Introduction: Masculinity, Identity, and the Health and Well-Being of African American Men

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The status of African American boys and men is of significant concern. This article reviews the literature on African American males within the field of the psychology of men and masculinity. We focus on theory and research that describe African American men’s masculinity, and how traditional masculinity and racial identity relate to the health and well-being of African American men. The article provides a context for introducing this special series of articles on African American men that advance our understanding of psychosocial factors associated with the health and well-being of African American men.

Keywords: African American men, Black men, masculinity, manhood, masculinity ideology, racial identity, gender role conflict

Gibbs’s classic 1988 book, Young, Black, and Male in America: An Endangered Species, brought much needed attention to the status of young African American males and suggested that there had been marked deterioration compared with past generations. Compared with earlier cohorts, young African American males were more likely to be unemployed, involved in the criminal justice system, unwed fathers, and victims of homicide and suicide.

Almost 25 years later the status of African American boys and men continues to be an issue of significant concern. For example, African American men have the shortest life expectancy of all race/gender groups (National Center for Health Statistics, 2005). In 2006, the rate of new HIV infection for African American men was six times higher than European American men, nearly three times that of Hispanic/Latino men and twice that of African American women (Centers for Disease Control & Prevention, 2010). Further, African American men are six times more likely than European American men to be incarcerated (National Urban League, 2007). Lastly, the growth rate of African American men enrolling in college is the lowest among minority groups in the United States (Harvey, 2003).

While these data are discouraging, other research has highlighted strengths, progress, and psychosocial patterns characterized by resilience. Compared with the national averages, African American men had lower rates of alcohol use and binge drinking from 2004–2008 (Substance Abuse & Mental Health Service Administration, 2010), and lower rates of mood disorders than both African American women and Whites (Breslau, Su, Kendler, Aguilar-Gaxiola, Kessler, 2005; Brown & Keith, 2003; Robins et al., 1984; Williams et al., 2007). Additionally, African American unwed fathers are more likely to live close by and visit their children than Hispanic and White fathers, as well as pay child support at higher levels (Lerman, 1993). Lastly, between 1980 and 2000, the number of Black men who enrolled in college grew by 37% (Harvey, 2003).

Given the admittedly mixed findings regarding the status of African American men, researchers have attempted to understand those factors contributing to disparities in health and psychosocial functioning. Most frequently researched have been sociodemographic factors including age, socioeconomic status, employment status, marital status, and education level. For example, unemployment is associated with higher levels of stress and illness (Yen & Frank, 2002), and the unemployment rate for African American men has been twice as high as that of European American men for the past 50 years (Williams, 2003).

The effect of racism in its various manifestations has also been an area of focus. Studies indicate African American men experience racial harassment and discrimination more frequently than African American women (Sellers & Shelton, 2003). Further, research suggests the experience of racism might be qualitatively different for men and women of African American descent (Moradi & Subich, 2003). Franklin (1999) described how African American men’s repeated encounters with prejudice and racism create an “invisibility syndrome,” defined as “an inner struggle with the feeling that one’s talents, abilities, personality, and worth are not valued or even recognized because of prejudice and racism” (p. 761). As African American men encounter prejudice and acts of racism there is an inner struggle for personal identity that fosters inherent stress related to management of one’s identity (Franklin, 1998).

Exposure to racial discrimination is a stressor that can adversely affect one’s health (Krieger, 1999; Williams, Neighbors, & Jackson, 2003). The chronic experience of racism has been identified as a risk factor for African American men’s physical health, including increased rates of cardiovascular disease and hypertension (Krieger & Sidney, 1996; McCord & Freeman, 1990), as well
as for their psychological well-being. “Racism-related stress” may be a consequence of such experiences of race-related stressors (Clark, Anderson, Clark, & Williams, 1999; Harrell, 2000). Racism, as measured by a range of measures, has consistently been found to be a predictor of psychological distress in working and middle-upper class African American men (Pieterse & Carter, 2007).

Social science scholars and researchers have attempted to understand and describe those psychosocial factors that are particular to African American men’s functioning given the structural contexts of their lives. This body of literature has tended to center on four themes: African American men’s constructions of manhood and masculinity, male or masculine identity, racial identity, and the effects of traditional masculinity ideology. Most of the early scholarship on African American masculine identity and manhood in the late 1970s to early 1990s originated in fields beyond psychology, in particular sociology, and therefore are included in this review.

**African American Men’s Constructions of Manhood**

Consistent with the broader psychology of men literature, the influence of male identity and socialization has been often posited as central to African American men’s mental health, typically in negative ways. Authors have theorized how African American men negotiate their masculine identity within the context of a sociopolitical environment that negates one’s manhood, which is particularly acute for low income African American men. Racism, in particular, has been emphasized as having specific psychological consequences for the masculine identity of African American men (e.g., Cazenave, 1984; Clatterbaugh, 1990; Majors & Billson, 1992; Segal, 1990; Staples, 1978). Some constructions of masculinity have been viewed as dysfunctional and/or compensatory responses to racial oppression (Majors & Billson, 1992; Oliver, 1984). One popular depiction is “cool pose” associated with the masculinity enactments of young African American men. “Cool pose” is characterized as “a ritualized form of masculinity that entails behaviors, scripts, physical posturing, impression management, and carefully crafted performances that deliver a single, critical message: pride, strength, and control” (Majors & Billson, 1992, p. 4). According to Franklin (1987), African American men are subject to a different set of socializing influences than are White men. They live in a different social reality and actually have a different masculinity. Franklin articulated the ways men may vary in their experience of the male role according to one’s reference group. He provided descriptions of three reference groups that African American men typically live in and interact with, each having its own definition of appropriate male role behavior. The Black man’s peer group is marked by a hypermasculine and misogynist adaptation that some African American men have made to a racist American society. Norms include sexist attitudes, antifemininity, aggressive solutions to disputes, antagonism toward other Black men, and contempt for nonmaterial culture (i.e., the nonphysical ideas that people have about their culture, including beliefs, values, rules, norms, morals). The importance of this group to African American men is inversely related to their socioeconomic status. The more influence the peer group has, the less likely it is that the larger society will play a role in defining male role norms. The *subcultural reference group* is the African American community as a whole. Polarization of gender roles is minimized, and men are expected to assume a gender role that is not as traditional as the societally sanctioned one. Franklin asserted that historically the minimization of gender role polarization was based on the importance of maintaining African American unity and solidarity. The *societal reference group* is the larger U.S. social system in which societal definitions of masculinity and traditional gender roles are embraced or emulated.

Research with African American men addressing constructions of masculinity and definitions of the male gender role have been conducted. Most broadly, these studies have found African American men define manhood in terms of traditional aspects of the male role, including the importance of being a provider, aggressive, competitive, and ambitious, but the definitions also include nontraditional aspects (Cazenave, 1984; Hunter & Davis, 1992, 1994; Pierre, Mahalik, & Woodland, 2001; Wade, 1995). For example, Hunter and Davis (1992) identified four domains of manhood among African American men: (a) self-determinism and accountability, (b) family, (c) pride, and (d) spirituality and humanism. The researchers noted that African American men’s relationships with others are important in defining their manhood.

In an effort to replicate the Hunter and Davis study, Hammond and Mattis (2005) found similar results. They also found four themes in which men defined manhood as (1) an interconnected state of being (interconnection between self, family, and others), (2) a redemptive process (rectifying past behavior and recouping one’s humanity through active family and civic participation), (3) a fluid developmental process (manhood as being and becoming), and (4) a proactive course (anticipating potential barriers or threats to one’s identity as well as ensuring its maintenance by initiating a set of positive life actions). These more nontraditional aspects of masculinity may reflect some of the core Black cultural constructions of manhood that have helped sustain African American families and communities over time (Hunter & Davis, 1994).

**Traditional Masculinity Ideology**

Masculinity ideology refers to men’s acceptance or internalization of a culture’s definition of masculinity and beliefs about adherence to culturally defined standards of male behavior (Pleck, Sonenstein, & Ku, 1993). Although there are many masculinity ideologies, the masculinity ideology that has been examined most within the literature has been referred to as “traditional,” which has been described by several researchers (e.g., David & Brannon, 1976; Franklin, 1984; Harris, 1995; Levant et al., 1992; O’Neil, 1981). Conceptual formulations of traditional masculinity ideology in contemporary American culture have focused on those standards and expectations that have various negative consequences (Pleck, 1995), including antifemininity, homophobia, emotional restrictiveness, competitiveness, toughness, and aggressiveness.

At present there are seven commonly used scales measuring traditional masculinity ideology in the psychology of men and masculinity literature. Research on African American men’s masculinity ideology has found equivocal results. Some research findings indicate that African American men endorse a traditional masculinity ideology to a stronger degree than European American men (e.g., Levant et al., 2003; Levant, Majors, & Kelley, 1998;
Levant & Majors, 1997; Levant, Smalley, Aupton, House, Richmond, & Noronha, 2007; Pleck, Sonenstein, & Ku, 1993, 1994). Yet, other findings suggest no differences between African American and European American men in the endorsement of traditional masculinity ideology (e.g., Abreu, Goodyear, Campos, & Newcomb, 2000; Thompson, Grisanti, & Pleck, 1985). It is possible that differences that have surfaced may be more influenced by geographic region than race or ethnicity (Levant et al., 1998).

However, two studies addressing dimensions of masculinity indicated that African American men endorsed the norm of “status” at considerably higher levels than European American men (Campos, 1999; Lease, Hampton, Fleming, Baggett, Montes, & Sawyer, 2010). The masculinity norm of status concerns men’s need to achieve status and others’ respect (Thompson & Pleck, 1986).

At this point, there are a few studies on African American men that have examined psychosocial correlates of traditional masculinity ideology. This includes research on men’s health-related attitudes and behaviors, interpersonal competencies, and forgiveness of racial discrimination. Traditional masculinity related to restricting one’s emotions has been identified as a factor associated with being less willing to forgive racially discriminatory experiences (Hammond, Banks, & Mattis, 2006). With regard to health behaviors, self-reliance was associated with behaviors conducive to one’s health (Hammond et al., 2010; Wade, 2009) and also related positively to health care utilization (Hammond et al., 2010). These findings contradict other studies on predominantly European American men and suggest there may be cultural factors associated with how self-reliance norms are perceived in different racial/ethnic groups. Similarly, traditional masculinity norms of “toughness” and “status” were found to relate differently to interpersonal competencies with regard to work and romantic relationships of African American and European American men (Lease et al., 2010).

**Gender Role Conflict and Racial Identity**

A few studies have focused on how gender role conflict, a frequently measured construct derived from the broader gender role strain literature, relates to African American men’s psychological well-being and racial identity status. Men’s gender role conflict is a consequence of conforming to or deviating from traditional masculinity (O’Neil, 2008). Research suggests that African American men may experience higher levels of gender role conflict than European American men (Norwalk, Vandiver, White, & Englar-Carlson, 2011). Sources of gender role conflict may be attributable to the obstacles that racism and discrimination create in fulfilling traditional male role expectations. Additionally, gender role conflict may be attributable to competing masculinities—one culture of masculinity developing from a European tradition, the other from an African tradition and influenced by a history of racial oppression (Wade, 1996; Wester, 2008). Additionally, research supports the relationship between gender role conflict and psychological distress in African American men (Carter, Williams, Juby, & Buckley, 2005; Wester, Vogel, Wei, & McLain, 2006).

To explain variation among African American men in their psychological well-being and experience of gender role conflict, Black racial identity theory (Cross, 1971; Helms, 1990) has been frequently used. Specific to racial identity and the psychological well-being of African American men, research has shown that the racial identity status of “internalization”—in which racial identity is internally defined and Blacks are the racial reference group—was associated with greater self-esteem. On the other hand, the “preencounter” status (externally defined identity, Whites as the racial reference group) and “immersion” status (externally defined identity, Blacks as reference group) were associated with greater psychological distress and less self-esteem (Pierre & Mahalik, 2005). Similarly, with regard to racial identity and gender role conflict (Wade, 1996), preencounter and immersion identity statuses were associated with gender role conflict. Additionally, the “encounter” status, which is characterized as an “identity-less” status with regard to racial identity (Helms, 1990), related positively to gender role conflict.

Two studies have investigated how racial identity may mediate the relationship between gender role conflict and psychological functioning. In one study, racial identity attitudes fully mediated the relationship between gender role conflict and psychological symptoms (Carter et al., 2005). This indicates that the relationship between gender role conflict and psychological symptoms is transmitted by one’s racial identity status. In the second study, the preencounter identity specific to viewing oneself negatively because of one’s race partially mediated the effects of gender role conflict on psychological distress (Wester et al., 2006). The researchers interpreted this finding to indicate that African American men who internalize a racist understanding of themselves suffer more from their attempts to navigate the traditional male gender role than men who internalize a racial identity based on an appreciation of their African American heritage.

In summary, earlier qualitative research has provided descriptions of African American men’s constructions of masculinity. Theory and research have recognized the significance of race, culture, and racism when describing masculine identity for African American men. To date, there has been considerably more attention paid to the masculinity of urban and lower SES men, though aspects of African American manhood may well transcend social class (Wade, 2006). Scant research has examined how traditional masculinity ideology and gender role conflict relate to African American men’s psychosocial functioning. Comparatively, more research attention has focused on the effects of racism and the concomitant stress. Identification of gender-related racism has also been frequently described (e.g., Franklin, 1998, 1999). However, we are currently lacking a measure to validate this construct. Lastly, to date, much of the research has focused on negative outcomes and risk factors. Research on understanding the protective factors contributing to the health and well-being of African American men is needed, particularly with regard to the psychological aspects of masculinity and identity.

**Continued Research on African American Men: An Introduction to the Special Series**

In this special series of articles, the authors advance our understanding of many of these psychosocial factors associated with the health and well-being of African American men.

In a qualitative study, Roberts-Douglass and Curtis-Boles (2013) help us understand how African American men develop their masculine identity and constructions of manhood by analyzing men’s responses of their masculine identity development during adolescence. They explore variability in how masculine iden-
Tities are conceptualized and negotiated among African American males of diverse socioeconomic backgrounds. This data provides practical implications that lead to more positive psychosocial outcomes and definitions of manhood.

To further our understanding of the experience of African American men’s racism-related stress, Schwing, Wong, and Fann (2013) have created a new measure of racism-related stress for African American men. The measure has promising utility for research on how African American men’s experiences of gendered racism contribute to their physical and mental health outcomes. With increased knowledge of the effects of racism on African American men, clinicians may be better equipped to address issues that affect the health and well-being of this population.

Bowleg and colleagues (2013) addressed how African American men of low socioeconomic status understand and negotiate the structural contexts of their lives in a second revealing qualitative study. In this project, the voices of lived experience of African American men point to the issues of unemployment, incarceration, racial microaggressions, police harassment, and the stress of “the streets.” Gender role strain and psychological distress are the concomitants. These researchers also identified the psychological resilience of African American men in the ways that they cope with their structural challenge. Such work highlights the need for health behavior interventions to capitalize on the existing assets and strengths of low-income urban African American men.

Next, two studies focus on risk and protective factors in the relationship between African American men’s experience of racial discrimination and psychological distress. Powell Hammond and colleagues (2013) investigated the effects of masculine self-reliance and John Henryism as appraisal mechanisms underlying the racial discrimination-depressive symptoms relationship. Masculine self-reliance is examined as a risk factor, whereas John Henryism is posited as a protective factor. John Henryism is defined as a “strong behavioral predisposition to cope actively with psychosocial environmental stressors” (James, 1994, p. 163) and is characterized by three factors: (1) efficacious mental and physical vigor; (2) a strong commitment to hard work; and (3) a single-minded determination to succeed (James, 1994).

Caldwell and colleagues (2013) further this area of research by examining risk and protective factors for depressive symptoms and drinking behavior among nonresident African American fathers with preadolescent sons. In this project, the researchers differentiated masculinity ideologies whereby certain masculine beliefs were risk factors whereas other beliefs about masculinity were protective. The importance of parenting is highlighted as a protective factor against depressive symptoms and frequency of alcohol use.

Lastly, Gordon and colleagues’ (2013) research on incarcerated African American men is unique in its examination of how masculinity norms and social support interact to predict length of incarceration. Given the overrepresentation of African American men in the criminal justice system, their study provides new information with promising implications for the development of interventions aimed at reducing incarceration and preventing recidivism.

References


Received June 15, 2012
Revision received June 25, 2012
Accepted June 25, 2012