What’s Right With Men? Gender Role Socialization and Men’s Positive Functioning

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Abstract

This study explored relations between conformity to masculine norms, gender role conflict, hope, and psychological well-being among a sample of 389 men from a university, with a predominantly White student body, located in the Midwestern United States. Bivariate correlations revealed that men’s conformity to masculine norms and gender role conflict were positively correlated. Bivariate correlations revealed no significant relations between conformity to masculine norms, trait hope, and psychological well-being. Gender role conflict was associated with decreased hope and psychological well-being. Results of path analysis explained relations between conformity to masculine norms, gender role conflict, trait hope, and psychological well-being. This indicates that gender role conflict may contribute to lower trait hope and psychological well-being for college men. Although several aspects of conformity to masculine norms had positive associations with hope, these relations were significant and negative when men experienced gender role conflict. This work fills an important gap in the literature by examining the unique relations of conformity to masculine norms and gender role conflict to men’s positive functioning. Results are discussed within the context of positive psychological theories including Frederickson’s broaden and build theory of positive emotions, hope theory, Ryff’s model of psychological well-being, and self-determination theory. Implications and future directions are discussed.

Keywords

men, gender role socialization, hope, psychological well-being, positive psychology

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Almost two decades ago, positive psychologists posited that the disease model of psychology has not moved the field closer to the prevention of psychopathology (Seligman & Csikszentmihalyi, 2000). Similar trends have emerged in the study of the psychology of men and masculinities. Decades of research on male gender role socialization have unveiled numerous physical and psychological consequences of traditional masculinity for men’s health (McDermott, Schwartz, & Rislin, 2016; Wong, Ho, Wang, & Miller, 2017). This focus on negative aspects of masculinity is important, but it provides a limited view of masculinities that is based upon the principle that engagement in stereotypically masculine behavior is inherently negative (Hammer & Good, 2010). Very little is known about the healthy psychological functioning of men. There has been a movement among some scholars aiming to examine masculinity from a strengths-based, positive psychology perspective (Hammer & Good, 2010; Kiselica, Englar-Carlson, Horne, & Fisher, 2008; Levant, 1992); however, published literature on relations between gender role socialization and positive functioning of men is limited.

Gender Role Socialization

From a young age, men learn to evaluate their adequacy based upon their ability to behave in accordance with male
gender norms. These norms are shaped and influenced by culture, communicated to the individuals through social learning and filtered through, and affected by group characteristics (e.g., socioeconomic status and race) as well as individual characteristics (e.g., sexual identity; Levant & Pollack, 1995; Wong & Rochlen, 2008). Mahalik and colleagues (2003) proposed a model of conformity to masculine norms that details how these norms are formed, learned, experienced, and finally enacted in individual lives. Unique to the conformity to masculine norms model was the idea that individuals choose to conform or not conform to these norms and that this choice can have both positive and negative outcomes for the individual. Endorsement of traditional masculine norms predicts low self-esteem (Cournoyer & Mahalik, 1995), difficulty in interpersonal relationships (Fischer & Good, 1997; Sharpe & Heppner, 1991), tendencies toward interpersonal violence (Franchina, Eisler, & Moore, 2001), and psychological distress (e.g., depression and anxiety; Cournoyer & Mahalik, 1995; Hayes & Mahalik, 2000).

Men are prone to negative consequences when they fail to maintain these norms, thus threatening their manhood (Vandello & Bosson, 2013). There is variation in the degree to which men regulate their behavior in accordance with these socially prescribed norms as a way to affirm self-worth (Eisler, 1995; Englar-Carlson, 2006). Men whose self-worth is contingent on a personal sense of masculinity will feel increased self-esteem in response to positive feedback about their masculinity and experience a decrease in self-esteem in response to negative feedback about their masculinity (Burkley, Wong, & Bell, 2016). Male gender roles are contradictory and inconsistent. Crying, for example, is assumed to violate traditional masculine norms regarding emotional control, although in specific contexts (e.g., winning or losing a football game), men view shedding tears as an appropriate and typical response (Wong & Rochlen, 2005; Wong, Steinfeldt, LaFollette, & Tsao, 2011). These conflicting messages make it difficult for men to find congruence between societal perceptions of what it means to be a man and their own beliefs about masculinity.

Men's violation of gender roles leads to real and imagined psychological consequences and gender role strain (Pleck, 1995). Gender role conflict (O'Neil, 1981) is one of the most common results of gender role strain and occurs when individuals' socialized gender norms prevent them from acting in a certain way or lead them to feel negatively for doing so (O'Neil, 2008). Research on men's experiences of gender role conflict has provided support for the relationship between depression and anxiety (Cournoyer & Mahalik, 1995; Shepard, 2002), stress (Sharpe & Heppner, 1991), low self-esteem (Cournoyer & Mahalik, 1995), shame (Thompkins & Rando, 2003), and negative relationship outcomes (Sharpe & Heppner, 1991), and gender role conflict. In all, over 200 studies have examined the relationship between gender role conflict and the mental health issues of men, with the results suggesting significant associations between the experience of gender role conflict and negative outcomes (O'Neil, 2015). Although conformity to masculine norms and the experience of gender role conflict have been associated with numerous negative outcomes, far less is known about how they relate to men's positive functioning.

Positive Functioning

Hope. Although hope has been conceptualized in numerous ways throughout the history of psychology, the predominant theory of hope is that of Snyder and colleagues (1991). In this theory, hope is defined as “goal-directed thinking in which people perceive that they can produce routes to desired goals (pathways thinking) and the requisite motivation to use those routes (agency thinking)” (Lopez et al., 2003, p. 94). This model of hope is comprised of those three interrelated cognitive components—goals, agency, and pathways. Goals are the cognitive foundation of the theory and “provide the targets of mental action sequences” (Snyder, 2002, p. 250). Goals may be either short term or long term, must be of significant personal value, must be attainable, and must contain a degree of uncertainty. Pathways thinking is a person's perceived capacity to generate alternative routes to reach the desired goals. High-hope people tend to be decisive about the pathways for their goals and are effective at producing plausible alternate routes, should a barrier occur. Pathways thinking of high-hope persons becomes more precise as the goal pursuit sequence progresses toward goal attainment (Snyder, 1994). Agency thinking is a person’s perceived capacity to use pathways that have been produced to attain desired goals—it is the motivational component in hope theory. Agency is especially significant when people are met with barriers to goal attainment because it helps them direct motivation to necessary alternate pathways (Snyder, Rand, & Sigmund, 2005). The cognitive components of hope theory previously described are thought to drive emotional experiences in relation to goal pursuits, while emotional experiences, whether positive or negative, influence pathways, agency, and goal-related cognitions (Snyder, Parenteau, Shorey, Kahle, & Berg, 2002). Hope is related to a number of important life domains including physical health (Berg, Rapoff, Snyder, & Belmont, 2007; Kaplan, 2000; Snyder, 1996) and academic performance (Curry and Snyder, 2000; Snyder, Cheavens, & Michael, 1999). People's trait levels of hope are also associated with psychological adjustment (Kwon, 2002; Snyder et al., 1991); specifically, those with more trait hope exhibit less
depression and negative emotion (Kwon, 2000; Snyder, Symposon, Ybusco, Borders, Babyak, & Higgins, 1996) and more self-worth and life satisfaction (Chang, 1998; Snyder et al., 1996). The impact of emotion itself on an individual’s hope is addressed in Frederickson’s (2001) broaden and build theory of positive emotions, which holds that the experience of positive emotions provides individuals with the “ability to broaden people’s momentary thought-action repertoires and build their enduring personal resources, ranging from physical and intellectual resources to social and psychological resources” (2). This increase in momentary ability allows individuals to conceive a greater number of pathways toward achieving their goals, while also feeling more capable of reaching said goals due to their increased resources.

**Well-being.** There is little consensus on the operational definition or conceptualization of well-being (Cooke, Melchert, & Connor, 2016). Models of well-being vary in their adherence to hedonic and eudaimonic approaches, which influence their emphasis on happiness and life satisfaction versus self-actualization in pursuit of the good life (Cole, 2009). Ryff (1989) offered the first comprehensive conceptualization of psychological well-being, which served as an alternative to prevailing research on wellness that neglected theoretical rationale defining essential aspects of positive functioning. She argued that perspectives defining positive psychological functioning across disciplines of philosophy, life-span development, mental health, humanism, and clinical psychology could be integrated into a holistic summary. Ryff’s model of psychological well-being is guided by elements of theories including Maslow’s (1968) self-actualization theory, Roger’s (1961) understanding of the fully functioning person, Jung’s (1933) account of individuation, Allport’s (1961) maturity theory, Erikson’s (1959) psychosocial stages of development, Buhler’s (1935) basic life tendencies, Neugarten’s (1968) theory on personality, and Jaho-da’s (1958) positive criteria of mental health. Taken together, psychological well-being is defined inclusively by six domains: self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth (Ryff & Singer, 1996). This multidimensional model of positive psychological well-being offers key advantages. Most notably, the model defines criteria that are distinct from other prevailing conceptions of well-being (Cooke et al., 2016, Ryff & Singer, 1996). Studies have reported Ryff’s psychological well-being to be associated with a number of important outcomes. For example, individuals with higher levels of the six domains of psychological well-being were reported to have lower levels of depression (Ryff, 1989), improved emotion regulation (Gross & John, 2003), positive biological health markers (Ryff, Singer, & Love, 2004), and higher psychological need satisfaction consistent with self-determination (Church et al., 2012).

Self-determination theory (Ryan & Deci, 2000) posits that three universal psychological needs must be met for people to create intrinsic goals and develop to their fullest potential: (a) autonomy—experiencing freely chosen behavior, (b) relatedness—feeling belonging, intimacy, and connectedness to others, and (c) competence—feeling capable and effective in one’s actions. Consistent with Ryff’s conceptualization of well-being, people developing in environments that offer positive relationships, self-regulated behavior, and successful control over the world around them are better able to pursue authentic, internally motivated goals that enhance well-being across life domains (Deci & Ryan, 2008; Patrick, Knee, Canavello, & Lonsbary, 2007; Ryan & Deci, 2000; Ryff, 1989).

**Gender Role Socialization and the Positive Functioning of Men**

As of July 2018, published research on relations between gender role socialization and positive functioning of men is limited. Burkley et al. (2016) identified a distinction between two pathways of masculine self-worth: Contingency threat describes the extent that a man’s self-worth is threatened by a perceived lacking of masculinity, and contingency boost describes the amount of self-worth increase accompanied by confirmations of masculinity. Although masculine contingency and its latent variables predicted negative outcomes (e.g., gender role conflict, homophobia, and hostile sexism), threat and boost yielded differential results—threat, in most cases, was more associated with these negative outcomes, and boost predicted higher trait self-esteem. Hammer and Good (2010) examined relations between men’s conformity to masculine norms and autonomy (one of the six domains of psychological well-being defined by Ryff). Results of this study suggest that men who conformed to the masculine norms of winning and self-reliance reported lower levels of autonomy. Hammer and Good (2010) also identified that men who conformed to the masculine norm of dominance reported higher levels of autonomy. Increased conformity to certain masculine norms was associated with higher levels of positive functioning (i.e., grit, courage, and resilience).

In a meta-analysis of studies utilizing the Conformity to Masculine Norms Inventory (CMNI), Wong and colleagues (2017) reported that the norm of risk taking was associated with both positive and negative mental health outcomes and that the relationship between primacy of work and positive mental health was associated with either negative nor positive mental health outcomes. Gerdes and Levant (2018) performed a content analysis of studies utilizing the original CMNI consisting of 96 items and
utilized 219 significant findings in their analysis. Relationships between positive outcomes such as exercising (winning, violence), courage (risk taking, violation, and dominance), life satisfaction (emotional control), health promotion (risk taking, primacy of work), self-esteem and self-acceptance (winning, status, and power), and conformity to masculine norms were found. These results were limited in that they grouped previous results together to identify themes such as “life satisfaction” (a positive emotional experience) and “courage” (a positive trait). Additional research is needed to more clearly identify the relationship between conformity to masculine norms, eudaimonic perspectives on psychological well-being (i.e., Ryff’s 1998 model), and hope.

Research on relations between gender role socialization and hope is also severely limited and needs further examination. Although research indicates that men and women report no significant differences in overall hope, Chang (2003) suggested that men report greater agentic and pathways thinking than women do (Lee & Gallagher, 2018). Several studies have examined women’s experiences of gender role socialization and negative consequences for hope (see Lee & Gallagher, 2018, for review). Research on hope and men’s gender role socialization is scant. In one of the few studies to examine men’s hope, Cole and colleagues (2013) indicated that men who report more body surveillance and body shame also report less trait and relational hope.

The Current Study

Past studies demonstrate the ways in which conformity to masculine norms and gender role conflict restrict the experience of positive emotional experiences and positive functioning of men (Cournoyer & Mahalik, 1995; O’Neil, 2008; Sharpe & Heppner, 1991; Wong et al., 2017). Despite the assertion by Mahalik and colleagues (2003) that some aspects of conformity to masculine norms may be positive and beneficial to men, this research is underrepresented in the literature. Past research demonstrates that conformity to masculine norms is associated with positive health outcomes, positive traits, positive emotions, life satisfaction, and self-acceptance (Gerdes & Levant, 2018; Wong et al., 2017). Burkley and colleagues (2016) also suggest that confirmations of masculinity may boost self-esteem. The current authors posit that conformity to masculine norms and gender role conflict may function differently as they relate to men’s positive functioning. Whereas gender role conflict may restrict the experience of positive emotional experiences and development of positive traits, conformity to masculine norms may promote positive functioning. The current study utilized path analysis to examine relations between conformity to masculine norms, gender role conflict, and positive functioning of men through the lens of positive psychological theories including Snyder et al.’s (1991) hope theory and Ryff’s (1998) model of psychological well-being. More specifically the following hypotheses were tested:

Hypothesis 1: Higher conformity to masculine norms will be associated with more gender role conflict.

Hypothesis 2: Greater conformity to masculine norms will be associated with more (2a) trait hope goals, (2b) trait hope agency, (2c) autonomy, and (2d) environmental mastery and less (2e) trait hope pathways and (2f) self-acceptance.

Hypothesis 3: Increased experience of gender role conflict will be associated with less (3a) trait hope goals, (3b) trait hope pathways, (3c) trait hope agency, (3d) autonomy, (3e) environmental mastery, (3f) personal growth, (3g) positive relationships with others, and (3h) self-acceptance.

Hypothesis 4: The mediating effects of gender role conflict will explain negative relations between conformity to masculine norms and (4a) trait hope goals, (4b) trait hope pathways, and (4c) trait hope agency.

Hypothesis 5: The mediating effects of gender role conflict will explain the relations between conformity to masculine norms and (5a) autonomy, (5b) environmental mastery, (5c) personal growth, (5d) positive relationships with others, (5e) purpose in life, and (5f) positive functioning.

Method

Participants and Procedures

Prior to study recruitment, institutional review board approval was obtained. Male undergraduate students from a Midwestern university (N = 389) were recruited via the undergraduate psychology research pool and announcements in classes. Participants from the general campus population were entered into a drawing to win one of fifteen $10 gift cards of their choice of iTunes or Amazon.com. Participants from the undergraduate psychology pool received research credit for their participation. Ages ranged from 18 to 40 years (M = 20.24, SD = 2.813). Participants self-identified their race as Caucasian (N = 325, 83.6%), Latino (N = 18, 4.6%), African American (N = 17, 4.4%), Asian American (N = 17, 4.4%), biracial or multiracial (N = 9, 2.2%), and “other” (N = 3, 0.8%). The sample was predominantly heterosexual (N = 368, 94.5%), with participants also identifying as gay (N = 11, 2.7%), bisexual (N = 4, 1.1%), and “questioning” or “other” (N = 6, 1.4%). After providing consent, participants completed a brief set of demographic questions and the measures described in the following text.
Measures

Conformity to masculine norms. The Conformity to Masculine Norms Inventory-46 (CMNI-46; Parent & Moradi, 2009) is a 46-item, self-report measure of men’s endorsement of behaviors, feelings, and thoughts related to masculine gender role norms. Responses are provided on a 4-point Likert-type scale (0 = strongly disagree to 3 = strongly agree), with higher scores indicating greater conformity to masculine norms (Parent & Moradi, 2009). Convergent validity has been tested by comparing the CMNI-46 to the original version of the measure, the CMNI (CMNI; Mahalik et al., 2003), with correlations between the original CMNI subscales and CMNI-46 subscales ranging from .89 to .98, indicating a strong relationship between the measures (Parent & Moradi, 2009). Discriminant validity has been established through comparisons of scores on the CMNI-46, Male Role Norms Inventory—Short Form, and Gender Role Conflict Scale—Short Form (Levant, Hall, Weigold, & McCurdy, 2016). In the current study, the obtained mean score was 1.50 (SD = .32) and Cronbach’s α = .89.

Gender role conflict. The Gender Role Conflict Scale (GRCS; O’Neil, Helms, Gable, David, & Wrightsman, 1986) is a 37-item, self-report measure of stress related to conflict with traditional masculine gender roles. Items on the GRCS assess men’s cognitions, affect, behaviors, and unconscious beliefs about gender roles and are answered using a 6-point Likert-type scale (0 = strongly disagree to 6 = strongly agree), with higher scores indicating greater experience of gender-based conflict and fear of femininity (O’Neil et al., 1986). Convergent validity evidence for the GRCS is based upon positive associations between the original CMNI subscales and CMNI-46 subscales ranging from .89 to .98, indicating a strong relationship between the measures (Parent & Moradi, 2009). Discriminant validity has been established by comparing GRCS scores to scores on measures of masculine gender role stress scale, Masculine Role Norms Scale, Male Role Norm Inventory, and the Conformity to Masculine Norm Inventory (O’Neil, 2015). Discriminate validity has been established by comparing GRCS scores to scores on measures of sex role egalitarianism and homophobia (O’Neil, 2008). Across studies, the GRCS has demonstrated adequate internal consistency (α = .70–.90; O’Neil, 2015). In the current study, the obtained mean score was 3.71(SD = .61) and Cronbach’s α = .90.

Psychological well-being. The Ryff Scales of Psychological Well-Being—54 (SPWB-54; Ryff, 1989) is a 54-item, self-report measure of psychological well-being across six domains, including (a) Autonomy (e.g., “I tend to worry about what other people think of me”), (b) Environmental Mastery (e.g., “I often feel overwhelmed by my responsibilities”), (c) Personal Growth (e.g., “I am not interested in activities that will expand my horizons”), (d) Positive Relations with Others (e.g., “Most people see me as loving and affectionate”), (e) Purpose in Life (e.g., “My daily activities often seem trivial and unimportant to me”), and (f) Self-Acceptance (e.g., “I like most aspects of my personality”). Items are endorsed using a 6-point Likert-type scale (1 = strongly disagree to 6 = strongly agree), with higher scores indicating higher levels of psychological well-being. Internal consistency estimates range from .71 to .82 across subscales, indicating adequate internal consistency reliability. To date, no published studies have reported the test–retest reliability of the SPWB-54, however, 6-week estimates for the original 84-item version of the measure range from .81 to .88 across subscales (Ryff, 1989). Although there are no published studies of convergent or discriminant validity of the SPWB-54, the 84-item version of the measure reports evidence of convergent validity with measures of positive affect and life satisfaction and divergent validity from measures of depression and negative affect (Ryff, 1989; Ryff, Lee, Essex, & Schmutte, 1994; Ryff & Keyes, 1995). Mean psychological well-being scores for the SPWB-54 were calculated for the current study and ranged from 4.10 to 4.60 (see Table 1 for more details). Cronbach’s α ranged from .71 to .84 across subscales.

Hope. The Trait Hope Scale—Revised (HSR; Shorey & Snyder, 2004) is a 18-item, self-report measure of hope across three domains including (a) Goals (e.g., “I clearly define the goals that I pursue”), (b) Pathways (e.g., “I can think of many ways to get out of a jam”, and (c) Agency thinking (e.g., “I have found that I can overcome challenges”). Items are endorsed using an 8-point Likert-type scale (1 = Definitely false to 8 = Definitely true), with higher scores indicating higher levels of hope. Ranging from 1 (Definitely false) to 8 (Definitely true), responses are assessed on an 8-point Likert-type scale. In a study utilizing the HSR with college students, the HSR indicated convergent validity with measures of self-efficacy and well-being and discriminant validity from measures of psychological distress. Internal consistency reliability ranged from .64 to .81 across subscales and .86 to .88 for the overall scale (Shorey & Snyder, 2004). Mean trait hope scores for the HSR were calculated for the current study and ranged from 5.96 to 6.32 (see Table 1 for more details). Cronbach’s α ranged from .73 to .83 across subscales.

Results

Correlations

Consistent with Hypothesis 1, men’s conformity to masculine norms and gender role conflict were positively
correlated with one another. Bivariate correlations (Table 1) revealed no significant relations between conformity to masculine norms, trait hope, and psychological well-being (Hypotheses 2a–2f). However, consistent with Hypothesis 3, more gender role conflict was associated with less trait hope pathways (Hypothesis 3b), trait hope agency (Hypothesis 3c), autonomy (Hypothesis 3d), environmental mastery (Hypothesis 3e), personal growth (Hypothesis 3f), positive relationships with others (Hypothesis 3g), and self-acceptance (Hypothesis 3h).

Path Analysis

Path analysis was utilized to evaluate the direct relations between conformity to masculine norms, gender role conflict, trait hope, and psychological well-being as described in Hypotheses 2 and 3 and to directly test Hypotheses 4 and 5, that the mediating effects of gender role conflict explain relations between conformity to masculine norms, trait hope, and psychological well-being. To examine the unique direct and indirect effects of these variables, two path models were developed (see Figures 1 and 2). Path analysis is similar to structural equation modeling including a structural model, but path analysis does not include a measurement model. The model is fully saturated (like hierarchical linear regression), and thus, testing model fit or examining fit indices is inappropriate. In Model 1, conformity to masculine norms was the predictor (X), gender role conflict was the mediator (M), and trait hope goals, trait hope pathways, and trait hope agency served as the outcomes (Y1–Y3). In Model 2, conformity to masculine norms was the predictor (X), gender role conflict was the mediator (M), and autonomy, environmental mastery, personal growth, positive relationships with others, purpose in life, and self-acceptance served as outcomes (Y1–Y6).

Maximum likelihood estimation within Mplus Version 7.0 (Muthén & Muthén, 1998/2012) was used to estimate the path analysis for each model. Examining all of the variables within each model simultaneously allowed us to consider each variable’s unique variance while controlling for the other variables. The unstandardized direct path coefficients and errors are depicted in Figures 1 and 2, whereas a summary of the indirect effects appears in Table 2. Specifically, following recent recommendations for testing mediation (Mallinckrodt, Abraham, Wei, & Russell, 2006), 10,000 bootstrap samples were used to examine the significance of indirect effects. The bootstrapped unstandardized indirect path coefficients and errors and 95% bias-corrected confidence intervals are reported (Williams & MacKinnon, 2008). If the 95% confidence interval does not contain zero, then the indirect effects are considered significant and indicate mediation (see Mallinckrodt et al., 2006).

Unique Direct Relations

Model 1. When all variables were included in the model (see Figure 1), a positive direct relation between conformity to masculine norms and gender role conflict emerged (Hypothesis 1). Consistent with Hypothesis 2, higher levels of conformity to masculine norms were associated with higher levels of trait hope agency (Hypothesis 2b). Inconsistent with Hypothesis 2, higher levels of conformity to masculine norms were not associated with increased trait hope goals (Hypothesis 2a). As predicted in Hypothesis 3, higher levels of gender role conflict

| Variables | N   | M   | SD  | 1  | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 10 | 11 |
|-----------|-----|-----|-----|----|----|----|----|----|----|----|----|----|----|----|
| 1. Goals  | 388 | 5.96| 1.15| –  | –  | –  | –  | –  | –  | –  | –  | –  | –  | –  |
| 2. Pathways | 388 | 6.01| 1.06| .63**| –  | –  | –  | –  | –  | –  | –  | –  | –  | –  |
| 3. Agency | 388 | 6.32| 1.10| .72**|.71***| –  | –  | –  | –  | –  | –  | –  | –  | –  |
| 4. CMNI-46 | 389 | 1.5 | .32 | –.00| –.01| .09| –  | –  | –  | –  | –  | –  | –  | –  |
| 5. GRCS   | 389 | 3.71| .61 | –.10| –.15**| –.13**| .56**| –  | –  | –  | –  | –  | –  | –  |
| 6. PWB-A  | 389 | 4.16| .61 | .44**| .50**| .50**| –.08| –.28***| –  | –  | –  | –  | –  | –  |
| 7. PWB-EM | 389 | 4.25| .71 | .55**| .60**| .73**| .03| –.23**| .43**| –  | –  | –  | –  | –  |
| 8. PWB-PG | 389 | 4.60| .63 | .57**| .54**| .55**| –.10| –.24**| .43**| .42**| –  | –  | –  | –  |
| 9. PWB-PR | 389 | 4.47| .80 | .43**| .43**| .57**| –.10| –.31**| .35**| .59**| .46**| –  | –  | –  |
| 10. PWB-PL| 389 | 4.10| .68 | .69**| .51**| .63**| –.04| –.14**| .38**| .63**| .51**| .52**| –  | –  |
| 11. PWB-SA| 389 | 4.44| .53 | .53**| .54**| .70**| .02| –.18**| .49**| .73**| .49**| .64**| .60**| –  |

Note. Trait Hope Scale—Revised (Goals subscale, Pathways subscale, Agency subscale), Conformity to Masculine Norms Inventory-46 (CMNI-46), Gender Role Conflict Scale (GRCS), Ryff Scales of Psychological Well-Being-54 (PWB-A = Autonomy subscale, PWB-EM = Environmental Mastery subscale, PWB-PG = Personal Growth subscale, PWB-PR = Positive Relationships subscale, PWB-PL = Purpose in Life subscale, PWB-SA = Self-Acceptance subscale).

*p < .05. **p < .01.
Figure 1. Empirical model of relations between gender socialization and hope.

Note. Values represent the unstandardized coefficients and standard errors. Solid lines indicate a positive relationship. Dashed lines indicate a negative relationship.

* p < .05. ** p < .01. *** p < .001.

Figure 2. Empirical model of relations between gender socialization and well-being.

Note. Values represent the unstandardized coefficients and standard errors. Solid lines indicate a positive relationship. Dashed lines indicate a negative relationship.

* p < .05. ** p < .01. *** p < .001.
were associated with lower levels of trait hope goals (Hypothesis 3a), trait hope pathways (Hypothesis 3b), and trait hope agency (Hypothesis 3c).

Model 2. When all variables were included in the model (see Figure 2), a positive direct relation between conformity to masculine norms and gender role conflict emerged (Hypothesis 1). Consistent with Hypothesis 2, higher levels of conformity to masculine norms were associated with higher levels of environmental mastery (Hypothesis 2d) and self-acceptance (Hypothesis 2f). As predicted in Hypothesis 3, higher levels of gender role conflict were associated with lower levels of autonomy (Hypothesis 3d), environmental mastery (Hypothesis 3e), personal growth (Hypothesis 3f), positive relationships with others (Hypothesis 3g), and self-acceptance (Hypothesis 3h).

Mediation

Hypotheses 4 and 5 examined the indirect effects of gender role conflict mediating relations between conformity to masculine norms and psychological well-being. With regard to men’s trait hope, gender role conflict significantly mediated the relations between their conformity to masculine norms and each of the three domains of trait hope (Hypotheses 4a–4c). Furthermore, gender role conflict significantly mediated the relations between conformity to masculine norms and all six domains of psychological well-being (Hypotheses 5a–5f).

Discussion

Model 1. Results of path analysis conducted for Model 1 revealed that when conformity to masculine norms and gender role conflict were included simultaneously, only gender role conflict revealed negative relations to (a) trait hope goals, (b) trait hope pathways, and (c) trait hope agency. When men experience gender role conflict, fear of social and/or psychological consequences may lead them to restrict their behaviors to avoid deviating from gender norms. As a result, they might struggle to reach their full potential (O’Neil, 2008). Men experiencing gender role conflict may place limitations on their goal pursuits (e.g., eliminate goals that do not demonstrate or reinforce their masculinity), engage in goals that have less intrinsic meaning (e.g., avoidance goals based upon fear of femininity), see fewer pathways to their desired goals, and experience decreased motivation toward these goals (i.e., agency thinking). Applying Fredrickson’s (1998, 2001) broaden and build theory of positive emotions, this study proposes that the negative emotions that occur as a result of gender role conflict lead men to ruminate on problems and deficits, which in turn prevents the expansive mood and thought action repertoires necessary for the development of hope. When a man is experiencing gender role conflict, therefore, it may be much more difficult to see beyond the issues leading to the conflict, let alone to work toward one’s desired goals for the future. This is consistent with past research on hope, which has indicated that the emotional state of the individual was a strong predictor of goal pursuits, pathways thinking, and agency thinking (Snyder, 2002). The use of GRCS total score in this study does not allow for the interpretation of what specific dimensions of the GRCS may further explain this finding, which could shed light on how gender role conflict inhibits positive functioning.

Model 2. Numerous studies have suggested that conformity to masculine norms negatively impacts men’s...
mental health (see Wong et al., 2017 for review). Results of the path analysis conducted for Model 2 suggest that conformity to certain masculine norms, when utilized in appropriately corresponding situations, may enhance men's psychological well-being, namely, in the domains of environmental mastery and self-acceptance. Inferences cannot be made about which specific masculine norms of the CMNI relate to environmental mastery and self-acceptance; however, the findings from Model 2 are consistent with the work of Hammer and Good (2010), which reported that conformity to certain aspects of masculine norms (i.e., risk taking, dominance, primacy of work, and pursuit of status) was associated with increased positive functioning (i.e., courage, autonomy, endurance, and resilience). In contrast, increased gender role conflict was associated with decreased autonomy, environmental mastery, personal growth, positive relationships, purpose in life, and self-acceptance. Applying Ryan and Deci’s (2000) self-determination theory, this study proposed that gender role conflict restricts men's potential for growth and diminishes their well-being by reducing their autonomy, competence, and relatedness. When men restrict their actions as a result of perceived consequences of deviating from masculine norms, their autonomy is diminished. Men experiencing high levels of gender role conflict may feel less competence, less ability to reach desired outcomes, and lower environmental mastery. Decisions to restrict emotions and become overly involved in work may negatively impact the need for relatedness by impacting relationships with others. With regard to personal growth and purpose in life, one possibility is that gender role conflict makes it more difficult to work toward self-determined goals when these goals are inconsistent with traditional masculine norms.

Mediation analyses. The results of the mediation analyses conducted for Hypothesis 4 demonstrated that gender role conflict is the mechanism through which conformity to masculine norms is negatively associated with men's hope and psychological well-being. Past research has demonstrated that adherence to specific masculine norms is related to negative health outcomes (Wong et al., 2017), but it is noteworthy that conformity to masculine norms was not a significant negative predictor of hope or psychological well-being in this sample. In fact, endorsement of masculine norms was associated with increased agency thinking, environmental mastery, and self-acceptance. These factors have been implicated as vital to mental health throughout the history of positive psychology (Jahoda, 1958; Keyes, 2007). Consistent with positive masculinity theory (Kiselica & Englar-Carlson, 2010) and the original conceptualization of conformity to masculine norms (Mahalik et al., 2003), results of the current study suggest that conformity to certain masculine norms may be related to some positive outcomes in men. The specific subscales of CMNI that might be associated with the aforementioned domains of psychological well-being and hope are to still be explored.

Implications

The results of the current study enhance our understanding of the influence of gender role socialization on the positive functioning of men. More specifically, the current study provides evidence that conformity to masculine norms may have some positive benefits for men, whereas gender role conflict is associated with decreased hope and psychological well-being. Results suggest that positive functioning is impacted across interpersonal and intrapersonal domains of psychological well-being. The current study provides evidence that when conformity to masculine norms leads to gender role conflict, men may experience less hopeful thinking, autonomy, environmental mastery, personal growth, positive relationships, purpose in life, and self-acceptance, which lends additional support to the importance of studying men's positive functioning when exploring male gender role socialization. More specifically, clinicians and researchers are encouraged to utilize a contextual approach to masculinities, which recognizes that men enact aspects of gender conformity differently across environments and situations (Wong & Rochlen, 2008). Thus, aspects of conformity to masculine norms may vary in their influence on the positive functioning of men. However, gender role conflict appears to consistently predict diminished positive functioning. Clinicians are encouraged to treat conformity to masculine norms and gender role conflict as two unique aspects of male gender role socialization. Furthermore, clinicians should assess gender role conflict along with symptom distress and psychological well-being when making determinations about each client's psychological functioning.

Limitations

The primary limitations of the current study include the use of self-report measures, the lack of diversity among participants, and the use of total scores for the CMNI and GRCS. The use of information from participant self-reports may lead to questions regarding the accuracy of responses. Although the demographics of the current sample mirror those of the university where data were collected, the lack of racial and sexual diversity among participants limits generalizability and does not allow for comparisons of hypotheses between groups. Given that all participants were college men, the generalizability of the findings to non-college men is limited. The use of total scores for the CMNI and GRCS limits the extent to
which the findings of this study can be interpreted. Based on the results, there is evidence to claim a suggested link between GRCS and CMNI with hope and psychological well-being; however, inferences about which specific sub-scales of GRCS and CMNI contribute to that relationship cannot be made. It would not be advisable to assume GRCS and CMNI in their entirety influence the relationships found in this study. The findings of this study do give reason to further examine the concept of positive masculinity, starting with which aspects of conformity to masculine norms and gender role conflict predict which aspects of hope and psychological well-being. Finally, the causal links between variables should be interpreted with caution due to the correlational nature of the study.

**Conclusion**

This study investigated associations between gender role socialization, hope, and psychological well-being among a sample of college men. Results indicate that gender role conflict may contribute to lower trait hope and psychological well-being for college men. Although several aspects of conformity to masculine norms had positive associations with hope, these relations were significant and negative when men experienced gender role conflict. The current study fills a gap in the literature by empirically linking the experience of gender role conflict to decreased hope and psychological well-being. Furthermore, the current study provides evidence that conformity to certain masculine norms in and of itself does not have negative implications for the hope and psychological well-being of college men. Rather, it is when rigid conformity to masculine norms leads to gender role conflict that problems ensue.

**Authors’ Note**

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**References**

Allport, G. W. (1961). *Pattern and growth in personality*. New York, NY: Holt, Rinehart & Winston.

Berg, C. J., Rapoff, M. A., Snyder, C. R., & Belmont, J. M. (2007). The relationship of children’s hope to pediatric asthma treatment adherence. *The Journal of Positive Psychology*, 2(3), 176–184. doi:http://dx.doi.org/10.1080/17439760701409629

Buhler, C. (1935). The curve of life as studied in biographies. *Journal of Applied Psychology*, 19, 405–409. doi:http://dx.doi.org/10.1037/h0054778

Burkley, M., Wong, Y. J., & Bell, A. C. (2016). The Masculine Contingency Scale (MCS): Scale development and psychometric properties. *Psychology of Men and Masculinity*, 17, 113–125. doi:http://dx.doi.org/10.1037/a0039211

Chang, E. C. (1998). Hope, problem-solving ability, and coping in a college student population: Some implications for theory and practice. *Journal of Clinical Psychology*, 54(7), 953–962.

Chang, E. C. (2003). A critical appraisal and extension of the hope theory in middle-aged men and women: Is it important to distinguish agency and pathways components? *Journal of Social and Clinical Psychology*, 22(2), 121–143.

Church, A. T., Katigbak, M. S., Locke, K., Zhang, H., Shen, J., Vargas-Flores, J. D., … Ching, C. M. (2012). Need satisfaction and well-being: Testing self-determination theory in eight cultures, *Journal of Cross-Cultural Psychology*, 44(4), 507–534. doi:http://dx.doi.org/10.1177/0022022112466590

Cole, B. P. (2009). The good life. In S. J. Lopez (Ed.), *The encyclopedia of positive psychology* (pp. 438–441). Malden, MA: Wiley-Blackwell.

Cole, B. P., Davidson, M. M., & Gervais, S. J. (2013). Body surveillance and body shame in college men: Are men who self-objectify less hopeful? *Sex Roles*, 69(1–2), 29–41. doi:http://dx.doi.org/10.1007/s11199-013-0282-3

Cooke, P. J., Melchert, T. P., & Connor, K. (2016). Measuring well-being: A review of instruments. *The Counseling Psychologist*, 44, 730–757. doi:http://dx.doi.org/10.1177/0011000016633507

Cournoyer, R. J., & Mahalik, J. R. (1995). Cross-sectional study of gender role conflict examining college-aged and middle-aged men. *Journal of Counseling Psychology*, 42, 11–19. doi:http://dx.doi.org/10.1037/0022-0167.42.1.11

Curry, L. A., & Snyder, C. R. (2000). Hope takes the field: Mind matters in athletic performances. In C. R. Snyder (Ed.), *Handbook of hope: Theory, measures, and applications* (pp. 243–259, Chapter xxv, 440 pages). San Diego, CA: Academic Press. doi:http://dx.doi.org/10.1016/B978-012654050-5/50015-4

Deci, E. L., & Ryan, R. M. (2008). Self-determination theory: A macrotheory of human motivation, development, and health. *Canadian Psychology/Psychologie canadienne*, 49(3), 182–185. doi:http://dx.doi.org/10.1037/a0012801

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). New York, NY: Basic Books.

Englar-Carlson, M. (2006). Masculine norms and the therapy process. In M. Englar-Carlson & M. A. Stevens (Eds.), *In the room with men: A casebook of therapeutic change* (pp. 13–47). Washington, DC: American Psychological Association.
Parent, M. C., & Moradi, B. (2009). Confirmatory factor analysis of the conformity to masculine norms inventory and development of the conformity to masculine norms inventory-46. *Psychology of Men & Masculinity, 10*(3), 175–189. doi:http://dx.doi.org/10.1037/a0015481

Patrick, H., Knee, C. R., Canevello, A., & Lonsbary, C. (2007). The role of need fulfillment in relationship functioning and well-being: A self-determination theory perspective. *Journal of Personality and Social Psychology, 92*(3), 434–457. doi:http://dx.doi.org/10.1037/0022-3514.92.3.434

Pleck, J. H. (1995). The gender role strain paradigm: An update. In R. Levant & W. Pollack (Eds.), *A new psychology of men* (pp. 11–32). New York, NY: Basic Books.

Rogers, C. R. (1961). *On becoming a person: A therapist’s view of psychotherapy*. London: Constable.

Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist, 55*(1), 68–78. doi:http://dx.doi.org/10.1037/0003-066X.55.1.68

Ryff, C. D. (1989). Happiness is everything, or is it? Explorations of psychological well-being. *Journal of Personality and Social Psychology, 56*(6), 1069–1081. doi:http://dx.doi.org/10.1037/0022-3514.56.6.1069

Ryff, C. D., & Keyes, C. L. M. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology, 69*, 719–727. doi:http://dx.doi.org/10.1037/0022-3514.69.4.719

Ryff, C. D., Lee, Y., Essex, M. J., & Schmutte, P. S. (1994). My children and me: Midlife evaluations of grown children and of self. *Psychology and Aging, 9*, 195–205. doi:http://dx.doi.org/10.1037/0882-7974.9.2.195

Ryff, C. D., & Singer, B. (1996). Psychological well-being: Meaning, measurement, and implications for psychotherapy research. *Psychotherapy and Psychosomatics, 65*, 14–23. doi:http://dx.doi.org/10.1159/000289026

Ryff, C. D., Singer, B. H., & Love, G. D. (2004). Positive health: Connecting well-being with biology. *Philosophical Transactions of the Royal Society of London, 359*, 1383–1394. doi:http://dx.doi.org/10.1098/rstb.2004.1521

Seligman, M. E. P., & Csikszentmihalyi, M. (2000). Positive psychology: An introduction. *American Psychologist, 55*(1), 5–14. doi:http://dx.doi.org/10.1037/0003-066X.55.1.5

Sharpe, M. J., & Heppner, P. P. (1991). Gender role conflict, and psychological well-being in men. *Journal of Counseling Psychology, 38*(3), 323–330. doi:http://dx.doi.org/10.1037/0022-0167.38.3.323

Shepard, D. S. (2002). A negative state of mind: Patterns of depressive symptoms among men with high gender role conflict. *Psychology of Men & Masculinity, 3*, 3–8. doi:http://dx.doi.org/10.1037/1524-9220.3.1.3

Shorey, H. S., & Snyder, C. R. (2004). *The revised domain specific hope scale*. Unpublished manuscript, University of Kansas, Lawrence, KS.

Snyder, C. R. (1994). *The psychology of hope: You can get there from here*. New York, NY: Free Press.

Snyder, C. R. (2002). Hope theory: Rainbows in the mind. *Psychological Inquiry, 13*, 249–275. doi:http://dx.doi.org/10.1207/S15327965PNI1304_01

Snyder, C. R., Irving, L., & Anderson, J. R. (1991). Hope and health: Measuring the will and the ways. In C. R. Snyder & D. R. Forsyth (Eds.), *Handbook of social and clinical psychology: The health perspective* (pp. 285-305). Elmsford, NY: Pergamon.

Snyder, C. R., Michael, S. T., & Cheavens, J. S. (1999). Hope as a psychotherapeutic foundation of common factors, placebos, and expectancies. In M. A. Hubble, B. L. Duncan, & S. D. Miller (Eds.), *The heart and soul of change: What works in therapy* (pp. 179–200, Chapter xxiv, 462 pages). Washington, DC: American Psychological Association. doi:http://dx.doi.org/10.1037/11132-005

Snyder, C. R., Parenteau, S. C., Shorey, H. S., Kahle, K. E., & Berg, C. (2002). Hope as the underlying process in the psychotherapeutic change process. *International Gestalt Journal, 25*, 11–29.

Snyder, C. R., Sympson, S. C., Ybasco, F. C., Borders, T. F., Babyak, M. A., & Higgins, R. L. (1996). Development and validation of the state hope scale. *Journal of Personality and Social Psychology, 70*(2), 321–335. doi:http://dx.doi.org/10.1037/0022-3514.70.2.321

Thompkins, C. D., & Rando, R. A. (2003). Gender role conflict and shame in college men. *Psychology of Men & Masculinity, 4*(1), 79–81. doi:http://dx.doi.org/10.1037/1524-9220.4.1.79

Williams, J., & MacKinnon, D. P. (2008). Resampling and distribution of the product methods for testing indirect effects in complex models. *Structural Equation Modeling, 15*, 23–51. doi:http://dx.doi.org/10.1080/10705510701758166

Wong, Y. J., Ho, R. M., Wang, S. Y., & Miller, I. S. K. (2017). *Structural Equation Modeling*, 51. doi:http://dx.doi.org/10.1007/978-981-10-0257-9

Wong, Y. J., & Rochlen, A. B. (2005). Demystifying men’s emotional behavior: New directions and implications for counseling and research. *Psychology of Men & Masculinity, 6*, 62–72. doi:http://dx.doi.org/10.1037/1524-9220.6.1.62

Wong, Y. J., & Rochlen, A. B. (2008). Re-envisioning men’s emotional lives: Stereotypes, struggles, and strengths. In S. J. Lopez (Ed.), *Positive psychology: Exploring the best in people: Capitalizing on emotional experiences* (Vol. 2, pp. 149–163, Chapter xvii, 183 pages) Westport, CT: Praeger Publishers/Greenwood Publishing Group.

Wong, Y. J., Steinfeldt, J. A., Lafollette, J. R., & Tsao, S. (2011). Men’s tears: Football players evaluations of crying behavior. *Psychology of Men & Masculinity, 12*(4), 297–310. doi:http://dx.doi.org/10.1037/a0020576