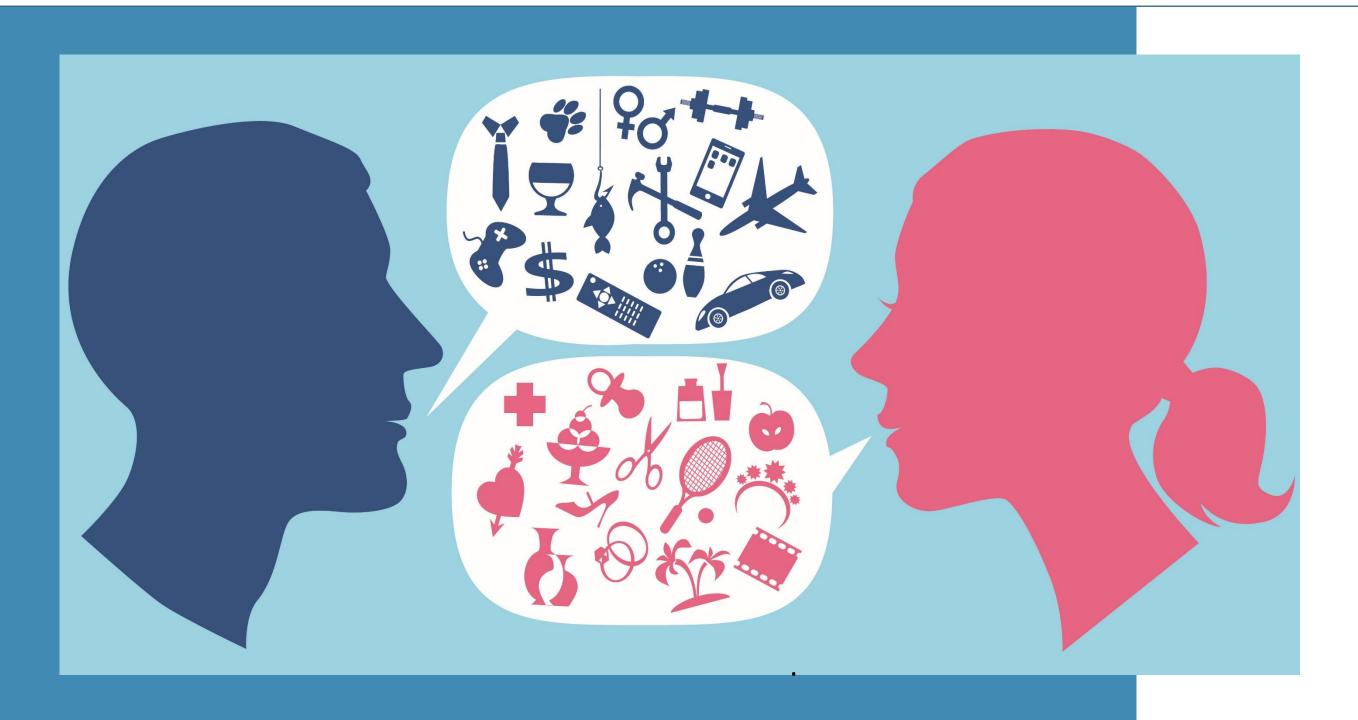


Abstract

This investigation aimed to uncover the relationship between traditional masculine traits and depressive symptoms in college students. The significance of this research lies in the factors that attribute and or predispose someone to acting and holding views that algin more with traditionally masculine qualities. But in doing so, the results of such are represented with the mental illnesses and emotional ailments that follow, i.e., depression. A sample of 455 students were pooled at the local university via virtual survey questionnaires. The survey consisted of two different scales: one to measure the extent of toxic masculine traits/behaviors, and another for depressive symptoms. Control variables consisting of sex, gender, sexual orientation, relationship status, religious affiliation, and race were also included. Results suggest a statistically significant relationship between the two variables but is rather weak. Much more research is needed in this field, especially that related to different subgroups to better understand where these prejudices and detrimental gender-binary perspectives lie.

Introduction

- As cited in Hill et al., the term masculinities are defined "as the plural and dynamic ways in which masculine norms, attitudes, identities, power dynamics, and behaviors are lived" (Ragonese et al., 2018)
- "Harmful masculinities, on the other hand, are detrimental beliefs that perpetuate rigid, heteronormative, violent, and controlling norms about what a 'real man' is" (Heilman and Barker, 2018). Others may classify these behaviors under the term toxic masculinity, which is characterized by a drive to dominate and by endorsement of misogynistic and homophobic views" (Parent et al., 2019).
- Studies conducted in the past exploring these relationships have been found to associate poorer mental health and higher risks of depression with those who conform to strongly masculine norms, however; results varied in terms of the specific norm in question, as these studies have also demonstrated that adhering to masculine behaviors can sometimes render adaptive (Wong et al., 2016).
- Due to these warped and oftentimes inappropriate/offensive expressions of gender, males have been in a sense confined to a box, making their attempts to release emotion in a healthy manner unattainable and lacking. Therefore, it is imperative to contextualize and develop a deep understanding regarding the various aspects of masculine displays, especially as they pertain to the embodiment and overall expression of mental illness.
- Hypothesis: Individuals who report higher levels of traditionally masculine traits will also report higher levels of depressive symptoms when compared to those who report lower levels of toxic masculinity traits.



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Toxic Masculinity and Mental Health

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University of Central Florida, Spring 2022

Methods and Materials

The data for this research are taken from a convenience sample of adult UCF undergraduates enrolled in at least one sociology course during the Fall 2021 and Spring 2022 semesters. Study participants were given a URL to an anonymous ten-minute survey containing questions about toxic masculinity and depression, as well as background information on their class rank (i.e., freshmen, sophomore, etc.), race, gender, sexual orientation, religious affiliation, and relationship status. The link was distributed to 733 students with 455 of responses for a response rate of 62%.

Depression in males was the dependent variable in this study. This was measured using the Beck Depression Inventory-II. This measurement tool consisted of twenty-one questions that evaluated one's levels of depression by using a score of severity based on the responses chosen by participants. This method of measurement was implemented for this particular investigation as it effectively put to words the feelings and negative experiences associated with depressive symptoms, some of which are hard to decipher at times with male individuals.

The independent variable was toxic masculinity. This was operationalized as seventeen questions measuring various aspects and levels of traditional masculine notions and behaviors. Respondents were asked questions derived from the Man Box Scale. These set of questions are particularly appropriate for this study as they relate to and concisely measure aspects of masculine norms such as self-sufficiency, acting tough, physical attractiveness, rigid masculine gender roles, heterosexuality and homophobia, hypersexuality, and aggression and control.

Results

An index (referred to as composite measure) was first computed for both the independent and dependent variables. The toxic masculinity index ranges from 17 through 136 with a mean of 46.53 and a standard deviation of 27.48.68% of respondents scored below the mean with the remaining 32% scoring above the value of 46.53. The depression scale ranged from 21 through 64, with a mean of 32.81 and a standard deviation of 9.58. The results from the depression scale indicated that 56.5% of respondents reported scores below the mean and 43.5% above it. A reliability and validity assessment were tested across the two variables to ensure consistency and accuracy within the measuring methods. These results are presented under Cronbach's Alpha. Both measures had rather high scores (both over .90), which indicates that the scales and indexes sustained in this investigation were reliable sources of measurement.

A closer look at the sample was then undergone. Descriptive statistics were given for each control variable asked within the survey, which revealed mostly white, cisgender, heterosexual females who identified with Christianity. From then the hypothesis testing commenced with the bivariate analysis on the independent and dependent variables. A correlation test was executed, rendering a Pearson (r) value of .205 and a p-value of .051. The relationship was considered statistically significant; however, the strength of the relationship is quite weak given the score of the r value (.205). Next, multiple OLS regressions were computed for both independent and dependent variables, along with the control variables which consisted of the respondent's relationship status, gender, sexual orientation, religious affiliation, race, and sex. Because this relationship between the two variables rendered statistically significant, the initial hypothesis can then be said to be supported.

Table 1.1 Descriptive Statistics For TM and Depression Composite.

Composite	Ν	Mean	SD	Range	Cronbach's Alpha
Toxic Masculinity	91	46.53	27.48	119.00	.943
Depression	91	32.81	9.58	43.00	.915

References

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Those who reported higher levels of toxic masculine traits reported higher rates of depressive symptoms than those who reported lower levels. This finding can be linked to early gender socialization, media influences, enforced societal expectations, and many other factors. Depending on the level of exposure and human absorbency of the above influences, one can be negatively impacted on a large scale. Not only is one more likely to experience depressive symptoms when coinciding with more traditional masculine traits, but research points to other detrimental factors like gender role conflict (GRC) and gender socialization theories dealing with rigid gender norms and expectations that can lead to a conglomeration of ailments if not treated. Kaya et al., (2019), states that psychological cost of endorsing rigid gender norms may induce gender role conflict (GRC) or the state in which restrictive gender roles heighten stress." These "men who reported heightened GRC, specifically Restricted Emotionality, reported decreased well-being. Given that the identity development and relationship formation are salient in emerging adulthood, it is possible that restricting one's emotional expression may be in contention with these expectations, thus creating strain" (Kaya et al., 2019). Other studies also indicate that males may also undergo 'double jeopardy.' A term which describes males who not only are at greater risk of depression but are also more likely to hold negative attitudes regarding counseling services. This finding is particularly concerning because oftentimes males do not express their thoughts and feelings the same way females may, making them susceptible to suppressing their emotions.

Strengths of this investigation are that the surveys created and distributed were clearly structured around the research question at hand. The scales that used within the survey also were of high validity and reliability. Weaknesses consisted of how the survey was only a convenience sample, making it difficult to generalize findings. In the future a much larger sample, preferably more male respondents, and a more diverse sample in terms of personal identities would make this research design that much more consistent and perhaps nuanced.

best advocate for change and promote health" (Rivera, 2019).



Discussion

Conclusions

I, as well as many other well-versed researchers in overlapping fields would agree, that these topics require a more nuanced approach to themselves if we want to change the overarching and fundamental expectations of gender, self-expression, and sexual acceptance in society. Stephen Wester argues for greater emphasis surrounding the context in which masculinity and similar topics are looked after within the realm of research. He states "that different men engaging in the exact same traditional male gender role behavior will experience different levels of GRC and accordingly different consequences, depending on the context of their lives. Therefore, while society does teach boys the culturally embedded standards of masculinity, any consequences of those standards" ... "are potentially moderated or mediated by the situational context in which an individual man exists" (Wester, 2008). This is especially important to keep in mind as "men, especially Caucasian males, have frequently been treated as the normative referent in determining social injustice; however, there is a serious discrepancy created by being masculine that is not accounted for by biology and is exacerbated by race, ethnicity, sexual orientation, and social class. The intersection between gender and each of these social health determinants must be uniquely evaluated to comprehensively understand how to