Religion, Spirituality, and Masculinity: New Insights for Clinical Practice

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Acknowledgements

• Justin H. McManus, LCSW, CAP, SATP
• Shannon Mullen, PhD, CSAT
• Dr. Jay Wade
Agenda

• 9:00 to 10:30 - Content/Questions
  - Overview of Men’s Health
  - Review of relevant masculinity theories, constructs, and related research.
  - Review of relevant religious/spirituality constructs and associations with masculinity and men’s health.
  - Q/A

• 10:30 to 10:45 – Break

• 10:45 to 12:15 - Content/Questions
  - Insights for Clinical Practice
    a) Conceptualization
    b) Assessment tools and approaches
    c) Intervention techniques, strategies, and guidelines
  - Application to Case Study
  - Q/A
Learning Objectives

• Describe health disparities between men and women.

• Apply theories and research about male gender socialization to their clinical practice with men.

• Integrate masculinity, religiosity, and spirituality factors into their conceptualizations, assessments, and interventions with male clients.
Introduction
THE BASIC MODEL

Religion and Spirituality

Masculinity

Men’s Health
Catholic men in the US thinking about becoming priests and deacons

**Religious** faith valued service to others, being a servant-leader, caring for other people, maintaining a relationship with God to the point of listening for, and doing what they thought God wanted them to do in their lives.

Their **manhood** was defined by their ability (or inability) to live in accordance to those values and conscious rejection of some masculinity norms such as dominance over others, violence, aggression, competitiveness.
Indonesian men in Java and Bali

- **Javanese** culture and most of Indonesia is Muslim. High value placed on harmony in relationships and for men, responsibilities associated with being head of the family (and protector) were identified as the most important characteristics of manhood.

- **Balinese** culture is Hindu and places a central value on harmonious relationships. Thus, Balinese men placed importance on harmonious relationships and the happiness of others. Caring for others was identified as a central characteristic of manhood.

Wade (2016; 2018)
**ADD IN MEN’S HEALTH**

- **Javenese & Balinese Men (Example 2)**
  - Increased life & marital satisfaction

- **Catholic Men (Example 1)**
  - Increased sense of purpose & meaning
  - Desire to serve others
  - Not always open to psychological intervention
Gap in PMM Scholarship

Published in 2016
799 pages
34 Chapters

Published in 2017
417 pages
12 Chapters

1,216 pages
46 Chapters
OVERVIEW OF MEN’S HEALTH

LO1: Describe health disparities between men and women.
More than erectile dysfunction and prostate cancer

In addition to physical, men also have emotional, social, psychological, spiritual/religious factors to their health.

MEN’S HEALTH: BROAD CONCEPTUALIZATION
**MEN’S HEALTH: TROUBLING STATISTICS**

**Psychological Issues**

- Males are diagnosed with ADHD at least twice as much as females across the lifespan (Ramtekkar, Reiersen, Todorov, & Todd, 2010).

- Prevalence rates of addictive gambling behaviors are twice as high in men compared to women (Thombs, 2006).

- Alcohol Use Disorder is diagnosed in 12.4% of men compared to 4.9% of women (APA, 2013).

- Men complete suicide at 4 times the rate of women and men represent 78% of all suicides in the United States (CDC as cited in Bower, 2015).
Physical Issues

- Across several countries, male life expectancy is lower than female life expectancy. (e.g., 5.2 years in the US)

- Men tend to have more cardiovascular diseases; hypertension; cancer diagnoses (Crimmins, Shim, Zhang, & Kim, 2019)

- Men account for 95% of workplace accidents (Gough & Robertson, 2017)

- Men are more likely than women to engage in more than 30 risky health behaviors, including tobacco and alcohol use, poor diet, leading a sedentary lifestyle (Courtenay, 2001).**
**Men’s Health: Troubling Statistics**

**Help-Seeking Issues**

- Men are less likely than women to use preventative health services, attend yearly check-ups, seek medical care in response to pain and illness, and seek counseling services for mental health concerns (e.g., Bonhomme, 2012).

- During their lifetime, 1 in 7 men seek mental health services compared with 1 in 3 women, and 1 in 4 men would wait as long as possible before consulting a physician if they were feeling sick, in pain, or concerned about their health (Courtenay, 2003).

- Women attend doctor visits for annual or preventive services (i.e., non-illness related) at a rate 100% higher than men, even after controlling for age and pregnancy-related visits.

- Thirty-three percent of men have no regular physician, and almost a quarter of all men have not seen a physician in the past year.

(Garfield, Isacco, & Rogers, 2008)
Sexual Issues: Pornography Consumption

- 62% of men (compared to 36% of women) aged 18-26 years-old have viewed a pornographic video in past year (Price, Patterson, Regnerus, & Walley, 2016).

- Men in the same age group have more favorable attitudes toward pornography than women (Riemersma & Sytsma, 2013).

- The “profile of a typical user” of Internet pornography is “a young man with less religiosity, more sexual permissive views, of higher SES, and more liberal political views (Perry, 2017).
Religious/Spiritual Metrics

- Women > men
  - Religious affiliation with a major world religious (Trzebiatowska & Bruce, 2012), sharpest declines in Christian denominations
  - Church attendance, prayer, meditation, read scripture, belief in religion’s importance in their life (PEW, 2016)

- Men > women
  - de-affiliating with a religion, identifying as atheist and joining the “Nones” group at higher rates (PEW, 2014).

https://www.pewforum.org/religious-landscape-study/gender-composition/
Men’s Health Crisis: Across health disciplines, men’s health was deemed to be in a state of crisis or at least very grim in the early 2000’s.

Tucker Carlson, 2018 series *Men in America* discussed similar statistics and conclusions (although more political)


Researchers and practitioners are advancing new ideas, approaches, pathways, interventions to improve men’s health (Griffith, Bruce, Thorpe, 2019).

Two fatherhood-based examples

Still can be an ignored problem.
LO2: Apply theories and research about male gender socialization to their clinical practice with men.
MASCUlINITY 101

- **What is it?**
  Characteristics, attributes, expressions of being a man

- **What is it NOT?**
  Purely toxic

- **Do all men have masculinity?**
  Yes

- **Is it linked to men’s health?**
  Yes

- **Do all men have the same masculinity?**
  No

- **Always negatively linked to men’s health?**
  No
## Psychology of Masculinity Theories

<table>
<thead>
<tr>
<th>Name of Theory/Primary Author(s)</th>
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<tbody>
<tr>
<td>Gender Role Strain (Pleck)</td>
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<td>Gender Role Conflict (O’Neil)</td>
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<tr>
<td>Masculinity Ideology (Thompson)</td>
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<tr>
<td>Conformity to Masculine Norms (Mahalik)</td>
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<tr>
<td>Masculine Gender Role Stress (Eisler &amp; Skidmore)</td>
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<tr>
<td>Male Reference Group Identity (Wade)</td>
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<tr>
<td>Precarious Manhood (Vandello &amp; Bosson)</td>
</tr>
<tr>
<td>Positive Psychology-Positive Masculinity (Kisileca)</td>
</tr>
</tbody>
</table>
MASCU LINITY IDE OLOGY

- Ideology = A set of values, expectations, beliefs and ideas that are common among a group and are presumed to be true.

- Add in Masculinity = socially constructed ideas about what it means to be a man.

- 4 Core Beliefs (Brannon, 1976). To be a man….
  1) No Sissy Stuff: ...you have to avoid anything feminine
  2) The Big Wheel: ...you have to be respected, which comes from achievement
  3) The Sturdy Oak: ...you have to be strong and silent, calm under pressure
  4) Give ‘em Hell: ....you have to take risks, be adventuresome, not back down
To be a man,
...you should be strong in relationships
...you should be successful at work and make money
...you should be respected
...you should avoid being feminine
....you should be in control of your emotions
...you should be tough, self-reliant, and independent
...you should be physically tough
...you should take risks
...you should initiate and engage in sexual pursuits
...you should avoid being perceived as gay
CONFORMITY TO MASCULINE NORMS

Def: Meeting societal expectations for manhood in one’s own life.

Key Hypotheses
- The most dominant group sets the societal expectations
- The most dominant group communicates societal expectations through prescriptive means (approve/disapprove)
- Other influences may factor in (SES, race, religion, spirituality, etc…)
- Individuals take in the societal expectations and other influences to decide if and how to conform or not conform.
THE 11 MASULINE NORMS

1) Winning
2) Emotional Control
3) Risk-Taking
4) Violence
5) Power over Women
6) Dominance
7) Playboy
8) Self-Reliance
9) Primacy of Work
10) Disdain of Homosexuals
11) Pursuit of Status
Hypothesis One: Men may feel intense demands to uphold gender roles and learn to adopt increasingly more rigid gender roles to avoid social punishment and gain social rewards for being masculine.

Hypothesis Two: More rigid adherence to the socially prescribed gender roles will lead to negative health consequences.
5 MASCULINE STRESSORS

1) **Physical Inadequacy**: Athleticism, fitness, physique, sexual prowess

2) **Emotions: Situations** that require the expression of tender emotions

3) **Subordination to Women**: Situations that entail men being outperformed by women, making less money than women, or having a woman superior.

4) **Intellectual Inferiority**: Situations that question men’s rational abilities, motivation, drive, and ambitions.

5) **Performance Failure**: Situation that may lead to work and sex failures.
4 Main Tenets

1) Manhood is a precarious social status that is elusive and must be earned.
2) That status of manhood is not permanent.
3) Manhood requires the appropriate public demonstrations that are then socially confirmed.
4) Manhood is a more challenging status to achieve than womanhood.
POSITIVE-PSYCHOLOGY: POSITIVE MASCULINITY

- All of the other theories take a deficit approach to masculinity

- **Goal**: Identify strengths of traditional masculinity

- **Positive Masculinity definition**: Prosocial attitudes, beliefs, and behaviors that produce positive consequences for self and others.
11 **POSITIVE MASCULINITY CHARACTERISTICS**

1) Relational Style
2) Caring
3) Generative Fatherhood
4) Self-Reliance
5) Worker-Provider Tradition
6) Respect for Women
7) Courage
8) Group and Team-Orientation
9) Service
10) Use of Humor
11) Heroism
**MASCULINITY THEORIES AND MEN’S HEALTH**

The Levant Interpretation: Traditional masculinity is bad for men’s health.

The Kiselica Interpretation: Positive aspects of traditional masculinity have been overlooked and are good for men’s health.

The Mahalik Interpretation: Traditional masculinity in itself is not bad to men’s health, but an **overly rigid adherence** to some masculine norms can be harmful to men’s health.

The Scientific Interpretation: Nuanced and mixed findings depending on participants, survey instruments, study design and setting, author biases, statistical techniques.
<table>
<thead>
<tr>
<th>Theory</th>
<th>Men’s Health Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Masculinity Ideology (Traditional)</td>
<td>Poor health behaviors</td>
</tr>
<tr>
<td></td>
<td>Depression, anxiety, distress</td>
</tr>
<tr>
<td></td>
<td>Maladaptive coping; lack of health help-seeking</td>
</tr>
<tr>
<td>Conformity to Masculine Norms</td>
<td>Development of a male identity and positive social group</td>
</tr>
<tr>
<td></td>
<td>Work success and financial rewards</td>
</tr>
<tr>
<td></td>
<td>Negative help-seeking attitudes</td>
</tr>
<tr>
<td></td>
<td>Increased psychological distress</td>
</tr>
<tr>
<td>Masculine Gender Role Stress</td>
<td>Anger, anxiety, poor health behaviors</td>
</tr>
<tr>
<td>- Performance</td>
<td>Aggression</td>
</tr>
<tr>
<td>- Physical inadequacy</td>
<td>Sexual Coercion</td>
</tr>
<tr>
<td>- Intellectual Inferiority</td>
<td>Injury</td>
</tr>
<tr>
<td>Precarious Manhood</td>
<td>Very nascent and theoretical; Assumed negative</td>
</tr>
<tr>
<td>Positive-Positive Positive Masculinity</td>
<td>Very nascent and mixed; Assumed positive</td>
</tr>
</tbody>
</table>
LO3: Integrate masculinity, religiosity, and spirituality factors into their conceptualizations, assessments, and interventions with male clients.
QUICK OVERVIEW OF R/S CONSTRUCTS

Religious Coping (Positive and Negative)
Religious Support
Meaning in Life
Religious/Spiritual Struggle
Extremeism
Garfield, Isacco, & Sahker, 2013

- Reviewed 120 articles across disciplines
- There are clear health pathways between R/S and men’s health outcomes
- Importance of SUPPORT and EXISTENTIAL Wellness
FOCUS ON TWO R/S CONSTRUCTS WITH MEN

Men and their Relationship with God

Men and Forgiveness
**RELATIONSHIP WITH GOD**

- **God Concept**: An individual’s definition of God. How we think about God. *

- **God Image**: An individual’s perceptions about the nature of God. *
  (Authoritative, Benevolent, Critical, Distant)

- **God Attachment**: An individual’s appraisal of the relational dynamic with God (secure, insecure, anxious, avoidant).**

- **Relationship with God**: How an individual relates to a personal God in terms of affection, intimacy, closeness, fulfillment of needs, and sense of belonging.**
People often assign adjectives and descriptors based on gender and family-of-origin influences as well as relate to God in ways they relate to other authority and/or attachment figures.

Men view God as authoritative, powerful, controlling, purposeful, less forgiving, and vengeful while women view God more as loving, nurturing, caring, peaceful, calming, healing (Shah, Bartkowski, & Xu, 2016).

Overall, researchers have found that women have a more holistic view of God as provider, ruler, creator, and relational entity) compared to men.

Masculinity norms of independence, self-reliance, avoidance of intimacy, dominance likely play a role in men’s God concept and image.
RELATIONSHIP WITH GOD, MASCULINITY, MEN’S HEALTH

Religion and Spirituality
- +

Masculinity
- +

Men’s Health
- +
Forgiveness: Prosocial change toward a perceived transgressor, and includes the reduction of negative (sometimes increase in positive) emotions, thoughts, and motivations toward the offender that might eventuate in changed behavior (Davis, Worthington, Hook, & Hill, 2013).


Decisional forgiveness: A commitment by the victim to reduce unforgiveness.

Emotional forgiveness: Extent to which a victim experiences positive emotions while forgiving.

Dispositional forgiveness: Ingrained characteristic to forgive.

State forgiveness: Response to a specific situation, transgression that causes harm.
4 COMMON DIMENSIONS OF FORGIVENESS

Interpersonal
Self
Divine
Seeking, as transgressor
What do you think the research says?
FORGIVENESS, MASCULINITY, AND MEN’S HEALTH

Religion and Spirituality
- 
+ 

Masculinity
- 
+ 

Men’s Health
- 
+
LO3: Integrate masculinity, religiosity, and spirituality factors into their conceptualizations, assessments, and interventions with male clients.
RELATIONSHIP WITH GOD

Strength-based Path

Conflict with God Path
CONCEPTUALIZATION

Positive God Image, secure attachment to God, and supportive-intimate relationship with God are all associated with positive outcomes.

God = a strength in the counseling process for male client (excuse the reductionism)
<table>
<thead>
<tr>
<th>Construct</th>
<th>Formal</th>
<th>Informal</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>God Concept</strong></td>
<td>God Concept Adjective Checklist</td>
<td>How do you think about God?</td>
</tr>
<tr>
<td></td>
<td>The God-10</td>
<td>What adjectives do you use to describe God?</td>
</tr>
<tr>
<td><strong>God Image</strong></td>
<td>The God Image Inventory</td>
<td>How do you feel about God?</td>
</tr>
<tr>
<td></td>
<td>God Image Measure</td>
<td>In what ways does God impact your life?</td>
</tr>
<tr>
<td><strong>Attachment to God</strong></td>
<td>The Attachment to God Scale</td>
<td>How would you describe your relationship with caregivers (parents)?</td>
</tr>
<tr>
<td></td>
<td>The Attachment to God Inventory</td>
<td>How your relationship with caregivers influenced your relationship with God?</td>
</tr>
<tr>
<td><strong>Relationship with God</strong></td>
<td>Attitudes Toward God Scale</td>
<td>Describe your relationship with God</td>
</tr>
<tr>
<td></td>
<td>Divine Struggle Subscale of the Religious and Spiritual Struggles Scale</td>
<td>Does your relationship with God provide strength and support or distress and conflict?</td>
</tr>
</tbody>
</table>
# Assessment of Masculinity

<table>
<thead>
<tr>
<th>Formal</th>
<th>Description</th>
<th>Specific to relationship with God</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conformity to Masculine Norms Inventory</td>
<td>94-item, self-report; Assesses the extent of conformity to dominant 11 US masculinity norms. 46 item SF</td>
<td>Independence; Emotional control</td>
</tr>
<tr>
<td>Male Role Norms Inventory</td>
<td>57-item, self-report; Assesses adherence to traditional masculinity. 21 item SF: 10 item VB form</td>
<td>Self-Reliance, Restrictive Emotionality</td>
</tr>
</tbody>
</table>
COUNSELING INTERVENTIONS: STRENGTH-BASED TECHNIQUES (ENGLAR-CARLSON & KISELICA, 2013; ISACCO, TALOVIC, CHROMIK, & YALLUM, 2013)

- Assumes informed consent, client autonomy, ethics

1) Exploration of a positive relationship with God as a strength that can help with presenting concerns

2) Identification of ways to use the divine relationship as a strength
   EX: Prayer to communicate with God
   EX: Attend a religious activity to encounter God in community
   EX: Meet with a spiritual leader for conversation about God’s role in his life
   EX: Bibliotherapy. Spiritual reading focused on God.

3) Identify any potential barriers to step 2 and explore ways to overcome those barriers

4) Monitor how intentionally activating God impacts mental health
FORGIVENESS

To forgive
For today’s purpose, the guiding question is: how does the man’s masculinity relate to barriers forgiving other(s)?
Precarious Manhood
- Men equate religion with femininity.
- They avoid religious activities to avoid being feminine in social contexts and risk the social punishment.
- Forgiveness may be seen as weak and thus, unmanly, i.e., feminine. In turn, men avoid forgiving others to maintain their sense of manhood.

Masculine Gender Role Stress
- Being a victim elicits feelings of hurt, vulnerability, weakness, and shame for men.
- Such feelings can threaten the man’s sense of masculinity, which increases stress (Emotions, inadequacy, inferiority).
- Forgiving the transgressor is seen as a sign of weakness, exacerbating the stress, and the need to prove manhood in a way more congruent with social expectation and identity (e.g., anger, revenge).
<table>
<thead>
<tr>
<th>Construct</th>
<th>Formal</th>
<th>Informal</th>
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</thead>
<tbody>
<tr>
<td>Motivation to Forgive</td>
<td>Transgression-Related Interpersonal Motivation Inventory-Revised</td>
<td>What is motivating your actions right now?</td>
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<tr>
<td></td>
<td></td>
<td>Would you like those motivations to change?</td>
</tr>
<tr>
<td>Forgiveness of others</td>
<td>Forgiveness Scale</td>
<td>How have you forgiven others in the past?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>How might you forgive now?</td>
</tr>
<tr>
<td>Decisional forgiveness</td>
<td>The Decision to Forgive Scale</td>
<td>What are you factoring into your decision to forgive or not?</td>
</tr>
<tr>
<td>Likelihood to Forgive</td>
<td>The Forgiveness Likelihood Scale</td>
<td>How likely are you to forgive this person?</td>
</tr>
<tr>
<td>Formal</td>
<td>Description</td>
<td>Specific to forgiveness</td>
</tr>
<tr>
<td>------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------</td>
</tr>
<tr>
<td>Masculine Gender Role</td>
<td>40-item, self-report; Assess the degree to which men cognitively appraise a</td>
<td>Expression of tender emotions/emotional inexpressiveness</td>
</tr>
<tr>
<td>Stress Scale</td>
<td>situation to be stressful to their masculinity.</td>
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<tr>
<td>Precarious Manhood</td>
<td>No formal self-report scale; Areas to Assess</td>
<td></td>
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<tr>
<td></td>
<td>- Unforgiveness due to perceived social consequences</td>
<td></td>
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<td></td>
<td>- Equating forgiveness with weakness and feminine</td>
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<td></td>
<td>- Enacting anger or revenge to prove masculinity</td>
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Individual > Group Counseling

1) Identify forgiveness as a salient issue (likely not a presenting concern)
2) Integrate an established therapy model of forgiveness (The Enright Model or REACH model).
   A. Recalling the hurt feelings and other emotions
   B. Perspective taking
   C. Exploring the possibility of forgiving as an altruistic response
   D. Commit to forgive
   E. Hold on to forgiveness when negative emotions re-emerge

3) Account for masculinity
   - Workbooks for restrictive emotionality
   - Reframe as positive masculinity
   - Draw on sacred readings and role models
Composite client; de-identified a lot of demographics

Peter, 50-year-old, white, married man with two teenage children
Applied for a clergy role in a Christian Church
My Role: Psychological evaluation and consultant
Presentation: Anxious, stuttered speech, aversion to eye contact, sweaty
Key Quote: “People should follow the rules. The Church is clear on what you can and can’t do. I don’t understand why people don’t do what they are supposed to do.”
R/S Construct: Relationship with God
Thank you again!

Men’s health is multifaceted and has clear indicators of being problematic

Masculinity is an important and linked to men’s health (in positive and negative ways)

Religion and spirituality are overlooked but deep pathways to men’s health

Clinical practice can integrate religion, spirituality, masculinity theories and constructs into their conceptualization, assessment, and intervention approach.
Describe health disparities between men and women.

Apply theories and research about male gender socialization to their clinical practice with men.

Integrate masculinity, religiosity, and spirituality factors into their conceptualizations, assessments, and interventions with male clients.
I have over 500 articles, books, book chapters, etc.…!

**Primary reference**

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