# Father-Son Relationship, Hegemonic Masculinity and Emotional Health in Adult Men



# By

# Malaika Batool

Dr. Muhammad Ajmal

National Institute of Psychology

Center of Excellence

Quaid-i-Azam University

Islamabad, Pakistan

2021

# Father-Son Relationship, Hegemonic Masculinity and Emotional Health in Adult Men

By

### Malaika Batool

The Research Report Submitted In Partial Fulfillment of
The Degree of Master of Science in Psychology

Dr. Muhammad Ajmal

**National Institute of Psychology** 

Center of Excellence

Quaid-i-Azam University

Islamabad, Pakistan

## **CERTIFICATE**

It is certified that this M.Sc. Research Report on Father-son Relationship, Hegemonic Masculinity and Emotional Health in Adult Men prepared by Malaika Batool has been approved for submission to National Institute of Psychology, Quaid-i-Azam University Islamabad.

Supervisor

Ms. Raiha Aftab

Father-Son Relationship, Hegemonic Masculinity and Emotional Health in Adult Men

# **Table of Content**

List of Tables	i
List of Appendices	ii
Acknowledgments	iii
Abstract	iv
Chapter I: INTRODUCTION	
Father-Son Relation	3
Types of Father-Son Relationship	9
Theoretical Background	14
Hegemonic Masculinity	17
Types of Masculinity	18
Theoretical Background	24
Emotional Health	26
Emotional Health of Men	28
Theoretical Background	31
Demographic based Variables	32
Relationship between variables	33
Rationale	34
Chapter II: METHOD	
Objectives	37
Hypotheses	37
Operational Definitions of Variables	37
Instruments	38
Sample	40
Procedure	42
Chapter III: RESULTS	
Results	41
Chapter IV: DISCUSSION	
Discussion	61
Conclusion	65
Implications	65
limitations	66

References 67

# **List of Tables**

Table 1	Frequency and percentage of demographic variables ( <i>N</i> =310)	
Table 2	Cronbach alpha, reliabilities and descriptive statistics father-son	42
	relation, hegemonic masculinity and emotional health (N=310)	
Table 3	Correlation between father-son relation, hegemonic masculinity	44
	and emotional health of men (N=310)	
Table 4	Linear Regression of Father-Son Relation, Hegemonic Masculinity	45
	and Emotional Health of Men (N=310)	
Table 5	Categorical analysis of emotional difficulties in sample (N=310)	46
Table 6	t-test comparison of education status on variables (N=310)	47
Table 7	t -test comparison of marital status on study variables ( $N=310$ )	48
Table 8	<i>t</i> -test comparison of family system on study variables ( <i>N</i> =310)	49
Table 9	t-test comparison of background family system on study	50
	variables(N=310)	
Table 10	<i>t</i> -test comparison of residential status on study variables ( <i>N</i> =310)	51
Table 11	t-test comparison of background residential system on study	52
	variables (N=310)	
Table 12	ANOVA for occupation on study variables (N=310)	54
Table 13	ANOVA for age on study variables (N=310)	56
Table 14	ANOVA for current respondent current living situation on study	58
	variables (N=310)	

# **List of Appendices**

Appendix A Informed Consent

Appendix B Demographic Sheet

Appendix C Toronto Alexithymia Scale

Appendix D Fatherhood Scale

Appendix E The Masculine Gender-Role Stress Scale- Abbreviated Version

## Acknowledgement

In Allah's name, the Most Merciful and Generous. Thank you, Almighty, for blessing me with such a great windfall, allowing me to pursue this academic opportunity. This project would not have been possible without my supervisor, Ms. Raiha Aftab. I appreciate her clear directions and constant assistance, as well as her astute observations and knowledge.

No words can adequately describe my appreciation to my parents, particularly my mother, who is the most important person in my life and my sole source of inspiration, and whose prayers for me have kept me going so far. Finally, I want to thank my entire family for their unwavering support and understanding of my position .

## **Abstract**

The aim of present research was to study the relationship between father-son relationship, hegemonic masculinity and emotional health in adult men. The sample of study consisted of 310 adult males taken from Rawalpindi and Islamabad with an age range of 25-35 years. The data regarding their age, education, occupation, marital status, current residency, background residency, current family system, background family system and currently living with parents was collected to situate the sample. The form of The Masculine Gender-Role Stress abbreviated version (MGRS-AV Swartout, Parrott, Cohn, Hagman, & Gallagher, 2015), Fatherhood scale (FS) (Dick, 2004), and Toronto Alexithymia Scale (Bagby et al., 1994) were used to measure study variables. The result indicated that majority of sample reported high on emotional difficulties. Moreover, the results of study showed that father-son relationship and hegemonic masculinity have a significant relationship with emotional health in men. Emotional health problems were higher in men from rural areas as compare to urban area. However education, marital status, occupation, and family system showed non-significant difference on emotional health. Results of regression analysis shows that father-son relationship is less contributing and non significant to emotional difficulties. However, hegemonic masculinity and its components are significantly predicting emotional difficultie

### Introduction

Family is an excellent institution for the health of an individual. A family is a group of blood relations and comprises grandparents, parents, siblings, and other blood relatives. Every person in a family contributes to the proper development of a child. They engage with one another, each with their responsibilities, and together they develop and maintain a culture. The role of the family is as a primary educator. They work together to teach their children. The family's primary responsibility in children's education is to provide a foundation for social behaviors and norms. The family has a significant influence during the period of child development. The proper development consists of the child's physical, mental, social, and emotional development.

Parents, in particular, have a critical role in developing a child's behavior and personality. Specifically, an active and involved father is crucial to cut the frequency of behavioral problems in boys and psychological problems in daughters. Similarly, the mother's presence in a family shapes up the proper emotional development of a child. Parental involvement of both mother and father has a tremendously positive effect on the child. Researchers often miss out on the role of the father figure, whereas motherhood, mother care, and maternal relation and its consequences captured their attention in studies. A father is equally important in family development and for the psychological and emotional wellbeing of children (Eirini, Flouri, Ann, & Buchanan, 2003). Father-son relation also positively affects cognitive development and decreases delinquency and economic disadvantage in low-income families because it directly or directly affects the development of a child's emotional and mental well-being (Marsiglio, Amato, Day, & Lamb, 2000). Children, who have a close bond and strong attachment with their fathers, are more likely to be emotionally secure and exhibit more confidence in social settings. They are interested in exploring their environments and show the ability to build stronger and lasting social relations as they grow older.

Similarly, affectionate and compassionate fathering has a significant and significant impact on a child's cognitive and social growth, contributing to a child's overall sense of well-being and self-assurance (Hesse, Mikkelson, & Saracco, 2018).

Each son's emotional and gender identity is another essential aspect it may develop in several ways.

As Freud (1905) suggested, a boy in early childhood is closer to the mother, and a daughter prefers her father's admiration. Towards later ages, especially in adolescent boys learn gender roles from their father. Similarly, the father-son relationship may be the most critical in a man's life cycle, particularly for a male-male relationship that can significantly impact how the son develops his masculinity as the son ages (Morman & Floyd, 2006). Gender identity formation has a vital source of societal norms and social learning. Initially, boy or girl starts to learn these gender roles from their parents. Boys acquire their masculine characteristics from their fathers. Paternal relations better account for a son's identity formation and type of masculinity (Morman & Floyd, 2006). The masculinity of son and daughter's femininity is associated with father involvement in child-rearing. Specifically, in context to the father-son relationship, the father's type of masculinity is acquired as a model of gender roles (Lamb, Pleck, & Levine, 2017). Fathers shape their son's masculinity following the masculinity he possesses (Hauari & Hollingworth, 2009). Therefore, a traditional masculine father is more likely to raise a son who will show conformity to traditional masculine norms (Kane, 2006). Traditional masculinity is psychologically harmful because teaching men to hide their emotions has both internal and external consequences and can affect their mental, physical and emotional health in the worst manner (Rivera & Scholar, 2020).

Emotional health is a facet of mental health. It refers to one's ability to manage both happy and negative emotions, as well as your knowledge of them. Being emotionally healthy means understanding, describing, and regulating your feelings. An emotionally healthy person can feel stress, anger, and sadness, but they should know how to control their emotions (Galderisi, Heinz, Kastrup, Beezhold, & Sartorius, 2015). Emotionally healthy people have effective coping methods for bad feelings and know when to seek expert help.

This research will study the quality of father-son relations. In addition, it will explore hegemonic masculinity, as it is a type of masculinity that affects the emotional health of an individual in the worst manner. Hegemonic masculinity and other aspects also involve the suppression of emotions and encouragement of not showing emotions explicitly and the effect of these two variables on the emotional health of adult males

in Pakistan. Keeping in mind these relationships, the present research explores how the quality of a father-son relation shapes specific masculine characteristics. Secondly, this research will explore reported the emotional health of adult men. The previous literature will explain these variables in detail in the next section. The method section and results will follow.

#### Literature Review

The previous studies related to study variables, i.e., father-son relationship, hegemonic masculinity, and emotional health, are as follows.

#### **Father-Son Relationship**

While discussing the role of fathers in their children's development and wellbeing, it's critical to define what is meant by the term *Father*, as this word carries numerous assumptions that may or may not be entirely accurate given the evolving family structure. In the American Academy of Pediatrics (AAP; 2016) guideline on fathers, the father is defined broadly as the male most involved in caregiving and committed to the wellbeing of the child, regardless of living situation, marital status, or biological relation (Gogineni & Fallon 2013). This definition encompasses biological fathers and includes foster fathers, stepfathers, and grandfathers (Yogman, Lavin, & Cohen, 2018).

Fathers, like mothers, are pillars in the development of a child's emotional wellbeing. Children look to their fathers to provide a feeling of security, both physical and emotional. Recently, fathers figures have obtained enormous attention in their children's development. They must share child-care responsibilities, develop more deep and affectionate relationships with their children, and be physically and emotionally available to them (Cabrera, Tamis-Lemonda, Bradley, & Hoffert, & Lamb, 2000; Lamb, 2004; Silverstein et al., 2002). Fathers may help their children develop a positive self-concept, self-esteem, social competence, empathetic abilities, self-confidence, and emotional regulation (Amato, 1994; Biller, 1993; Culp, Schadle, Robinson, & Culp, 2000; Downer & Mendez, 2005; Fagan & Iglesias, 2000).

#### **Importance of Father Involvement for Child**

Fathers play a unique and crucial role in their families. Fathers frequently parent their children differently than moms due to their parts. Mothers can play the role of nurturer and bond with their children by providing compassionate care in a secure, well-organized atmosphere. One of the most crucial aspects of a child's development and to be a mentally healthy adult is having an involved father.

Father involvement levels may vary as Michael Lamb proposed different aspects. Lamb and his colleagues (Lamb, Pleck, & Levine, 1985; Sarkadi, Kristiansson, Oberklaid, & Bremberg, 2008) established a three-part model of paternal involvement that incorporates the various sorts of involvement that fathers might have in the lives of their children. According to him, the tripartite split of father participation into engagement, accessibility, and accountability is the most frequently accepted description (Lamb et al., 1985). The first aspect of father involvement is one-on-one interactions with the child and direct interaction (e.g., time spent playing with the child). Second is accessibility when a parent is available for interaction with their children. Still, it is not currently engaged in direct interaction, which refers to accessibility (e.g., when the parent is gardening while a child is playing in the yard). The third aspect of the involved father is responsible. Taking ultimate responsibility for the child's wellbeing is referred to as duty, e.g., ensuring that the child has clothes (McBride et al., 2005).

According to Bronfenbrenner's Bio-ecological theory (1979), to fully understand paternal influences on children's cognitive skills development. Studies must consider some factors like proximal (e.g., paternal involvement) and distal (e.g., socioeconomic status, race/ethnicity, school context). Although, many proximal and distal factors, such as fathers' education, income level, residency status, and relationship with the child's mother, are indirectly linked to children's language development and literacy activities (Varghese & Wachen, 2016). Research has found a direct, positive, and relatively strong link between paternal involvement and children's cognitive skills development (Fan & Chen, 2001; Jeynes, 2007), and a strong and significant relationship of father involvement and emotional wellbeing and emotional health of a child(Bradley & Corwyn, 2000).

The way fathers interact with their children has a significant impact on their emotional and social development (Rosenberg, 2006). Children with an involved father

are more likely to be emotionally secure from birth, be confident in exploring their surroundings, and have more significant social interactions with peers as they grow older. These children are also less likely to get into trouble at home, at school, or in the community (Yeung, Duncan, & Hill, 2000).

Overall, Children's psychological adjustment (Flouri, 2008), fewer behavioral difficulties (Carlson, 2006), improved educational performance (Flouri & Buchanan, 2004), and overall mental health have all linked to father engagement throughout a child's development (Boyce et al., 2006; Downer & Mendez, 2005; Dubowitz et al., 2001; Fagan & Iglesias, 2000, Harris, 2010).

Previous literature shows that a traditional or a hegemonic father is less likely to be an involved father. According to the present study, fathers, who fall into the conventional masculinity category, are the least active with their children (Krivickas, 2010). Furthermore, it suggests that fathers who adhere to more male norms are less involved in instrumental and expressive parenting styles and are more likely to use severe discipline than fathers who adhere to less masculine norms. Adherence to masculine standards also lowers the chance of accepting the new fatherhood ideal. Dedication to the new fatherhood ideal partially controls the association between masculinity and father participation (Petts, Shafer, & Essig, 2018).

#### Father as Role Model for Son

Fathers have a unique and critical role in the development of children, particularly for boys who require a male role model to form a masculine gender identity (Silverstein & Auerbach, 1999). According to the psychoanalytical theory of adolescents, a son observes his father when the Oedipus complex resolves successfully. At this crucial stage of personality development, a son sets his father as the gender role model. Sons frequently compare themselves to their fathers to make sense of their own identity and manly aspirations (Remmo, 2009). Vogt and Sirridge (1991) wrote books *Like Son, Like Father, and Healing The Father-Son Wound in Men's Life,* in which he emphasizes the role of the father figures in men's life. He states:

"One very key element in the formation of men's relationships is the relationship between son and father. The model of this relationship influences everything in a man's life, from the way he sees himself inside to how he sees

all other people, power, economics, politics, and even his vision of the natural world" (p. 6).

A similar argument of boys acquiring masculine characteristics from their fathers is often presented in masculinity and its development (Russell & Saebel, 1997). Cabrera et al. (2014) created a model to recognize the flow of events and behaviors that influence child functioning quality (and quantity). According to this model, the father's personality affects the father-child relationship, personal characteristics, behaviors, and the overall context of the family system. It includes the family relationship (e.g., coparenting), different family households, socioeconomic statuses (SES), cultures, and the child's and family's development. (Cabrera et al., 2014; Cabrera & Volling, 2019). This model's strengths include the study of transactional and reciprocal interactions between father and children (Sameroff, 2010) and incorporating interpersonal and contextual elements in determining the extent of father participation (Volling & Belsky 1991).

Fathers engage in unique activities and interactions to socialize their sons to masculinity standards. Modeling is another aspect of socialization that occurs in the father-son connection. In sociology, there are two types of socialization: purposeful and unconscious. Through exposure and modeling, socialization can be deliberate through interaction or unintentional put, and sons learn to be masculine from what their fathers say and witness. In this way, fathers do not only teach the standard, but they also become the standard of masculinity, functioning as a reference point or archetype (à la Plato), even idolizing it (Bucher, 2014). The traditional family structure hasn't always encouraged fathers to take an active role in their children's lives. As a result, many early conceptions of father involvement focused on the concept of inadequate or deficient fathering (McBride et al., 2005).

#### **Impact of Absent Fathering on Son**

According to German psychologist Sigmund Freud, the loss of a parent might be the single greatest sorrow a person can endure (Jones, 2004). The significance of the 'father wound' or 'father hunger' has been emphasized in more contemporary writing on men, implying that most men bear significant wounds due to their interactions with their fathers. The most serious of these wounds get infliction by the distance and absence of fathers (Farmer, 1991; Pease, 2000). Lack of father care causes the son to

be unable to identify with his father as a means of building his own male identity, and as a result, in later ages, a son cannot advance to the stage of manhood in life (Pease, 2000). Biologically, boys require several hours of one-on-one male contact per day. No matter how good they are, boys cannot learn how to be a man from their mothers, while there are some things that only fathers can teach their boys. Only fathers can meet a biological need (Biddulph, 1994; Pease, 2000).

There is a link between fathers' physical and emotional absence from their son and son's personal and social behavior (Pease, 2000). Moreover, it suggests that the greater the emotional distance from the father figure, the worse the son's self-esteem and uncertainty about masculinity. Hence, the greater the likelihood of men being aggressive toward women (Horsfall, 1991; Pease, 2000). The psychological impacts of father absence and lack of a male role model were likely to undermine a boy's feeling of masculinity. Children in fatherless families were more likely to become juvenile delinquents (Hertzog & Sudia, 1971; Pease, 2000).

#### **Father-Son Relation Emotional Health**

The mature and warm communication of father-son is beneficial for the psychological consequences of the son (Marrocco, 2002). Fathers can assist their sons in developing their natural ability to empathize with others. Instead of simply expressing their displeasure, fathers can engage their boys in a discourse, assisting them in comprehending why people act the way they do. Empathy education that focuses on detecting internal and external sentiments is one technique to help this process. Inviting the son to consider the other person's point of view fosters empathy and understanding that allows the son to feel less ashamed of his flaws while also comprehending the emotional feelings of others (Snarey, 1993; Pope & Carlson, 2001).

The research examined how father and mother impact the child's emotional development differently. Results indicate that mother-child relationship quality was related to lower levels of daily psychological distress. The quality of both mother-child and father-child relationships was related to stressor exposure. Still, only father-son relationship quality was related to lower emotional reactivity to stressors during adulthood (Mallers, Charles, Neupert, & Almeida, 2010).

A Father-child relation and a father's relation with an adult son impact emotional health differently. Observably, the involvement of a father can positively affect emotional health. The connection between a father and an infant or child (Jessee & Adamsons, 2018) father involvement shows positive levels of social-emotional competence throughout childhood and adolescence (Overbeek et al., 2007; Harris, 2010; Downer & Mendez, 2005; Fagan & Iglesias, 2000). However, it is a reversible process in the father and adult son relationship.

#### **Emotional Synchronization in Father-Son Relationship**

A father is not just a role model for a son. Still, he also observes the father and learns the congruent behavior with his father's behaviors, especially regarding masculine behavior and emotional expressivity. Many authors believe there is a direct link between the father's behavior and the son's eventual behavior (Pease, 2000). A son whose father is an authoritarian or a tyrant will learn to be tough himself, and similarly, if a boy considers his father to be competitive or abusive, he will do the same (Lee, 1991; Pease, 2000). It stands to reason that if having a son reflects the father's masculinity, then having a masculine son is an even stronger reflection (Bucher, 2014). Similarly, when a son becomes a father himself, he reciprocates his father's behavior. As Morman and Floyd (2002) discovered, men with loving fathers convey higher levels of affection to their kids than men with unaffectionate fathers, implying a link between father-son contact and men's performance as fathers in their own families.

When a father has traditional masculinity, a son will expectedly acquire the same pattern of traits. Male gender roles and stereotypes restrict a man from explicitly expressing emotions. Still, studies observed that a son learns how to exhibit emotion that corresponds to how his father revealed it (Shields, 2002; Martin, Doka, & Martin, 2000).

Silver-Stein and Rashbaum (1994) have effectively demonstrated that women can likewise train boys to become men. Boys who do not have a father or are closer to their mother are psychologically and emotionally healthier, have fewer patriarchal stereotypes, and are more adaptable to change (Messerschmidt, 2019).

#### **Types of Father-Son Relationship**

Fatherhood can come in many different guises. A child whose biological father is deceased, unavailable, or otherwise unable to provide the required direction, love, and support may receive the closest to an actual father from a stepfather, grandfather, uncle, or close friend. Whatever forms a father figure takes can hugely positively influence a young person. In the contemporary era fathering comes in different forms; some theories explain positive and healthy father relations. There are several types of this relationship. Some salient types of father-child relationships are given in the following list

- 1. Generative Fathering. Generative fathering is a commitment to caring for the next generation through working to meet children's needs. Fruitful fathering is a process that takes consistent attempts at progress towards good fathering (Fagan & Palm, 2004). Good generative fathering, father attachment, father involvement, a healthy father-child relation, and quality time are fundamental for proper development. Generative fathering can provide benefits to both fathers and sons. Erik Erikson initially proposed the developmental theories of fruitful fathering (Erikson, 1982). Erikson views the work fathers do for their children in caring for and contributing to the next generation's life. According to Erikson, it generatively focuses on making a lasting contribution to the future, especially future generations, and is a central psychological preoccupation in midlife. According to Erikson, through the generative efforts of parents, most children become socialized (Brannen & Nilsen, 2006).
- 2. The Distant Fathering. The distant father is emotionally distant even though he can be physically present. According to psychoanalytic theory, the distant father plays a crucial role in psychosexual development by breaking the incestuous relationship with the mother. From a self-psychological standpoint, the distant and emotionally distant father would be unable to provide the appropriate experiences, such as warmth, empathy, and emotionality, which would support the child's self-object relationship with the father (Minsky, 2000).
- **3. Involved Fathering.** Involved fatherhood is a family paradigm in which men share parental obligations with mothers and are actively involved in their children's daily care (Thunstedt, 2017). The involving father style

demonstrates in men's descriptions of ideals about fatherhood (Gavanas, 2002; Henwood & Proctor, 2003)

In various ways, father involvement is to describe (Pleck & Masciadrelli, 2004; Marsiglio & Pleck, 2005). The first way is direct engagement between a father and his child (play, caretaking). Secondly, the accessibility, how readily a father is available to his child when necessary. The third factor is managing and supplying resources for a child (doctor's visits, augmenting family income, or child support). Last is the development of social capital, or how fathers create a support network for their children as they grow up and become contributing members of society. These are all examples of how a father might demonstrate his involvement in his child's life. The first two methods involve direct engagement between fathers and children, while the latter two methods are more indirect ways for fathers to stay active in their children's lives. Father engagement varies according to the child's age and stage. Fathers, for example, play a loving role with infants but become more teachers as their children get older (Palkovitz & Palm, 2009).

4. Traditional Fathering. The term traditional fatherhood described non-involved paternal approaches with limited physical and emotional availability for their children (Freeman, 2008; Seidler, 2003; Silverstein et al., 2002). In terms of father-child relationships, traditionally, fathers are reluctant to share emotional or personal issues with their children, and mostly they are unavailable for their children in physical contact. Avoiding physical contact with their children, such as hugging or kissing personal space (Yalçınöz, 2011).

Men who firmly adhere to traditional masculine roles, such as breadwinner and disciplinarian, may emphasize paternal parts like these. They were primarily responsible for leading, educating, and punishing their children. They control and hold a powerful/ dominant position in the family's decision-making strategies. When it comes to nurturance, traditional parenting has a more complex structure. Although there is a lack of father involvement in child care, which is considered a mother's task, this shows low nurturance. However, fathers have traditionally taken responsibility for their children's protection, and financial wellbeing has a dimension of high nurturance (Freeman, 2008; Lamb & Tamis-Lemonda, 2004; Morman & Floyd, 2006; Seidler, 2003; Silverstein et al. 2008).

#### **Fathering Responsible for Hegemonic Masculinity**

Hegemonic masculinity or traditional masculinity has a link with the conservative fathering style. Psychoanalytic theory can also help understand the patriarchal norms that underpin traditional fatherhood. Traditional fatherhood refers to non-involved paternal practices with limited physical and emotional availability for their children (Freeman, 2008; Seidler, 2003; Silverstein et al., 2002).

One mechanism that reproduces hegemonic masculinity, masculine domination, and patriarchy is identification with traditional fathers (Christian, 1994; Demetriou, 2001; Pease, 2000). There is a concept that fathers play an instrumental role in socializing sons in the ways of hegemonic masculinity, which a large body of research has supported (Bucher, 2014; Coltrane, 2004; Kane, 2006). When fathers advise their boys to act like a boy, they attempt to shame them into accepting these beliefs of proper masculine behavior. The expectation is that the young males will do all it takes to safeguard their honor, avoid dishonor, and prevent shame (Pope & Carlson, 2001).

#### **Conflicts in Father-Son Relationship**

According to Kindlon and Thompson (1999), most men want to do a good job raising their boys; they also want to do it better than their dads did. These same males voiced annoyance, disappointment, and dissatisfaction with their sons' behavior or attitude, communication methods, and decision-making ability, among other things. Likewise, many of their boys expressed dissatisfaction with fathers who do not listen, do not understand, and want respect without giving it. These boys felt betrayed by their fathers, not only in terms of affection and emotional support but also in their time with their fathers. It also suggests that fathers and sons have different perspectives on family life (Morman & Floyd, 2002). For instance, when asked to record their observations of the identical event experienced by both father and son, dads and sons provided entirely different stories (Larson & Richards, 1994).

According to the overwhelming observation made by sons about living with their fathers, the father-son relationship is a substantial source of conflict, competition, criticism, and lack of understanding (Kindlon & Thompson, 1999). He discovered that, out of all the individuals in a boy's life, his fathers are the ones with whom he is least likely to share his actual feelings (Morman & Floyd, 2002).

One important reason is that fathers and sons may find it more challenging to maintain a strong emotional and communicational association with each other. Therefore, when sons grow in their teenage and young adulthood, we believe that the pressures both feel to satisfy the expectations of the masculine gender role. Restricted emotionality, a preoccupation with successes, the restrained expression of affection, a craving for control and power, and a competitive attitude to life are all characteristics of the traditional masculine gender role (Mahalik et al., 2003; Salgado, Knowlton, & Johnson, 2019; O'neil, 1981). The father-son relationship is more than just a bond between two family members; it's also a bond between two men. Consequently, the relationship gets influenced to the extent that either the father or the son feels motivated to adhere the demands of traditional masculinity.

#### **Factors Associated With Father-Son Relationship**

Difference aspects of a son's life are affected by his relationship with his father. Some of the factors are as follow:

**Emotional Wellbeing.** Fathers play a central and critical role in providing substantial social and financial support, emotional nurturance, and moral and ethical guidance (Connor & White, 2006). A concrete parental relationship determines a child's good emotional regulation and emotional intelligence. The father-child dyad better accounts for emotional health. This emotional health has vast implications on other aspects of life, especially in personality formation.

Psychological Wellbeing. Fatherhood can be particularly redeeming for men who have struggled with significant life issues such as drug abuse and interpersonal problems (Roy & Lucas, 2006) or even imprisonments (Walker, 2010). Palkovitz (2002) best summarizes these effects by noting that: fathers with aggressive, abusive, substance-dependent, consistently detached or absent behavior, or those who alternate between warmth and harshness unpredictably, leave their children with developmental deficits to overcome and this weakened and unstable parenting leader to multiple personality-related issues and disorders (Lander, Howsare, & Byrne, 2013).

**Development of the Personality.** The father's participation in the child's upbringing is essential for normal personality development (Borisenko, 2007). A recent study explored the father's role in developing the children's personality. Significant

results showed that it is impossible to create quality if there is no time to do it. This research also explored that no quantity can compensate for poor quality. A highly significant correlation (p = .00) between the positive role of the father and positive child personality development. It further explored if training constructs good paternal relations, children perform better in school and show more beneficial conduct. It shows that an excellent paternal relationship impacts a child's personality development, including gender identity (Akram, Batool, Mahmood, & Mahmood, 2019).

**Self-Esteem and Fathering.** Men with solid self-esteem described their fathers as emotionally present and highly invested with them. They thought their fathers were more approachable and nurturing than those with poor self-esteem. They saw their fathers as more affectionate, caring, understanding, encouraging, and soothing. Men with high self-esteem claimed that their fathers were more likely than men with low self-esteem to praise them, talk about their difficulties, tell them that they loved them, and make them feel unique (Dick & Bronson, 2005).

Father and Sexual Orientation. Some parents shared negative personal feelings regarding their son's perceived gender nonconformity, invoking a sense of accountability within their own moral or normative system rather than to others. Such references to a personal normative framework dominated the negative responses offered by fathers. It was especially true among fathers when the two major themes previously identified as eliciting negative responses: symbols of feminine gender performance and homosexuality (Kane, 2006). Also, the research established the notion that Father-figure determines gender identity and sexual orientation. That is strong evidence for a paternal relation leading to sexual orientation.

Father role in Gender identity. Father figure plays a vital role in shaping up gender identity and the gender roles of men. Contemporary academic literature about the father-son relationship dynamics sketches the father as critical to how the son sees himself as an emerging adult. The quality and content of the relationship can have significant implications on the child's psychological development and the identity and gender role as an adult (Mormon & Floyd, 2006). To develop their masculinity, boys must identify with their fathers, and if they do not, they would probably have personality and gender issues (Brittan, 1989; Pease, 2000).

In the father-son dyad, masculinity gets shaped through the gender identity attained by the paternal relation source. Kane (2006) suggests that heterosexual fathers are most likely to raise their sons in a way consistent with traditional hegemonic masculinity, so often known as toxic masculinity. She also stated that heterosexual fathers might feel mainly responsible for shaping their sons' sexual orientation. Furthermore, as compared to mothers, fathers in general and heterosexual fathers, in particular, have fewer concerns about how others would socially handle their son if he is gay and is more likely to refer to the personal dissatisfaction they expect in this hypothetical scenario. Notably, the role of a father has a more substantial impact on a son's masculinity than a mother.

#### **Theoretical Background of Father-Son Relation**

Psychoanalytic Model. According to the psychoanalytical theory, out of fear of the father, the young child denounces his intense combined state of being with the mother and begins to idealize the father, turning to the realm of reality. For Freud, it was simpler for males to identify with their fathers than daughters because girls have less to gain from their fathers (Minsky, 2000). According to Freud, the symbolic father breaks up the bliss with the mother. He assists the child in transitioning from a state of merged oneness with the mother to a triangle that includes the father, effectively making the child an outsider who eventually accepts that he will never possess the mother. The culture's regulations and limits are ushered in by the affiliation with the father.

The child learns to cope more creatively with frustration, to abandon omnipotent incestuous fantasies, and, most crucially, not to murder those who get in the way. This traditional psychoanalytic paradigm alienated fathers from the emotional fabric of family life, which overlooked their potential to fulfill essential psychological and emotional tasks in developing a self-structure for their children. If the father is emotionally accessible to help the child resolve the Oedipus complex, a child can separate from the mother without feeling betrayed or angry (Minsky, 2000).

Attachment Theory. Attachment theory focuses on understanding better people's early relationships or attachment bonds and their impact later in life. According to Bowlby (1977), attachment theory refers to human beings' propensity to form deep affectional attachments to sure others. Bowlby thought that the attachments formed between an infant and their caregiver serve as models for other forms of partnerships.

Attachment styles, according to Bowlby, are essential from childhood through adulthood. Researchers have established a three-category model of adult attachment types based on research with children and adults (Hazan & Shaver, 1987). Adults have three different attachment styles: secure, avoidant, and anxious/ambivalent.

- 1. Secure attachment style. Secure adults have a favorable self-image and a positive perspective of others. Secure adults, on the whole, are unconcerned about being abandoned or oppressed in relationships. Individuals with secure attachment types are capable of forming relationships with others.
- 2. Avoidant attachment styles. Adults with avoidant attachment styles distrust others and dislike being around them right away. Avoidant people are frequently concerned about being involved in oppressive relationships.
- 3. *Anxious/ambivalent attachment*. Adults with anxious/ambivalent attachment types want to be close to others.

In conclusion, the primary assumption of attachment theory is that attachment types influence a wide range of behaviors (Hazen & Shaver, 1987). According to attachment theory, attachment styles show interlinks with emotional distress (Leerkes & Siepak, 2006). According to research, individuals with secure attachment styles are less emotionally upset, process information more quickly, and maintain relationships with other than those with other attachment styles. As a result, attachment styles may impact communication behaviors and motivations (Punyanunt-Carter, 2007).

Attachment theory is related to this research as a son's early relationship with his father, who is available and responsive to his son, set the foundation for overall personality development. This theory suggests that a child needs to develop a relationship with a primary caregiver for normal social and emotional development. Therefore, to better study how and why emotional difficulties emerge in adult men, it is vital to understand the relationship between father and son.

The Parent Role Development Theory (PRDT). Mowder(1991) explicitly explains the role of parenting in how individuals' perceptions of parenting modify through different developmental stages of a child. It means that children progress from childhood to adulthood, their parents' perceptions regarding the parent role evolve and change its form of expression.

Parents of infants devote a significant amount of time to feeding, diapering, caressing, and holding their children. As babies grow into toddlers and preschoolers, their developmental demands alter, and parents' efforts shift to encouraging, leading, and overseeing their children's exploration. The dynamics of parent-child interactions cause parental knowledge of their child's developmental changes and accompanying requirements, as well as each child's distinct qualities (LeVine, 2003). The PRDT examines how parents' perceptions of their roles and parenting move and evolve as parents modify and respond to their own experiences, children's experiences, family dynamics, and the social-cultural milieu.

This theory contributes to the fact that a father-child relation and a father- adult son relation are different from each other. As a father, show no or lesser expressions of affection and love such as hugging a grown-up adult son. In this way, the expression of a son's emotion in adulthood will be utterly different from childhood and adolescence.

**Identity Theory**. Identity theory explains fathers' involvement with their children. This theory explains that a father identifies with the father role, and the more essential or central it is to his self-conception, the more involved he will be with his children. This theory sets grounds for the fact that fathers can shape gender identity, self-concept, and overall personality development (Ihinger-Tallman, Pasley, & Bueler, 1995).

A Three-Fold Model of Paternal Relationship. Lamb, Pleck, Charnov, and Levine (1985) formulated a three-fold model of paternal involvement. This theory explains the constructs of engagement, availability, and responsibility. This theory explains the quality of the father-child relationship, which directs a child's development. Later, when the tripartite model got facilitated, the focus shifted from father-child traits to evaluating specific activities that the father and kid may participate in together (McBride, 1990; Radin, 1994; Brotherson, Yamamoto, & Acock, 2003). Pleck (1997) referred to the idea of the distinction between father engagement and positive paternal involvement.

Within this framework, engagement refers to a father's experience of direct contact, caregiving, and shared activities with his child. Accessibility entails a man's presence and availability to his child regardless of actual interactions between father and child. Finally, responsibility encompasses a father's participation in his child's decision-making. Fathers demonstrate commitment by selecting health professionals, arranging

medical appointments, arranging child care, speaking with teachers and caregivers, and monitoring a child's activities (Marsiglio, Day, & Lamb 2000; Pleck 2007).

Kohut's (1977) Theory of the Self. The theory of self-proposed by Kohut (1977) gave insight into the individual's inner psychological environment. Introspection allows us to view our inner world of feelings, thoughts, imaginations, and wishes, whereas empathy will enable us to observe others' inner worlds. Self-psychology explains how empathetic responses by fathers and mothers can develop and impact their children's self-esteem and identity. Children require particular sympathetic responses from their parents to mature into healthy adults. Empathic fathers are more likely to grasp their children's inner emotional lives (Dick, 2011).

According to Kohut (1984), children require a parental figure with whom they are permitted to share feelings and who encourages them to feel part of a group (e.g., family) that surrounds and protects them. The satisfaction of this need promotes the acceptance of community codes and the development of social skills, empathy, and a sense of belonging (Banai, Mikulincer, & Shaver, 2005).

#### **Hegemonic Masculinity**

The term hegemonic masculinity is widely used and debated in research. Hegemonic masculinity is the idealized form of masculinity at a given place and time. Hegemonic masculinity characterizes aggression, denial of weakness, lack of care for others, emotional repression, homophobia, the wining urges, seeking to control others, self-reliance, sexism, the devaluation of femininity, and never-ending interest in sex (Connell, 2000; Courtenay, 2000; Kahn, 2009; Mankowski & Maton, 2010; Parent, Gobble, & Rochlen, 2019; Parent & Moradi, 2011; Thacker, 2019). Over the years of studies, refined hegemonic masculinity, and now its basic definition, encapsulates the idea of a culturally idealized form of masculinity (Jewkes et al., 2015). In previous literature, orthodox masculinities in polish literature discussed hegemonic masculinity. Traditional masculinities are stereotypes of a traditionalist image of males as risk-takers who are overtly heterosexual and distinct from women (Anderson, 2009). Another term that refers to is traditional masculinity. The word traditional masculinity refers to a Western notion of manliness that emphasizes stoicism, domination, violence, and competitiveness, often to an unhealthy degree (Carli, 2001; Thomas, 2001).

Connell (2000) has proposed the most commonly used definition of hegemonic masculinity. Connell's concept of hegemonic masculinity identifies those toxic attitudes and practices among men that elevate gender inequality. It involves not only men's domination over women but the power of some men over other men –often from minority groups or those who do not fit into the binary gender system (Connell & Messerschmidt, 2005).

Definition of hegemonic masculinity by (Morrell, Jewkes, & Lindegger, 2012) declares a set of values established by men in power that include and exclude particular people and organize society in gendered ways. It incorporates many characteristics, including a hierarchy of masculinities, unequal and differential access among men to power (over women and other men), and the relationship between men's identity, ideals, interactions, power, and patriarchy (Jewkes et al., 2015).

#### **Types of Masculinity**

Some masculinities offer alternatives to the hegemonic ideal in the community, such as gay and transgender men, intellectuals, geeks, sensitive artists, etc. Hegemonic masculinity, according to Connell, is always constituted in connection to diverse subjugated masculinities as well as women (Connell, 1998). Connell posits four types of masculinities, more as positions concerning one another than as personality types:

- 1. Hegemonic masculinity
- 2. Complicit masculinity
- 3. Subordinated masculinity and,
- 4. Marginalized masculinity

**Hegemonic Masculinity.** The critical features of hegemonic masculinity are aggressive dominance over women and men, including egotistical heterosexuality; success-oriented behaviors; and physical adequacy, which refers to physical strength and sexual potency. Moreover, it defines the suppression of soft emotional, leading abilities, higher positions, competitive, and decisive amongst others. These characteristics of masculinity exposed significant pressures over male members in the family to prove themselves (Eckman et al., 2007).

**Complicit Masculinity.** It defines masculinities that (even unknowingly) attempt to meet the standards of hegemonic masculinity yet fail to do so for a variety

of reasons. Nonetheless, by pursuing hegemonic masculinity, they (unintentionally) reinforce and increase the group's power and dominancy. Complicit masculinity, like hegemonic masculinity, benefits from the so-called "patriarchal dividend," which is the benefit of being a man in a patriarchal society while also being somewhat ruled by it (Connell, 2020).

**Subordinated Masculinities.** Subordinated masculinities do not adhere to what is considered 'masculine' in a given social or contextual environment; they do not meet the expectations of acceptable male behavior or the concept of what a (usually) masculine person entails. In the hierarchical gender hierarchy, they take on the role of outside (Connell, 2020; Buschmeyer& Lengersdorf, 2016).

Marginalized Masculinity. A marginalized social group: excluded from the power and privilege of hegemonic or complicit masculinities. Preconceptions and stereotypes of other boys and men on the margins, such as those with disabilities, men of color, and LGBT people, lead to similarly detrimental positioning, and derogatory treatment of one disadvantaged group often has consequences for several marginalized groups.

The hegemonic position is the currently accepted male ideal within a particular culture at a specific time. The hegemonic male is ideal (Swain, 2003; Weber, 1946). Among these categories, hegemonic masculinity is at the highest hierarchy because it is culturally valued and the dominant form of masculinity.

#### **Hegemonic Masculinity as Toxic Masculinity**

Hegemonic masculinity is often considered the most toxic type of masculinity because it legitimizes male dominance over others in society; not only this, but it also ensures the subordination of common men, women, and other marginalized types of gender identities such as transgender (Connell & Messerschmidt, 2005). Toxic masculinity is made up of hegemonic masculinity traits that promote dominance over others and are thus socially damaging. Extreme competition and greed, insensitivity to or lack of respect for others' experiences and feelings are unfortunate male inclinations connected with toxic masculinity. There is a strong desire to control and dominate people, an inability to nurture, fear of dependency, a willingness to use violence, and the stigmatization and enslavement of women, gays, and males who exhibit feminine

characteristics (Kupers, 2005). To maintain gender supremacy, men participate in harmful behaviors such as physical and sexual abuse against women and gay men, hurting men, women, and children's health (Connell, 2001).

Hegemonic masculinity is cultivated in Pakistan, where women, queer, and trans-men are highly marginalized and stripped of their fundamental rights. In Pakistan, patriarchal dominance is manifested by strict behavioral norms, gender segregation in the private and public spheres, and the idea of associating family honor with females only. Rape and sexual abuse, honor killings, acid attacks, being burned alive, abduction, domestic violence, forced marriages, dowry murder, corporal and emotional torture are all examples of abnormal and unethical cultural practices in Pakistan. This adverse effect of toxic masculinity greatly impacts emotional well-being (Fatima, 2020).

#### **Role of Parents in Gender Identity Formation**

Many parents make steps to deviate from and so broaden gender stereotypes. However, their sons balance this effort with an intentional effort to produce masculinity that approximates hegemonic standards (Kane, 2006). It has been observed that parents play different roles in gender typing children. Overall, gender boundary maintenance tends to be more visible in the treatment of boys than daughters for both mothers and fathers, but specifically, Fathers appear to treat their sons and daughters differently and to enforce gender boundaries more than mothers do (Antill, 1987; Coltrane & Adams, 1997; Maccoby, 1998).

Kane (2006) reported that after interviewing fathers and mothers from different races, classes, and ethnic groups, parents generally accept their daughters to gender norms. They encourage her to do many things that a boy would do. In addition to it, she suggested, these fathers never desired their daughters to behave like a little princess, so delicate, instead of the bit they wanted their daughter to be strong and athletic.

#### **Hegemonic Masculinity and Emotional Health of Men**

Hegemonic masculinity has been used frequently in masculinity literature, and it has become the most commonly used term in the subject. The word is similarly widespread in the narrower sphere of health, and it is frequently used as a determinant of men's poor health practices (Alston, 2012; Sloane, Gough, & Conner, 2010; Stough-Hunter, 2015).

Masculinity traits like aggression and competitiveness have a biological basis. Boys and men have certain hormonal processes that produce a huge amount of testosterone, which increases aggression level behaviorally, a positive sign for defensive behavior (Dreber & Hoffman, 2010). But hegemonic masculinity is not predetermined by the biological basis; it is mainly developed by social factors, such as parenting style, especially the role of the father, which can be an important factor for a son to acquire hegemonic masculinity (Christian, 1994; Demetriou, 2001; Pease, 2000). Because father relationship can affect son in various dimensions of emotional and behavioral, such as appropriate social behaviors of children were positively related to father's participation (Buckley& Sullivan, 2010). Emotional expressions are also one learning process of every person; a good positive attachment of children can also help them express their emotions (Boyum & Parke, 1995). Because those children learned the emotions control potential from their father and had good emotional intelligence (Pyun, 2014).

#### **Factors Associated with Hegemonic Masculinity**

Other than the core characteristics of hegemonic masculinity, some other personality factors negatively affect an individual. These factors are as follow.

Violence and Aggression. The thoughts and notions of shame and honor can also lead to violence (Betcher & Pollack, 1993). In this concept of masculinity, refusing to fight or not knowing how to fight is regarded as shameful or non-masculine. Violence is merely a boy's attempt to prevent dishonor and embarrassment by going on the offensive, that is, injuring someone else before or after they have hurt you (Pope & Carlson, 2001). Many individuals feel that testosterone, a male hormone, is directly responsible for such aggressiveness in males, but some studies found no such relationship (Pollack, 1998; Pope & Carlson, 2001). Later on, it was realized that boys' conduct results from a combination of biological and environmental factors. Biology and heredity are linked to tendencies for gender-differentiated behavior; however, they are simply tendencies, not absolutes. According to Pollack (1998), research reveals that boys are born with an innate sense of empathy, contradictory to aggression. So, their social learning or environmental factor turns normal men into aggressive men with acceptance in society by shifting the masculine norms they acquire (Pope & Carlson, 2001).

Lack of Empathy. Men who conform to masculine gender patterns have not developed the ability to form positive relationships in their social environment during their socialization process. It was found that the following deficits and traits related to poor emotional development: a lack of sense of responsibility for one's actions, a lack of empathy, cognitive distortions related to a sexist system of values, a troubling view of the world, and relationships with others, and emotional constriction (Verdú-Delgado& Mañas-Viejo, 2017). As a result of their deep internalization of masculinity norms, men and boys are transformed into emotionless beings, detached from their innate feelings of compassion and empathy. It leads to emotional insensitivity, competitiveness, and hostility (UNESCO Islamabad, 2010).

Emotional Suppression. Our patriarchal set of values and traditions is shaped to expect our men to keep persevering, strength, and firmness in the difficult journey of life. Emotional repression, assertiveness, and striving for dominance add to the list. Moreover, aggression, audacity, and low empathy are not negatively opinioned. Men are not expected to behave to present emotional expressivity openly. In Pakistan, when we analyze the core characteristics of an ideal man in our culture, masculinity ideology appears at its fullest. Characteristics of a man through Pakistani cultural prism include a powerful and successful person, avoiding femininity to adhere to a masculine ideology, dominant, aggressive, having a due interest in heterosexuality otherwise stigmatized. Our cultural literature is loaded with examples and sketches out a macho man (Rizvi, 2015). The negative aspect of this toxic masculinity is the emergence of emotional regulation and well-being.

**Poor Wellbeing.** According to the study, men who conform to hegemonic masculinity standards have poor mental and overall wellbeing. They are more likely to engage in sexual violence with their partner and exert a high level of female dominance. As a result of such displays of violence and a lack of healthy interaction with family and friends, Men are more vulnerable to depression or suicide, leading to mental breakdown or other emotion regulation issues. The adverse effect of this hegemonic masculinity affects emotional health is a major reason for the prevalent emotional issue in men, most commonly alexithymia (Smith, Mouzon, & Elliott, 2018).

**Sexual Aggression.** Hegemonic masculinity has been linked to sexually aggressive behavior and acceptance of the rape myth (Gerdes & Levant, 2018), as well

as rejection violence (Thacker, 2019), all of which can have serious consequences for those in interpersonal relationships with hegemonic masculine people, as well as the toxic people themselves.

#### **Factors Contributing to Hegemonic Masculinity**

Hegemonic masculinity is not a genetic tendency; rather, it is learned by the cultural, social, parental integrations. These factors differently contribute to shaping up the toxic personality in men.

Gender Stereotypes. Social-role theory suggests that gender stereotypes originate from a variance point of view, which distinguishes men and women into social roles in the home and at work. Many assumptions exist regarding the gender differences of men's and women's personality characteristics, such as traits, behavior, occupation, and emotions (Hentschel, Heilman, & Peus). In the emotional aspects, boys are taught from an early age not to weep, to be strong and courageous, and to avoid being sensitive because these attributes are stereotyped as being feminine. The behavior acts, such as particular games and toys, considered manly, are given to boys. They are discouraged from playing with girls, even their sisters, to ensure they don't possess feminine traits. Boys are often made to watch warrior cartoons in which violence is justified when it happens in the context of a good-versus-evil battle. They are usually subtly encouraged by their fathers and male relatives when impressions of heroic characters reenact the plays. It directs to the dominancy or need for power over women and other masculine identities (Edwards, 2015).

According to research, men and boys are under more social pressure than women and girls to accept gendered societal prescriptions, such as the widely held health-related assumption that men are autonomous, self-reliant, strong, robust, and rugged. It's not surprising, then, that their behavior and gender ideas are more stereotypical than those of women and girls (Courtenay, 2000).

#### **Social Construct of Hegemonic Masculinity**

Gender is not a specific thing that an individual has. Rather it is a set of actions and activities one does, and the traditional value and beliefs mainly sign these activities and behavior for both genders (Perkins, 2015). In Pakistan, men are not expected to

behave to present emotional expressivity openly. Characteristics of a man through Pakistani cultural prism include a powerful and successful person, avoiding femininity to adhere to a masculine ideology, dominant, aggressive, having a due interest in heterosexuality otherwise stigmatized. Our cultural literature is loaded with examples and sketches out a macho man (Rizvi, 2015). Men are psychologically trained to monitor and guard women's behavior, dress codes, and activities outside the home in their position as protectors (Bhanbhro et al., 2013). Hegemonic masculinity has been largely used as a social structural concept to explain the legitimization of masculinities through social institutions and social groups (Jewkes et al., 2015).

#### **Theories of Gender Identity**

Gender is constructed from cultural and subjective meanings that constantly shift and vary, depending on the time and place (Kimmel, 1995).

**Biological Determinism.** According to biological determinism, gender is something we are born with, something that is fixed; for example, it claims that being male or female is genetically determined and biologically predisposed. As a result, just like testosterone and oestrogen, there are natural qualities of masculinity and femininity that we acquire.

Psychodynamic Theory. From the psychological perspective, many theories explained the formation of gender identity from a different dimension. Sigmund Freud (1905) credited with developing psychodynamic theory. According to this idea, the role of the family, particularly the mother, is critical in forming one's gender identity. The identity of boys and girls is shaped in connection to their mothers. Because girls are physiologically similar to their mothers, they are linked. Because boys are physiologically distinct from their mothers, they build their gender identities in opposition to their mothers. The identification process is represented as a wholesale adoption of children's same-sex parent's features and qualities. Children are sex-typed as a result of this identifying process. Males are predicted to be more firmly sex-typed than girls since affiliation with the same-sex parent is greater in boys than girls (Bussey & Bandura, 1999).

**Social-Cognitive Developmental Theory.** According to Kohlberg(1966), gender constancy means understanding that one's sex is a permanent trait linked to

underlying biological features unaffected by surface characteristics such as hair length, dress style, or preferred play activities. Gender identity is the primary organizer and regulator of children's gender learning. What children see and hear around them shapes their stereotypical gender ideas. They highly value their gender identity and attempt to behave exclusively in ways that are compatible with that idea after they acquire gender constancy, the conviction that their gender is fixed and irreversible.

From a constructionist perspective, women and men think and act differently; they are not the same because of their role identities or psychological traits, but because of concepts about femininity and masculinity that they adopt from their culture (Pleck et al., 1994). Based on Vygotsky's (1978) social constructivist theory, conforming to masculine norms seems to be an ongoing process whereby people, particularly men, use their resources in day-to-day interactions and settings (Courtenay, 2000; Daly, 1993; Totten, 2003).

According to a specific starting point in the sociological discourse, gender, masculinities, and fatherhood are all socially constructed; This indicates that social structures like family and fatherhood are mutually defined and agreed upon; they are not inherent phenomena (Berger & Luckmann, 1967).

Social Learning. According to the social learning theory, children imitate others for acceptable gender roles and actions (Bandura, 1977). Children learn about power and dominance relationships by watching their parents interact (Pease, 2000). Parents are more likely to engage in rough and tumble play with their son than their daughter; parents are also more likely to provide gender-appropriate toys to their children (Levy, 1999). Similarly, parents are more accepting of boys who demonstrate rage than girls who do the same (Zahn-Waxler & Polanichka, 2004). According to studies, men have more gender role anxiety than women as they grow into men (Vandello & Bosson, 2013). It could be explained by the social learning theory, which states that men are punished for not displaying manhood from an early age.

Gender Schema Theory. Gender Schema Theory (Bem, 1985) is another theoretical account that provides a basis for expecting the combined effects of parent sex and child sex on parent-child relationships. Gender schema theory emphasizes gender-schematic processing based on socially prescribed gender schema for maleness and femaleness. Bem (1985) suggested that males and females behave differently from

one another on average because, as individuals, they have each come to perceive, evaluate, and regulate both their behavior and the behavior of others by cultural definitions of gender appropriateness. Gender schema theory also posits that these cultural definitions are acquired early in childhood. Then, it stands to reason that differences would be expected between mother-child and father-child relationships and among the individual dyads.

#### **Emotional Health**

The third variable of research is emotional health. Emotional health refers to a condition of psychological wellbeing. It's the optimal functioning end of the ideas, feelings, and actions that make up our internal and outside environments; it's an extension of mental health. It encompasses a complete sense of wellbeing in what we think, feels, and do during life's highs and lows (Peterson, 2019). Emotions are very important for the human being to survive. A need to interact with others and share things and a healthy emotional life also required a reciprocal relation for disclosing and identifying emotions.

Emotional health is described more broadly to include concepts like emotional regulation and emotional intelligence and the competency to describe them appropriately. Emotional regulation refers to an individual's capacity to regulate their emotions, whereas emotional intelligence refers to their ability to identify, understand one's own emotion, and utilize emotions productively (Hendrie et al., 2006).

Weare (2004) coined the term emotional literacy, which most suits under overall emotional health. The ability to understand ourselves and other people, particularly to be aware of, understand, and use information about the emotional states of ourselves and others with competence. It includes the ability to understand, express, and manage our own emotions and respond to the emotions of others in a way that is helpful to ourselves and others (Coleman, Coleman, Hendry, & Kloep, 2007).

#### **Emotional Difficulties**

Empirical evidence showed that men's and women's emotionality is not much dissimilar to each other in self-report feelings (Simon & Nath, 2004). Although the emotion expressions are significantly gender controlled, males are less likely than females to express their actual emotions, influenced by socioeconomic and other factors

that contribute to male emotions (Charteris-Black & Seale, 2013). The idea of fewer emotions expressive in men is also socially constructive. It influences more male characters; the expectations do not allow men to express emotions. Men who approve of these more conventional norms of masculinity have higher health risks than other men (Courtenay, 2000). These men are less likely to communicate or seek help for their mental health problems due to societal expectations and traditional gender norms (Smith, Mouzon, & Elliott, 2018).

Unfortunately, everyone is not successful, and the same emotions, such as gender, are very different for emotions. Men often have more intense emotional experiences than women, and women have a high tendency to express emotion (Deng et al., 2016). There are always many gender stereotypes related to men's emotional expressions, such as men express more anger than men, and men should not. The study showed that these men interpreted the expression in a stereotype-consistent manner (Plant, Hyde, Keltner, & Devine, 2000). An emotionally arousing stressor has been defined equally for both genders. Still, physiological response, for instance, high blood pressure, was mainly associated with men because men have been found too high to internalize negative emotions like sadness, guilt, and fear (Chaplin, 2015). Another neurological explanation also confirmed that some brain regions such as the prefrontal region, amygdala, and ventral striatal are involved in increasing or decreasing, making men significantly different compared to emotion regulation (McRa et al., 2008).

Difficulties in identifying and describing the emotion can be caused by several mental problems for a hegemonic man. As Garfield, Isacco, and Rogers (2008) pointed out, men who identify more traditionally masculine tend to be at great risk of experiencing problems like anxiety, depression, and psychological distress and more frequently adopt maladaptive coping. Another study also identified that men who are more approved hegemonic ideal experienced a less sense of wellbeing (Mankowski & Maton, 2010). Because appropriately understating the emotions is a positive sign for one's mental health, as Guerra-Bustamante et al. (2019) reported that the capacity to understand and regulate emotional intelligence increases people's wellbeing.

Literature suggested that childhood abuse by the primary caregivers makes the child helpless and unable to negotiate his emotional needs. Hence, it fosters the inability

to identify emotions or fantasize positive emotions later, making the victim emotionally numb or suffering from alexithymia(Farooq, Aasma, &Yousaf, 2016).

#### **Emotional Health of Men**

Men are less likely to communicate or seek help for their mental health problems due to societal expectations and traditional gender norms. We know that gender preconception about women can be harmful, such as the expectation that they should act or appear a specific way. It's crucial to remember, though, that prejudices and expectations can harm men as well. Adult males subsequently lose touch with their emotions, develop their aggressive veneer to protect themselves from more harm, and learn to exhibit the sole acceptable male emotion and rage (Pope, 2000).

In the early stages of life, during early adolescence, boys show a welldeveloped, natural, hard-wired ability to feel empathy and a desire to assist others who are suffering. Later on, boys, towards late adolescents and early adulthood, on the other hand, begin to lose their ability to express their own emotions and concerns in words by the age of seven, as a direct result of a process known as toughening up. When boys begin to sense the pressure from society to avoid feelings and acts that might embarrass them, they begin to toughen up. It leads to wearing a bravado mask, which directly adds to violence. The boy is so afraid of exposing his humiliation that he compensates by exhibiting its polar opposite: recklessness, risk-taking, and self-violence (Pope & Carlson, 2001). Increased risk-taking and self-destructive behaviors (Meth, 1990), stress and anger (Eisler & Skidmore, 1987), and a diminished lack of health concern have all been linked to the male gender role (Nathanson, 1977). Men appear to acquire masculine gender ideas that encourage aggressiveness, accomplishment, and relational and emotional disconnection due to socialization (Mahalik, 1999). Men's health reviews (Eisler & Blalock, 1991; Lemle & Mishkind, 1989) have emphasized the potential impact of masculinity-related issues on men's physical health. Furthermore, males may be unaware of the impact that gender role socialization has had or continues to have on their mental health (Pope & Carlson, 2001).

## **Hegemonic Masculinity and Emotional Health**

Hegemonic masculinity is a collection of socially regressive male characteristics that promote dominance, devaluation of women, homophobia, and

indiscriminate violence. Toxic masculinity also involves a significant degree of masculine inclinations that lead to treatment resistance and provides a significant measure of the male proclivities that lead to resistance in psychotherapy (Brooks & Good, 2001; Meth & Pasick, 1990). Therefore, it isn't easy to spate hegemonic masculinity from the concept of men's emotional health.

Furthermore, concealing emotions and pain, these attitudes emerge from cultural effects that teach men the importance of projecting strength (Frosh, Phoenix, & Pattman, 2001). It can directly or indirectly impact the development of emotional knowledge, which prevents them from using their emotions appropriately, explaining why some men have difficulty identifying emotions (Addis & Mahalik, 2003). While theories identified that men who confirm hegemonic masculinity traits have a greater risk for emotions than normal because they are more restrained to express emotions even with their closer person. Calasanti (2004) argues that hegemonic masculinity is associated with many dimensions, such as power and strength, wealth, and emotional control. Men's suppression of certain emotions is linked to devotion, the dominant representation of traditional masculinity; due to this socialization factor, they have difficulty identifying and describing emotional states (Wong, Pituch, & Rochlen, 2006).

#### Factors associated with poor emotional health

The following factors are associated with emotional health. Poor emotional health and emotional difficulty can impact these aspects.

**Father-Son Relation**. Male Gender roles and stereotypes restrict men from explicitly expressing emotions. Still, it has been observed that a son learns how to exhibit emotion in a manner that corresponds to how his father used to exhibit. Floyd and Morman (2000) discovered that men with loving fathers convey higher levels of affection to their kids than men with unaffectionate fathers, implying a link between father-son contact and men's performance as fathers in their own families.

**Physical illness and psychological disorders.** Furthermore, concealing emotions and pain, these attitudes emerge from cultural effects that teach men the importance of projecting strength (Frosh, Phoenix, & Pattman, 2001). It can directly or indirectly impact the development of emotional knowledge, which prevents them from using their emotions appropriately, explaining why some men have difficulty

identifying emotions (Addis & Mahalik, 2003). While theories identified that men who confirm hegemonic masculinity traits have a greater risk for emotions than normal because they are more restrained to express emotions even with their closer person. Calasanti (2004) argues that hegemonic masculinity is associated with many dimensions, such as power and strength, wealth, and emotional control. Men's suppression of certain emotions is linked to devotion, the dominant representation of traditional masculinity; due to this socialization factor, they have difficulty identifying and describing emotional states (Wong, Pituch, & Rochlen, 2006).

**Suicide.** Suicide is one of the top 10 major causes of mortality in the world today, with about a million people dying each year (Bertolote & Fleischmann, 2002). According to research in Pakistan, most suicides occur in young persons under 30; this includes single males and married women (Khan, Naqvi, Thaver, & Prince, 2008). According to gender-specific rates, the greatest rates for men are 5.2/100,000 in Rawalpindi, while the highest rates for women are 1.7/100,000 in Larkana (Khan, 2007). By a factor of two, men outweighed women. There were more singles than married men in men, but the pattern was inverted (Khan& Reza, 2000). Almost 34% of the Pakistani population suffer from common mental disorders, both men and women (Mirza & Jenkins, 2004), and depression is implicated in more than 90% of suicides (Harris & Barraclough, 1997).

## **Emotional Health of Pakistani Men**

In Pakistan, the research was conducted on alexithymia, a subclinical condition defined by difficulties in identifying and describing feelings and a cognitive style avoidant of introspection (Starita & Di Pellegrino, 2018). The results, therefore, revealed that alexithymia is associated with numerous impaired mental and physical health issues as an outcome, individual suffers from emotional suppressiveness. However, some other cognitive deficits in alexithymic individuals are potentially linked with mental problems because emotion regulation difficulties may arise as a possible mediator in causing alexithymia and its associated symptoms (Khan, 2017).

# Theoretical Background of Emotional Health

The following theories describe an individual's emotional aspect in this research study.

Biological Construction of Emotion. Our bodies are built to process sensory data from all around us. Our brains are built to process, store, and act on data from both external and internal sources (Perry, 2006). The amygdala is a brain region that controls biological, emotional responses (Wolfe, 2006). The amygdala releases chemicals into the bloodstream to prepare our bodies to react to prospective threats, resulting in sweaty palms, tense muscles, an occasional jump in blood pressure, and mobilized a movement to the fight or flight reaction (Wolfe, 2006). Emotions come and go quickly, lasting only a few seconds (Reeve, 2001). Humans act emotionally before they are aware of their emotions; we react before we realize we are reacting. As the biological response to emotions reacts to the physical environment, our minds respond cognitively. Emotion has a biological impact on the mind.

**Evolutionary Perspective.** Charles Darwin hypothesized that emotions evolved because they had adaptive value more than a century ago, in the 1870s. Fear, for example, evolved to aid humans in acting in ways that increased their chances of survival. Darwin felt that emotional facial expressions are intrinsic (hard-wired). He explained that facial expressions help people swiftly assess someone's level of antagonism or friendliness and transmit their intentions to others.

According to recent evolutionary theories, emotions are also innate responses to inputs. Although evolutionary theorists accept that thought and learning can impact emotion, they tend to downplay their importance. According to evolutionary scientists, happiness, disdain, surprise, disgust, rage, fear, and sadness are among the fundamental emotions shared by all human societies. They think that all other emotions result from combining these main emotions with varying intensities. Terror, for example, is a more powerful version of the basic feeling of fear (Hess & Thibault, 2009).

## **Demographic-based Variable**

Some studies included the related demographic variables in the following study.

## Study Variables and Age

Erikson expanded on Freudian psychoanalysis in the widely acclaimed book, Childhood, and Society, published in 1950. His psychosocial developmental theory proposed the psychosocial crisis of *identity vs. confusion* in adolescent age. Gender identity and personality development are two milestones of adolescent age. In this age,

The effects of prenatal exposure to gonadal hormones and the role of genetics are discussed as psychosocial (such as child and parental characteristics) and biological (such as the effects of prenatal exposure to gonadal hormones and the role of genetics) factors that contribute to a gender-variant identity are discussed (Steensma, Kreukels, De-Vries, & Cohen-Kettenis, 2013). A teenager observes gender roles and societal norms throughout adolescence, which eventually set the gender direction in adulthood (De-Vries, Doreleijers, & Kettenis, 2007).

Through research, it has been observed that the father plays a vital role in the overall development of the child and mental and emotional wellbeing of the child in early childhood and late childhood (Hagenmeyer, Erzinger, & Reichle, 2014; Lamb, Pleck, & Levine, 1985; Lamb, 2004; Maselko et al., 2019). In contrast, When it comes to a father-son relationship in adulthood, it was observed that an adult male having a relationship with his father tend to show lesser emotional expression and is restricted to express feelings directly or explicitly, yet it has been noted that a son learns how to show emotion in the same way that his father did (Bucher, 2014; Lee, 1991; Messerschmidt, 2019; Palmer, Lakhan-Pal, & Cicchetti, 2019; Pease, 2000).

## Study Variables and Residential Area

Men in urban and suburbs have more freedom and flexibility in expressing masculinity than men in rural areas (Silva, 2021). For example, certain urban males reframed certain aesthetic and fashion behaviors as being consistent with masculinity (Barber 2008, 2016; Barry, 2018; Barry & Weiner 2019). It was discovered that rural men with mental and emotional disorders sought care less than urban men with the same condition. Likewise, rural men commit suicide considerably higher than urban men (Judd et al., 2006).

#### **Father Residential Status**

According to research, there may be variances in the association between father engagement and social-emotional development depending on the father's residential situation (Black et al., 1999). Father residential status is usually determined by whether or not the father resides at home with the child. The most typical consideration for nonresidential father engagement is monetary support. It, however, is only one facet of father participation. Although nonresidential fathers' engagement has been linked to

better social and emotional adjustment and fewer behavioral issues (Greene & Moore, 2000), no research has specifically compared how sons' social-emotional health differs in homes with resident and nonresident fathers (Harris, 2010).

## Relationship between Variables

Father-Son Relationship and Masculinity. A relationship with a father better accounts for a son's identity formation and type of masculinity (Floyd, 2006). Dutch fathers and Lundy (2002) discovered links between parental mind-mindedness (the ability to describe the infant's thoughts and feelings), synchronous actions, and attachment security.

According to studies, a father's masculinity position has a greater effect on a son's masculinity than a mother's. Father determines gender identity and sexual orientation. Hence, Fatherhood is a good predictor of masculinity. Heterosexual Fathers may feel particularly responsible for shaping their sons' sexual orientation. Furthermore, compared to mothers, fathers' remarks are less likely to respond to concerns about how others would handle their son if he were gay and more likely to refer to the personal dissatisfaction they expect in this hypothetical scenario. It was suggested that heterosexual fathers are especially likely to raise their sons consistent with traditional hegemonic masculinity (Kane, 2006). According to a separate line of study, stay-at-home fathers are frequently stigmatized and judged negatively by others because their behavior does not conform to hegemonic masculine ideals (Brescoll & Uhlmann, 2005; Doucet, 2004).

#### Rationale

The purpose of this study is to explore relationship between father-son relation, hegemonic masculinity, and emotional health in adult men. These variables have been studied in disjoined or segregated manner (Crespi & Ruspini 2015; Hunter, Riggs, & Augoustinos, 2017; Liong, 2015; Madrid, 2017; Pleck, 2010). This study will explore these variables on same sample. The research focuses on the poor emotional health of man which may be due to stereotypical gender norms in society. Also, literature suggested that men population obliviously in Pakistan suffer through emotional health problems in describing, identifying and articulating their own emotion and reported predominance of negative emotional experiences (*Khan, 2017*). *Therefore*, there is a

need to explore the factors that may contribute to the emotional suppression and emotional inexpressibility in men leading to mental and emotional difficulties

Moreover, there are few studies that have on fatherhood and its impact on a child's growth. This may be due to a lack of interest, as in our community, mothers spend the majority of their time at home with their children, and most significant source of love, comfort, and, most importantly, as the primary caretaker, contrary to fathers and this relationship has been studied in detail (Bornstein, et. al., 2008, Célia, Stack, & Serbin, 2018; Ritvo, 2012). As a result, there is still a need to investigate the relationship of paternal side on children, especially on sons (Rizvi, 2015). It is because boys, especially adolescent boys, learn gender roles from their fathers as they get older. Similarly, the father-son relationship, particularly for male-male relationships, may be the most important relationship in a man's life cycle. As the son grows older, this can have a significant impact on how he develops his masculinity. (Morman & Floyd, 2006). However, A three-fold model of paternal involvement was formulated by Lamb, Pleck, Charnov, and Levine 1985. Pleck claimed that fathering entailed three primary activities: "(a) positive engagement activities, more intensive interaction with the child likely to promote development; (b) warmth and responsiveness; which promotes the proper development of mental health of a child and (c) control, particularly monitoring and decision making (Pleck, 2010). So, its utmost necessary to bring this topic of father's presence effect on a son's development.

Sons are relatively more prone to internalize gender identity from his father (Diamond, 2004). They acquire masculinity though observation and learning by setting their fathers as a role model. It stands now that father deal with their sons in different way than they do to their daughters. Fathers employ language that speaks to emotional and bodily awareness with their daughters but not with their sons. A study was done in 2017, fathers were considerably more likely to respond to daughters when they wailed at night. An independent study from 2018 also found that son's masculine norms are shaped in the shadow of father's behavior (Petts, Shafer, & Essig, 2018). The dynamics of father-son relation are totally different when it comes to son in adulthood. Fathers have a unique and critical role to play in the development of children, particularly for boys who require a male role model to form a masculine gender identity (Silverstein & Auerbach, 1999). As the theory of Mowder (1991) explicitly explains the role of parenting in a way that how individuals' perceptions of parenting modify through

different developmental stages of child. It means that children progress from childhood to adulthood, their parents' perceptions regarding the parent role evolves and change its form of expression. Therefore, this research will particularly explore the direction, nature and quality of father and adult son relationship and how it impacts the masculine identity if son

Researchers have compared and contrasted the positions of fathers in urban and rural settings (Creighton, Brussoni, Oliffe, & Olsen, 2015). In the wake of long working hours at office setting, urban fathers, running on corporate treadmill, spend less time with their children. Also, the amount of time they spend with their children is not anything closer to ideal (Garfield & Isacco III, 2012). This shrinks the room for fatherson interaction. However, this is contrary to fatherhood pattern in rural settlements. Due to field work and other means of earning, in rural set up, allow fathers to spend more time with their children, especially male children. This bond is usually strengthened due to traditional agrarian pattern of rural life, where usually all or most of the family members are engaged in work (Peter et. al., 2005). As per the form of work they are to do, fathers require regular assistance and human resource. Of these, sons are the most optimal resource they can have. This provides ample chance of male kin relationship to grow. As a result, they are also more democratic fathers. Men in urban area have more freedom and flexibility in how they express masculinity than men in rural areas (Silva, 2021). Moreover, it has been found that rural males with mental problems and emotional had lower rates of seeking help than urban men with same issue (Judd et al., 2006); also suicide rates are significantly higher in rural men than in urban men (Australian Bureau of Statistics, 2000; Judd et. al., 2006). As in Pakistan a 64% population lives in rural area and only 36% people lives in urban area so there is a need to study whether the emotional health pattern in rural men is same (Alvi, 2018).

#### Method

# **Objectives**

The present study has some aims and objectives

- 1. The present study will attempt to determine how the quality of father-son relation is related to hegemonic masculinity and the emotional health of adult men.
- 2. To study the hegemonic masculinity of urban-rural adult men and various age groups.
- 3. To study how family settings can affect hegemonic masculinity and men's emotional health.
- 4. To explore how the study variables are affected by the current residential status of respondents and their parents.

## **Hypotheses**

- 1. There will be a positive relationship between the quality of the father-son relationship and hegemonic masculinity in adult men.
- 2. There will be a positive relationship between hegemonic masculinity and difficulties in emotional health in adult men.
- 3. Hegemonic masculinity in adult men will be higher in rural areas than men in urban areas.
- 4. There will be a significant difference in adult men's hegemonic masculinity and different levels of emotional difficulties reported by adult men.

#### **Operational Definition of Variables**

The operational definition of the present study variables is as follows.

## **Father-Son Relation**

Father-son relation is defined as the degree to which a father shows engagement, accessibility, and responsibility. The quality of good father-son relations is how a father is emotionally responsive, the ideal gender role model for a son, and accessibility when a son needs him (Dick, 2004). In this study, The Fatherhood scale (Dick, 2004) is used

to measure the strength and quality of a father and son bond. A higher score indicated a good relationship between father and son; a lower score indicated the poor quality of father-son relation.

## **Hegemonic Masculinity**

Hegemonic masculinity is defined as a practice that legitimizes men's dominant position in society and justifies the subordination of the common male population and women and other marginalized ways of being a man (Connell, 2020). This study measures hegemonic masculinity with all aspects related to it. The Masculine Gender-Role Stress abbreviated version (MGRS-AV) scale is used. Higher scores indicated a higher level of hegemonic masculinity. Low scores indicate that individuals conform to hegemonic norms (Swartout, Parrott, Cohn, Hagman, & Gallagher, 2015).

#### **Emotional Health**

In this research, men's emotional health is described as difficulty understanding, differentiating, describing, and expressing emotions, together with a paucity of dreams and fantasies and a preoccupation with concrete details (Quinton & Wagner, 2005). These components of emotional health are much in congruence with alexithymia. Both terminologies mean the same, but alexithymia is a subclinical condition characterized by difficulties identifying and describing one's emotional state (Bird & Cook, 2013). The current sample was from a non-clinical population. The Toronto Alexithymia scale (Bagby et al., 1994) measured emotional health's definition. Which measure individuals having difficulties identifying and describing emotions and who tend to minimize emotional experience and focus attention externally. A higher score indicated poor emotional health, while a lower score indicated well.

#### **Instruments**

The following instruments were used to measure the study variables in this research.

**Demographic Sheet.** A demographic sheet was developed together with information about the respondents. It sought information about age, education, occupation, marital status, current residency, background residency, current family system, background family system, and parents' everyday living.

The Masculine Gender-Role Stress (MGRS; Swartout et al., 2015). The abbreviated version of the Masculine Gender-Role Stress scale was used in this study. It is a 15-item scale and abbreviated from the full version of the Masculine Gender-Role Stress 40-items scale (Eisler & Skindmore, 1987). This scale is used to the stress that men experience in different situations in which they explicitly depict traditional masculine standards of behavior. The good quality of the abbreviated version is that it has the same five subscales as in the original: physical inadequacy, emotional inexpressiveness, subordination to women, intellectual inferiority, and *performance failure*. The full-scale demonstrated a high degree of internal consistency ( $\alpha = .93$ ), as did the abbreviated measure ( $\alpha = .90$ ). Participants are asked to rate situations on a 6-point Likert scale, where scoring categories range from 0 = not at all stressful to 5 = extremely stressful; the respondent rates each hypothetical situation keeping in mind how stressful they would feel in each situation if it happened to them; higher scores indicating greater masculine role stress (Swartout et al., 2015).

**Fatherhood Scale (FS: Dick, 2004).** It is a 64-items instrument with nine subscales positive engagement, positive paternal emotional responsiveness, the moral father role, the gender role model, negative paternal engagement, the androgynous role, the accessible father, responsible, paternal engagement, and the good provider role. The selected subscales are positive paternal emotional responsiveness, the gender role model, the androgynous role, and the accessible father. The subscales attained high levels of internal consistency reliability, with alpha levels ranging from .80 to .96. The scale has an overall reliability of .98 (Dick, 2004). The responses are given on a 5-point Likert scale ranging from 1 = never to 5 = always. Higher scores indicate strong relation with the father.

**Toronto Alexithymia Scale (Bagby et al., 1994).** Toronto Alexithymia Scale (Bagby et al., 1994) is a 20 item self-report, 5-point Likert-type measure with response options ranging from 1 (*strongly disagree*) to 5 (*strongly agree*); this scale was utilized to evaluate the presence and the level of alexithymia. The scale items are designed to be understandable for people aged 12 onwards. The scoring range for TAS-20 is 20 - 100, where higher scores reflect the severity of emotional difficulties. The total alexithymia score is the sum of responses to all 20 items, while the score for each subscale factor is the sum of the responses to that subscale. The TAS-20 uses cutoff

scoring: equal to or less than 51 = non-alexithymia, equal to or greater than 61 = alexithymia. Scores of 52 to 60 = possible alexithymia.

# Sample

The sample consisted of 310 adult males. The criterion for inclusion was male respondents between 20-35 years of age. For sample selection, a convenient sampling technique was used. The sample was collected from Islamabad and Rawalpindi. Due to the pandemic, the data was collected in a hybrid model.

**Table 1**Frequency and Percentage of Demographic Variables (N=310)

Demographic	f	%
Age		
20-24 years	42	13.5%
25-29 years	131	42.3%
30-35 years	137	44.2%
Qualification		
Graduate	134	43.2%
Post-Graduate	176	56.8%
Occupation		
Job	169	54.5%
Student	104	33.5%
Unemployed	37	11.9%
Marital Status		
Married	181	58.4%
Single	129	41.6%
Family Structure		
Nuclear	217	70%
Joint	93	30. %
<b>Background Family System</b>		
Joint	219	70.6%
Nuclear	91	29.4%
Residential Status		
Rural	101	32.6%
Urban	209	67.4%
<b>Background Residential Status</b>		
Rural	110	35.5%
Urban	200	64.5%
Currently Living With		
without parents, live separately	30	9.7%
without parents, parents deceased	114	36.8%
with parents	76	24.5%
with father only	59	19%
with mother only	31	10 %

Note: the information is presented in categories created after frequency analysis.

#### **Procedure**

Sample of adult males was collected through the hybrid method using online questionnaires, and also the same questionnaires were distributed to the participants in person. Questionnaires were presented in booklet form. Data was collected from university students, office employees, and staff to approach the age demand in Rawalpindi and Islamabad. The office authority gained permission to survey Rawalpindi and Islamabad. Questionnaires were handed over to participants after their willingness.

Further, informed consent was shared with the participants. They were given clear knowledge of the research purpose and informed of the right to withdraw anytime. Further over, they were taken into confidence that the information would be kept confidential. The questionnaire's content was anonymous, and no personal information was taken other than demographic. All the participants were positively encouraged to take in the research.

## Results

The present study was conducted to examine father-son relation, hegemonic masculinity, and emotional health of adult males; psychometric properties of variables include mean, standard deviation, and alpha reliability; and the relationship between variables was analyzed by correlation, ANOVA, and *t*-test analysis. To study men's emotional health in the sample, the analysis through the cutoff score has also been done. The target sample of the study was three hundred and ten adults. The analysis was done on all study variables and demographics.

## Reliability and Descriptive Statistics of the Measures

Cronbach's alpha reliability coefficients were calculated for every scale and their subscales to measure the internal stability and establish the applicability of the scales on the sample (N=310) and the descriptive statistic of the constructs (see Table 2).

Table 2

Cronbach Alpha, Reliabilities and Descriptive Statistics Father-Son Relation, Hegemonic Masculinity and Emotional Health (N=310)

					Ra	ange		
Scales	k	α	M	SD	Actual	Potential	Skew	Kurt
<b>Emotional Health</b>	20	.92	81.41	11.9	28-100	20-100	-1.64	2.56
Difficulty Describe Feeling	5	.78	20.06	3.42	7-25	5-25	-1.64	2.52
Difficulty Identifying Feeling	7	.83	28.41	4.72	10-35	7-35	-1.45	1.79
External Oriented thinking	8	.83	32.94	4.80	10-40	8-40	-1.75	3.43
Hegemonic masculinity	15	.67	52.90	6.47	27-75	15-75	73	1.43
Subordination to Women	5	.54	17.94	3.08	5-25	5-25	-1.05	1.76
Physical Inadequacy	5	_	17.75	2.44	10-25	5-25	33	.72
Emotional Inexpressiveness	2	_	7.46	1.43	2-10	2-10	67	.99
Intellectual Inferiority	2	_	3.28	1.00	1-5	2-10	38	28
Performance Failure	1	-	3.26	1.03	1-5	1-5	32	26
Father-son relation	30	.90	104.1	17.1	45-137	30-150	68	1.33
Positive Emotional Response	13	.87	46.26	8.71	16-65	13-65	23	.54
The Gender Role Model	6	.72	18.92	4.39	6-30	6-30	75	1.00
The Androgynous Role	7	.72	25.34	3.98	11-35	7-35	31	.98
The Accessible Father	4	.71	13.59	3.18	4-20	4-20	51	.76

Note. Skew=Skewness; Kurt=Kurtosis.

Table 2 shows that the alpha reliability of the Toronto Alexithymia scale is .92. Likewise, the reliability of scales' subscales (difficulty describing feeling, difficulty identifying feeling, and externally-oriented thinking) was: .78, .83, and .83, respectively, which shows that scale has strong reliability. Moreover, the table also shows the alpha reliability of masculine gender role stress is .67. The reliability of its subscales, subordination to women, physical inadequacy, emotional inexpressiveness, and intellectual inferiority are .67, .54, .24, .19, and .26, respectively. The subscale performance failure had only one item, so the reliability analysis cannot be run. Overall, this scale showed good reliability. Skewness and kurtosis were within the acceptable range.

The fatherhood scale has strong reliability of .90. Likewise, the reliabilities of subscales (positive paternal emotional responsiveness, the gender role model, the

androgynous role, the accessible father) are .87, .72, .72, and .71, respectively. It shows that subscales also have good reliabilities.

## The Relationship among Study Variables

Table 3 shows the relationship between the major constructs used for the current study.

Table 3 shows the correlation between study variables father-son relationship, hegemonic masculinity, and emotional health in men and subscales. Through table 3, it is observed that the correlation between emotional health and father-son relation is .325, which means positive and significant. Similarly, the correlation between emotional health and hegemonic masculinity is .477, a moderate, positive, and significant correlation. Lastly, the correlation between masculinity and the father-son relationship is .30, which shows a positive and significant correlation. Moreover, the table depicts that the subscales have the most significant relationship.

.

 $\begin{tabular}{ll} \textbf{Table 3} \\ Correlation \ Between \ Father-Son \ Relation, \ Hegemonic \ Masculinity \ and \ Emotional \ Health \ of \ Men \ (N=310) \\ \end{tabular}$ 

	Variables	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1	Emotional Health	-	.32**	.47**	.90**	.93**	.92**	.30**	.22**	.24**	.30**	.62**	.32**	.35**	11*	01
2	Hegemonic masculinity		-	.30**	.26**	.34**	.27**	.92**	.71**	.79**	.86**	.33**	.23**	.15**	00	.05
3	Father-son relation			-	.42**	.49**	.39**	.26**	.29**	.18**	.25**	.80**	.79**	.58**	.34**	.36**
4	Difficulty Describing Feeling				-	.78**	.75**	.24**	.21**	.17**	.26**	.59**	.26**	.28**	11*	06
5	Difficulty Identifying Feeling					-	.76**	.33**	.22**	.26**	.29**	.64**	.38**	.30**	09	02
6	Externally Oriented Thinking						-	.26**	.17**	.21**	.27**	.50**	.23**	.39**	10	.03
7	Positive Emotional Response							-	.48**	.65**	.72**	.29**	.20**	.17**	01	.03
8	The Gender Role Mode								-	.43**	.60**	.32**	.21**	.12*	.07	.04
9	The Androgynous Role									-	.65**	.20**	.17**	.03	05	.07
10	The Accessible Father										-	.30**	.19**	.11*	01	.05
11	Subordination to Women											-	.45**	.37**	.04	.12*
12	Physical Inadequacy												-	.32**	.21**	.20**
13	Emotional Inexpressiveness													-	.12*	.09
14	Intellectual Inferiority														-	.22**
15	Performance Failure															-

<sup>\*\*\</sup>overline{p} < .01, \*p < .005

**Table 4**Linear Regression of Father-Son Relation, Hegemonic Masculinity and Emotional Health of Men (N=310)

	Emotic	nal Hea	ılth	95 % Confidence Inte				
Predictors	В	β	t	p	Lower	Upper		
(Constant)	30.76		6.34	.00	21.21	40.30		
Hegemonic masculinity	-2.27	-1.23	-4.50	.00	-3.26	-1.28		
Subordination to Women	4.44	1.14	7.92	.00	3.34	5.54		
Physical Inadequacy	2.79	.57	4.57	.00	1.59	3.99		
Emotional Inexpressiveness	3.58	.43	5.66	.00	2.34	4.83		
Intellectual Inferiority	.75	.06	1.01	.31	71	2.21		
Performance Failure	1.31	.11	1.87	.06	06	2.70		
Positive Emotional Response	.05	.04	.66	.50	11	.23		
The Gender Role Mode	13	04	92	.35	41	.15		
The Androgynous Role	.19	.06	1.12	.26	14	.54		
The Accessible Father	.19	.05	.77	.43	30	.70		
$R^2$	.50							
$\Delta R^2$	.50							
F	29.92							
P	.00							

Table 4 shows the linear regression analysis of study variables. The result shows that the father-son relationship contributes less and is non-significant to emotional difficulties. However, hegemonic masculinity and its components are significantly predicting emotional difficulties.

## **Demographic Based Analysis**

This analysis is important to study as most men in the sample reported great emotional difficulties. And result suggested that the majority of men in the sample have difficulty identifying feelings and distinguishing between feelings and bodily sensations of emotional arousal. Furthermore, they face difficulty describing feelings to others and have externally oriented thinking or lack of introspection. They also lack the ability of imaginative activities.

**Table 5**Categorical Analysis of Emotional health in Men (N=310)

G	food	Mo	derate	<b>Poor</b>				
Emotion	nal Health	Emotio	nal Health	Emotional Health				
(Bel	ow 50)	(5	1-60)	(60 above)				
n	%	n	%	n	%			
9	2.90	15	4.84	286	92.2			

Table 5 shows that 2.90% (9 individuals) of the total sample were tend to have good emotional health, 4.84% (15 individuals) had a moderate emotional health. Most importantly, tables 4 show that 92.2% (286 individuals) laying on poor emotional health category. This data shows a high chance of emotional difficulties in the sample.

**Table 6**Comparison of Education Status on Variables (N=310)

-	Unde	rgraduate	Pos	tgraduate					
	(n	=134)	(1	<i>i</i> =176)			959	% CL	Cohens
Variables	M	SD	M	SD	t	p	LL	UL	<i>d</i>
Emotional Health	81.92	11.58	81.02	12.41	.66	.51	-1.79	3.59	-
Difficulty Describing	20.17	3.378	19.98	3.46	.49	.62	58	.97	-
Feeling									
Difficulty Identifying	28.63	4.64	28.24	4.79	.73	.47	67	1.46	-
Feeling									
Externally Oriented	33.12	4.55	32.81	5.00	.57	.57	77	1.39	-
Thinking									
Father-son relation	104.1	17.80	104.2	16.62	03	.98	-3.91	3.82	-
Positive Emotional	46.32	9.09	46.22	8.45	1.0	.92	-1.87	2.07	-
Response									
The Gender Role Mode	18.76	4.71	19.04	4.16	56	.57	-1.28	.70	-
The Androgynous Role	25.31	4.28	25.36	3.76	11	.91	95	.85	-
The Accessible Father	13.70	3.33	13.52	3.08	.51	.61	53	.90	-
Hegemonic masculinity	52.93	6.93	52.90	6.13	.08	.94	-1.40	1.52	-
Subordination to	18.05	3.19	17.87	3.00	.51	.61	51	.88	-
Women									
Physical Inadequacy	17.57	2.60	17.89	2.32	-1.1	.26	87	.23	-
Emotional	7.51	1.49	7.43	1.40	.54	.59	24	.41	-
Inexpressiveness									
Intellectual Inferiority	3.24	1.09	3.32	.94	69	.49	31	.15	-
Performance Failure	3.40	1.019	3.16	1.04	2.0	.05	.00	.47	.25
					0				

Table 6 shows the comparison of education status on variables. The result shows that both education groups have a significant mean difference in masculine gender role stress (performance failure). However, education has no significant effect on other study variables.

**Table 7**Comparison of Marital Status on Study Variables (N= 310)

	Single		Mar	ried					
	(n=1)	181)	(n=1)	29)			95%	CL	Cohen
Variables	M	SD	M	SD	t	p	LL	UL	d
Emotional Health	82.30	11.78	80.15	12.03	1.57	.11	54	4.84	-
Difficulty Describing Feeling	20.27	3.40	19.75	3.44	1.31	.19	25	1.29	-
Difficulty Identifying Feeling	28.78	4.69	27.88	4.73	1.66	.09	16	1.96	-
Externally Oriented Thinking	33.24	4.70	32.51	4.93	1.33	.18	35	1.82	-
Father-son relation	105.6	17.54	102.03	16.32	1.82	.06	27	7.45	-
Positive Emotional Response	47.43	9.02	44.62	8.00	2.83	.00	.86	4.76	.33
The Gender Role Mode	18.74	4.73	19.17	3.88	86	.38	-1.43	.56	-
The Androgynous Role	25.54	4.12	25.05	3.77	1.07	.28	41	1.39	-
Accessible Father	13.89	3.34	13.17	2.90	1.96	.05	00	1.43	.23
Hegemonic masculinity	52.50	6.97	53.44	5.68	-1.26	.20	-2.40	.52	-
Subordination to Women	17.82	3.17	18.11	2.95	81	.41	98	.41	-
Physical Inadequacy	17.64	2.52	17.91	2.33	97	.33	82	.28	-
Emotional Inexpressiveness	7.49	1.55	7.42	1.26	.39	.69	26	.39	-
Intellectual Inferiority	3.16	1.09	3.45	.85	-2.57	.01	52	07	.29
Performance Failure	3.28	1.06	3.22	.99	.52	.60	17	.29	-

Table 7 shows the comparison of marital status on study variables. Results illustrate that both groups are significantly different on the subscale of fatherhood scale (positive paternal emotional responsiveness; the accessible father) and subscale of masculine gender role stress (intellectual inferiority)

Table 8

Comparison of Current Family System on Study Variables (N= 310)

	Join	nt	Nuc	lear					Cohe
	(n=2)	17)	(n=0)	93)			95% CL		n
Variables	M	SD	M	SD	t	p	LL	UL	d
Emotional Health	81.53	11.7	81.12	12.3	.27	.78	-2.50	3.3	-
Difficulty Des. Feeling	20.06	3.44	20.05	3.40	.02	.98	82	.84	-
Difficulty Ident. Feeling	28.50	4.60	28.18	5.00	.55	.58	82	1.5	-
Extern. Oriented Thinking	32.96	4.73	32.89	5.01	.11	.90	-1.10	1.24	-
Father-son relation	104.9	16.5	102.2	18.4	1.28	.19	-1.43	6.90	-
Positive Emotion	46.75	8.39	45.14	9.37	1.49	.13	51	3.72	-
Response									
The Gender Role Mode	19.03	4.31	18.6	4.61	.69	.48	70	1.45	-
The Androgynous Role	25.45	3.98	25.10	3.98	.74	.46	60	1.33	-
Hegemonic masculinity	53.54	5.99	51.40	7.29	2.70	.00	.58	3.7	0.32
Accessible Father	13.71	3.11	13.33	3.2	.95	.34	40	1.15	-
Subordination to Women;	18.17	2.97	17.43	3.28	1.94	.05	00	1.49	.23
Physical Inadequacy	17.98	2.27	17.23	2.75	2.45	.01	.14	1.33	.30
Emotional Inexpressive	7.54	1.38	7.29	1.55	1.39	.16	10	.60	-
Intellectual Inferiority	3.34	1.02	3.15	.98	1.52	.12	05	.43	-
Performance Failure	3.28	1.07	3.22	.93	.39	.69	20	.30	-

Table 8 shows the mean Comparison of the current family System on the Study Variable. It depicts significant results that two groups are significantly different on scale Masculine Gender Role Stress and its subscale Subordination to Women and Physical Inadequacy. However, the family system has non—significant differences in father-son relation and emotional health.

Table 9

Comparison of Background Family System on Study Variables

	Jo	int	Nuc	lear					
	(n=2)	219)	(n=	91)			95%	CL	Cohens
Variables	M	SD	M	SD	t	p	LL	UL	$\overline{d}$
Emotional Health	81.52	11.78	81.13	12.3	.26	.78	-2.53	3.32	-
Difficulty Des. Feeling	20.10	3.32	19.95	3.67	.34	.72	69	.99	-
Difficulty Ident. Feeling	28.51	4.66	28.16	4.86	.58	.55	81	1.50	-
Extern. Oriented Thinking	32.91	4.75	33.01	4.95	16	.87	-1.27	1.08	-
Father-son relation	104.1	16.94	104.1	17.6	.01	.99	-4.18	4.22	-
Positive Emotion Response	46.33	8.57	46.08	10.0	.23	.81	-1.89	2.39	-
The Gender Role Mode	18.94	4.27	18.86	4.71	.14	.88	-1.00	1.15	-
The Androgynous Role	25.21	4.00	25.64	3.92	87	.38	-1.41	.54	-
Hegemonic masculinity	53.40	6.12	51.68	7.14	2.14	.03	.14	3.30	.25
The Accessible Father	13.63	3.14	13.50	3.28	.32	.74	65	.91	-
Subordination to Women	18.18	3.00	17.37	3.19	2.12	.03	.06	1.56	.26
Physical Inadequacy	17.92	2.38	17.34	2.56	1.92	.05	01	1.18	.23
Emotional Inexpressive	7.51	1.33	7.35	1.66	.89	.37	19	.51	-
Intellectual Inferiority	3.32	1.00	3.17	1.01	1.21	.22	09	.40	-
Performance Failure	3.23	1.03	3.31	1.02	63	.52	33	.17	-

Table 9 shows the mean comparison of the background family system on the study variable. It depicts significant results that two groups are significantly different on scale Masculine Gender Role Stress and its subscale Subordination to Women and Physical Inadequacy. However, the family system has non—significant differences in father-son relation and emotional health.

Table 10

Comparison of Current Residential System on Study Variables

	Rural Urban								
	(n=1)	01)	(n=2)	209)			95%	6 CL	Cohens
Variables		SD		SD	t	p		UL	d
-				12.51		.01	.76		.31
Emotional Health	83.83	10.2	80.24		2.50			6.40	
Difficulty Des. Feeling	20.62	3.00	19.79	3.58	2.02	.04	.02	1.64	.25
Difficulty Ident. Feeling	29.34	4.17	27.96	4.91	2.45	.01	.27	2.50	.30
Exter. Oriented Thinking	33.86	3.90	32.49	5.14	2.36	.01	.22	2.50	.30
Father-son relation	105.18	16.5	103.61	17.42	.75	.44	-2.5	5.65	-
Positive Emotion	46.83	8.43	45.99	8.86	.80	.42	-1.2	2.92	-
Response									
The Gender Role Mode	19.35	4.44	18.71	4.38	1.18	.23	41	1.67	-
The Androgynous Role	25.30	3.97	25.36	4.00	13	.89	-1.0	.88	-
The Accessible Father	13.71	3.17	13.54	3.19	.45	.65	58	.93	-
Hegemonic masculinity	53.45	5.54	52.63	6.88	1.05	.29	72	2.36	-
Subordination to Women	18.40	2.52	17.724	3.30	1.82	.06	05	1.41	.23
Physical Inadequacy	17.82	2.21	17.72	2.56	.33	.73	48	.68	
Emotional Inexpressive	7.57	1.38	7.41	1.46	.93	.35	18	.50	-
Intellectual Inferiority	3.26	.99	3.29	1.02	20	.84	26	.21	-
Performance Failure	3.07	1.12	3.34	.97	-2.17	.03	51	02	.25

Table 10 shows the comparison of the current residential system on study variables. The result illustrates that groups are significantly different on the emotional health scale, and its subscale (difficulty describing feeling; difficulty identifying feeling; and externally oriented thinking) and on subscales of Masculine Gender Role Stress (subordination to women, performance failure)

**Table 11**Comparison of Residential Background System on Study Variables (N= 310)

	Ru	ral	Url	oan					
	(n=1)	10)	(n=2)	200)			95%	% CL	Cohen's
Variables	M	SD	M	SD	t	p	LL	UL	d
Emotional Health	83.03	10.2	80.5	12.67	1.78	.07	25	5.29	.21
Difficulty Des. Feeling	20.37	3.00	19.89	3.62	1.18	.24	31	1.28	-
Difficulty Ident. Feeling	28.78	4.68	28.20	4.74	1.02	.30	52	1.67	-
Exter. Oriented Thinking	33.88	3.77	32.42	5.22	2.57	.01	.34	2.56	.32
Father-son relation	104.7	16.4	103.8	17.48	.43	.66	-3.1	4.89	-
Positive Emotion Response	46.76	8.87	45.99	8.63	.74	.45	-1.2	2.81	-
The Gender Role Mode	19.06	4.02	18.84	4.59	.41	.68	81	1.24	-
	25.01	4.11	25.52	3.90	-	.28	-1.4	.42	-
The Androgynous Role					1.06				
The Accessible Father	13.85	3.16	13.45	3.19	1.06	.29	34	1.14	-
Hegemonic masculinity	53.44	5.74	52.60	6.83	1.10	.27	66	2.35	-
Subordination to Women;	18.30	2.78	17.75	3.22	1.53	.12	15	1.27	
Physical Inadequacy	17.74	2.34	17.76	2.51	05	.96	58	.55	
Emotional Inexpressive	7.56	1.36	7.41	1.47	.90	.36	18	.48	-
Intellectual Inferiority	3.27	.927	3.29	1.05	14	.88	25	.21	-
Performance Failure	3.20	1.07	3.29	1.01	66	.51	32	.16	

Table 11 shows the comparison of the residential system on study variables. The result illustrates that groups are significantly different on the Toronto alexithymia scale and its subscale (feeling externally oriented thinking).

*ANOVA*. Analysis of variance was used to conclude more than two groups differences along with the demographic conditions, i.e., Occupation groups (Students, Job, and Unemployment), Age groups (20-25, 26-29, and 30-35), Currently Living with Parents (With Father, With Mother, With Both Parents and Without Parents).

# **Group Differences in Occupation groups.**

Table 11 showed the differences between occupation categories in the association of study variables.

**Table 12**Anova Comparison of occupation on Study Variables (N=310)

	Jo	b	Stud	ent	Unem	ployed						
	(n=	42)	(n=1)	31)	(n=	137)					959	%CL
Variables	$\overline{M}$	SD	M	SD	M	SD	F	p	i-j	MD(i-	LL	UL
										j)		
Emotional Health	80.15	12.38	83.91	9.85	80.10	14.05	3.50	.03	2>1	3.8*	.28	7.22
Difficulty Describing Feeling	19.88	3.36	20.55	3.10	19.45	4.34	1.89	.15	-	-	-	-
Difficulty Identifying Feeling	27.88	4.79	29.49	4.13	27.78	5.49	4.19	.01	2>1	1.6*	.23	2.98
Externally Oriented Thinking	32.39	5.12	33.86	3.65	32.86	5.81	3.07	.04	2>1	1.5*	.07	2.87
Father-son relation	103.05	16.56	107.59	17.69	99.24	16.51	4.05	.01	2>3	$8.4^{*}$	.71	15.99
Positive Paternal Emotional Responsiveness	45.26	7.86	48.82	9.46	43.64	8.71	7.59	.00	2>1	3.6*	1.06	6.07
•									2>3	5.2*	1.33	9.02
The Gender Role Mode	19.15	4.05	18.83	4.90	18.10	4.40	.88	.41	-	-	-	-
The Androgynous Role	25.22	3.89	25.78	4.34	24.62	3.21	1.33	.26	-	-	-	-
The Accessible Father	13.42	2.92	14.14	3.59	12.86	2.87	2.80	.06	-	-	-	-
Hegemonic masculinity	53.11	6.23	53.04	6.29	51.51	7.93	.96	.38	-	-	-	-
Subordination to Women	17.89	3.02	18.31	2.91	17.13	3.66	2.07	.12	-	-	-	-
Physical Inadequacy	17.83	2.43	17.74	2.37	17.43	2.72	.41	.66	-	-	-	-
Emotional Inexpressiveness	7.47	1.40	7.47	1.35	7.40	1.81	.03	.96	-	-	-	-
Intellectual Inferiority	3.33	.95	3.18	1.07	3.35	1.05	.79	.45	-	-	-	-
Performance Failure	3.34	1.01	3.11	1.07	3.29	.99	1.59	.20	-	-	-	-

Results in Table 12 show that three occupational groups are significantly different on alexithymia and its subscale difficulty in identifying emotions and externally oriented thinking. Tables also show that three groups are also different on fatherhood and subscale Positive Paternal Emotional Responsiveness. The comparison of mean values depicts that students tend to have more emotional health difficulties than unemployed and men doing jobs. Similarly, students on subscales of alexithymia also showed significant differences. In comparison, men doing jobs and students showed a higher father-son level and relation on its subscale than unemployed men. At the same time, hegemonic masculinity showed no significant difference in these groups.

Table 13

Comparison of Age on Study Variables (N=310)

	20-24 ( <i>n</i> =42)		25-29 ( <i>n</i> =131)		30-35 ( <i>n</i> =137)							
											959	%CL
Variables	M	SD	M	SD	M	A SD	F	p	i-j	MD(i-j)	LL	UL
Emotional Health	82.90	13.31	82.82	10.30	79.60	12.80	2.90	.06	-	-	-	
Difficulty Describing Feeling	20.14	4.11	20.50	3.10	19.62	3.50	2.14	.11	-	-	-	-
Difficulty Identifying Feeling	29.04	5.00	29.12	4.12	27.53	5.04	4.32	.01	2>3	1.6*	.24	2.9
Externally Oriented Thinking	33.71	5.06	33.21	4.30	32.44	5.20	1.50	.23	-	-	-	-
Father-son relation	105.7	20.60	106.63	17.00	101.2	15.71	3.60	.03	2>3	5.3*	.50	10.2
Positive Emotional Response	48.50	10.71	47.60	8.70	44.32	7.64	6.50	.00	1>3	4.1*	.60	7.7
									2>1	3.3*	.80	5.7
The Gender Role Model	18.80	5.20	18.90	4.62	19.01	3.93	.06	.94	-	-	-	-
The Androgynous Role	24.80	4.60	26.00	4.10	24.90	3.61	2.93	.05	-	-	-	-
The Accessible Father	13.70	4.13	14.20	3.13	13.00	2.80	4.70	.01	3>1	1.8*	.30	2.0
Hegemonic masculinity	52.30	7.60	53.20	6.41	52.83	6.20	.30	.75	-	-	-	-
Subordination to Women	17.80	3.70	18.00	2.90	18.00	3.10	.09	.91	-	-	-	-
Physical Inadequacy	17.80	2.63	17.90	2.52	17.70	2.32	.21	.80	-	-	-	-
Emotional Inexpressiveness	7.50	1.60	7.60	1.50	7.40	1.40	.51	.60	-	-	-	-
Intellectual Inferiority	3.30	1.20	3.30	1.10	3.30	.90	.01	.98	-	-	-	-
Performance Failure	2.30	1.14	3.40	1.10	3.30	1.00	2.40	.09	-	-	-	-

Table 13 shows the one-way ANOVA analysis of 3 categories of age on study variables. Through table 6, it can be noticed that significant finding shows that father-son relation has highest mean in 25-29 age group. In addition, difficulty in identifying emotion is also highest in the same age group. However, on the positive paternal emotional responsiveness subscale, age category 20-25 showed a significant mean difference.

Table 14

Comparison for current respondent current living situation on study variables (N=310)

Сотраг	WPLS		ent respondent current living situation on stud WPPD WP					WF		M					050	%CL
	(n=30)		(n=114)		(n=	(n=76)		(n=59)		(n=31)					93	%CL
Variabl e	M	SD	M	SD	M	SD	M	SD	M	SD	F	p	i-j	MD(i-j)	LL	UL
EH	80.50	9.50	80.50	12.44	83.90	11.94	82.41	10.16	77.67	14.15	1.92	.11	-	-		-
FATH	97.63	20.42	107.5	17.33	105.8	20.26	100.6	12.16	100.2	6.09	3.51	.00	2>1	$9.9^{*}$	.40	19.3
MAS	52.20	6.019	53.10	7.23	52.47	6.60	53.73	5.49	52.32	5.14	.50	.74	-	-	-	-
ADD	19.20	3.20	19.83	3.43	20.63	3.63	20.63	2.91	19.25	3.75	1.98	.09	-	-	-	-
ADI	28.23	3.024	28.27	4.92	29.50	4.62	27.96	4.80	27.26	5.16	1.70	.16	-	-	-	-
ADEX	33.07	4.28	32.39	5.06	33.76	4.58	33.81	3.98	31.16	5.73	2.53	.04	-	-	-	-
FPO	42.93	9.92	47.89	8.59	47.99	10.27	43.37	6.43	44.77	4.25	4.92	.00	2>1	5.0*	.17	9.75
													2>4	4.5*	.78	8.26
													3>1	5.1*	.02	10.0
													3>4	4.6*	.57	8.70
FGE	17.90	4.78	18.99	4.61	19.07	4.96	19.37	2.95	18.41	3.75	.69	.60	-	-	-	-
FAN	23.93	4.31	26.48	4.00	25.08	4.48	24.70	3.41	24.39	1.91	4.40	.00	2>1	$2.5^{*}$	.35	4.74
													2>4	$1.80^{*}$	.07	3.50
FAC	12.87	3.92	14.15	3.10	13.73	3.82	13.22	2.26	12.65	2.04	2.22	.07	-	-	-	-
MSU	17.70	2.67	17.97	3.00	17.88	3.40	18.30	3.23	17.61	2.74	.33	.85	-	-	-	-
MPH	17.60	2.25	17.96	2.80	17.79	2.46	17.66	2.11	17.29	1.75	.54	.71	-	-	-	-
MEM	7.50	1.48	7.37	1.59	7.38	1.43	7.75	1.14	7.45	1.36	.76	.55	-	-	-	-
MIN	3.07	1.11	3.31	1.11	3.24	1.04	3.41	.62	3.29	1.07	.61	.65	-	-	-	-
MPE	3.43	1.14	3.37	1.02	3.01	1.09	3.27	.91	3.29	1.04	1.63	.17	-			

Note. EH= Emotional Health; FATH= Father-son relation; MAS= Hegemonic masculinity; ADD= Difficulty Describing Feeling; ADI= Difficulty Identifying Feeling; AEX= Externally Oriented Thinking; FPO= Positive Paternal Emotional Responsiveness; FGE= The Gender Role Mode; FAN= The Androgynous Role; FAC= The Accessible Father; MSU= Subordination to Women; MPH= Physical Inadequacy; MEM= Emotional Inexpressiveness; MIN= Intellectual Inferiority; MPE= Performance Failure; WPLS= Without Parents Live Separately: WPPD= Without Parents Deseased: WP= With Parents: WF= With Father: WM= With Mother

## Chapter 4

#### **Discussion**

The aim of current research was to study the relationship between father-son relationship, hegemonic masculinity, and emotional health in adult males. The present research also investigated the relationship of demographic variables which included age, education, occupation, marital status, current and background family system, current and background residential area and current residence with parent status.

Present study hypothesized that father-son relationship and hegemonic masculinity are positively correlated (Bucher, 2014; Buschmeyer & Lengersdorf, 2016; Hunter, Riggs, & Augoustinos, 2017). To study the strength and direction of relationship, of father and son, correlation analysis was done (see Table 3). Result showed that there is a significant and positive correlation between father-son relationship and hegemonic masculinity. In addition to this, it can be observed through result of analysis that subscales of masculine gender role stress which includes subordination to women, physical inadequacy and particularly emotional inexpressiveness were also significantly and positively correlated with subscales of fatherhood scale. Hence, it can be said that a man having a stronger relation with his father may have tendency to suppress women. Ali et al., (2011) found that in families where men possess more dominance and power of decision making, women tended to look up to their husbands in order to control their children. Women tended to have internalized this social gender norms. Hence, they let their husbands to scold the kids and remained stern in front of them. Due to the already established standards of dominance, only the threats and references of father-figure were enough to make children quiet and controlled (Ali et al., 2011). Through the theory of social learning (Albert, 2017) children first learn their social and gender norms by their primary caregivers. Ultimately, son in later ages tends to learn this behavior of subordination of women. Likewise physical inadequacy was also corelated with stronger father-son relationship. This may indicate a son's fear of not meeting masculine standards for physicality, such as in sports competitions or sexual prowess. This includes projecting a manly image when compared to other men. These men tend to be more concerned with staying in good physical shape, holding one's liquor, and satisfying a sexual partner (e.g., Feeling as though you are not in good physical condition) (Sherman, 2010). As it

was also found out that father-son relation also predicts the sons' emotional inexpressivity. According to Sherman (2010), fear of appearing emotionally weak or vulnerable is reflected in emotional inexpressiveness. This can also include a fear of dealing with another person's emotional vulnerabilities. This suggests that sons who have a stronger relationship with their fathers are more likely to be afraid of situations in which they must express tender emotions such as love, fear, or hurt feelings (e.g., Telling your spouse that you love her) (Sherman, 2010).

The current findings of this study shows that when it comes to an adult man and relationship with his father, stronger relation is related to hegemonic masculine traits. This element was supported by previous literature (Bucher, 2014; Coltrane, 2004; Kane, 2006). This can be due to the fact that mostly fathers in our culture are found conforming to traditional masculine roles. Research suggests that when a father exhibits traditional masculinity, a son will expectedly acquire the same pattern of traits. A son whose father is an authoritarian or a tyrant will learn to be tough himself, and similarly, if a boy considers his father to be competitive or abusive, he will do the same (Lee, 1991; Pease, 2000). It stands to reason that if having a son reflects the father's masculinity, then having a masculine son is an even stronger reflection (Bucher, 2014). The patriarchal set up of our culture ensures power remains in the hands of males in the families particularly power of decision-making. As a result, as the father-son relationship strengthens, it has the potential to shape the child's gender identity, particularly the development of masculinity that is consistent with his own father's masculinity. In research it was found that the quality and content of the relationship can have important implications on the psychological development of the child and for the identity and gender role of him as an adult (Mormon & Floyd, 2006). Also, in research it was found out that to develop their masculinity, boys must replicate the actions and behaviors of their fathers, and if they fail to do so, it is expected that they tend to have personality and gender issues (Brittan, 1989; Pease, 2000). Another past research also concluded that that son's masculine norms are shaped in the shadow of father's behavior (Petts, Shafer, & Essig, 2018). Hence findings of this research are in coherence with past literature that father-son relation has a strong impact on a son's gender identity.

The study hypothesized there will be positive relationship between hegemonic masculinity and difficulties in emotional health in men. To check the direction of

correlation between two correlation analyses was done (see Table 3). As observed in the table it indicates that hegemonic masculinity significantly contributes to poor emotional health. Moreover, hegemonic masculinity was found to have a significant relationship with the following subscales 'difficulty describing feeling', 'difficulty identifying feeling' and 'externally oriented thinking', which shows that a man with toxic masculinity tends to have difficulties in identifying and describing emotions that he himself feels and experiences. This form of masculinity demands men to suppress emotional expression. This is because Pakistan's patriarchal system of beliefs and customs is formed in such a way that males are expected to maintain perseverance, courage, and firmness throughout life. Emotional repression, assertiveness, and the need for domination are the traits that are demanded and encouraged to be expressed. Aggression, bravado, and a lack of empathy are also not viewed in a negative light. Overall, it is understood that men are not appreciated, nor will they receive any support to act in a way that allows them to openly express their emotions.

The present study also hypothesized that there is high prevalence of emotional difficulties in men in Pakistan. To check the emotional health of males in this sample, descriptive mean analysis was run and through the cutoff score (see Table 4) it was observed that in Pakistan majority of men (92%) were found to have emotional difficulties, in expression and identification of emotions and external oriented thinking pattern is defined as a cognitive style characterized by a focus with external facts over thought content connected to emotions and imaginations. The result of study is supported by past research that men in Pakistan have a tendency to show a greater inclination towards negative emotions and it was also found that the occurrence of poor emotional health is more prevalent among males than females (Khan, 2017).

The last hypothesis of this research was that men in rural areas will have higher hegemonic masculinity. To further understand this, comparative analysis was done to compare two groups, urban and rural. The comparison between males who were brought up in urban or in rural areas were also compared against study variables and can be observed in (Tables 9 and 10). Through analysis it was found out that those men who were currently living in rural areas had higher mean on hegemonic masculinity as compared to men in urban areas. Similar patterns of hegemonic masculinity were found in men who were reared in a rural background. This is because of the fact that men in urban areas have more freedom and flexibility in how they express masculinity than

men in rural areas. In rural areas where gender binary and gender roles are relatively more strictly shaped. In urban area men tend to be more indulged in self-grooming and styling. Whereas the expressions of masculinity in rural areas are restricted and gender role expectation is very high for both men and women (Silva, 2021).

Furthermore, in rural areas, the father-son relationship is stronger than in urban areas. Urban fathers, who are on the corporate treadmill, spend less time with their children as a result of long work hours at the office. Furthermore, the amount of time they spend with their children is far from ideal. This reduces the amount of space available for father-son interaction. In rural settlements, however, this is the opposite of the fatherhood pattern. This bond is usually strengthened by the traditional agrarian pattern of rural life, in which most or all of the family members work. Fathers spend more time with their children, especially male children, in rural settings because they spend more time in the field. (Rolle, et al, 2019).

Parallel to this finding it can be anticipated that if hegemonic masculinity is high in men in rural areas so the emotional health should also be poor (As hegemonic masculinity found to be positive with emotional difficulties). It was also explored (see Tables 9 and 10) and found that men in rural areas had higher mean not on overall scale but on subscales of Toronto alexithymia scale too but through table it is depicted that father-son relationship is also high in rural areas. In rural areas, field work and other sources of income allow fathers to spend more time with their children, particularly male children. Due to historic agrarian ties, this bond is frequently deepened.

In addition, marital status was also studied against study variables and result showed that positive paternal emotional responsiveness was significantly higher in in single males as compared to married males. Similarly, single males had significantly higher scores on accessible father. This can be due to the reason that when an individual gets married they have and extended family. A married person has lesser time to spend with his parents, due to multiple reasons for example, living separately having responsibilities of his children and wife. Therefore, he is less emotionally involved with his parents especially to father.

Research also studied the current family and background family system. Through results it was find out that men from join family system significantly showed more hegemonic masculine characteristics as compared to men from nuclear family

system. They subordination of women and physical inadequacy were significantly higher in men from joint families. Results were parallel on current family system and background family system. In joint families, generally the decision-making power is in hand of male members. Along with that, in joint family a boy learns gender and social norms from different sources, such as from grandfather, his own father and from uncles. Therefore, the hegemonic and traditional masculine traits are more prevalent in joint families.

#### **Implications**

The current study shows the relationship between disjoined and segregated studies variables father-son relationship, hegemonic masculinity, and emotional health of adult men. The present study has practical implications for academic purposes, and it implies through findings that most men have emotional difficulties that they are not aware of this. The present study suggests men's emotional health should be considered in theoretical work and clinical settings.

#### Limitations

This study has certain limitations in addition to some implications. As the number of people in the sample is so small, this study cannot be generalized. Furthermore, self-report inventories were administered; individuals may under or overreport themselves; thus, an interview or alternative approach is recommended. Moreover, due to an extensive number of items in the fatherhood scale, some subscales were used which were more specific and relevant to study.

#### **Conclusions**

This research was conducted as there was a gap in the study of father-son relation, hegemonic masculinity, and men's emotional health in Pakistan is often ignored in Pakistan. Through analysis, it was found that the father-son relationship, hegemonic masculinity, and emotional health are significantly correlated. Moreover, those men currently living in rural had a high mean of hegemonic masculinity compared to men in urban areas. Furthermore, it was found that those family settings can have less effect on hegemonic masculinity and men's emotional health. It was also found out that male adults in the sample had great emotional difficulties.

#### References

- Addis, M. E., & Mahalik, J. R., (2003). Men, masculinity, and the contexts of help seeking. *American Psychologist*, 58(1), 5.
- Akram, M., Batool, Z., Mahmood, B., & Mahmood, S. (2019). Role of father in child personality development: Evidence from Pakistan. *European Online Journal of Natural and Social Sciences Proceeding*, 8(3), 1.http://www.europeanscience.com
- Albert, B. (2017). Social learning theory of aggression. In The control of aggression (pp. 201-252). Routledge.
- Ali, T. S., Krantz, G., Gul, R., Asad, N., Johansson, E., & Mogren, I. (2011). Gender roles and their influence on life prospects for women in urban Karachi, Pak0istan: a qualitative study. Global health action, 4(1), 7448.
- Alston, M. (2012). Rural male suicide in Australia. *Social Science & Medicine*, 74(4), 515-522.
- Alvi, M. H. (2018). Difference in the Population Size between Rural and Urban Areas of Pakistan.
- Amato, P. R. (1994). Father-child relations, mother-child relations, and offspring psychological wellbeing in early adulthood. *Journal of Marriage and the Family*, 56(4), 1031-1042.
- Amato, P. R., & Gilbreth, J. G., (1999). Nonresident fathers and children's wellbeing: A meta-analysis. *Journal of Marriage and the Family*, 61(3), 557-573.
- Anderson, E., (2009). *Inclusive masculinity. The changing nature of masculinities*. New York: Routledge.
- Angel, N., Leung, & Henry, K.S. (2015). Sex role development and education. International Encyclopedia of the Social & Behavioral Sciences (2<sup>nd</sup> ed.), 21, 678-685.

- Antill, J. K. (1987). Parents' beliefs and values about sex roles, sex differences, and sexuality: Their sources and implications. In P. Shaver & C. Hendrick (Eds.), *Sex and gender*, 294–328. Sage Publications, Inc.
- Arendell, T. E. (1997). *Contemporary parenting: Challenges and issues*. Sage Publications, Inc. Retrieved from https://psycnet.apa.org/record/1997-09088-000
- Australian Bureau of Statistics. (2000). Suicides: recent trends Census of population and housing. Canberra: Australia.
- Bagby, R. M., Parker, J. D., & Taylor, G. J. (1994). The twenty-item Toronto Alexithymia scale, item selection and cross-validation of the factor structure. *Journal of Psychosomatic Research*, 38(1), 23-32.
- Banai, E., Mikulincer, M., & Shaver, P. R. (2005). Self-object needs in Kohut's self-psychology: Links with attachment, self-cohesion, affect regulation, and adjustment. *Psychoanalytic Psychology*, 22(2), 224.
- Barber, K. (2008). The well-coiffed man: Class, race, and heterosexual masculinity in the hair salon. *Gender & Society*, 22(4), 455-476.
- Barber, K. (2016). Styling masculinity. Rutgers University Press.
- Barry, B. (2018). Fashioning masculinity: Social identity and context in men's hybrid masculinities through dress. *Gender & Society*, 32(5), 638-662.
- Barry, B., & Weiner, N. (2019). Suited for success? Suits, status, and hybrid masculinity. *Men and Masculinities*, 22(2), 151-176.
- Bem, S. L. (1985). A conceptual and empirical integration. *Psychology and Gender*, 32, 179.
- Benau, E. M., Wiatrowski, R., &Timko, C. A. (2020). Difficulties in emotion regulation, alexithymia, and social phobia are associated with disordered eating in male and female undergraduate athletes. *Frontiers in Psychology*, 11, 1646. doi: 10.3389/fpsyg.2020.01646

- Berger, P. L., & Luckmann, T., (1967). *The social construction of reality*. London: Allen Lane: The Penguin Press.
- Bertolote, J. M., & Fleischmann, A. (2002). A global perspective in the epidemiology of suicide. *Suicidologi*, 7(2), 6–8.
- Betcher, R. W., & Pollack, W. S. (1993). *In a time of fallen heroes: The re-creation of masculinity*. New York: Atheneum.
- Bhanbhro, S., Wassan, M. R., Shah, M., Talpur, A. A., & Wassan, A. A. (2013). Karo Kari: The murder of honour in Sindh Pakistan: An ethnographic study. *International Journal of Asian Social Science*, *3*(7), 1467-1484.
- Biddulph, S. (1994). Manhood. Sydney, Finch Publishing.
- Biller, H. B. (1993). Fathers and families: Paternal factors in child development. Boston: Auburn House.
- Bird, G., & Cook, R. (2013). Mixed emotions: The contribution of alexithymia to the emotional symptoms of autism. *Translational Psychiatry*, 3(7), e285. doi:10.1038/tp.2013.61
- Black, M. M., Dubowitz, H., & Starr, R. H. (1999). African American fathers in low income, urban families: Development, behavior, and home environment of their three-year-old children. *Child Development*, 70(4), 967-978.
- Borisenko, J. (2007). Fatherhood as a personality development factor in men. *The Spanish Journal of Psychology*, 10(1), 82-90.
- Bowlby, J.(1977). The making and breaking of affectional bonds. *British Journal of Psychiatry*, 130(3), 201–210.
- Boyce, W. T., Essex, M. J., Alkon, A., Goldsmith, H. H., Kraemer, H. C., & Kupfer, D. J. (2006). Early father involvement moderates biobehavioral susceptibility to mental health problems in middle childhood. *Journal of the American Academy of Child and Adolescent Psychiatry*, 45(12), 1510-1520.
- Boyum, L. A., & Parke, R. D. (1995). The role of family emotional expressiveness in the development of children's social competence. *Journal of Marriage and the Family*, 57(3), 593-608.

- Bradley, R. H., & Corwyn, R. F. (2000). Fathers' socioemotional investment in their children. *The Journal of Men's Studies*, 8(3), 333-347.
- Brannen, J., & Nilsen, A. (2006). From fatherhood to fathering: Transmission and change among British fathers in four-generation families. *Sociology*, 40(2), 335-352.
- Brescoll, V. L., & Uhlmann, E. L. (2005). Attitudes toward traditional and nontraditional parents. *Psychology of Women Quarterly*, 29(4), 436-445.
- Brittan, A. (1989). Masculinity and power. Oxford. Basil Blackwell.
- Brooks, G., & Good, G. (Eds.) (2001). A new handbook of counseling and psychotherapy approaches for men. San Francisco: Jossey-Bass.
- Brotherson, S. E., Yamamoto, T., & Acock, A. C. (2003). Connection and communication in father-child relationships and adolescent child wellbeing. *Fathering*, *I*(3), 191.
- Bucher, J. (2014). "But he can't be gay": The relationship between masculinity and homophobia in father-son relationships. *The Journal of Men's Studies*, 22(3), 222–237. Retrieved from https://doi.org/10.3149/jms.2203.222
- Bucher, J. (2014). "But He Can't Be Gay": The Relationship between Masculinity and Homophobia in Father-Son Relationships. The Journal of Men's studies, 22(3), 222-237
- Buckley, C. K., & Sullivan, S. J. (2010). Father involvement and coparenting behavior: Parents' nontraditional beliefs and family earner status as moderators. *Personal Relationships*, 17(3), 413-431.
- Buschmeyer, A., & Lengersdorf, D. (2016). The differentiation of masculinity as a challenge for the concept of hegemonic masculinity. Norma, 11(3), 190-207.
- Buschmeyer, A., & Lengersdorf, D. (2016). The differentiation of masculinity as a challenge for the concept of hegemonic masculinity. *NORMA*, *11*(3), 190-207.

- Bussey, K., & Bandura, A. (1999). Social cognitive theory of gender development and differentiation. *Psychological Review*, *106*(4), 676–713. https://doi.org/10.1037/0033-295X.106.4.676
- Cabrera, N. J., & Volling, B. L. (2019). Moving research on fathering and children's development forward: Priorities and recommendations for the future.

  \*Advancing Research and Measurement on Fathering and Children's Development, 84(1), 107-117.
- Cabrera, N. J., Fitzgerald, H. E., Bradley, R. H., & Roggman, L. (2014). The ecology of father child relationships: An expanded model. *Journal of Family Theory & Review*, 6(4), 336-354.
- Cabrera, N. J., Tamis-LeMonda, C. S., Bradley, R. H., Hofferth, S., & Lamb, M. E. (2000). Fatherhood in the twenty-first century. *Child Development*, 71(1), 127–136. https://doi.org/10.1111/1467-8624.00126
- Calasanti, T. (2004). Feminist gerontology and old men. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, *59*(6), 305-314.
- Caldwell, T. M., Jorm, A. F., & Dear, K. B. (2004). Suicide and mental health in rural, remote and metropolitan areas in Australia. *Medical Journal of Australia*, 181(7), 10-14.
- Carli, L. L. (2001). Gender and social influence. *Journal of Social issues*, 57(4), 725-741.
- Carlson, M. J. (2006). Family structure, father involvement, and adolescent behavioral outcomes. *Journal of Marriage and Family*, 68(1), 137-154.
- Chaplin T. M. (2015). Gender and emotion expression: A developmental contextual perspective. *Emotion Review: Journal of The International Society for Research on Emotion*, 7(1), 14–21. https://doi.org/10.1177/1754073914544408
- Charteris-Black, J., & Seale, C. (2013). Men and emotion talk: Evidence from the experience of illness. *Gender and Language*, 3(1) 81–113.
- Christian, H.(1994). The making of anti-sexist men, London, Routledge

- Coleman, J. C., Coleman, J., Hendry, L. B., & Kloep, M. (Eds.). (2007). *Adolescence and health* (Vol. 4). John Wiley & Sons.
- Coltrane, S. (2004). Fathering: Paradoxes, contradiction, and dilemmas. Coleman M. & L.Ganong (Eds.), *Handbook of contemporary families: Considering past, contemplating the future*(pp. 224-243). Thousand Oaks, CA: Sage Publications.
- Coltrane, S., & Adams, M. (1997). Children and gender. Thousand Oaks, CA: Sage.
- Connell, R. W. (2001). Introduction and overview. *Feminism & Psychology*, *11*(1), 5–9. https://doi.org/10.1177/0959353501011001001.
- Connell, R. W. (2020). Masculinities. London. Routledge.
- Connell, R. W., & Connell, R. (2000). *The men and the boys*. University of California Press.
- Connell, R. W., & Messerschmidt, J. W. (2005). Hegemonic masculinity: Rethinking the concept. *Gender & Society*, 19(6), 829-859.
- Connell, R.W. (1998). Masculinities and globalization. *Men and Masculinities*, *1*(1), 21–23.
- Connor, M. E., & White, J. (Eds.). (2006). Black fathers: An invisible presence in America. Routledge.
- Corneau, G.(1991). Absent fathers, lost sons: The search for masculine identity, Boston, Shambhalapublications.
- Courtenay, W. H. (2000). Constructions of masculinity and their influence on men's wellbeing: A theory of gender and health. *Social Science & Medicine*, 50(10), 1385-1401.https://doi.org/10.1016/S0277-9536(99)00390-1
- Culp, R. E., Schadle, S., Robinson, L., & Culp. A. M. (2000). Relationships among paternal involvement and young children's perceived self-competence and behavioral problems. *Journal of Child and Family Studies*, *9*(1), 27-38.
- Daly, K. (1993). Reshaping fatherhood: Finding the models. *Journal of Family Issues*, 14(4), 510–530.

- De Vries, A. L., Doreleijers, T. A., & Cohen-Kettenis, P. T. (2007). Disorders of sex development and gender identity outcome in adolescence and adulthood: understanding gender identity development and its clinical implications. *Pediatric Endocrinology Reviews: PER*, 4(4), 343-351.
- Demetriou, D. Z. (2001). Connell's concept of hegemonic masculinity: A critique. *Theory and society*, 30(3), 337-361.
- Deng, Y., Chang, L., Yang, M., Huo, M., &Zhou, R. (2016). Gender differences in emotional response: Inconsistency between experience and expressivity *PloS one*, 11(6), e0158666.https://doi.org/10.1371/journal.pone.0158666
- Dette-Hagenmeyer, D. E., Erzinger, A. B., & Reichle, B. (2014). The changing role of the father in the family. *European Journal of Developmental Psychology*, 11(2), 129-135.
- Dick, G. L. (2004). The fatherhood scale. *Research on Social Work Practice*, 14(2), 80–92. https://doi.org/10.1177/1049731503257863
- Dick, G. L. (2011). The changing role of fatherhood: The father as a provider of self-object functions. *Psychoanalytic Social Work*, 18(2), 107-125.
- Dick, G. L., & Bronson, D. (2005). Adult men's self-esteem: The relationship with the father. *Families in society*, 86(4), 580-588.
- Doucet, A. (2004). "Its almost like I have a job, but I don't get paid": Fathers at home reconfiguring work, care, and masculinity. *Fathering: A Journal of Theory, Research & Practice about Men as Fathers*, 2(3), 277-303.
- Downer, J. T., & Mendez, J. L. (2005). African American father involvement and preschool children's school readiness. *Early Education and Development*, 16(3), 317-340.
- Dreber, A., & Hoffman, M. (2010). Biological basis of sex differences in risk aversion and competitiveness. Stockholm School of Economics, Stockholm.
- Dubowitz, H., Black, M. M., Cox, C. E., Kerr, M. A., Litrownik, A. J., Radhakrishna,A., English, D. J., Schneider, M. W., & Runyan, D. K. (2001). Father involvement and children's functioning at age 6 years: A multisite study. *Child*

- Maltreatment: Journal of the American Professional Society on the Abuse of Children, 6(4), 300-309.
- Eckman, A., Jain, A., Kambou, S. D., Bartel, D., & Crownover, J. (2007). *Exploring dimensions of Masculinity and Violence*. Washington, DC: CARE International Balkans.
- Edwards, A. (2015). It's man's world: The effect of traditional masculinity on gender equality. *E-International Relations Students*. Retrieved fromhttps://www.e-ir.info/2015/03/29/its-a-mans-world-the-effect-of-traditional-masculinity-on-gender-equality/
- Eirini Flouri, Ann Buchanan, (2004). The role of father involvement and mother involvement in adolescents' psychological wellbeing. *The British Journal of Social Work*, 33(3), 399-406.
- Eisler, R. M., & Blalock, J. A. (1991). Masculine gender role stress: Implications for the assessment of men. *Clinical Psychology Review*, 11(1), 45-60.
- Eisler, R. M., & Skidmore, J. R. (1987). Masculine gender role stress: Scale development and component factors in appraisal of stressful situations. *Behavior Modification*, 11(2), 123-126.
- Erikson, E. H. (1982). The life cycle completed. New York: Norton.
- Fagan, J. & Palm, G. (2004). *Fathers and early childhood programs*. Clifton Park, N.Y. Delmar Learning.
- Fagan, J. (2000). African American and Puerto Rican American parenting styles, paternal involvement, and Head Start children's social competence. *Merrill-Palmer Quarterly*, 46(4), 592-612.
- Fagan, J., & Iglesias, A. (2000). The relation between fathers' and children's communication skills and children's behavior problems: A study of Head Start children. *Early Education and Development*, 11(3), 307-320.
- Fan, X., & Chen, M. (2001). Parental involvement and students' academic achievement: A meta-analysis. *Educational Psychology Review*, 13(1), 1-22.

- Farmer, S.(1991). The wounded male. New York, Ballantine.
- Farooq, A., &Yousaf, A. (2016). Childhood trauma and alexithymia in patients with conversion disorder. *Journal of the College of Physicians and Surgeons Pakistan*, 26(7), 606-610.
- Fatima, A., Ghayas, S., &Khawar, R. (2016). Development and validation of alexithymia scale for Pakistani population. *Pakistan Journal of Social and Clinical Psychology*, 14(2), 3-9.
- Fatima, F. (2020). *Hegemonic masculinity and its effects: a social stigma*. Retrieved from https://pakistanhorizon.wordpress.com/2020/03/17/hegemonic-masculinity-and-its-effects-a-social-stigma/
- Flouri, E. (2008). Fathering and adolescents' psychological adjustment: The role of fathers' involvement, residence and biology status. *Child: Care, Health and Development*, 34(2), 152-161.
- Flouri, E., & Buchanan, A. (2003). The role of father involvement in children's later mental health. *Journal of Adolescence*, 26(1), 63-78.
- Flouri, E., & Buchanan, A. (2004). Early father's and mother's involvement and child's later educational outcomes. *British Journal of Educational Psychology*, 74(2), 141-153.
- Franklin II, C. W. (2012). *The changing definition of masculinity*. Springer Science & Business Media.
- Freeman, T. (2008). Psychoanalytic concepts of fatherhood: Patriarchal paradoxes and the presence of an absent authority, *Studies in Gender and Sexuality*, 9(2), 113-139.
- Frosh, S., Phoenix, A., & Pattman, R. (2001). *Young masculinities: Understanding boys in contemporary society*. Macmillan International Higher Education.
- Galderisi, S., Heinz, A., Kastrup, M., Beezhold, J., & Sartorius, N. (2015). Toward a new definition of mental health. *World psychiatry: Official Journal of the World*

- *Psychiatric Association* (WPA), 14(2), 231–233. https://doi.org/10.1002/wps.20231
- Garfield, C.F., Isacco, A., &Rogers, T. E. A review of men's health and masculinity.

  \*American Journal of Lifestyle Medicine, 2(6), 474-487.doi:10.1177/1559827608323213
- Gavanas, A. (2002). The fatherhood responsibility movement: The centrality of marriage, work and male sexuality in reconstructions of masculinity and fatherhood. *Making men into fathers: Men, Masculinities and the Social Politics of Fatherhood*, 213-244. Cambridge University Press
- Gerdes, Z. T., & Levant, R. F. (2018). Complex relationships among masculine norms and health/wellbeing outcomes: Correlation patterns of the conformity to masculine norms inventory subscales. *American Journal of Men's Health*, 12(2), 229–240.
- Gogineni, R., &Fallon, A. E. (2013). The adoptive father. In Brabender, V. M.& Fallon,A. E. (Eds.), Working with adoptive parents: Research, theory, and therapeutic interventions., John Wiley & Son.
- Greene, A. D.,& Moore, K. A. (2000). Nonresident father involvement and child wellbeing among young children in families on welfare. *Marriage and Family Review*, 29(2), 159-180.
- Guerra-Bustamante, J., León-Del-Barco, B., Yuste-Tosina, R., López-Ramos, V. M., &Mendo-Lázaro, S. (2019). Emotional intelligence and psychological wellbeing in adolescents. *International Journal of Environmental Research and Public Health*, *16*(10), 17-20. https://doi.org/10.3390/ijerph16101720
- Guvensel, O. (2016). The relationship among normative male alexithymia, gender role conflict, men's non-romantic relationships with other men, and psychological wellbeing(Doctoral Dissertation). Georgia State University.Retrieved from https://scholarworks.gsu.edu/cps\_diss/115
- Harris, E. C., & Barraclough, B. (1997). Suicide as an outcome for mental disorders. A meta-analysis. *British Journal of Psychiatry*, 170(3), 205-228.

- Harris, R. D. (2010). A meta-analysis on father involvement and early childhood social-emotional development. New York: New York University.
- Hauari, H., & Hollingworth, K. (2009). *Understanding fathering: Masculinity, diversity and change*. York: Joseph Rowntree Foundation.
- Hazan, C., & Shaver, P. (1987). Romantic love conceptualized as an attachment process. *Journal of Personality and Social Psychology*, 52(3), 511 – 524.
- Hendrie, H. C., et al. (2006). The NIH cognitive and emotional health project: Report of the critical evaluation study committee. *Alzheimer's & Dementia*, 2(1), 12-32.
- Hentschel, T., Heilman, M. E., & Peus, C. V. (2019). The multiple dimensions of gender stereotypes: A current look at men's and women's characterizations of others and themselves. *Frontiers in Psychology*, 10(11). Doi: 10.3389/fpsyg.2019.00011
- Henwood, K., & Procter, J. (2003). The 'good father': Reading men's accounts of paternal involvement during the transition to first-time fatherhood. *The British Journal of Social Psychology*, 42(3), 337–355. https://doi.org/10.1348/014466603322438198
- Herbert, B. M., Herbert, C., & Pollatos, O. (2011). On the relationship between interoceptive awareness and alexithymia: Is interoceptive awareness related to emotional awareness?. *Journal of personality*, 79(5), 1149-1175.
- Herzog, E., & Sudia, C. E. (1971). *Boys in fatherless families*. US Department of Health, Education, and Welfare, Office of Child Development, Children's Bureau.
- Hess, U., & Thibault, P. (2009). Darwin and emotion expression. *American Psychologist*, 64(2), 120-128.
- Hesse, C., Mikkelson, A. C., & Saracco, S. (2018). Parent-child affection and helicopter parenting: Exploring the concept of excessive affection. *Western Journal of Communication*, 82(4), 457-474.

- Horsfall, J. (1991). *The presence of the past: male violence in the family*. Sydney, Allen &Unwin.
- Hunter, S. C., Riggs, D. W., & Augoustinos, M. (2017). Hegemonic masculinity versus a caring masculinity: Implications for understanding primary caregiving fathers. Social and Personality Psychology Compass, 11(3), e12307.
- Ihinger-Tallman, M., Pasley, K., & Buehler, C. (1995). Developing a middle range theory of father involvement post-divorce. In W. Marsiglio (Ed.), *Fatherhood:* Contemporary theory, research and social policy (pp. 57–77). London: Sage.
- Jakupcak, M., Lisak, D., & Roemer, L. (2002). The role of masculine ideology and masculine gender role stress in men's perpetration of relationship violence. *Psychology of Men & Masculinity*, *3*(2), 97–106. https://doi.org/10.1037/1524-9220.3.2.97.
- Jessee, V., & Adamsons, K. (2018). Father involvement and father-child relationship quality: An intergenerational perspective. *Parenting*, 18(1), 28-44.
- Jewkes, R., Morrell, R., Hearn, J., Lundqvist, E., Blackbeard, D., Lindegger, G., & Gottzén, L.(2015). Hegemonic masculinity: combining theory and practice in gender interventions. *Culture, Health & Sexuality*, 17(2), 112-127.
- Jewkes, R., Morrell, R., Hearn, J., Lundqvist, E., Blackbeard, D., Lindegger, G., & Gottzén, L. (2015). Hegemonic masculinity: combining theory and practice in gender interventions. *Culture, health & sexuality*, 17(2), 112-127..
- Jeynes, W. H. (2007). The relationship between parental involvement and urban secondary school student academic achievement: A meta-analysis. *Urban Education*, 42(1), 82-110
- Jones, K. (2004). Assessing psychological separation and academic performance in nonresident-father and resident-father adolescent boys. *Child and Adolescent Social Work Journal*, 21(4), 333-354.
- Judd, F., Jackson, H., Komiti, A., Murray, G., Fraser, C., Grieve, A., & Gomez, R. (2006). Help-seeking by rural residents for mental health problems: The

- importance of agrarian values. Australian & New Zealand Journal of Psychiatry, 40(9), 769-776.
- Kahn, J. S. (2009). An introduction to masculinities. John Wiley & Sons.
- Kane, E. (2006). No way my boys are going to be like that! Parents' responses to children's gender nonconformity. *Gender and Society*, 20(2), 149-176.https://doi.org/10.1177/0891243205284276
- Karakis, E. N., & Levant, R. F. (2012). Is normative male alexithymia associated with relationship satisfaction, fear of intimacy and communication quality among men in relationships?. *The Journal of Men's Studies*, 20(3), 179-186.
- Khan, M. M. (2007). Suicide prevention in Pakistan: An impossible challenge? *The Journal of the Pakistan Medical Association*, *57*(10), 478-479.
- Khan, M. M., Naqvi, H., Thaver, D., & Prince, M. (2008). Epidemiology of suicide in Pakistan: Determining rates in six cities. *Archives of Suicide Research*, 12(2), 155-160.
- Khan, N. (2017). Prevalence of alexithymia in the general adult population of Quetta, Baluchistan in Pakistan. *Cloning & Transgenesis*, 6(2).doi: 10.4172/2168-9849.1000160
- Kimmel, M. S. (1995). *Manhood in America: A cultural history*. New York: The FreePress.
- Kindlon, D., & Thompson, M. (1999). *Raising Cain: Protecting the emotional life of boys*. New York: Random House.
- Kohut, H. (1984). How does analysis cure, Chicago, University of Chicago Press.
- Krivickas, K. (2010). *Masculinity and men's intimate and fathering relationships: A Focus on Race and Institutional Participation* (Doctoral dissertation), Bowling Green State University.
- Kupers, T. (2001). Psychotherapy with men in prison. In G. Brooks & G. Good (Eds.), A new handbook of counseling and psychotherapy approaches for men. San Francisco: Jossey-Bass/Wiley

- Kupers, T. A. (2005). Toxic masculinity as a barrier to mental health treatment in prison. *Journal of Clinical Psychology*, 61(6), 713-724.
- Lală, A., Bobîrnac, G., & Tipa, R. (2010). Stress levels, alexithymia, type A and type C personality patterns in undergraduate students. *Journal of Medicine and Life*, 3(2), 200-205.
- Lamb, M. E. (1998). Fatherhood then and now. In A. Booth, & A. C. Crouter (Eds.), *Men in families: When do they get involved? What difference does it make?* (pp. 47-52). Mahwah, NJ: Erlbaum.
- Lamb, M. E. (Ed.). (2004). *The role of the father in child development*. John Wiley & Sons.
- Lamb, M. E., Pleck, J. H., & Levine, J. A. (1985). The role of the father in child development. In B. B. Lahey et al. (Eds.), *Advances in Clinical Child Psychology*, (pp. 229-266). Plenum Press, New York
- Lamb, M. E., Pleck, J. H., Charnov, E. L., & Levine, J. A. (2017). A biosocial perspective on paternal behavior and involvement. *Parenting across the life span* (pp. 111-142). Routledge.
- Lander, L., Howsare, J., & Byrne, M. (2013). The impact of substance use disorders on families and children: From theory to practice. *Social Work in Public Health*, 28(3-4), 194–205. https://doi.org/10.1080/19371918.2013.759005
- Larson, R., & Richards, M. (1994). Divergent realities: The emotional lives of mothers, fathers, and adolescents. New York: Basic Books.
- Lee, J. (1991). At my father's wedding: Reclaiming our true masculinity. New York: Bantam.
- Leerkes, E. M., & Siepak, K. J.(2006). Attachment linked predictors of women's emotional and cognitive responses to infant distress. *Attachment and Human Development*, 8(1),11–32.
- Lemle, R., & Mishkind, M. E. (1989). Alcohol and masculinity. *Journal of Substance Abuse Treatment*, 6(4), 213-222.

- Levant, R. F., Allen, P. A., & Lien, M. C. (2014). Alexithymia in men: How and when do emotional processing deficiencies occur? *Psychology of Men & Masculinity*, 15(3), 324-334.
- LeVine, R. A. (2003). *Childhood socialization: Comparative studies of parenting, learning and educational change.* University of Hong Kong.
- Levy, G. D. (1999). Gender-typed and non-gender-typed category awareness in toddlers. *Sex Roles*, 41(11), 851-873.
- Lundy, B. L. (2002). Paternal socio-psychological factors and infant attachment: The mediating role of synchrony in father—infant interactions. *Infant Behavior and Development*, 25(2), 221-236.
- Maccoby, E. E. (1998). *The two sexes: Growing up apart, coming together* (Vol. 4). Harvard University Press.
- Mahalik, J. R. (1999). Incorporating a gender role strain perspective in assessing and treating men's cognitive distortions. *Professional Psychology: Research and Practice*, 30(4), 333.
- Mahalik, J. R., Locke, B. D., Ludlow, L. H., Diemer, M. A., Scott, R. P., Gottfried, M., & Freitas, G. (2003). Development of the conformity to masculine norms inventory. *Psychology of Men & Masculinity*, 4(1), 3-25.
- Mallers, M. H., Charles, S. T., Neupert, S. D., & Almeida, D. M. (2010). Perceptions of childhood relationships with mother and father: Daily emotional and stressor experiences in adulthood. *Developmental Psychology*, 46(6), 1651–1661. https://doi.org/10.1037/a0021020
- Mankowski, E. S., & Maton, K. I. (2010). A community psychology of men and masculinity: Historical and conceptual review. *American Journal of Community Psychology*, 45(1), 73-86.
- Mankowski, E., & Maton, K.. (2010). A community psychology of men and masculinity: Historical and conceptual review. *American Journal of Community Psychology*, 45(1), 73-86.

- Marrocco, M. (2002). Participation in divine life in the De Trinitate of St. Augustine. *Augustinianum*, 42(1), 149-185.
- Marsiglio, W. P., & Joseph H. (2005). Fatherhood and masculinities. In M. Kimmel, J.Hearn, & R. W. Connell (Eds.), *The handbook of studies on men and masculinities* (pp. 249-269). Thousand Oaks, CA: Sage
- Marsiglio, W., Day, R. D., & Lamb, M. E. (2000). Exploring fatherhood diversity: Implications for conceptualizing father involvement. *Marriage & Family Review*, 29(4), 269-293.
- Martin, T. L., Doka, K. J., & Martin, T. R. (2000). *Men don't cry-women do: Transcending gender stereotypes of grief.* Psychology Press.
- Maselko, J., Hagaman, A. K., Bates, L. M., Bhalotra, S., Biroli, P., Gallis, J. A., ... & Rahman, A. (2019). Father involvement in the first year of life: Associations with maternal mental health and child development outcomes in rural Pakistan. *Social Science & Medicine*, 237, 11242
- Maselko, J., Hagaman, A. K., Bates, L. M., Bhalotra, S., Biroli, P., Gallis, J. A., ... & Rahman, A. (2019). Father involvement in the first year of life: associations with maternal mental health and child development outcomes in rural Pakistan. Social Science & Medicine, 237, 112421.
- Mattila, A. K., Ahola, K., Honkonen, T., Salminen, J. K., Huhtala, H., & Joukamaa, M. (2007). Alexithymia and occupational burnout are strongly associated in working population. *Journal of Psychosomatic Research*, 62(6), 657-66.
- McBride, B. A. (1990). The effects of a parent education/play group program on father involvement in child rearing. *Family Relations*, *39*(3), 250-256.
- McBride, B. A., et al. (2005). Paternal identity, maternal gatekeeping, and father involvement. *Family Relations*, *54*(3), 360-372.
- McRae, K., Ochsner, K. N., Mauss, I. B., Gabrieli, J., & Gross, J. J. (2008). Gender differences in emotion regulation: An firm study of cognitive reappraisal. *Group Processes & Intergroup Relations*, 11(2), 143–162. https://doi.org/10.1177/13 68430207088035

- Messerschmidt, J. W. (2019 a). *Nine lives: Adolescent masculinities, the body, and violence*. Routledge.
- Messerschmidt, J. W. (2019 b). The salience of hegemonic masculinity. *Men and Masculinities*, 22(1), 85–91. https://doi.org/10.1177/1097184X18805555
- Meth, L.M., & Pasick, R.S. (Eds.). (1990). *Men in therapy: The challenge of change*. NewYork.
- Meth, R. L. (1990). The road to masculinity. In R. L. Meth & R. S. Pasick(Eds.), *Men in therapy: The challenge of change*(pp. 3-34). New York: Guilford Press
- Miller, T. (2011). Falling back into gender? Men's narratives and practices around first-time father-hood. *Sociology*, 45(6),1094–1109. https://doi.org/10.1177/0038038511419180
- Minsky, R. (2000). Beyond nurture: Finding the words for male identity. *Psychoanalytic Studies*, 2(3), 241-254.
- Mirza, I., & Jenkins, R. (2004). Risk factors, prevalence, and treatment of anxiety and depressive disorders in Pakistan: systematic review. *BMJ* (*Clinical research ed.*), 328(7443), 794. https://doi.org/10.1136/bmj.328.7443.794
- Morman, M. T., & Floyd, K. (2002). A changing culture of fatherhood: Effects on affectionate communication, closeness, and satisfaction in men's relationships with their fathers and their sons. *Western Journal of Communication*, 66(4), 395-411.
- Morrell, R., Jewkes, R., & Lindegger, G. (2012). Hegemonic masculinity/masculinities in south africa: Culture, power, and gender politics. *Men and Masculinities*, *15*(1), 11–30. https://doi.org/10.1177/1097184X12438001.
- Mowder, B. A. (1991). *Parent role development*. In annual meeting of the International School Psychology Association. Braga, Portugal.
- Murray, T. R. (2001). Feminist perspectives. In T. R. Murray(Ed.), *Recent theories of human development*. Thousand Oaks, California: Sage, 248. ISBN 9780761922476

- Nathanson, C. A. (1977). Sex roles as variables in preventive health behavior. *Journal of Community Health*, 3(2), 142-155.
- O'neil, J. M. (1981). Patterns of gender role conflict and strain: Sexism and fear of femininity in men's lives. *The Personnel and Guidance Journal*, 60(4), 203-210.
- O'Neil, J. M. (2008). Summarizing 25 years of research on men's gender role conflict using the Gender Role Conflict Scale: New research paradigms and clinical implications. *The Counseling Psychologist*, 36(3), 358-445.
- Overbeek, G., Stattin, H., Vermulst, A., Ha, T., Engels, & Rutger C. M. E. (2007). Parent–child relationships, partner relationships, and emotional adjustment: A birth-to-maturity prospective study. *Developmental Psychology*, 43(2), 429-437.
- Palkovitz, R. (2002). *Involved fathering and men's adult development: Provisional balances*. Lawrence Erlbaum Associates Publishers.
- Palkovitz, R., & Palm, G. (2009). Transitions within fathering. *Fathering*, 7(1), 3-22. DOI:10.3149/fth.0701.03
- Palmer, A. R., Lakhan-Pal, S., & Cicchetti, D. (2019). Emotional development and depression. *Handbook of Emotional Development* (pp. 695-748). Springer, Cham.
- Parent, M. C., & Moradi, B. (2011). An abbreviated tool for assessing conformity to masculine norms: Psychometric properties of the conformity to masculine norms inventory-46. *Psychology of Men & Masculinity*, 12(4), 339–353. https://doi.org/10.1037/a0021904
- Parent, M. C., Gobble, T. D., & Rochlen, A. (2019). Social media behavior, toxic masculinity, and depression. *Psychology of Men & Masculinities*, 20(3), 277-287.
- Parrott, D. J., Cohn, A. M., Hagman, B. T., & Gallagher, K. E. (2015). Development of the abbreviated masculine gender role stress scale. *Psychological Assessment*, 27(2), 489–500. https://doi.org/10.1037/a0038443

- Pease, B. (2000). Beyond the father wound: Memory work and the deconstruction of the father–son relationship. *Australian and New Zealand Journal of Family Therapy*, 21 (1), 9-15.
- Perkins, S. (2015). Hegemonic masculinity and its effect on attitudes toward seeking professional psychological help(Doctoral Dissertation). Northeastern University. Boston, Massachusetts.
- Perkins, S. (2015). Hegemonic masculinity and its effect on attitudes toward seeking professional psychological help. Northeastern University.
- Perry, B. D. (2006). Fear and learning: Trauma-related factors in the adult education process. In Johnson, S., & Taylor K., (Ed.), New Directions for Adult and Continuing Education, 110, 21-58. Jossey-Bass. San Francisco
- Petts, R. J., Shafer, K. M., & Essig, L. (2018). Does adherence to masculine norms shape fathering behavior?. *Journal of Marriage and Family*, 80(3), 704-720.
- Plant, E. A., Hyde, J. S., Keltner, D., & Devine, P. G. (2000). The gender stereotyping of emotions. *Psychology of Women Quarterly*, 24(1), 81-92.
- Pleck, J. H. (2007). Why could father involvement benefit children? Theoretical perspectives. *Applied Development Science*, 11(4), 196-202.
- Pleck, J. H., & Masciadrelli, B. P. (2004). Paternal involvement by U.S. residential fathers: Levels, sources, and consequences. In M. E. Lamb (Ed.), *The role of the father in child development* (pp. 222–271). John Wiley & Sons Inc.
- Pleck, J. H., Sonenstein, F. L., & Ku, L. C. (1994). Attitudes toward male roles among adolescent males: A discriminant validity analysis. *Sex Roles*, 30(7), 481-501.
- Pollack, W. (1998). Real boys: Rescuing our sons from the myths of boyhood. New York: Random House.
- Pope, M. (2000). Preventing school violence aimed at gay, lesbian, bisexual, and transgender youth. In D. S. Sandhu & C. B. Aspy (Eds.), *Violence in American schools: A practical guide for counselors*(pp. 285-304). Alexandria, VA: American Counseling Association.

- Pope, M., & Englar-Carlson, M. (2001). Fathers and sons: The relationship between violence and masculinity. *The Family Journal*, 9(4), 367-374.
- Punyanunt-Carter, N. M. (2007). Using attachment theory to study communication motives in father-daughter relationships. *Communication Research Reports*, 24(4), 311-318.
- Pyun, Y. S. (2014). *The influence of father-child relationship on adolescents' mental health* (Doctoral dissertation). Minnesota State University, Mankato, U.S.A.
- Quinton, S., & Wagner, H. L. (2005). Alexithymia, ambivalence over emotional expression, and eating attitudes. *Personality and Individual Differences*, 38(5), 1163-1173
- Radin, N. (1994). Primary-caregiving fathers in intact families. *Redefining families* (pp. 11-54). Springer, Boston, MA.
- Reeve, J. (2001). *Understanding motivation and emotion*. Fort Worth, TX: Harcourt College.
- Remmo, Jr., C. J. (2009). *Understanding masculinity: The role of father-son interaction on men's perceptions of manhood*(Doctoral Dissertation). University of Denver, U.S.A
- Rivera, A., & Scholar, J. (2020). Traditional masculinity: A review of toxicity rooted in social norms and gender socialization. *Advances in Nursing Science*, 43(1), 1-10.
- Rizvi, S. S. (2015). Father's masculinity ideology and their adolescent s perception of father's love. *International Journal of Information and Education Technology*, 5(1), 14-20.
- Roberts, S., & Elliott, K. (2020). Challenging dominant representations of marginalized boys and men in critical studies on men and masculinities. *Boyhood Studies*, 13(2), 87-104.
- Rollè, L., Gullotta, G., Trombetta, T., Curti, L., Gerino, E., Brustia, P., & Caldarera, A.M. (2019). Father involvement and cognitive development in early and middle childhood: a systematic review. Frontiers in psychology, 10, 2405.

- Rosenberg, J. (2006). The importance of fathers in the healthy development of children.

  Report for US Department Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, Office of Child Abuse and Neglect.
- Roy, K. M., & Lucas, K. (2006). Generativity as second chance: Low-income fathers and transformation of the difficult past. *Research in Human Development*, 3(2-3), 139-159.
- Russell, A., & Saebel, J. (1997). Mother-son, mother-daughter, father-son, and father-daughter: Are they distinct relationships?. *Developmental Review*, 17(2), 111-147.
- Salgado, D. M., Knowlton, A. L., & Johnson, B. L. (2019). Men's health-risk and protective behaviors: The effects of masculinity and masculine norms. *Psychology of Men & Masculinities*, 20(2), 266–275. https://doi.org/10.1037/men0000211.
- Sameroff, A. (2010). A unified theory of development: A dialectic integration of nature and nurture. *Child Development*, 81(1), 6-22.
- Sarkadi, A., Kristiansson, R., Oberklaid, F., & Bremberg, S. (2008). Fathers' involvement and children's developmental outcomes: a systematic review of longitudinal studies. *Acta Paediatrica*, 97(2), 153-158.
- Seidler, V. J. (2003). Fatherhood, masculinity, and parental relationships. In S. Ervø, & T. Johansson (Eds.), *Moulding masculinities among men*(pp. 212-226). Burlington: Ashgate Publishing.
- Sherman, A. E. (2010). Validation of the Masculine Gender Role Stress Scale in a diverse population.
- Shields, S. A., & Shields, S. A. (2002). Speaking from the heart: Gender and the social meaning of emotion. Cambridge University Press
- Silva, T. (2021). Masculinity Attitudes Across Rural, Suburban, and Urban Areas in the United States. Men and Masculinities, 1097184X211017186.

- Silva, T. (2021). Masculinity attitudes across rural, suburban, and urban areas in the United States. *Men and Masculinities*. Retrieved from https://doi.org/10.1177/1097184X211017186
- Silverstein, L. B., & Auerbach, C. F. (1999). Deconstructing the essential father. American Psychologist, 54(6), 397–407. https://doi.org/10.1037/0003-066X.54.6.397
- Silverstein, L. B., Auerbach, C. F., & Levant, R. F. (2002). Contemporary fathers reconstructing masculinity: Clinical implications of gender role strain. *Professional Psychology: Research and Practice*, 33(4), 361–369. https://doi.org/10.1037/0735-7028.33.4.361
- Silverstein, M., Lamberto, J., DePeau, K., & Grossman, D. C. (2008). You Get What You Get: Unexpected findings about low-income parents' negative experiences with community resources. *Pediatrics*, 122(6), 1141-1148.
- Silverstein, O., & Rashbaum, B. (1994). The courage to raise good men. New York: Viking.
- Simon, R. W., &Nath, L. E. (2004). Gender and emotion in the United States: Do men and women differ in self-reports of feelings and expressive behavior? *American Journal of Sociology*, 109(5), 1137–1176. https://doi.org/10.1086/382111
- Skalická, V., Wold Hygen, B., Stenseng, F., Kårstad, S. B., & Wichstrøm, L. (2019).
  Screen time and the development of emotion understanding from age 4 to age
  8: A community study. *British Journal of Developmental Psychology*, 37(3),
  427-443
- Sloan, C., Gough, B., & Conner, M. (2010). Healthy masculinities? How ostensibly healthy men talk about lifestyle, health, and gender. *Psychology and Health*, 25(7), 783-803.
- Smith, D. T., Mouzon, D. M., & Elliott, M. (2018). Reviewing the assumptions about men's mental health: an exploration of the gender binary. *American Journal of Men's Health*, 12(1), 78–89. https://doi.org/10.1177/1557988316630953

- Snarey, J. (1993). How fathers care for the next generation: A four-decade study. Cambridge, MA: Harvard University Press.
- Starita, F., & Di Pellegrino, G. (2018). Alexithymia and the reduced ability to represent the value of aversively motivated actions. *Frontiers in Psychology*, *9*, (2587).https://doi.org/10.3389/fpsyg.2018.02587
- Steensma, T. D., Kreukels, B. P., de Vries, A. L., & Cohen-Kettenis, P. T. (2013). Gender identity development in adolescence. *Hormones and Behavior*, 64(2), 288-297.
- Stough-Hunter, A. N. (2015). Negotiating masculinity, class, and health in a rural context. *International Journal of Men's Health*, *14*(2), 129-145.
- Sullivan, L., Camic, P. M., & Brown, J. S. (2015). Masculinity, alexithymia, and fear of intimacy as predictors of UK men's attitudes towards seeking professional psychological help. *British Journal of Health Psychology*, 20(1), 194-211.
- Swain, J. (2003). How young schoolboys become somebody: The role of the body in the construction of masculinity. *British Journal of Sociology of Education*, 24(3), 299-314.
- Swartout, K. M., Parrott, D. J., Cohn, A. M., Hagman, B. T., & Gallagher, K. E. (2015).

  Development of the abbreviated masculine gender role stress scale. *Psychological Assessment*, 27(2), 489–500
- Thacker, L. (2019). The Danger of 'No: Rejection violence, toxic masculinity and violence against women (Doctoral dissertation). Eastern Kentucky University. U.S.A
- Thunstedt, C. (2017). Masculinities and fatherhood in parenting discourses: An ethnographic content analysis of polish childcare magazines for fathers (Master thesis). Stockholm University, Faculty of Social Sciences, Department of Sociology. Stockholm, Sweden.
- Totten, M. (2003). Girlfriend abuse as a form of masculinity construction among violent, marginal male youth. *Men and Masculinities*, 6(1), 70–92

- UNESCO Islamabad (2010). Guidelines for mainstreaming gender in literacy materials. Electronic version of report.
- Van D., Cruijsen, R., Murphy, J., & Bird, G. (2019). Alexithymic traits can explain the association between puberty and symptoms of depression and anxiety in adolescent females. *Plos One*, *14*(1), e0210519. https://doi.org/10.1371/journal.pone.0210519
- Vandello, J. A., & Bosson, J. K. (2013). Hard won and easily lost: A review and synthesis of theory and research on precarious manhood. *Psychology of Men & Masculinity*, *14*(2), 101–113. https://doi.org/10.1037/a0029826
- Varghese, C., & Wachen, J. (2016). The determinants of father involvement and connections to children's literacy and language outcomes: Review of the literature. *Marriage & Family Review*, *52*(4), 331-359.
- Verdú Delgado, A. D., & Mañas-Viejo, C. (2017). Masculinities and emotional deficit: linkages between masculine gender pattern and lack of emotional skills in men who mistreat women in intimacy. *Masculinities and Social Change*, 6(2), 166-189. doi:10.17583/MCS.2017.258
- Vogt, G. M., & Sirridge, S. T. (1991). *Father's body as womb*. Like son, like father(pp. 79-100). Springer, Boston, MA.
- Volling, B. L., & Belsky, J. (1991). Multiple determinants of father involvement during infancy in dual-earner and single-earner families. *Journal of Marriage and the Family*, 53(2), 461-474.
- Wakiuru, M. M. (2016). Influence of parents'socio-economic status on their participation in children's pre-school education in Kayole in Nairobi Countyin Kenya.
- Walker, L. (2010). My son gave birth to me: Offending fathers-generative, reflexive and risky?. *British Journal of Social Work*, 40(5), 1402-1418.
- Weber, M., Gerth, H. H., & Mills, C. W. (1946). From max weber: Essays in sociology. Oxford University Press.
- Wolfe, P. (2006). The role of meaning and emotion in learning. *The Neuroscience of Adult Learning (ed.). Sandra Johnson and Kathleen Taylor*, 110,35-41.

- Wong, Y., Pituch, K., & Rochlen, A. (2006). Men's restrictive emotionality: An investigation of associations with other emotion-related constructs, anxiety, and underlying dimensions. *Psychology of Men & Masculinity*, 7(2), 113-126. Doi:10.1037/1524-9220.7.2.113
- Yalçınöz, B. (2011). From being a son to being a father: An intergenerational comparison of fatherhood in Turkey (Doctoral dissertation). İstanbul Bilgi Üniversitesi. Turkey.
- Yeung, W. J., Duncan, G. J., & Hill, M. S. (2000). Putting fathers back in the picture: Parental activities and children's adult outcomes. *Marriage & Family Review*, 29(2-3), 97-113.
- Yogman, M., Lavin, A., Cohen, G., &committee on psychosocial aspects of child and family health. (2018). The prenatal visit. *Pediatrics*, *142*(3), e20182058.
- Zahn-Waxler, C., & Polanichka, N. (2004). All things interpersonal. In Putallaz, M., Bierman, K.L. (Eds.), *Aggression, antisocial behavior, and violence among girls: A developmental perspective*. (pp. 48–68). Guilford Publications, New York,
- Zaidi, S. M. I. H., Arshad, M., & Yaqoob, N. (2015). Gender distinction in alexithymia among graduation students of Pakistan. *European Journal of Research in Social Sciences*, 3(2), 99-103.

(Appendix A)

#### **Consent Form**

I am student of Psychology at National Institute of Psychology, Quaid-i-AzamUniversity Islamabad. I want you to participate in my research study in which I will explore how paternal relation can predict hegemonic masculinity and its effect on alexithymia. You are requested to carefully read and fill the demographic sheet before responding the questionnaires.

I ensure you that your all information will be kept confidential and will only be used for research purposes. It will not be shared with anyone else. Your participation is completely voluntary. You have right to withdraw participation at any time. So, honestly respond to statements given in questionnaires. You are free to leave any statement unanswered. Your participation in my research will be highly appreciated and would be helpful for me.

Regards Your Signature

(Appendix B)

# **Demographic Sheet**

Age:		<b>Education</b> :		
Marital status: Occupation:	Single Job	Married Unem	Separated	Divorced Student
Family setting:	Joint family		Nuclear famil	ly
Residential status :	Urban area		Rural area	
Background Info	ormation_			
Majority time spen	t while	Rural	Urban	
growing up:				
Family setup while	growing	] Joint family	Nuclear	family
☐ Living with fa	ther and mother			
☐ Living with fa	ther only, Specify	if:		
☐ Biologica	al mother was	☐ Biolog	gical mother li	ved separately
deceased				
☐ Living with n	nother only, Specif	fy if:		
☐ Biologic	al Father was	☐ Biolog	gical Father liv	ed separately
deceased				
☐ Living in some	other arrangemen	nt without biolo	gical parents	:
☐ Biologic	al Parents were	☐ Biolo	gical Parents v	were living
deceased		separately		

(Appendix C)

### TORONTO ALEXITHYMIA SCALE

**Direction:** Please check  $(\checkmark)$  and rate yourself honestly based on what you actually do, on given statements using the following scales:

1	2	3	4	5
StronglyDisagree	Disagree	Neutral (N)	Agree (A)	Strongly Agree
(SD)	(D)			(SA)

		1SD	2D	3N	4A	5 SA
1	I am often confused about what emotion I am					
	feeling.					
2	It is difficult for me to find the right words for my					
	feelings.					
3	I have physical sensations that even doctors don't					
	understand.					
4	I am able to describe my feelings easily					
5	I prefer to analyze problems rather than just					
	describe them					
6	When I am upset, I don't know if I am sad,					
	frightened, or angry.					
7	I am often puzzled by sensations in my body.					
8	I prefer to just let things happen rather than to					
	understand why they turned out that way.					
9	I have feelings that I can't quite identify.					
10	Being in touch with emotions is essential.					
11	I find it hard to describe how I feel about people.					
12	People tell me to describe my feelings more.					
13	I don't know what's going on inside me.					
14	I often don't know why I am angry.					
15	I prefer talking to peopleabout their daily activities					
	rather than their feelings.					
16	I prefer to watch "light" entertainment shows rather					
	than psychological drama					
17	It is difficult for me to reveal my innermost					
	feelings, even to close friends					
18	I can feel close to someone, even in moments of					
	silence.					
19	I find examination of my feelings useful in solving					
	personal problems.					

20	Looking for hidden meanings in movies or plays			
	distracts from their enjoyment			

(Appendix D)

## FATHERHOOD SCALE (FS)

Please answer the following set of question keeping in mind your relationship with your father. The scale is the same.

		1	2	3	4	5
		SD	D	N	A	SA
1	My father told me that I was a good boy/girl.					
2	My father is a caring person.					
3	During my childhood I felt close to my father.					
4	I felt close to my father as a teenager.					
5	I know my father cared about me.					
6	My father comforted me when I was feeling bad.					
7	My father made me feel special.					
8	My father was loving toward me.					
9	I have warm feelings for my father.					
10	My father understood me.					
11	I told my father I loved him.					
12	My father praised me.					
13	My father showed concern when I got hurt.					
14	My dad taught me to fight back.					
15	My father encouraged me to say what I felt.					
16	I could talk to my father about anything.					
17	My dad would talk to me about things going on in					
	the world.					
18	My father talked to me about sex.					
19	My dad taught me what it was like to be a man.					
20	My father told me that he loved me.					
21	My father hugged me.					
22	My father is a good man.					
23	I saw my father cry.					
24	My father helped my mom clean the house.					
25	My father is a kind man.					
26	My dad would cook meals.					
27	My father talked to be about my personal problems.					

28	My father helped me solve my problems.			
29	When I got angry, I used to talk things over with			
	my dad.			
30	My father was around when I needed him.			

(Appendix E)

# THE MASCULINE GENDER-ROLE STRESS ABBREVIATED VERSION (MGRS-AV) SCALE

Please honestly answer the following set of question keeping in mind how you feel generally. The scale is as follows:

1	2	3	4	5
Strongly Disagree	Disagree	Neutral (N)	Agree (A)	Strongly Agree
(SD)	(D)			(SA)

		1	2	3	4	5
		SD	D	N	A	SD
1	Being outperformed at work by a woman					
2	Letting a woman control the situation					
3	Being perceived by someone as "gay"					
4	Being married to someone who makes more money than you					
5	Losing in a sports competition					
6	Admitting that you are afraid of something					
7	Being with a woman who is more successful than					
	you					
8	Being perceived as having feminine traits					
9	Having your children see you cry					
10	Being outperformed in a game by a woman					
11	Having people say that you are indecisive					
12	Appearing less athletic than a friend					
13	Having others say that you are too emotional					
14	Being compared unfavorably to other men					
15	Getting passed over for a promotion					