

Gender–Oriented Therapy for Man

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What is a gender-oriented perspective?

During the past decade and a half, a group of approaches to understanding women (represented by the work of Chodorow, 1978; Gilligan, 1982; and others) has gained wide popularity, both within and outside academia. Collectively, these models suggest that girls and women necessarily have different experiences than do boys and men and that those differential experiences generate distinctive modes of thinking, judging, relating, and so forth. According to those thinkers, gender is not biological but it is a social construct.

“ The fundamental assertion of social construction is that we have no way of knowing with certainty the nature of reality. What we purport to know, what we see as truth, is a construction, a best understanding, based upon and inextricably intertwined with the contexts within which we create. What we called knowledge is simply what we agreed to call truth” (Bohan 1997 P. 38)

Gender, from this understanding, is the meaning we have agreed to impute to a particular class of transaction between individuals and environmental contexts. As Bohan (1997, P.23) say: “One does not have gender; one does gender”

”The research that has been done in the past two decades showed the differential oppositional constructs that society teaches men and women. As mentioned before, those oppositions are not biological or natural, but socially contracted.

The oppositional characteristics that are expected from men as opposed to women, as Frosh (1992 P.44) illustrates are:

Strength—weakness
Control—understanding
Independence—dependence
Achievement—acceptance
Abstraction—concreteness
Behavior—experience

Feminist theory has been demonstrating for many years the cost and the damage that these oppositions lead to. There is no value judgment in saying that one gender is different from the other. The problem arises when the dominant gender, the man, sets values for each quality and emphasizes that the qualities of the male gender are better than those of the female. In this paper I will not explore in depth the feminist approach but it is important to stress that the new theories of masculinity and therapy emerge from the feminist perspective. Without the feminist perspective we would not be able to understand and help men as we hope to. As Rowan expresses: “If we want to understand why the masculine role is so compulsive and universal, we have to go into feminism” (Rowan 1997 P. 9).

For the past decades the feminist view showed how women are “forced” to act in ways that do not allow them to develop themselves freely and are often oppressed physically, financially, emotionally and politically (Gavey 1997). In this essay I will try to demonstrate the process that happens to men in society, and the cost that they may pay in their everyday lives.

This approach or reaction to feminism by men is called “the pro-feminist perspective”. It claims that “hegemonic masculinity” is committed to misogyny and violence against women, and that patriarchy is the social and political order in which this exists. This paper emerges from the approach which stresses that masculinity is a “set of limitations that are imposed on men”, much as femininity is a “set of limitations that are imposed on women”. This is a non-defensive perspective that tries to learn from feminism rather than oppose it (Rowan 1997).

The Socialization of Males

We are not born with those qualities that seem to typify man or woman. We learn them from society in many different kinds of experiences during our childhood and growing up years, and even afterwards. We learn our sex roles from society and start to act according to them.

Hopkins tells about his experience as a student in a normal conservative Christian high school:

“ Quite specifically and explicitly, we were taught that women were more emotional, more verbal, more in need for security, love, and attention, more interested in their physical appearance, more interested in family than individual success, naturally maternal, less logical, less sexual, less aggressive, less leader and in general, people whose self esteem was wrapped up in relationships and doing for others.

Men, we were explicitly taught, were the opposite: individualistic, aggressive, independent, more in need for social status, more leaders, rational and yet paradoxically far more controlled by forceful sex drives, less interested in their physical appearance, less emotional and in general people whose self esteem was based on their social success and being effective leaders” (Hopkins 1998 P.34)

Children, from the time they are born, are both explicitly and implicitly taught how to be a man or a woman. While the girls are taught to act “feminine”, the boys are taught to “be a man”. In learning to be a man, the boy comes to value expressions of masculinity such as physical courage, competitiveness and aggressiveness (Balswick & Peek 1971)

There are several ways in which the little child understands these codes and learns to behave according to them:

“ Reward and punish, encourage and discourage, are the keys to understanding how men are taught to behave like ‘men’. In a thousand different incidents that constitute a thousand different learning experiences, a pattern of predictable and characteristic behavior will emerge.” (Gaylin 1992 P. 19).

According to Schmitt (1998), a sense of self is built through conscious and un-conscious pieces of conditioned behavior, emulation, and also identification, which proceed in a purely unconscious fashion. The father has an important role in this process. A man may find himself consciously or unconsciously behaving like his father. He may walk, talk, and can behave toward others as his father does, even if he loathes the way his father behaves.

A “real man”: what it means to be a man

As mentioned earlier, both sexes are socialized in different ways. In this section I will describe the “real man”, according to stereotypical images.

A “real man” is strong, sexy, courageous, stoic, beneficent, modest, and independent. He is not whiny, weak, clinging, emotional, vain, girlish or a “mama’s boy” (Schmitt 1998).

I will mention a few basic codes of masculinity, of what we call the “macho man”. These are the codes that are common in the western society, and even if we have an illusion that they no longer exist in our society they are still the norms of being a man (Nardi 1992).

Nardi (1992) points out several characteristics of the “real man:

1. The “real man” has to be as non-feminine as he can.
2. The “real man” has to be superior to other men and women.
3. The “real man” has to be in control all the time and not show emotions such as pain and distress.

It is these codes that seem to represent masculinity for most males, and in order to be a “real” man you have to do everything you can to adapt yourself to those codes. Otherwise you are not a man:

“ From pre-pubescence on, a boy will be struggling to prove that he is a real man. A barrage of words will be aimed at the boy as a challenge to his manhood that must be answered in kind or be ignored with shame and humiliation. He will be called a “Mama’s boy” or a “fag”, or their equivalent” (Gaylin 1992 P. 30).

If the man will not act as a “man” he might feel that he is a woman. For a boy, being a girl is a serious threat because it raises anxiety by representing a loss of power. Until real power is attained, the young boy’s current power is in the power of imagination, but the continued pull of passive aims, the attraction to girls and mother, ensure that a tension continues to exist (Kaufman 1995). This is why men work so hard at doing and acting like “real” men. This effort affects them in a various ways, as we shall see in the next chapter on practice.

The codes Nardi points out are the ones that are relevant for this paper. As I expressed earlier, what I, as a social worker, believe in, is the effect, the value, and the importance of emotion in changing and helping others. The codes of masculinity, such as being strong, responsible and protective, guide the way a man deals or more correctly does not seem to deal with his emotions. The role of men in our culture is to have power, and power seems to translate into “not showing and not expressing emotion”.

“ The little boy must become inexpressive not simply because our culture expects our boys to be inexpressive but because our culture expects little boys to grow up to become decision makers and wielders of power” (Sattel 1995 P. 295).

Emotions are the drives that influence our actions and our activities in the world. The “real man” is trying to rationalize the world and himself in it and trying to act according to his sets of beliefs. On one level, the cognitive one, there is nothing wrong with thus approach. One has to have sets of beliefs for living and feeling for a sense of meaning in life. The problem starts when

man do not take under consideration their feelings as one aspect in decision-making in their life. The “real man” is trying desperately to live according to some norms that for the most part put aside many of his emotions.

I have just mentioned the sociological origin of inexpressive masculinity. We can think also about the psychological origins of this phenomenon. According to Real (1997), men tend to be more narcissistic than women. Following Kohut (1985) a narcissistic disorder basically means that one gets self-esteem and self-value through the reflection of the other. As Real (1997) said, the narcissistic man, the “macho”, gets his self value not according to what he “feels about himself” but according to how he sees his “reflection in others”.

“ The man who is in love with his reflection is like one who is in love with his looks, bank account, or his power. Each time he tries to get what he wants, it runs away from him. Even his tears, which are an expression of his pain, are not allowed because they make him hate the way he looks in the narcissistic reflection” (Real 1997 P. 33)

The narcissistic man will try to attain and retain power because it allows him to love himself. He will not show his emotions easily because they make him look weak and he cannot see himself in this manner.

He pays dearly for this image, as I will demonstrate in the next section.

What may be the psychological costs of being a man?

In this section I will focus on the psychological costs that may be the consequence of “being a man”. By “being a man” I am referring to the behaviors mentioned earlier; Inability to express feelings and internalizing the vulnerable emotions, such as pain, sadness, anxiety, shame and fear. My assumption is that the psychological problems that emerge as a result of this behavior manifest themselves in a wide range of life domains such as sex, work, health, fatherhood and addiction (Real 1997).

“Hidden depression”

I am talking about the phenomena of “hidden depression”, a term that seems appropriate, because men tend not to recognize and to cover up their emotions regarding depression. The reason for this cover-up is shame. Shame is described in the literature as an inconvenient emotion of low self value compared to others (Morisson 1989). At certain intensity, shame has the power to make us feel completely worthless, degraded from head to foot, sometimes without our having done anything bad at all (Jacoby 1996).

“ The definition of masculinity is to be strong. Recognizing the depression means to surrender, and men will try to work more but will not to try to work out their emotions of sadness. For men, denial of pain appears to be a strong and admirable attitude.” (Real 1995 P. 27).

Male “hidden depression” is one of the main problems and costs of trying to be the “real man”. “Hidden depression” is one of the most common disorders in western society and one of the most ignored syndromes in the psychiatric literature (Opler 1974). Historically, depression seems to be a more feminine disorder. Mental health professionals tend to diagnose women

more frequently than men as having depressive disorders (Taffel 1991). There are some reasons for that:

The first is that we tend not to recognize male depression because the disorder itself seems to be un-manly. Another reason is the way men express their depression. Boys and men tend to act when they are in pain while women tend to internalize their pain. Men feel that they are victims of others and try to act upon that feeling. Another reason is that male depression does not fall into the category of the usual depression disorders. The DSM IV will not recognize most of the men, who suffer from “hidden depression”. According to the DSM IV, clinical depression is a state that lasts at least two weeks, in which the man feels sadness, despair, and loses interest in joyful activities, including sex. In addition he has to have at least four of the following symptoms: loss of weight, fatigue, too much or too little sleep, guilt, difficulty in making decisions and suicidal thoughts. Most of the men won’t even recognize these feelings in themselves and if they do notice them, they try to avoid and deny their existence.

Depression does not mean that one is weak or that one is incurable or crazy, but that one has a problem that one needs to deal with before it may cause further damage. The American National Center for Health statistics shows that men are four times more suicidal than women.

The “hidden depression” is basically a disorder of self-esteem and self-value. Healthy self-value is essentially internal. It is the ability to value oneself even though you are not perfect, not because of what you have or what you can do. Healthy self-value is built on the assumption that everyone, men and women, are born equal and that no one is better than the other (Kohut 1985). In the “hidden depression”, the man – clinically speaking -could not develop the ability to internalize love, to gain love from his parents and feel safely loved. The only way for him to acquire love is by relying on outside sources as described in the narcissistic disorder. Under the narcissistic confidence may lie vulnerability, shame, and fear that he will not receive the love he needs so much. For many men, to be depressed is a state of shame and it leads them to hide these feelings from everyone. In the “hidden depression” state, men hide their depression not just from the others who care for them, but even from themselves. Some men experience depression as a state of numbness, which is called in the psychiatric literature “alexithymia” (Krystal 1979). In this state, the depression manifested itself not as a bad feeling but as the loss of the ability to feel at all.

Do all men suffer from a “hidden depression”? Not at all. As I explained before, men need to have certain conditions in their childhood that may lead to this kind of disorder. This is the psychological explanation for the “hidden depression”. On the other hand, if we consider the sociological perspective we will see that most men are at great risk in developing “hidden depression” due to the expectations of our society. We learn to be competitive and to see ourselves through the eyes of the others. We as men learn not to express our feelings of pain and “to do” rather than “to be” and “to feel”.

“Women find it hard to understand how men, who are in a better position of power in our society, live in such a fear which is so hard to put down and relax. For men, every wrong step means falling down. If a man does not win he is a loser. And the cost is not just this game, but it is abundant.” (Real 1997 P. 129)

“Hidden depression” is one of the psychological costs that may happen to a man in our society. The consequences of “hidden depression” are several and the first of them is the loss of intimacy. There are other symptoms that men demonstrate. I will mention them later on in this paper when I present examples from my social work internship.

Loss of intimacy

What is intimacy? According to Rubin (1995) intimacy is putting aside the masks we wear in the rest of our lives; it is the ability to believe we can be loved for whom we really are, that we can show our shadowy side without fear, that our vulnerabilities will not be counted against us. If we think in this context about men who suffer from “hidden depression” and even about men in general, we can easily see how difficult and almost impossible the task of intimacy can be for them.

“To women the world men live in seems a lonely one – a world in which their fear of exposing their sadness and pain, their anxiety about allowing their vulnerability to show, even to a woman they love, is deeply rooted inside them that, most often, they can allow it to happen ‘late at night in the dark.’” (Rubin 1995 P. 282).

Without the ability for intimacy, the man feels lonely and alone in the world. A man who could not feel intimacy with his wife will have trouble in his marriage and will find it hard to have a strong and meaningful relationship with his children. He can easily pass this problem on to them, because he will not be a model for intimacy for his children.

He will not have the ability to share his problems and will have to try to deal with them alone. This could lead to a “hidden depression”.

Another problem about being in an intimate relationship with the other gender has to do with the way men express themselves and their needs and emotions:

“Yet, if we listen to what men say, we will hear their insistence that they do speak of what’s inside them, do share their thoughts and feelings with the women they love. For men have integrated all too well the lessons of their childhood – the experiences that taught them to repress and deny their inner thoughts, wishes, needs, and fears; indeed not even to notice them. It’s real, therefore, that the kind of inner thoughts and feelings that are readily accessible to a woman generally are unavailable to man.” (Rubin 1995 P. 282).

Violence:

Violence has long been institutionalized as an acceptable means of solving problems. Men tend to use violence more than women. At first glimpse it seems to be paradoxical that the men who have power need to use so much violence. Why use violence if you already have power? We can see the beginning of the answer in Kaufman’s (1995) point of view:

“Masculinity is power. But masculinity is terrifyingly fragile because it does not really exist. It exists as scripted behavior; it exists within ‘gendered’ relationships.” (P. 16).

Men tend to cover this fragility with violence and control. Herman (1992) points out that covering low self – value and shame with control is one of the main themes in every kind of abuse – from child abuse to political tortures.

Real (1997) shows a pattern in men which moves from low self esteem and shame to a state of high intensity and a feeling of superiority. One way to achieve this feeling is through violence:

“ The change from shame to grandiose feelings through violence happens in our life every day. Men who beat their wives do it to suppress their “hidden depression”. Without admitting it, those macho men depend on their wives for covering up their low self-value. When their wives or partners let them down in some manner, they use rage and anger and violence to cure their feelings of shame and depression. The rage cures in a histological and psychological manner. The feeling of helplessness disappears because of the illusion of control and power over the woman. The feeling of grandiosity covers the low self esteem “ (Real 1997 P. 50)

We can ask ourselves why can't those men express their feelings in a different way rather than use violence against others? Kaufman (1995) states that it is expressed this way also because of the active/passive split between the genders. Activity as an aggression is part of the masculine gender definition. It is needless to say what kind of price society, and especially women, pay because of male violence.

How a gender-oriented perspective can help therapists working with men?

After examining some of the problems men suffer from in our society, such as loss of intimacy and use of violence, I would now like to present several models in which therapy helps men deal with their issues.

As we know there are many kinds of therapy, and so there are many ways to work with men. It was important for me to select those models where the specific interest in men was gender-sensitive. The traditional way in the therapeutic literature is to find a model for working with a specific problem or disorder and not a gender oriented perspective. It was the feminist psychologists who started to look for specific therapy for women. Following them, the male oriented perspective would try to find some facts and techniques that can be helpful when working with men. What I am suggesting is that we should not view our client merely as a person with a problem or a disorder, but also as a man or a woman. For example, unemployed men will feel and act differently in some ways than a woman. The assumption is that there is some basic difference in the way men act, talk, and attach to their feelings. If we can learn and understand those differences we can find a better way to connect with them and therefore to help them. Another assumption is that there are several problems, as I mentioned before, which are more related to men and require a special attitude and model of working.

Setting goals for therapy with men

As social workers we learn the important of setting goals in therapy. If we better understand men we can understand where they come from, and hope to lead them to a better place for themselves. People come to therapy for many different reasons. The symptoms are endless and vary among clients. If our goals for the therapy are more than just helping the client to get rid of his symptoms (a target that is not recommendable with male clients as I will show later), we need to see what parts of his personality need to be changed.

The table below adapted from Kipnis (1991 P.145) can help us understand the changes men need to move from one stage to another.

Arena	Heroic (Hyper masculinity)	Feminized (Hypo masculinity)	Authentic (Integrated masculinity)
Physical	Hard Dominating Tough Soldier Killer Coercive Controlling Lord and master	Soft Submissive Gentle Pacifist Gatherer Pliant Controlled Immobile	Flexible Capable Strong Warrior Hunter Firm Vigilant Generative
Emotional	Closed Numb Codependent Demanding Aggressive Cynical Sex partner Defensive Repressed Bastard Over – responsible	Unprotected Flooded Dependent Smothering Passive Naive Pleaser Wounded Contained Nice guy Irresponsible	Receptive Feeling Interdependent Nurturing Assertive Fresh Lover Vulnerable Playful Direct Responsible
Mental	Compartmentalized Penetrating Analytical Splitting Linear Hierarchy Exploitive Rules and laws	Merged Diffused Synthetic Joining Circular Anarchy Conservative Procedures	Choosing Insightful Discriminating Holds paradox Homonymic Community Resourceful Personal ethics

The table describes different parts of a man's character: the heroic, the feminine and authentic. Men in society are trained to express and to develop their heroic side, and to keep the feminine side covered. This cover-up of feelings could result in mental problems and difficulties in the man's relationship to others.

The authentic part should be seen as the integration of the heroic and the feminine aspects of one's personality, and the integration should be seen as the goal in therapy.

We may say that for each person, one of the parts is more dominant than the other and this aspect can be the reason for the mental problem. We as practitioners will try to find what parts of the man are more dominant, the masculine or the feminine, and try to integrate them together

and help the man accept the different parts which exist in his personality. In most of the cases it will be the masculine side, which will be more dominant than the other, and it will lead to problems, as I mentioned earlier. It can be also the opposite, when a man will see himself as too feminine and we will need to help him accept those parts as well and integrate them with the masculine parts.

Kipnis (1991) gives an example of a man who came to therapy feeling that his life is over and that he can not find a reason to live because his wife left him. In therapy he became aware of his dependant side which was masked by aggressiveness toward his wife. He changed from being dependent and un-aware of his dependency to being interdependent with others. We can think about the high price this man paid in order to cover his dependency with aggressiveness, and how he may feel about himself after taking responsibility and recognizing the alternatives to his past behavior.

This is a very schematic example. When we change, it is never just one aspect of who we are, it may be our entire self-image.

The table can be very helpful for therapists who want to find their clients' place on this continuum between so-called masculine and feminine parts.

What kind of therapy will be the best for men?

The question about what kind of therapy will be the best for men is a very problematic one. Therapy has various forms; individual, family or group, depending on the persons involved. The method that may work with one may not work with another. The literature deals with men as a group with special needs and characteristics that stem from their gender. Gilbert (1984) says that many psychologists find that they need to make therapy more task-oriented for men. Some preliminary research data suggests that men are more open to cognitive-behavioral therapy than to psychodynamic or interpersonal treatment that often require substantial introspection. In one study (Gilbert 1984), male participants view videotaped depictions of different types of psychotherapy and asked which kind of therapy they would prefer. Those men who scored higher on gender–role conflict, or the rigid enactment of traditional roles, said that they'd prefer cognitive-behavioral therapy, and “actually hated the emotional–oriented therapy”.

We can assume that the difficulties men have with emotional oriented therapy arises from their problematic ability to express feelings.

“ Although men may talk about their discomfort in different, more stereotypically masculine voice, they still experience pain when, for example, relationships are problematic, often been unaware of its source. Because they have been socialized away from feeling and toward productivity, the amorphousness of emotion can make feeling all the more frightening for them.”(Erickson 1993 P. 7)

On the other hand many therapists say that because of the problematic use of feelings, and men's inclination towards a solution oriented way of operating, the kind of therapy that they needed is exactly the opposite.

“ Technique-oriented methods can be particularly problematic when used with men. This is because men are socialized to fix problems and to do so by themselves and with the highest efficiency. So the more flashy technique-oriented approaches to treatment inadvertently can end up reinforcing the very worldview that itself is problematic with men because it bolsters their socialization, rather

than seeking to help them examine and to change it. We need to help men get behind their ways of behaving and discern the fuel for these choices from both social and historical perspectives. Only then we can help people to free themselves and to truly, deeply change their life's" (Erickson 1993 P. 17)

The opposition between the different kinds of therapy becomes even more essential when we deal with men. We can agree on some level that psychodynamic therapy can be more "true and deep". On the other hand the difficulties men need to resolve in this kind of therapy can influence their decision to quit, and in the end, they do not help themselves. On the other hand does changing symptoms in a solution-oriented way make the change in the person? I think that the answer is somewhere in the middle, depending on the therapist and his or her ability to contain the client during the difficult parts in encouraging the man to express his emotions. The client needs to be helped to examine his ability and motivation to consider his emotions and then seeing possible way of changing.

Men and feelings in therapy.

"Talk therapy" traditionally relies on the ability of the client to identify his problems and feelings. "Talking therapy" It sees this ability as the main force of influencing change in the client's life. As we saw, one of the difficulties of this method is that it appears more suitable for women's skills than for males. It is difficult for men because our culture invested a great deal in their ability to "cut" off from this aspect of themselves. It is not considered manly to talk about your emotions. Even a brief look about the way men and women deal with problems will show that men tend to act under stress, while women will turn to their support networks and discuss their problems with friends.

In any manner of therapy we choose we have to help men deal with their feelings. Erickson (1993) points out that therapists must begin by learning to identify when men are telegraphing feelings, even though they are not using words or concepts that are standard for feelings. Through this effort, we eventually can help clients begin to identify for themselves when and what they are feeling.

Our emotions as therapists and the client's emotions are one of the key tools of our work. We act, in general, according to our emotions and cognitions, which is why therapists emphasize and develop strategies to help men identify and use their "feelings toolbox".

Erickson (1993 P. 45) gives us some new ideas on this subject:

- To offer a list of emotions to the client. Help him identify them and see to what kind of emotions he can relate, and if there are other emotions that are absent from his life.
- To show the client a movie and ask him to describe the emotions the characters express.
- To appeal to the client's mechanical side and help him identify feelings with metaphors from his own life. In addition, we can draw a diagram of the emotional conditions the therapist wants to reflect for the client, or let the client draw a diagram of his feelings.
- To ask the client to write an "emotional log" of the week between sessions.
- It may sound strange and even funny to mention this list but we need to use every tool that we can think of to help our male clients start noticing their emotional side if we are to be successful in our work with men.

Erickson (1993) says that we, as therapists, have to be aware of the difficulties men have when they need to express emotions and have empathy for their struggles. We need to understand their fear of being thought of as "sissies" when they express feelings, and the loss of control that

they might feel when they can not understand what they are feeling, and the anger they feel when they know cognitively what they have to do but emotionally are not yet capable of acting differently.

A model of working with men who suffer from “hidden depression”

“Treating “hidden depression” is like taking off the onion rings one after the other. Under the compulsive defenses of the depressed male we find the pain of his mistaken attitude toward himself. At the bottom of this disorder lies an unresolved pain of an early trauma.” (Real P.202)

The recovery from the “hidden depression”, according to Real, takes place in three stages:

1. Opening the defenses that cover up the depression.
2. Practicing mature relationships.
3. Resolving the early trauma.

Stage I

Resolving the trauma happens usually after the men releases himself from his defenses. The defenses can be violent behavior, different kinds of addictions, running after money, women, power, or living a lonely life with no friend or meaningful relations. Some of these defenses will not seem normal to every eye, but others can be useful to the men in the family or working place and it will be more difficult to show them as a defenses from depression.

After opening the defenses the “hidden depression” becomes a depression that the man can feel and understand.

Stage II

After the first steps in understanding, the man has to improve his ability to communicate with others and with himself. He has to be less hard on himself for his actions and solve the dysfunctional patterns of his connection with himself and with others.

Stage III

Only after stage I and II has been achieved, can the man face his pain and begin to work his issues out. In this stage the man gets in touch with his two vulnerable sides; the vulnerable child and the tough child. By doing so he slowly resolves the empathic transference which lies at the base of his depression. He connects and identifies himself with the vulnerable child and disconnects from the tough child he developed as defiance. The tough child is the one he organizes to stay alive and not feel the pain and shame, which are underneath it. The client experiences again his pain and shame in a safe place with the help of the therapist. In the end of this painful experience he may begin to get rid of the feelings that existed in him entire life; the depressed feelings, hopefully for good.

Real says that this method of dealing with trauma is an integration of individual therapy and family therapy. The therapist catches the moment when the traumatic interaction was internalized in the clients. The therapist lets the client experience those emotions again and understand that he can let them go. In this way he can solves the traumatic event.

The painful road to resolving the trauma is called by Real (1997) “the journey of the hero”.

“ The journey of the hero is not only for his own good. It is also for his community, his children and his wife. This is not a journey that will make him greater than he was; it is more of a rehabilitation journey. The road to recovery is a very difficult one and most of the men will hesitate before they take it. The challenge of working out the depression is a hard and painful journey, but the reward at the end is worth it.” (P. 188)

In this model the therapist won't try to be a parent to the client. The therapist won't see the client's problem as a personality disorder, which stems from a structural lack or an ego dysfunction. He won't try to build a new father-son experience and work on the transference in the relationship. Instead he will try to be a “trainer” and practice a mature relationship with the client. The therapy will include support, guiding and practice. Real (1997) suggests that guiding will take place in five personality functions: self-value, self-defense, self-recognition, self-help, and self-holding. He sees those functions as dynamic in a sense that we can teach them to others. If the client can recognize his ability to better connect with others – he will be able to better overcome his depression.

“ The secret of recovery is in the art of connecting between the functioning adult male and the vulnerable immature child. Recognition and resolution of the trauma warms the frozen depression and plain sorrow warms the heart” (Real 1997)

Summary of theoretical section

In this chapter, I have tried to show the theoretical background for gender-oriented perspective in therapy with men. I showed how socialization of men and the myth of “the real man” can create psychological dysfunction in men. I focused on “male hidden depression” which I described as following Real (1997) presentation as a latent depression, which can manifest itself in a variety of ways, such as loss of intimacy, workaholism and violence.

I've learned that when dealing with male clients, one must focus on their background and on the gender roles, which they have internalized. Social workers must be sensitive and use this approach when working with men.

In the next chapter I will focus on case presentations, which will help illustrate the practical side of the theories presented in this theoretical chapter.

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