (1981) argues that either men are hurt by adhering to the expectations of masculinity, or are hurt by others should they fail to fulfill the expectations.

Community Psychology Research and Action Related to Masculinity

Even after roughly 30 years of theory and research focusing on men's gender and masculinity in the social sciences, community-based interventions guided by this work are too rare. While clinical (Liu 2005) and counseling psychology (Wester 2008) have made significant strides toward incorporating analysis of men's gender into their training programs, community psychology lags behind in utilizing this knowledge. Commonly taking the individual as the unit of analysis, clinicians and counselors have attempted to transform therapy so that it better fits the needs and perspectives of some men who internalized traditional masculine socialization. However, the needs of other men as well as those who cannot or choose not to seek help individually largely cannot be met by these changes. Nor will the system of gender based oppression that creates traditional masculinity be transformed by first order changes.

A community psychology that addresses men's gender and masculinity as it contributes to many social and health problems is sorely needed. With a gendered analysis of male behavior, new topics, problems and opportunities for study and intervention become apparent. Examples of possible areas for research and action suggested by this

analysis are listed in Table 1. Additional areas can be identified by considering how masculinity functions and impacts individuals within any mediating structure (e.g., school, workplace, religious organizations) and how these functions and impacts differ depending on the diverse characteristics and life contexts of individual men.

In pursuing these areas of research and action, we can build on the foundation of the modest amount of existing research and intervention within the field of community psychology that addresses men as gendered beings. To synthesize this work, we conducted a literature search using the PsycINFO database for all studies and papers indexed in community psychology journals by the keywords masculinity, masculinities, or manhood, or studies of men in those journals that considered gender substantially in their analyses.[2] A total of 17 papers were identified (see Table 2). Notably, much of this work has occurred outside the US and been conducted with marginalized groups of men—the studies address men who have sex with men, high risk sexual practices among men in India, male rape victims in the UK, high academically achieving African American males, male students with intellectual disability, depression among fathers, drug use among male youth, unemployed men in the UK, men in batterer intervention programs in New Zealand, themes of masculinity among adolescent males in South Africa, and manhood and sociopolitical development among African American youth.

Rare in its direct and extensive investigation of the construction of masculinity, Watts (1993) together with colleagues (Watts et al. 1999) developed and evaluated a community based program to facilitate positive manhood and sociopolitical development in African American youth. Additional work by community psychologists addressing masculinity also has been published outside the field's journals, for example, studies of men's support groups and

---

[2] Because community psychologists often publish in public health journals, an additional search was conducted for these key words in 15 public health journals. Only two additional articles were identified, one by an anthropologist and one by a doctor of public health.

Table 2 Studies of men and masculinity in community psychology

Study	Research topic/question	Participants/setting	Data collection/ analysis methods	Intervention or programming	Key findings or implications
D'Augelli et al. (2002)	How is sexual orientation development and adjustment to sexual orientation related to well-being among rural men who have sex with men?	100 rural men, convenience sample from social gatherings and a gay pride festival	Survey	No	Low self-esteem and lack of openness with family and friends were the most important predictors of men's adjustment to their sexual orientation. Men who were lifelong rural residents had higher internalized homophobia than men who had in-migrated from urban locations.
Doherty and Anderson (2004)	How do beliefs about masculinity and sexual orientation influence accounts about male victims of rape?	30 male-female acquainted dyads at a university in the UK	Discourse analysis of conversations about a rape vignette	No	Rape was discussed as worse for heterosexual male victims than for gay males or women, because it represents a deviation from normative heterosexual practice, in which sexuality is phallocentric and symbolic of power.
Ghee et al. (1997)	Does programming to address African American boys' cultural identity boost academic motivation?	100 African American male youth participating in the program	Survey	Yes, "RAAMUS Academy" (Responsible African-American Men United in Spirit)	Knowledge of black history, academic behaviors, and self esteem increased during the program, and social influence from others and social recreation decreased. Parents of participating youth also evaluated the program positively.
Haj-Yahia (2005)	How are masculinity ideologies related to beliefs about intimate partner violence?	349 Jordanian men	Survey	No	Endorsement of patriarchy predicated beliefs justifying partner abuse and blaming the victim, over and above sexist attitudes toward women.
Hoard and Anderson (2004)	How are stress, social support and geography related to men's depression?	127 poor, non- custodial fathers	Interview	Yes, "Maryland Young Fathers/ Responsible Fathers" Program	Rural fathers reported significantly more depressive symptomatology than urban fathers, despite similar levels of life stress.
Kulis et al. (2003)	What is the relationship between masculinity and drug use?	1,351 middle school boys, predominantly Mexican American, living in the U.S. Southwest	Survey	No	Aggressive (but not assertive) masculinity was generally associated with higher drug use. Less acculturated Latino students reported lower aggressive masculinity scores than non-Latinos.
Lloyd et al. (2004)	What are the perceptions of young black males who were diagnosed with psychotic disorders concerning male roles and identity?	6 black males	Focus group	Yes, "Kick 'n' On"	Findings informed the development of a group program to educate members about male role expectations, socially acceptable ways of interacting with young women, and women's expectations in relationships.

Table 2 continued

Study	Research topic/question	Participants/setting	Data collection/ analysis methods	Intervention or programming	Key findings or implications
Luyt (2003)	How are contemporary masculinities socially constructed in South Africa?	77 ethnically diverse South African men	Focus groups	No	Seven metaphorical themes describe constructions of masculinity in modern South African: (1) Masculine control: 'It's basically a conquest thing', (2) Masculine (un)emotionality: 'Having a lion's heart', (3) Masculine physicality and toughness: 'The iron man', (4) Masculine competition: 'It's a matter of war', (5) Masculine success: 'Flying high', (6) Masculine (hetero)sexuality: 'The steam engine within', (7) Masculine responsibility: 'Child-minding the world'.
McDonald et al. (2007)	How do cultural narratives about learning disabilities relate to gender in the lives of young men?	6 men in US community colleges	Interviews and focus groups	No	The consequences of disability were understood as unique for each gender. Men experienced disability as detracting from the perceived benefits of masculinity.
Melluish and Bulmer (1999)	Description of a grassroots mental health action project	Unemployed men in the UK	Unknown	Yes, "Men's Advice Network"	An initiative aimed at political/social consciousness building assisted men coping with unemployment and perceived threats to their masculine identities. Group and social action was more valued over individual introspection to address men's distress.
Morgan and O'Neill (2001)	How do abusive men construction their violence against female partners before and after an intervention program?	13 men in a batterer intervention program in New Zealand	Discourse analysis of pre- and post-program interviews	Yes, "Men for Non-Violence" Program	Many of the men's narrative accounts of violence perpetration changed during the program, as they drew on the narratives introduced in the program that emphasized ownership and responsibility for their violence (accountability).

Table 2 continued

Study	Research topic/question	Participants/setting	Data collection/ analysis methods	Intervention or programming	Key findings or implications
O'Neill and Morgan (2001)	How is an intervention program for abusive men implemented?	Men, staff and researchers of a batterer intervention program	Discourse analysis of participant observation notes (9 three hour sessions)	Yes, "Men for Non-Violence" Program	Various social discourses were present in the non-violence intervention program for partner-abusive men. Some discourses appear to compete or contradict each other, limiting the program's effectiveness and potentially providing new discourses for men to use in controlling partners.
Schensul et al. (2006)	How is masculinity related to HIV/STD risk and prevention strategies in India?	Married, poor urban men residing in India	Inter-disciplinary, collaborative research to action	Yes, men participating in RISHTA, (Research and Intervention in Sexual Health: Theory to Action)	Men's high risk sex behaviors were related to the construction and validation of their sense of masculine control and potency. HIV prevention activities potentially present a perceived threat to cultural expectations about being a "real man", as men linked performance issues, masculinity, risky sex and complicated primary relationships with wives or other sex partners in their narratives about sexual health problems
Stevenson (1997)	How is anger and wellness related to racial socialization beliefs in African American male youth?	208 male African-American adolescents	Survey	No	Racial socialization beliefs were related to psychosocial variables including anger, depression, religiosity, fear and social support. Proactive socialization beliefs were associated with greater religiosity and anger control and less anger expression than those with protective or adaptive racial socialization beliefs. Risk and resilience cannot be clearly distinguished in African American males' strategies for coping with racism.
Watts (1993)	What area the key themes of community based manhood development programs for African-American males?	40 leaders of manhood development organizations	Interviews	No	Six themes characterized the programs' mission and objectives: the importance of family/parenting, race and cultural socialization including rites of passage, the Black community and systems, behavior, especially at school, psychosocial development including concerns about women and self-esteem, and spirituality. Concepts of prevention and 'giving back' were distinct from scholars' and suggest unique avenues of manhood development.

Table 2 continued

Study	Research topic/question	Participants/setting	Data collection/analysis methods	Intervention or programming	Key findings or implications
Watts et al. (1999)	Is critical consciousness enhanced by participation in the Young Warriors program?	32 U.S. high school sophomore boys	Coding of taped program sessions	Yes, 8-week "Young Warriors" Program	Use of rap music and video facilitated development of critical consciousness in male adolescents participating in the Young Warriors program.
Willott and Griffin (2004)	How are masculinity and the breadwinner role constructed and maintained among unemployed men?	38 working class men in the UK	Focus group discussions	Yes, 2-week mandatory course "Re-Start" for men registered as unemployed for more than 2 years	Men continued to construct their gender identity mainly around the breadwinner role, even after a long period of unemployment, because of lack of availability of alternative social constructions of masculinity that reflect contemporary family structures and employment opportunities.

Note: Studies were identified in PsycINFO and Google Scholar using the search terms "masculinity" and "manhood" within all community psychology research and action journals that have either "community psychology" or "prevention and intervention" in the title

communities (Mankowski 2000; Mankowski et al. 2000; Maton 2000; Stein and Mankowski 2004; Reddin and Sonn 2003), batterer intervention programs (Mankowski et al. 2002; Robertson 1999; Silvergleid and Mankowski 2006), homophobic anger (Parrott et al. 2008) and HIV prevention (Harper 2007). Interestingly, the most developed bodies of community-based theory and research that undertake an analysis of masculinity in addressing social and health problems are done by sociologists or criminologists, for example, those studying intimate partner violence (Anderson and Umberson 2001) and HIV prevention (e.g., Dunkle and Jewkes 2007). In working with men as groups rather than individually, community psychologists can examine better the processes by which masculinity is socially constructed and enacted and develop resources that help men interrupt their destructive behaviors or promote healthy expressions of masculinity.

Papers in the Special Section

With this historical and conceptual review as background, we now turn to the seven papers and the commentary in this special section. First, we describe the diversity of proposals we received for the special section, and then briefly summarize the papers and commentary. We then make several observations about the papers as a group, including ways in which they do, and do not, reflect the four themes described in our review of the literature on men and masculinity. We conclude with several additional comments about the papers and future directions and challenges for research and action in this area.

We received 36 abstracts in response to the call for papers, and were pleased that they represented a diversity of ethnic and geographic groups of men, researchers and research methodologies, and community settings. Specifically, the abstracts focused substantially on one or more of the following: African American men (50%), Latinos (14%), and European American men (14%) in the United States, and men in Canada (6%), India (6%), Italy (3%), and New Zealand (3%). It is interesting to note in the case of abstracts focused on US samples that marginalized ethnic groups were represented in at a level far greater than their population representation, likely a reflection of the lack of focus on gender among those in more privileged position in society. In terms of age, the samples were almost exclusively adult (two studies included adolescent boys). The abstracts addressed a range of topics including fathering (25%), STD/high risk sexual behavior (19%), domestic and sexual violence (14%), other health behaviors and issues (14%), and other topics (28%). The lead submitting authors were affiliated with academic departments of public health or medicine (28%), psychology

(25%), family studies (11%) and anthropology (8%), social work (8%), or were unidentified (22%). About 80% reported original empirical research (20% were literature reviews or essays) and of these, 72% used qualitative methods and 38% quantitative methods (a few used both). Finally, only 37% of the empirical abstracts sampled from or evaluated community based programs or interventions for men. Almost two-thirds focused on individual men who were not part of a program or intervention context that addressed them as men. If the abstracts are an accurate reflection of current work in the field on men and masculinity, this work remains mostly theoretical and individually focused.

The studies selected for the special section represent the diversity of the abstracts we received, but these seven were selected in part because of their focus on community based programs or interventions. The studies examine men in community-based programs or organizations for involved fathering, HIV prevention, intimate partner violence prevention, manhood development, and military reservists—all settings in which masculinity is socially constructed and meanings of masculinity are questioned and contested. The men participating in the different research projects represent a diversity of ethnic groups, social classes, sexual orientations, geographic locations, and ages—across which the meanings and norms of masculinity and the resources available to fulfill dominant expectations for masculinity vary. The researchers' analyses attend to this variation, elucidating how masculinity is meaningful in the particular context in which men live their lives.

Turning to the individual studies, the first two papers in the special section focus on barriers to African American men's use of and participation in community services. Hammond (2010) examines factors linked to medical mistrust in a community-based sample of African American men. She finds that masculine role identity, discrimination experiences, and recent patient-physician interaction quality are related to higher medical mistrust. Furthermore, her study shows that perceived racism in healthcare mediates the relationship between discrimination experiences and medical mistrust. Catlett et al. (2010) examine participation in a batterer intervention program in a sample of African American men. Qualitative findings reveal that men minimize and deny responsibility for their partner violence, and furthermore suggest that the men's constructions of masculinity are linked to dropping out of batterer treatment. Quantitative findings indicate that several factors examined in the study are linked to program dropout, including lower income and higher levels of hostility.

The next two studies use qualitative methods to examine the challenges of being a father-for indigenous Canadian men and lower income African American men,

respectively. Ball's study (2010) of indigenous men in Canada underscores the influence of socio-historical oppression of this population, and in particular how it profoundly hinders indigenous men in their role as fathers. The study findings also suggest varied cultural strengths and sources of resilience in the population often not revealed in prior research and community programs driven by Euro-western perspectives. Roy and Dyson (2010) explore the role of two community-based fatherhood programs in helping low-income African American men to shape alternative masculinities, and to reframe the role of father so that serving as family provider is no longer the central defining characteristic. The programs' facilitation of personal turning points and "breaks with the past," and use of social support and institutional interventions are described as helping the young men resist pervasive countervailing influences in low-income neighborhoods.

The final three studies focus on the experiences of being and becoming a man for three samples in completely different life circumstances and contexts. Hodgetts and Rua (2010) use innovative qualitative methodology to examine what it means to be a man among working class men in a community-based military reservist setting in New Zealand, with special focus on men's appropriation of aspects of contemporary media to make sense of their lives. Findings reveal working class men's emphasis on friendship support, familial obligations, and community participation in defining themselves as men. Wilson et al. (2010) employ qualitative methods to examine responses to dominant images of masculinity among gay, bisexual and queer African American, Latino, and European American male adolescents. The responses to traditional masculinity, while varied, center on balancing presentations of masculine and feminine characteristics. Specific negotiation strategies are described that serve either to avoid anti-gay violence, live up to expected images of masculinity, or create unique images of personhood free of gender role expectations. Finally, Burke et al. (2010) examine change over time and the factors that predict change in primarily middle class men who participate in a male support organization, ManKind Project International (MKPI). The sample as a whole reported decreased levels of gender role conflict and depression symptoms, and enhanced life satisfaction following involvement in an intensive "initiation" weekend. Belief in MKPI core values related to being a man and enhanced levels of social support are the two primary predictors of positive outcomes.

Taken as a group, the findings from the papers in this special section underscore the importance of the first of the four themes outlined above in the men and masculinity literature: the importance of viewing men as gendered beings, rather than as generic beings (Kimmel 2000). Across a diversity of populations, conceptual models, and

research methods, the studies demonstrate the gains in understanding when a focus on masculinity-related hypotheses and constructs are included in research studies, whether masculinity is defined as a social role or a social construction. One limitation related to this theme, however, is that almost no explicit analysis is given to the ways in which men can use power in healthy or constructive ways.

The papers as a whole provide less direct support for the other three themes. Concerning the theme of the paradox of privilege and damage of being a masculine man, and the theme of men as a privileged group, none of the papers (nor the abstracts received) explicitly examine male privilege and damage together, nor male privilege alone. Evidence related to the negative consequences of traditional masculinity is present in many of the papers. However, most of the studies appear to be conceptualized in literature that associates adherence to traditional masculine ideology or behaviors as damaging to men—with less attention given to how men's gender, as part of a system of oppression, causes harm to women, youth, and less privileged men. Similarly, concerning the fourth theme, the paradox of men's power and subjective powerlessness, the papers (along with the abstracts received) tend to focus more on men's subjectivity and experience, rather than on how men's power is used to advantage themselves or harm others. The lack of focus on issues of privilege and associated paradoxes may reflect the reality that many of the papers address marginalized populations with limited power in society—groups who experience lack of privilege in many of their daily life contexts.

The final paper in the special section, a commentary provided by Watts (2010), emphasizes the larger contextual influences which affect men's lives and social roles. Specifically, Watts describes how men both resist and accept traditional masculinities, in the context of colonialism and oppression on the one hand, and in the context of the social-justice movements that contribute to the liberation of women and sexual minorities, on the other. The latter sections of the commentary turn to the research process, including the structural and constructionist themes in the studies in the special section, how men are classified (implicitly or otherwise) as either agents or targets of oppression, and the implications for community psychology research with men.

Before concluding this introductory paper, two additional observations are in order, first concerning research methods, and second concerning comparisons to gendered analyses that focus on women in community psychology. Concerning research methods, the papers in this section draw on a diversity of methodologies to address men's subjectivity and behavior. The methods and research designs include longitudinal and cross sectional quantitative surveys (Burke et al.; Catlett et al.; Hammond), and

qualitative, ethnographic studies that include analyses of participants' photography and other objects of material culture (Hodgetts and Rua) and of interview transcripts (Ball; Catlett et al.; Hodgetts et al.; Wilson et al.). Some of the studies draw on more than one of these data/design types to achieve triangulation through mixed methods. The diversity of methods researchers utilized suit well the range of questions under investigation.

As men are gendered beings, we understand that research methods developed in the social sciences mostly by men also are gendered. Methods that seek knowing through dissection of phenomena into smaller, basic units that can be measured more precisely have been critiqued as male gendered or as coming from a male-oriented epistemology (Campbell and Wasco 2000). Other methods, some referred to as feminist, utilize a research process that prioritizes attainment of understanding and meaning by observing the connections between a phenomenon or entity and its context (Campbell and Wasco). Consistent with our understanding of the positive consequences of balanced or integrated forms of gender, several of the papers individually and the papers as a set synthesize different epistemological-methodological approaches, some within the same study. We believe that these mixed method approaches, while having been criticized by some as inappropriate because of their basis in different epistemologies, are particularly effective for understanding the subjective meaning of gendered behavior and predicting consequences of these behaviors in community contexts.

Finally, in comparison to gendered analyses that focus on women in community psychology, the papers focus specifically on men, without attending much to the voices of women who are indirectly affected by men or may have relationships with them. The relatively recent developments in theory and research on men's gender and masculinity have been inspired and guided, to a great extent, by a long history of scholarship in women's studies and feminist analysis of gender and power (Kilmartin 2006). One question that needs addressing in future work on men's gender and masculinity in community psychology is how existing frameworks for studying gender in community context, notably feminist approaches to community psychology (Bond and Mulvey 2000), are related to the analysis of men and masculinity.

The papers and commentary are meant to present to the field the advantages, and the challenges, of focusing on men as explicitly gendered beings. They serve to capture the current status of community psychology as a field related to men and masculinity, and to serve as a foundation for future work in this area. We are very appreciative of the excellent work done in this relatively unexplored area by the authors, and look forward to continued progress in the future in this important domain.

References

Addis, M. E., & Mahalik, J. R. (2003). Men, masculinity and the contexts of help seeking. *American Psychologist, 58*, 5–14.

Anderson, K. L. (2005). Theorizing gender in intimate partner violence research. *Sex Roles, 52*, 853–865.

Anderson, K. L., & Umberson, D. (2001). Gendering violence: Masculinity and power in men's accounts of domestic violence. *Gender & Society, 15*, 358–380.

Ball, J. (2010). Indigenous fathers' involvement in reconstituting "circles of care". *American Journal of Community Psychology*. doi:10.1007/s10464-009-9293-1.

Barker, G., & Ricardo, C. (2005). *Young men and the construction of masculinity in sub-Saharan Africa: Implications for HIV/AIDS, conflict, and violence*. World bank social development papers: Conflict, prevention, & reconstruction (Paper #26).

Bond, M. A., & Mulvey, A. (2000). A history of women and feminist perspectives in community psychology. *American Journal of Community Psychology, 28*, 599–630.

Brannon, R. (1976). The male sex role: Our culture's blueprint for manhood and what it's done for us lately. In D. David & R. Brannon (Eds.), *The forty-nine percent majority: The male sex role* (pp. 1–48). Reading, MA: Addison-Wesley.

Burke, C. K., Maton, K. I., Mankowski, E. S., & Anderson, C. W. (2010). Healing men and community: Predictors of outcome in a men's initiatory and support organization. *American Journal of Community Psychology*. doi:10.1007/s10464-009-9283-3.

Campbell, R., & Wasco, S. M. (2000). Feminist approaches to social science: Epistemological and methodological tenets. *American Journal of Community Psychology, 28*, 773–791.

Catlett, B. S., Toews, M. L., & Walilko, V. (2010). Men's gendered constructions of intimate partner violence as predictors of court-mandated batterer treatment drop out. *American Journal of Community Psychology*. doi:10.1007/s10464-009-9292-2.

Centers for Disease Control and Prevention (CDC). (2005). Web-based injury statistics query and reporting system (WISQARS) [Online]. National center for injury prevention and control, CDC (producer). Available from URL: www.cdc.gov/ncipc/wisqars/default.htm.

Connell, R. W., & Messerschmidt, J. W. (2005). Hegemonic masculinity. *Gender & Society, 19*, 829–859.

Courtenay, W. H. (2000). Constructions of masculinity and their influence on men's well-being: A theory of gender and health. *Social Science and Medicine, 50*, 1385–1401.

D'Augelli, A. R., Preston, D. B., Kassab, C. D., & Cain, R. E. (2002). Rural men who have sex with men: An exploratory study of sexual orientation characteristics and adjustment patterns. *Journal of Rural Community Psychology*, E5 (2).

DiIorio, C., McCarty, F., Resnicow, K., Lehr, S., & Denzmore, P. (2007). REAL men: A group-randomized trial of an HIV prevention intervention for adolescent boys. *American Journal of Public Health, 97*, 1084–1089.

DiPrete, T. A., & Buchmann, C. (2006). Gender-specific trends in the value of education and the emerging gender gap in college completion. *Demography, 43*, 1–24.

Doherty, K., & Anderson, I. (2004). Making sense of male rape: Constructions of gender, sexuality, and experience of rape victims. *Journal of Community and Applied Social Psychology, 14*, 85–103.

Dunkle, K. L., & Jewkes, R. (2007). Effective HIV prevention requires gender-transformative work with men. *Sexually Transmitted Infections, 83*, 173–174.

Eisler, R. M. (1995). The relationship between masculine gender role stress and men's health risk: The validation of a construct. In R. F. Levant & W. S. Pollack (Eds.), *A new psychology of men* (pp. 207–225). NY: Basic Books.

Federal Bureau of Investigation. (2007). *Crime in the United States, 2007*. Washington, DC: US Department of Justice. Retrieved September 6, 2009 from http://www.fbi.gov/ucr/cius2007/documents/arreststopicpage.pdf.

Ghee, K. L., Walker, J., & Younger, A. C. (1997). The RAAMUS Academy: Evaluation of and edu-cultural intervention for young African-American males. *Journal of Prevention & Intervention in the Community, 16*, 87–102.

Haj-Yahia, M. M. (2005). Can people's patriarchal ideology predict their beliefs about wife abuse? The case of Jordanian men. *Journal of Community Psychology, 33*, 545–567.

Hammond, W. P. (2010). Psychosocial correlates of medical mistrust among African American men. *American Journal of Community Psychology*. doi:10.1007/s10464-009-9280-6.

Harper, G. W. (2007). Sex isn't that simple: culture and context in HIV prevention interventions for gay and bisexual male adolescents. *American Psychologist, 62*, 803–819.

Helgeson, V. S. (1995). Masculinity, men's roles, and coronary heart disease. In D. Sabo & D. Gordon (Eds.), *Men's health and illness: Gender, power and the body* (pp. 68–104). Thousand Oaks, CA: Sage.

Hoard, L. R., & Anderson, E. A. (2004). Factors related to depression in rural and urban non-custodial, low-income fathers. *Journal of Community Psychology, 32*, 103–119.

Hodgetts, D., & Rua, M. (2010). What does it mean to be a man today?: Bloke culture and the media. *American Journal of Community Psychology*. doi:10.1007/s10464-009-9287-z.

Jensen, R. (2007). *Getting off: Pornography and the end of masculinity*. Cambridge, MA: South Bend Press.

Katz, J. (2000). *Tough guise: Violence, media & the crisis in masculinity*. Northampton, MA: Media Education Foundation.

Kaufman, M. (1985). The construction of masculinity and the triad of men's violence. In M. Kaufman (Ed.), *Beyond patriarchy: Essays by men on pleasure, power and change*. Toronto: Oxford University Press.

Kaufman, M. (1994). Men, feminism, and men's contradictory experiences of power. In H. Brod & M. Kaufman (Eds.), *Theorizing masculinities*. Thousand Oaks, CA: Sage Publications.

Kilmartin, C. T. (2006). *The masculine self* (3rd ed. ed.). Cornwall-on-Hudson, NY: Sloan Publishing.

Kimmel, M. S. (1994). Masculinity as Homophobia: Fear, shame, and silence in the construction of gender identity. In H. Brod & M. Kaufman (Eds.), *Theorizing masculinities* (pp. 119–141). London: Sage.

Kimmel, M. S. (1996). *Manhood in American: A cultural history*. New York: Free Press.

Kimmel, M. S. (2000). *The gendered society*. Oxford: Oxford University Press.

Kimmel, M. S., & Aronson, A. (2003). *Men & Masculinities: A Social*. Cultural, and Historical Encyclopedia. Santa Barbara, CA: ABC-CLIO.

Kimmel, M. S., & Mahler, M. (2003). Adolescent masculinity, homophobia, and violence: Random school shootings, 1982–2001. *American Behavioral Scientist, 46*, 1439–1458.

Kivel, P. (1998). *Men's work: How to stop the violence that tears our lives apart* (2nd ed.). City Center, MN: Hazelden.

Krahé, B., & Fenske, I. (2002). Predicting aggressive driving behavior: The role of macho personality, age, and power of car. *Aggressive Behavior, 28*, 21–29.

Kulis, S., Marsiglia, F. F., & Hurdle, D. (2003). Gender identity, ethnicity, acculturation, and drug use: Exploring differences among adolescents in the Southwest. *Journal of Community Psychology, 31*, 167–188.

Kung, J., Hoyert, D. L., Xu, J., & Murphy, B. S. (2008). Deaths: Final data for 2005. *National Vital Statistics Report, 56* (10). Retrieved September 08, 2009, from http://www.cdc.gov/nchs/data/nvsr/nvsr56/nvsr56_10.pdf.

Lang, J. L. (2003). *Elimination of violence against women in partnership with men.* United Nations Economic and Social Commission for Asia and the Pacific. Retrieved September 6, 2009 from http://www.unescap.org/esid/GAD/Publication/DiscussionPapers/15/series15-main-text.pdf.

Lee, C., & Owens, R. G. (2002). *The psychology of men's health.* Philadelphia, PA: Open University Press.

Levant, R. (2008). How do we understand masculinity? An editorial. *Psychology of Men and Masculinity, 9*, 1–4.

Liu, W. M. (2005). The study of men and masculinity as an important multicultural competency consideration. *Journal of Clinical Psychology, 61*, 685–697.

Lloyd, C., Williams, P. L., & Sullivan, D. (2004). *Kick'n'On: Helping young males kick back into life.* Journal for the Advancement of Mental Health: Australian e.

Lorber, J. (2000). Using gender to undo gender: A feminist degendering movement. *Feminist Theory, 1*, 79–95.

Luyt, R. (2003). Rhetorical representations of masculinities in South Africa: Moving towards a material-discursive understanding of men. *Journal of Community and Applied Social Psychology, 13*, 46–69.

Mahalik, J. R., Aldarondo, E., Gilbert-Gokhale, S., & Shore, E. (2005). The role of insecure attachment and gender role stress in predicting controlling behaviors in men who batter. *Journal of Interpersonal Violence, 20*, 617–631.

Mahalik, J. R., Cournoyer, R. J., DeFranc, W., Cherry, M., & Napolitano, J. M. (1998). Men's gender role conflict and use of psychological defenses. *Journal of Counseling Psychology, 45*, 247–255.

Mankowski, E. S. (2000). Reconstructing masculinity: Imagoes and the life stories of members of a men's mutual support group. In E. Barton (Ed.), *Mythopoetic perspectives of men's healing work: An anthology for therapists and others* (pp. 100–117). Westport, CT: Greenwood Press.

Mankowski, E. S., Haaken, J., & Silvergleid, C. (2002). Collateral damage: An analysis of the achievements and unintended consequences of batterer's intervention programs and discourse. *Journal of Family Violence, 17*, 167–184.

Mankowski, E. S., Maton, K. I., Burke, C. K., Hoover, S. A., & Anderson, C. W. (2000). Collaborative research with a men's organization: Psychological impact, group functioning, and organizational growth. In E. Barton (Ed.), *Mythopoetic perspectives of men's healing work: An anthology for therapists and others* (pp. 183–203). Westport, CT: Greenwood Press.

Marsiglio, W., & Pleck, J. H. (2005). Fatherhood and masculinities. In M. S. Kimmel, J. Hearn, & R. Connell (Eds.), *Handbook of studies on men & masculinities* (pp. 249–269). Thousand Oaks, CA: Sage.

Maton, K. I. (2000). Making a difference: The social ecology of social transformation. *American Journal of Community Psychology, 28*, 25–57.

McCreary, D. R., Newcomb, M. D., & Sadava, S. W. (1998). The male role, alcohol use, and alcohol problems: A structural modeling examination in adult women and men. *Journal of Counseling Psychology, 46*, 109–124.

McDonald, K. E., Keys, C. B., & Balcazar, F. E. (2007). Disability, race/ethnicity and gender: themes of cultural oppression, acts of individual resistance. *American Journal of Community Psychology, 39*, 145–161.

Melluish, S., & Bulmer, D. (1999). Rebuilding solidarity: An account of a men's health action project. *Journal of Community and Applied Social Psychology, 9*, 93–100.

Miller, J., & Bell, C. (1996). Mapping men's mental health. *Journal of Community & Applied Social Psychology, 6*, 317–327.

Moore, T. M., & Stuart, G. L. (2005). A review of the literature on masculinity and partner violence. *Psychology of Men and Masculinity, 6*, 46–61.

Morgan, M., & O'Neill, D. (2001). Pragmatic post-structuralism (II): An outcomes evaluation of a stopping violence programme. *Journal of Community and Applied Social Psychology, 11*, 277–289.

National Center for Education Statistics. (2007). http://nces.ed.gov/programs/digest/d08/tables/dt08_109.asp.

New, C. (2001). Oppressed and oppressors? The systematic mistreatment of men. *Sociology, 35*, 729–748.

O'Neil, J. M. (2008). Summarizing 25 years of research on men's gender role conflict using the Gender Role Conflict Scale: New research paradigms and clinical implications. *The Counseling Psychologist, 36*, 358–445.

O'Neil, J. M., Helms, B. J., Gable, R. K., David, L., & Wrightsman, L. S. (1986). Gender-role conflict scale: College men's fear of femininity. *Sex Roles, 14*, 335–350.

O'Neill, D., & Morgan, M. (2001). Pragmatic post-structuralism (I): Participant observation and discourse in evaluating violence intervention. *Journal of Community and Applied Social Psychology, 11*, 263–275.

Olson, J. M., Herman, C. P., & Zanna, M. P. (1986). *Relative deprivation and social comparison: The Ontario Symposium (Vol. 4).* Mahwah, NJ: Lawrence Erlbaum.

Parrott, D. J., Peterson, J. L., Vincent, W., & Bakeman, R. (2008). Correlates of anger in response to gay men: Effects of male gender role beliefs, sexual prejudice, and masculine gender role stress. *Psychology of Men & Masculinity, 9*, 167–178.

Pleck, J. H. (1981). *The myth of masculinity.* Cambridge: MIT Press.

Pollack, W., & Levant, R. (Eds.). (1998). *New psychotherapy for men.* New York: Wiley & Sons.

Prilleltensky, I. (2003). Understanding, resisting, and overcoming oppression: Toward psychopolitical validity. *American Journal of Community Psychology, 31*, 195–201.

Reddin, J., & Sonn, C. C. (2003). Masculinity, social Support and sense of community: The men's group experience in Western Australia. *Journal of Men's Studies, 11*, 207–223.

Riger, S. (1993). What's wrong with empowerment. *American Journal of Community Psychology, 21*, 279–292.

Robertson, N. (1999). Stopping violence programmes: Enhancing the safety of battered women or producing better-educated batterers? *New Zealand Journal of Psychology, 28*, 68–78.

Roy, K., & Dyson, O. (2010). Making daddies into fathers: Community-based fatherhood programs and the construction of masculinities for low-income African American men. *American Journal of Community Psychology.* doi:10.1007/s10464-009-9282-4.

Ryan, W. (1971). *Blaming the victim.* New York: Vintage Books.

Schensul, S. L., Nastasi, B. K., & Verma, R. K. (2006). Community-based research in India: A case example of international and transdisciplinary collaboration. *American Journal of Community Psychology, 38*, 95–111.

Sharpe, M. J., & Heppner, P. P. (1991). Gender role, gender role conflict, and psychological well-being in men. *Journal of Counseling Psychology, 38*, 323–330.

Silvergleid, C. S., & Mankowski, E. S. (2006). How batterer intervention programs work: Participant and facilitator accounts

of processes of change. *Journal of Interpersonal Violence, 21*, 139–159.

Stein, C. H., & Mankowski, E. S. (2004). Asking, witnessing, interpreting, and knowing: The process of conducting qualitative research in community psychology. *American Journal of Community Psychology, 33*, 21–35.

Stevenson, H. C. (1997). Managing anger: Protective, proactive, or adaptive racial socialization identity profiles and African-American manhood development. *Journal of Prevention & Intervention in the Community, 16*, 35–61.

Stoltenberg, J. (1989). *Refusing to be a man: Essays on sex and justice*. Portland, OR: Breitenbush Books.

Terman, L. M., & Miles, C. C. (1936). *Sex and Personality*. New Haven, CT, US: Yale University Press.

US Bureau of Justice Statistics. (2008). *Criminal victimization in the United States, 2006 statistical tables: National crime victimization survey*. Washington, DC: U.S. Department of Justice, Bureau of Justice Statistics. NCJ 223436.

Watts, R. (2010). Advancing a community psychology of men. *American Journal of Community Psychology.* doi:10.1007/s10464-009-9281-5.

Watts, R. J. (1993). Community action through manhood development. A look at concepts and concerns from the frontline. *American Journal of Community Psychology*, 21, 333–359.

Watts, R. J., Griffith, D. M., & Abdul-Adil, J. (1999). Sociopolitical development as an antidote for oppression—Theory and action. *American Journal of Community Psychology, 27*, 255–271.

Wester, S. R. (2008). Male gender role conflict and multiculturalism: Implications for counseling psychology. *The Counseling Psychologist, 26*, 294–324.

Willott, S., & Griffin, C. (2004). Redundant men: Constraints on identity change. *Journal of Community and Applied Social Psychology, 14*, 53–69.

Wilson, D. M. B., Harper, G. W., Hidalgo, M. A., Jamil, O. B., Torres, R. S., & Fernandez, M. I. (2010). Negotiating dominant masculinity ideology: Strategies used by gay, bisexual and questioning male adolescents. *American Journal of Community Psychology.* doi:10.1007/s10464-009-9291-3.

World Health Organization. (2007). *Engaging men and boys in changing gender-based inequality in health: Evidence from programme interventions*. Geneva. Retrieved September 6, 2009 from http://www.who.int/gender/documents/Engaging_men_boys.pdf.