Trans Masculinity: Comparing Trans Masculine Individuals' and Cisgender Men's Conformity to Hegemonic Masculinity

Annalisa Anzani[1] · Sofia Pavanello Decaro[1] · Antonio Prunas[1]

Abstract

Introduction Masculinity and masculine norms are still relevant in the current social context. Literature showed that some masculine norms could be considered protective health buffers, while traditional masculinity has negative consequences on men's behaviors, relationships, and health.

Methods In the present study, we aimed at investigating trans masculine and cisgender men's levels of adherence to different dimensions of hegemonic masculinity. A total of 200 participants (100 trans masculine people and 100 cisgender men) took part in the study.

Results Results exhibit that trans masculine individuals showed higher scores than cisgender men on the dimensions of emotional control and self-reliance, whereas cisgender men showed higher endorsement of norms such as heterosexual self-presentation and power over women.

Conclusions Results are discussed in light of the minority stress model and masculinity threat theory.

Policy Implications The present work should act as a reminder of the pressure that trans masculine people may feel to conform to certain aspects of hegemonic masculinity. This may have the adaptive function of protecting them from the discrimination and threats that they expect from others.

Keywords Trans masculine · Cisgender men · Hegemonic masculinity · Minority stress · Masculinity threat

Introduction

Masculinity and masculine norms are still relevant in the current social and clinical context (Addis & Hoffman, 2019; American Psychological Association, 2018). Literature and mainstream media have generally compared masculinity, in its gender roles and norms, to femininity, adhering to a strictly binary conceptualization of gender (Kang & Bodenhausen, 2015), and depicting men and women as creatures from two different planets (Gray, 1992). Recently, however, the binary conceptualization of categories considered mutually exclusive has been challenged, and the possible overlap or fluidity of these social categories, including gender, has been recognized (Hyde et al., 2019). The majority of studies on masculinity compare men to women and have been conducted with presumably cisgender samples.

Aware of the complexity of gender categorization (Kang & Bodenhausen, 2015), the construct of essentialism helps understand some relevant processes that influence the current role of masculinity (Kray et al., 2017). Classical social psychology studies have shown how people tend to group stimuli into meaningful entities and base their judgments and inferences not on the individual stimulus but rather on the available knowledge about the group of stimuli (Allport, 1954; Tajfel, 1969). The perceivers, for instance, group people according to how similar they appear on specific attribute dimensions (Hamilton, 1994). Psychological essentialism refers to thinking that social groups are categorized through common qualities that describe them and are deep-seated and represent their true nature (Medin & Ortony, 1989). Social categories are perceived as essentially stable and unchanging, thus simplifying the nature of social groups. When applied to gender (gender essentialism), gender is therefore seen as inherent and immutable (Gelman & Taylor, 2000; Moskos, 2020). This perspective often originates from a biological and genetic understanding of the sources of gender differences, which are deemed biologically determined. A biological

✉ Annalisa Anzani
   annalisa.anzani@unimib.it

1   Department of Psychology, University of Milano, Bicocca, Milan, Italy

determination will allow for generalizations that imply that all men (or women) are and will always be a certain way, and this shall have consequences on attitudes and behaviors (Phillips, 2010). Skewes et al. (2018) have demonstrated that higher levels of gender essentialism are associated with sexist attitudes, specifically with less egalitarian views of sex roles. In the same research, gender essentialism predicted greater support for gender discriminatory practices.

Gender norms are specific to the socio-cultural context and determine the socially acceptable behaviors for men and women, thus the gender roles (Ryle, 2014).

Indeed, culture is a fundamental component of the child's development and influences how men behave over generations (Rivera & Scholar, 2020). Starting in early childhood social interactions provide a cultural frame of reference through which individuals learn the social expectations associated with their respective gender or adhere to a gender role following the sex assigned at birth (Best & Luvender, 2015). Interestingly, gender norms seem more rigidly prescribed for men than for women (Moss-Racusin, 2014; Salvati et al., 2021).

In the present work, we will focus on conformity to masculine roles and norms, meaning the degree to which individuals endorse personally the requirements of traditional masculine norms (Levant et al., 2020). Different contexts may present cultural gender differences: the levels of rewards and sanctions associated with conformity and nonconformity to masculine norms are not the same for all groups of men (Wong et al., 2012).

A concept that emerged from the first studies investigating masculinity (and its consequent implications on women) is hegemonic masculinity, which is the pattern of actions and practices that allows men's dominance to continue. It is highly visible and is regarded as exemplary, given a specific cultural setting (Connell & Messerschmidt, 2005). Hegemonic masculinity does not represent the most frequent or common manifestation but rather the most dominant and traditional.

The gender role strain paradigm (Pleck, 1995) helps explain the psychological strain created by adhering to traditional masculine norms. There are socially desirable expectations associated with being a man (such as avoiding femininity, aggression, and self-reliance), and violating these norms can negatively affect mental health, since not conforming to traditional masculinity norms is socially sanctioned (Pleck, 1995; Rivera & Scholar, 2020). Gender norm conformity theory (Iwamoto et al., 2018; Levant & Wimer, 2014; Mahalik et al., 2003) expands on this framework, approaching masculinity as a complex construct with multiple dimensions, and provides greater specificity about the degree to which adherence to dominant masculine norms can impact mental health outcomes.

Adherence to Masculine Gender Norms and Psychological Health[1]

In the gender norms conformity framework, masculine norms are not adaptive or maladaptive per se (Iwamoto et al., 2018; Mahalik et al., 2003). Studies have shown that the associations with health may vary, depending on which dimensions of health or health behaviors are used as outcome variables and which norms or facets of masculinity are used as predictors (Wimer & Levant, 2011). Some norms could be considered protective health buffers since they appear to protect against poorer mental health outcomes or risky behaviors (Levant & Wimer, 2014). For instance, traditional masculine characteristics, such as the ability to regulate emotions and the desire to win, may reduce the likelihood of engaging in risky behaviors, such as binge drinking or binge eating (Wong et al., 2012). On the other hand, it has been widely demonstrated that traditional masculinity has negative consequences on men's behaviors, relationships, and health (Rivera & Scholar, 2020). Mahalik et al. (2007) found that the more men conformed to masculine norms, the more likely they were to consider risky behaviors as expected and to engage in these risky behaviors themselves.

Furthermore, traditional masculinity discourages the expression of emotions and feelings, leading to a reluctance to seek professional help (White et al., 2011). This has severe consequences on men's psychological health and increases the risk of disease, injury, and death (Courtenay, 2011). Vandello et al. (2008) demonstrated that men experience stress and anxiety when they violate stereotypical male norms and attempt to demonstrate and reassert their masculinity to feel less anxious. Masculinity needs to be constantly proven (Vandello et al., 2008, 2019), and activities traditionally defined as typically feminine, such as caregiving and domestic work, may be felt by men as an obstacle to achieving such proof (Rivera & Scholar, 2020).

There is considerable evidence that traditional masculinity can act as a barrier in terms of psychological well-being, preventing men from seeking (Addis & Mahalik, 2003; McCusker & Galupo, 2011), achieving, and remaining compliant with psychological treatment (Rivera & Scholar, 2020). Yousaf et al. (2015) study on men's psychological help-seeking barriers found that men who bought into traditional notions of masculinity were more negative about seeking mental health services than those with more flexible gender attitudes. A recent study on a sample of Australian men found that self-reported identification with traditional masculinity and whether therapy made participants

---

[1] All of the studies presented in this paragraph are based on samples of presumably cisgender men. Thus, their results and the conclusions they draw should be read in the light of this premise.

feel emasculated were amongst the variables that predicted drop-out from mental health services (Seidler et al., 2021).

There is an extensive literature, published over multiple decades, indicating that complying with traditional and hegemonic ideals of masculinity is potentially harmful to boys' and men's mental health, relationship, and behavioral outcomes and that ignoring mental health needs has become an element of masculinity itself (Barber et al., 2019). Given such premises, the American Psychological Association (APA) published the Guidelines for Psychological Practice With Boys and Men, aiming to promote gender-sensitive treatment tailored to be more effective and appropriate for men and boys (American Psychological Association, 2018). Clinicians are provided with a tool to better understand the constructs and the issues around masculinity, work together with boys and men in support of their well-being, and help them build intimate and egalitarian relationships (American Psychological Association, 2018; Barber et al., 2019).

Since the APA guidelines (2018) focus primarily on heterosexual and cisgender masculinity, and gender identity is a relevant factor that impacts psychological and counseling treatment, Knutson and Goldbach (2019) proposed a work that integrates the guidelines with transgender and gender non-conforming people (TGNC) people. The authors explore how theoretical and treatment implications of conforming to masculine norms can be applied to TGNC patients. Regarding masculinity, they remind clinicians to develop TGNC-affirmative practice and environments (Singh & dickey, 2017) to address those norms and the social systems that impede the pursuit of health among cis and trans men. Finally, they highlight how transgender men or boys may feel pushed to present as more masculine to avoid discrimination and threats (Knutson & Goldbach, 2019).

Trans Masculinity

The literature on masculinity has traditionally associated the latter with having a stereotypical male body (Pascoe & Bridges, 2016). The underlying cisgenderist assumption is that in order to be masculine, one must be assigned male at birth (Phillips & Rogers, 2021).

Thus, the relationship of trans masculine individuals to traditional masculinity norms and how they express masculinity is not much investigated in the literature.

A few studies, which deserve mention, have investigated the experience of trans men, who for a period of their lives presented socially as women and transitioned to enacted masculinity (Dozier, 2005; Schilt, 2006). In some in-depth interviews, the narratives of some White trans men reveal that since their presentation changed to masculine, they were taken more seriously in the workplace, requests were readily met, and they generally felt they were perceived as more competent. However, the same does not emerge in

ethnic minority trans men (Schilt, 2006). Dozier (2005) highlights how trans men, after transitioning, get more respect, more conversational space even within male spaces, and less public harassment. Nevertheless, again, this experience was only characteristic of White men. Trans men of color were generally treated to a greater extent as criminals (Dozier, 2005).

These studies highlight how the male presentation allows trans men to access male privilege. However, privileges are granted because of their masculine appearance and adherence to certain norms (Schrock & Schwalbe, 2009). In fact, shorter and more feminine presenting trans men were harassed as gay (Dozier, 2005).

More recent sociology studies have investigated how trans masculine individuals perform their masculinity. Abelson (2014) identifies two ways of practicing masculinity: (1) defensive masculinity and (2) transformative masculinity. The former consists of defending one's sense of masculine self and behaviors that allow the individual to avoid violence from dominant masculinities. For example, when they do not perceive a safe environment, trans men tend to reinforce stereotypical "dominating" behaviors, such as masculine posturing and bravado, which allows them to defend themselves from possible threats. Positive experiences of when they access the "privilege of male violence" reinforce these gender-stereotypical behaviors. On the other hand, transformative masculinity challenges the hierarchical social order through gendered practices (Abelson, 2014). For example, transformative practices included being conscious of their interactional style with other men and women not to reproduce inequality through their practices. It is important to recognize that trans men do not express masculinity in one way only, but this can vary based on context and perception of threat (Abelson, 2014).

Phillips and Rogers (2021) investigated what it is like to be a man for trans men in Southern USA. The authors highlight a social hierarchy of masculinities, as some versions of masculinity are more socially valued than others. From this assumption, the authors highlight how both cis and trans men enact two types of behaviors to "do" masculinity: manhood acts and compensatory manhood acts. An essential element of claiming one's manhood is being accepted into groups of other cisgender or transgender men, establishing a brotherhood (Phillips & Rogers, 2021). The authors classified this behavior among the manhood acts, which are all behaviors enacted to be recognized as a man. On the other hand, the authors also identified compensatory manhood acts related explicitly to sexist beliefs in transgender people. Even though most participants did not participate in explicit forms of sexism, some endorsed benevolent sexism, an implicit and less visible form of subjugation of women (Glick & Fiske, 1996). Endorsing benevolent sexist beliefs and actions, including chivalrous behavior, were considered

ways to compensate for trans men's inability or unwillingness to correspond to the hegemonic form of masculinity (Phillips & Rogers, 2021).

In the present paper, we approach masculinity as a multidimensional construct (Addis & Hoffman, 2019), and we assume that conformity to masculine norms is an essential conceptual framework for investigating masculinity and its correlates (Levant et al., 2020; Mahalik et al., 2003). The present work aims to adopt this framework and its tools (Levant et al., 2020) to assess masculinity in a sample of cisgender men and trans masculine individuals. Given the importance of gender role socialization (Best & Luvender, 2015) and the relevant consequences of masculine norms on boys' and men's mental health (American Psychological Association, 2018), we wish to explore the differences concerning conforming to traditional masculinity in cisgender and trans masculine individuals.

Current Study

The present work aims to better understand trans masculine individuals' expression of masculinity compared to cisgender peers. Since hegemonic masculinity is the most prevalent way of "doing" masculinity in Western culture, our goal is to study how people with trans masculine identities position themselves in relation to these traditional models.[2] The objective was achieved by comparing both groups' levels of adherence to different dimensions of hegemonic masculinity. The ultimate goal is to increase awareness of the potentially different ways that traditional masculinity affects the experience of cisgender and transgender men to better address issues around this topic.

Methods

Participants and Procedure

Participants were 200 volunteers from the community, 100 self-identified as trans masculine individuals, and 100 as cisgender men, aged between 18 and 72 (mean age = 29.03, SD = 9.55). Only 8 participants identified as nonbinary and were excluded from the analysis. Participants were invited to participate in an online study that aimed "to explore the experiences and understandings of masculinity." Participants were recruited through various Facebook posts. In addition, trans masculine participants were recruited in various lesbian, gay, bisexual, transgender, queer/questioning, intersex,

asexual/agender, etc. (LGBTQIA +) online resources. Inclusion criteria for the study were as follows: (1) must be 18 years old or older and (2) must identify as a trans masculine or nonbinary person in the male gender identity spectrum or cisgender man. The two groups in terms of sexual identity are unbalanced with reference to other variables. The cisgender sample was primarily represented by heterosexual men (N = 96, 96%), and only 4% of the sample identifying as bisexual, gay, pansexual, or fluid. In contrast, the trans masculine sample was more diverse in terms of sexual identity. The 33% of the sample identified as bisexual, 2% as fluid, 10% as gay, 33% as heterosexual, 22% as pansexual, 6% as queer, and 6% as other. The study was conducted in Italy, and all participants are White and Italian. Data collection occurred between November 2020 and February 2021.

The Ethics committee of the University of Milan-Bicocca approved the study with the protocol number RM-2021–367.

Materials and Methods

All participants were asked to complete the Italian version of the Conformity to Masculine Norms Inventory CMNI-30 (Levant et al., 2020). The Italian version of the scale was obtained through back-translation. This inventory is the revised and updated version of the original CMNI created almost 20 years ago (Mahalik et al., 2003). The CMNI-30 consists of 30 items that constitute a 10-factor structure. The factors measure ten different dimensions of hegemonic masculinity:

1. Emotional control (i.e., *I tend to share my feelings* (r)).
2. Winning (i.e., *I will do anything to win*).
3. Playboy (i.e., *I would change sexual partners often if I could*).
4. Violence (i.e., *I dislike any kind of violence* (r)).
5. Heterosexual self-presentation (i.e., *I would get angry if people thought I was gay*).
6. Pursuit of status (i.e., *I would hate to be important* (r)).
7. Primacy of work (i.e., *Work comes first for me*).
8. Power over women (i.e., *Things tend to be better when men are in charge*).
9. Self-reliance (i.e., *I never ask for help*).
10. Risk-taking (i.e., *I take risks*).

Participants were invited to rate from 1 (= strongly disagree) to 5 (= strongly agree) their level of agreement with the items presented. Higher scores indicated higher endorsement of hegemonic masculinity norms. The Cronbach α for the CMNI-30 items is 0.87.

Analysis

All analysis was performed using SPSS 27 (IBM Corp. Released, 2020, Armonk, NY, USA). In order to test

---

[2] Clearly, this does not give a value judgment of any kind about different ways of "doing" masculinity. The aim is not to reify the hegemonic model of masculinity over other models.

Table 1 Sociodemographic characteristics of the sample

	Trans masculine, N	Cisgender, N
Educational level		
Middle school diploma	15	8
High school diploma	61	33
Undergraduate or postgraduate	24	59
Relationship status		
Married	-	15
In a relationship	32	37
Dating	8	11
Polyamory/consensual non-monogamy	2	1
Non-consensual non-monogamy	-	2
Open relationship	3	4
Single	49	28
Not interested	7	2

differences in the endorsement of traditional norms of masculinity, we performed a series of t-tests for independent samples. We also tested if the two groups were different in terms of mean age with another t-test.

Results

The two groups were significantly different in age (t (189.51) $= -4.24$, $p < 0.001$). The mean age of trans masculine individuals ($m = 26.23$, $sd = 8.19$) is slightly lower than that of the cisgender group ($m = 31.76$, $sd = 10.02$). Sociodemographic characteristics of the sample are outlined in Table 1.

As for the different dimensions of hegemonic masculinity, we found significant differences between cisgender men and trans masculine people for the following subscales:

emotional control, heterosexual presentation, power over women, and self-reliance. Trans masculine individuals scored higher in the scales of emotional control and self-reliance, with effect size respectively: Cohen's $d = 0.92$; 95% CI: (0.04, 0.67), Cohen's $d = 0.87$; 95% CI: (0.33, 0.95). Cisgender men scored higher on the scales power over women and heterosexual presentation, Cohen's $d = 0.77$; 95% CI: (-0.68, -0.12), Cohen's $d = 0.1.09$ and 95% CI: (-0.78, -0.22). All the mean scores for the different dimensions of masculinity and the t-test results are reported in Table 2.

Discussion

While adherence to norms of hegemonic masculinity appears to have important implications for (cisgender) men's psychological health, masculinity has been little studied in trans masculine identities. In the current study, we aimed at investigating differences in endorsement of traditional norms of hegemonic masculinity in cisgender men and trans masculine individuals, using the CMNI-30. The differences that emerged in adherence to norms of masculinity involve four dimensions: emotional control, self-reliance, heterosexual self-presentation, and power over women.

In fact, trans masculine individuals showed higher scores than cisgender men on the dimensions of emotional control and self-reliance. The dimension of emotional control refers to the extent to which people tend to express and share their emotions with others. It has been demonstrated in previous studies that masculinity imposes on men not to show themselves as emotional, in particular by sanctioning the expression of emotions such as sadness, vulnerability, and weakness, in favor of the expression of anger and rage (i.e., Addis, 2011; Fantini-Hauwel et al., 2015; Levant, 2011). Self-reliance refers to the value placed on making it on one's own and the difficulty or shame in asking others for help. This tendency, furthermore, has important clinical implications.

Table 2 Differences between trans masculine individuals and cisgender men in conformity to traditional masculine norms

		Trans masculine	Cisgender men
	t	*Mean*	*Mean*
Emotional control	2.20*	2.60	2.27
Winning	0.32	3.96	3.91
Playboy	-0.20	3.13	3.17
Violence	1.36	2.63	2.38
Heterosexual self-presentation	-3.51***	2.46	3.01
Primacy of work	1.89	3.55	3.26
Power over women	-2.81**	2.15	2.46
Self-reliance	4.20***	3.67	3.11
Risk-taking	1.00	3.97	3.82

*$p < 0.05$; **$p < 0.01$; ***$p < 0.001$

In fact, cisgender men may tend to seek less help, even medically or psychologically, when they find themselves hurt or in distress (i.e., Berger et al., 2013; Rivera & Scholar, 2020). Self-reliance also relates closely to emotional control; asking for help might be judged as a sign of weakness and vulnerability, strongly sanctioned by others.

These findings could be read in light of the gender minority stress model (Hendricks & Testa, 2012). Indeed, trans masculine individuals are more likely to have been exposed to stressful adverse events. We can therefore think that in the case of trans masculine people, it is not a fear of appearing less masculine than their peers, but rather it might be that the exposure to minority stress has made this group more cautious in terms of self-disclosure of emotions and in asking for help when they navigate a social environment that in some cases can be hostile. It must be noted that Italy, the participants' social environment in this study, is one of the countries in Europe with the highest rate of murders of trans people (Prunas et al., 2015), and where the road to inclusiveness of sexual and gender minorities is still a long way to go. It is not surprising that, in light of these data on social context, before exposing themselves in a request for help or expression of emotions, trans masculine individuals may be hypervigilant of the social environment in which they find themselves, and that their expectation may be of a hostile or rejecting environment. It is worth noting that developing this anxious expectation might lead to consequences concerning mental health. Both the subtle and low-intensity transphobic events, and the lifelong discriminations, may lead the individuals to expect prejudiced events and become hypervigilant (Timmins et al., 2017), which can have a negative impact on their mental health (Bockting et al., 2013; Tebbe & Moradi, 2016; Testa et al., 2017).

Another interesting finding from the results concerns the higher endorsement by cisgender men, compared to trans masculine people, of norms such as heterosexual self-presentation and power over women.

Heterosexual self-presentation, known in the first version of the CMNI as Disdain for Homosexuals (Mahalik et al., 2003), is defined as the desire to be perceived as heterosexual, (and not gay) in social settings, reinforcing a traditionally masculine identity that promotes the presentation as heterosexual irrespective of actual behavior or self-identification (Parent et al., 2012). Power over women is the endorsement of the subordination of women. It relates to antifemininity and to the belief that men should be the dominant group in society, and women should be subservient to men (Le et al., 2020; Mahalik et al., 2003).

The first result could be explained in the light of the limited diversity of sexual identities included in cisgender men, but we can also give an alternative explanation. The superiority of men over women and the belief that men should look "manly" are beliefs that rely heavily on gender stereotypes. Research has extensively studied the content of gender stereotypes in

(cisgender) women and men and has shown that these beliefs have significant, often negative, consequences in social interactions (for a review, see Rudman & Glick, 2008). Stereotypes can have a particularly negative impact on individuals who violate traditional gender stereotypes. For example, a cisgender man who expresses stereotypically feminine characteristics is highly socially sanctioned (Rudman & Fairchild, 2004). For the cisgender men in our sample, it appears that the threat of being categorized as feminine seems to be something much more feared than trans masculine individuals. Masculinity threat refers to men's fear of being categorized as gay or as lacking masculine traits (Willer et al., 2013). The masculinity threat has consequences for men in terms of attitudes and behaviors. For example, a study found men who are told that they are feminine to be more supportive of wars, more homophobic, more interested in purchasing an SUV, and more supportive of dominance hierarchies and male superiority, compared to those who are told that they are masculine (Willer et al., 2013). Trans masculine individuals in our sample do not seem to perceive this threat to the same extent as cisgender men, because they probably do not risk as much in terms of losing their privilege and social power. Trans masculine people's social position in the social hierarchy, like that of (cisgender and trans) women, is less privileged than the dominant male cisgender heterosexual group. Likewise, maintaining social privilege means endorsing beliefs about the superiority of men over women that justify the unequal system.

Overall, our results show that trans masculine individuals share the same concept of masculinity as cisgender men, although they do not seem to endorse all its dimensions to the same extent. Trans masculine individuals do not put particular emphasis on those dimensions that appear in sharp contrast to basic shared values of the LGBTQIA + community: heterosexual privilege and women's submission to men.

The results of the present work should act as a reminder of the pressure that trans masculine people may feel to conform to certain aspects of hegemonic masculinity. This may have the adaptive function of protecting them from the discrimination and threats that they expect from others (Knutson & Goldbach, 2019). However, the same process may lead to negative outcomes. For instance, if visiting a doctor or asking for help is perceived as a violation of masculine gender norms of self-sufficiency, and expressing emotion might undermine the masculine identity, we could argue that some behaviors that are relevant enactment of the construction of gender might lead to health consequences that are worth considering.

Limitations and Future Directions

Future research might expand in this direction further filling the gap in the literature concerning the role of masculinity in cis and trans men, and developing awareness

of similarities and potential differences between these groups. Future studies with this population might include mixed methodologies (e.g. focus groups, interviews), as well as longitudinal designs, for instance, to explore the progression of the role of masculinity during the transition for trans men. Analogous studies may be designed to capture the perception and adherence to masculinity during adolescence and young adulthood. Furthermore, it may be worth repeating this study and verify whether the results replicate across cultures and with a more diverse sample, given that previous studies reported differences between Black and White trans masculine participants. In fact, limitations to this study include lack of diversity in ethnicity of our sample, as well lack of diversity in sexual orientation of the cisgender group. Another limitation to be considered is that the CMNI-30, although created for respondents belonging to the Western culture, has not been tested specifically with Italian respondents.

Implications

The main strength of the present research is the attempt to increase awareness of the role that traditional masculinity plays in the lives of both cisgender and transgender men, although with some specific differences. This also has clinical implications since clinicians and professionals working with trans masculine population might benefit from data and knowledge on the specific processes and norms that regulate and influence transgender (and cisgender) men's experience. We believe that attention to the specificity of gender minorities is the basis for building an informed and affirmative practice.

It is crucial to understand how people relate to social norms that prescribe how men and women should behave, especially when those norms are too rigid and impose limits on the individual personal expression, impacting psychological well-being and mental health. The way masculine individuals negotiate with those social rules and relate to them can be informative for individual therapeutic work, support groups, and broader social policy.

For example, fostering the person's inclusion in an LGBTQIA + community may help them create a support network that allows them to overcome some of the limitations that minority stress can pose. Our findings highlighted how emotional expression and self-reliance might represent areas of vulnerability for trans masculine individuals. We might think that the person could feel safer in a community setting when expressing emotions or asking for help in front of individuals with more relatable experiences.

At the social policy level, however, work on masculinity can be more intersectional across different identities, proposing diverse models that do not necessarily fit within the traditional model of hegemonic masculinity. In conclusion, it is of paramount importance that all professionals coming in contact with gender minorities are aware of the hegemonic norms which may be of obstacle to the pursuit of health amongst all men, and are willing to promote TGNC-affirmative practice, socials systems, and environments (Singh & dickey, 2017).

Declarations

References

Abelson, M. J. (2014). Dangerous privilege: Trans men, masculinities, and changing perceptions of safety. *Sociological Forum, 29*(3), 549–570.

Addis, M. (2011). *Invisible men: Men's inner lives and the consequences of silence*. Macmillan.

Addis, M. E., & Hoffman, E. (2019). The psychology of men in context. *Routledge*. https://doi.org/10.4324/9780429491719

Addis, M. E., & Mahalik, J. R. (2003). Men, masculinity, and the contexts of help seeking. *American Psychologist, 58*(1), 5–14. https://doi.org/10.1037/0003-066X.58.1.5

Allport, G. W. (1954). *The nature of prejudice* (pp. xviii, 537). Addison-Wesley.

American Psychological Association. (2018). *APA Guidelines for Psychological Practice with Boys and Men: (505472019–001)*. https://doi.org/10.1037/e505472019-001

Barber, K., Bridges, T., & Nelson, J. D. (2019). Mitigating the harms of masculinity: A symposium on the APA Guidelines for Psychological Practice with Boys and Men. *Men and Masculinities, 22*(5), 905–908. https://doi.org/10.1177/1097184X19874855

Berger, J. L., Addis, M. E., Green, J. D., Mackowiak, C., & Goldberg, V. (2013). Men's reactions to mental health labels, forms of help-seeking, and sources of help-seeking advice. *Psychology of Men & Masculinities, 14*(4), 433–443. https://doi.org/10.1037/a0030175.

Best, D., & Luvender, K. L. (2015). Gender development: Cultural. *Differences.* https://doi.org/10.1016/B978-0-08-097086-8.23211-X

Bockting, W. O., Miner, M. H., Swinburne Romine, R. E., Hamilton, A., & Coleman, E. (2013). Stigma, mental health, and resilience in an online sample of the US transgender population. *American Journal of Public Health, 103*(5), 943–951. https://doi.org/10.2105/AJPH.2013.301241

Connell, R. W., & Messerschmidt, J. W. (2005). Hegemonic masculinity: Rethinking the concept. *Gender & Society, 19*(6), 829–859. https://doi.org/10.1177/0891243205278639

Courtenay, W. H. (2011). Dying to be men: Psychosocial, environmental, and biobehavioral directions in promoting the health of men and boys. In *Dying to be men: Psychosocial, environmental, and biobehavioral directions in promoting the health of men and boys* (p. Chapter xxiv, 502 Pages). Routledge/Taylor & Francis Group (New York, NY, US). http://www.proquest.com/docview/869820954/B0B3E9111B2A423BPQ/2

Dozier, R. (2005). Beards, breasts, and bodies: Doing sex in a gendered world. *Gender & Society, 19*(3), 297–316. https://doi.org/10.1177/0891243204272153

Fantini-Hauwel, C., Luminet, O., & Vermeulen, N. (2015). Live happily live in hiding (from our affect): Alexithymia Influences affect intensity and affect frequency ratings in men. *Psychiatry Research, 230*(2), 637–642. https://doi.org/10.1016/j.psychres.2015.10.019

Gelman, S. A., & Taylor, M. G. (2000). Gender essentialism in cognitive development. In P. H. [Ed Miller & E. [Ed Kofsky Scholnick (Eds.), *Toward a feminist developmental psychology* (pp. 169–190, Chapter viii, 309 Pages). Taylor & Frances/Routledge (Florence, KY, US). http://www.proquest.com/docview/619459142/E1B56716F28546DAPQ/3

Glick, P., & Fiske, S. T. (1996). The ambivalent sexism inventory: Differentiating hostile and benevolent sexism. *Journal of Personality and Social Psychology, 70*(3), 491. https://doi.org/10.1037/0022-3514.70.3.491

Gray, D. J. (1992). *Men are from Mars, women are from Venus. A practical guide for improving communication and getting what you want in your relationships.* New York, NY: HarperCollins.

Hamilton, D. L. (1994). Cognitive processes in stereotyping and intergroup behaviour. In *Cognitive processes in stereotyping and intergroup behaviour* (p. 366). UMI Books on demand. http://www.proquest.com/docview/38763071/A565E797797F49BFPQ/1

Hendricks, M. L., & Testa, R. J. (2012). A conceptual framework for clinical work with transgender and gender nonconforming clients: An adaptation of the Minority Stress Model. *Professional Psychology: Research and Practice, 43*(5), 460–467. https://doi.org/10.1037/a0029597.

Hyde, J. S., Bigler, R. S., Joel, D., Tate, C. C., & van Anders, S. M. (2019). The future of sex and gender in psychology: Five challenges to the gender binary. American Psychologist, 74(2), 171. https://doi.org/10.1037/amp0000307

IBM Corp. Released. (2020). IBM SPSS Statistics for Windows, Version 27.0. Armonk, NY: IBM Corp.

Iwamoto, D. K., Brady, J., Kaya, A., & Park, A. (2018). Masculinity and depression: A longitudinal investigation of multidimensional masculine norms among college men. *American Journal of Men's Health, 12*(6), 1873–1881. https://doi.org/10.1177/1557988318785549

Kang, S. K., & Bodenhausen, G. V. (2015). Multiple identities in social perception and interaction: Challenges and opportunities. *Annual Review of Psychology, 66*(1), 547–574. https://doi.org/10.1146/annurev-psych-010814-015025

Knutson, D., & Goldbach, C. (2019). Transgender and non-binary affirmative approaches applied to psychological practice with boys and men. *Men and Masculinities, 22*(5), 921–925. https://doi.org/10.1177/1097184X19875174

Kray, L. J., Howland, L., Russell, A. G., & Jackman, L. M. (2017). The effects of implicit gender role theories on gender system justification: Fixed beliefs strengthen masculinity to preserve the status quo. *Journal of Personality and Social Psychology, 112*(1), 98–115. https://doi.org/10.1037/pspp0000124.

Le, T. P., Pekosz, M. C., & Iwamoto, D. K. (2020). Masculine norms and college men's rape myth acceptance: The mediating role of

nurturance. *Psychology of Men & Masculinities, 21*(4), 665–674. https://doi.org/10.1037/men0000310

Levant, R. F. (2011). Research in the psychology of men and masculinity using the gender role strain paradigm as a framework. *American Psychologist, 66*(8), 765–776. https://doi.org/10.1037/a0025034.

Levant, R. F. , McDermott, R. , Parent, M. C., Alshabani, N. , Mahalik, J. R., & Hammer, J. H. (2020). Development and evaluation of a new short form of the Conformity to Masculine Norms Inventory (CMNI-30). *Journal of Counseling Psychology*, *67*(5), 622–636. https://doi.org/10.1037/cou0000414

Levant, R. F., & Wimer, D. J. (2014). Masculinity constructs as protective buffers and risk factors for men's health. *American Journal of Men's Health, 8*(2), 110–120. https://doi.org/10.1177/1557988313494408

Mahalik, J. R., Burns, S. M., & Syzdek, M. (2007). Masculinity and perceived normative health behaviors as predictors of men's health behaviors. *Social Science & Medicine, 64*(11), 2201–2209. https://doi.org/10.1016/j.socscimed.2007.02.035

Mahalik, J. R., Locke, B. D., Ludlow, L. H., Diemer, M. A., Scott, R. P. J., Gottfried, M., & Freitas, G. (2003). Development of the conformity to masculine norms inventory. *Psychology of Men & Masculinities*, *4*(1), 3–25. https://doi.org/10.1037/1524-9220.4.1.3

McCusker, M. G., & Galupo, M. P. (2011). The impact of men seeking help for depression on perceptions of masculine and feminine characteristics. *Psychology of Men & Masculinity*, *12*(3), 275–284. https://doi.org/10.1037/a0021071

Medin, D. L., & Ortony, A. (1989). Psychological essentialism. In S. [Ed Vosniadou & A. [Ed Ortony (Eds.), *Similarity and analogical reasoning* (pp. 179–195, Chapter xiv, 592 Pages). Cambridge University Press (New York, NY, US). https://doi.org/10.1017/CBO9780511529863.009

Moskos, M. (2020). Why is the gender revolution uneven and stalled? Gender essentialism and men's movement into 'women's work'. *Gender, Work and Organization*, *27*(4), 527–544. https://doi.org/10.1111/gwao.12406

Moss-Racusin, C. A. (2014). Male backlash: Penalties for men who violate gender stereotypes. In *Gender in organizations: Are men allies or adversaries to women's career advancement?* (pp. 247–269). Edward Elgar Publishing. https://doi.org/10.4337/9781781955703.00021

Parent, M. C., Torrey, C., & Michaels, M. S. (2012). "HIV testing is so gay": The role of masculine gender role conformity in HIV testing among men who have sex with men. *Journal of Counseling Psychology*, *59*(3), 465–470. https://doi.org/10.1037/a0028067.

Pascoe, C. J., & Bridges, T. (2016). Exploring masculinities: Identity, inequality, continuity, and change. *Brockport Bookshelf*. 391.

Phillips, A. (2010). What's wrong with essentialism?. *Distinktion: Journal of Social Theory, 11*(1), 47–60. https://doi.org/10.1080/1600910X.2010.9672755.

Phillips, M. Y., & Rogers, B. A. (2021). Brotherhood and sexism as manhood acts for trans men in the Southeastern United States. *Sociological Spectrum, 41*(4), 322–337. https://doi.org/10.1080/02732173.2021.1919578

Pleck, J. H. (1995). The gender role strain paradigm: An update. In R. F. [Ed Levant & W. S. [Ed Pollack (Eds.), *A new psychology of men* (pp. 11–32, Chapter xiv, 402 Pages). Basic Books/Hachette Book Group (New York, NY, US). http://www.proquest.com/docview/618763341/EBB53D8CA9224BE9PQ/1

Prunas, A., Clerici, C. A., Gentile, G., Muccino, E., Veneroni, L., & Zoja, R. (2015). Transphobic murders in Italy: An overview of homicides in Milan (Italy) in the Past Two Decades (1993–2012). *Journal of Interpersonal Violence*, 2872–2885.

Rivera, A., & Scholar, J. (2020). Traditional masculinity: A review of toxicity rooted in social norms and gender socialization. *Advances*

in Nursing Science, 43(1), E1–E10. https://doi.org/10.1097/ANS. 0000000000000284

Rudman, L. A., & Fairchild, K. (2004). Reactions to counterstereotypic behavior: The role of backlash in cultural stereotype maintenance. *Journal of Personality and Social Psychology, 87*(2), 157–176. https://doi.org/10.1037/0022-3514.87.2.157

Rudman, L. A., & Glick, P. (2008). *The social psychology of gender: How power and intimacy shape gender relations* . Guilford Press.

Ryle, R. (2014). Questioning gender: A sociological exploration, 2nd Edition. In *ProtoView* (Vol. 1, Issue 29). Ringgold Inc. http://www.proquest.com/docview/1651822987/citation/C240E36BCB514AF8PQ/1

Salvati, M. , Passarelli, M., Chiorri, C., Baiocco, R., & Giacomantonio, M. (2021). Masculinity threat and implicit associations with feminine gay men: Sexual orientation, sexual stigma, and traditional masculinity. *Psychology of Men & Masculinities*. https://doi.org/10.1037/men0000338

Schilt, K. (2006). Just one of the guys?: How transmen make gender visible at work. *Gender & Society, 20*(4), 465–490. https://doi.org/10.1177/0891243206288077

Schrock, D., & Schwalbe, M. (2009). Men, masculinity, and manhood acts. *Annual Review of Sociology, 35*(1), 277–295. https://doi.org/10.1146/annurev-soc-070308-115933

Seidler, Z. E., Wilson, M. J., Kealy, D., Oliffe, J. L., Ogrodniczuk, J. S., & Rice, S. M. (2021). Men's dropout from mental health services: Results from a survey of australian men across the life span. *American Journal of Men's Health, 15*(3), 15579883211014776. https://doi.org/10.1177/15579883211014776

Singh, A. A., & dickey, l. m. (2017). Affirmative counseling with transgender and gender nonconforming clients. In *Handbook of sexual orientation and gender diversity in counseling and psychotherapy* (pp. 157–182). American Psychological Association. https://doi.org/10.1037/15959-007

Skewes, L., Fine, C., & Haslam, N. (2018). Beyond Mars and Venus: The role of gender essentialism in support for gender inequality and backlash. *PLoS One, 13*(7), e0200921. https://doi.org/10.1371/journal.pone.0200921

Tajfel, H. (1969). Cognitive aspects of prejudice. *Journal of Social Issues, 25*(4), 79–97. https://doi.org/10.1111/j.1540-4560.1969.tb00620.x.

Tebbe, E. A., & Moradi, B. (2016). Suicide risk in trans populations: An application of minority stress theory. *Journal of Counseling Psychology, 63*(5), 520–533. https://doi.org/10.1037/cou0000152

Testa, R. J., Michaels, M. S., Bliss, W., Rogers, M. L., Balsam, K. F., & Joiner, T. (2017). Suicidal ideation in transgender people: Gender minority stress and interpersonal theory factors. *Journal of Abnormal Psychology, 126*(1), 125–136. https://doi.org/10.1037/abn0000234.

Timmins, L., Rimes, K. A., & Rahman, Q. (2017). Minority stressors and psychological distress in transgender individuals. *Psychology of Sexual Orientation and Gender Diversity, 4*(3), 328–340. https://doi.org/10.1037/sgd0000237.

Vandello, J. A., Bosson, J. K., Cohen, D., Burnaford, R. M., & Weaver, J. R. (2008). Precarious manhood. *Journal of Personality and Social Psychology, 95*(6), 1325–1339. https://doi.org/10.1037/a0012453.

Vandello, J. A., Bosson, J. K., & Lawler, J. R. (2019). Precarious manhood and men's health disparities. In D. M. [Ed Griffith, M. A., Bruce, & R. J. Thorpe (Eds.), *Men's health equity: A handbook* (pp. 27–41, Chapter xxiv, 594 Pages). Routledge/Taylor & Francis Group (New York, NY, US). https://doi.org/10.4324/9781315167428-3

White, A., McKee, M., Richardson, N., Visser, R. d., Madsen, S. A., Sousa, B. C. d., Hogston, R., Zatonski, W., & Makara, P. (2011). Europe's men need their own health strategy. *BMJ, 343*(nov29 2), d7397. https://doi.org/10.1136/bmj.d7397

Willer, R., Rogalin, C. L., Conlon, B., & Wojnowicz, M. T. (2013). Overdoing gender: A test of the masculine overcompensation thesis. *American Journal of Sociology, 118*(4), 980–1022. https://doi.org/10.1086/668417

Wimer, D. J., & Levant, R. F. (2011). The relation of masculinity and help-seeking style with the academic help-seeking behavior of college men. *Journal of Men's Studies, 19*(3), 256–274. https://doi.org/10.3149/jms.1903.256.

Wong, Y. J., Owen, J., & Shea, M. (2012). A latent class regression analysis of men's conformity to masculine norms and psychological distress. *Journal of Counseling Psychology, 59*(1), 176–183. https://doi.org/10.1037/a0026206

Yousaf, O., Popat, A., & Hunter, M. S. (2015). An investigation of masculinity attitudes, gender, and attitudes toward psychological help-seeking. *Psychology of Men & Masculinities, 16*(2), 234–237. https://doi.org/10.1037/a0036241.