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The Influence of Biopsychological, Social, Interpersonal, and Intrapersonal on Human Male
Sexual Identity Encoding

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Abstract

Men's sexual identity ranges from militant homosexuals to monks to fanatical fundamentalist abusers. This paper discusses some influences, challenges, and solutions to the male sexual identity issue. The discussion starts with biopsychological and social to inter and intra personal relationships. Some differences between men and women are discussed as well as some similarities. It is the purpose of this paper to stimulate further discussion on the present report's topic.

The encoding of male sexual identity is influenced by many factors. This paper will discuss the biopsychological, social, interpersonal, and intrapersonal aspect of male sexual identity.

Biopsychological Structure of Men and Social Influence

It is common knowledge that there are differences between men and women's physical appearance and brain structure (Kimura, 1987). What are some of the differences and would the differences influence males to encode a different identity than females? Research suggests these differences may be the result of mother's gender specific prenatal communications (Smith, 2005) and biopsychological organization of mental processes (D. Kimura, 1983; Seidlitz & Diener, 1998). Prenatal boys also show increase sensitivity to substances than girls (Hsu, Lai, Guo, Lambert, & Leon Guo, 2005; Moe & Slinning, 2001). Sex hormones affect physical appearance (Fink, Neave, & Manning, 2003) which may influence self-perception. Another matter, the degree a male is sex-stereotypic may determine what he remembers (Cherney, 2005; Frable & Bem, 1985; Mills & Tyrrell, 1983). In addition, erectile dysfunction may influence later life encoding of identity (Wylie & Davies-South, 2004). Using women as a comparison, this section will show some physical appearance, brain structure, and social influences that men may use for encoding sexual identity.

D. Kimura (1987) suggests the male brain may be more asymmetrical than the female brain. This asymmetry does not hold true in all instances. The prevailing thought is that men are more right hemisphere dominate and thus perform better on "nonverbal or spatial ability" (D.Kimura, p.136). Spatial ability helps in direction finding and target acquisition when throwing a projectile. This prevailing thought does not hold true with damage to either hemisphere. Men

and women perform spatial tasks in the same ratio as before damage. Conversely, differences in perception do indicate asymmetry in males. Men as opposed to women perceive words presented in both ears at the same time differently. Men will remember the words presented in the right ear more than the left ear. This indicates asymmetric perception of the left hemisphere for men in verbal perception. Women do not show this asymmetry. Another difference is the increase speech distribution in men's left hemisphere. Women's speech centers are more centralized. Women show more anterior regions dedicated to speech. D. Kimura reports past studies indicate men are more left dominate and more asymmetrical than women because injuries to the left hemisphere have resulted in more speech pathology in men than in women. What D. Kimura suggest is that because women have a more centralized location for speech (posterior) than men, the chances of women having damage to this localized area and subsequent speech problems is less than men having damage to a more disperse left hemisphere area and thus suffering the same issue at an increase risk. D. Kimura (1987) suggests men are anterior while women are more posterior dominate. The implications D. Kimura suggest is that men as hunters and defenders, needed to incorporate not only self but also distant visual fields. Women, on the other hand, needed to be closer to home and to be able to recognize small changes in environment or babies for nurturing. The brain structures as presented by D. Kimura allow each to perform their task in an optimum manner. The problem in our current-day environment is there are not many wild beasts to kill or foods to be gathered. For some men, changing environment while brain structure remains may present an identity crisis.

One such environment that may be burdensome to men is a college setting. Conducting the following study in a college setting may be an indication that males have problems in certain situations. For the stereotypical male, remembering life events can be difficult. Men and women

report similar moods and have similar word usage to describe life events, but men do not report as many or as detailed life events as women (Seidlitz & Diener, 1998) in a memory task. Seidlitz et al. questioned 132 students (69 men and 63 women) throughout a semester as to their best and worst events of the day along with personality and well-being questionnaires. The women in the study noted events more detailed than the men did. When asked to recall these events, the men could not remember as many details as the women did. Women also recalled events that were more positive than the men. Seidlitz et al. suggests the men encode differently than the women and thus the reduced recall rate for men. This study assumes that the men and women participants similarly value the daily details of the student's lives. The women in the study indicated more events that are positive than the men. Informing men that they do not encode as well as women may establish a predetermined mindset for some men. This mindset may influence their sexual identity in thinking the stereotypical reports that sex is all they can remember to think. Moreover, this author posits, the reduced positive response in this college setting may be more linked to situational rejection from women and that the inability to encode details is an internal global attempt to reduce feelings of rejection.

Reducing this identity crisis of gender stereotyping through education (even though there are genuine differences) is a difficult goal for some researchers (Smith, 2005). Smith presents herself as an "educational researcher, schooled in Women's Studies, [with] a baby" (p. 49). She recorded her prebirth talk with her unborn child before she knew the gender and then after she knew. Much to her surprise, the way she communicated with her baby boy was greatly different after she knew the gender. She went from rubbing her belly to tapping her stomach. She reports the baby boy does not need nurturing. He should be strong and independent. She talks to him in a low voice. She also starts to use "proper" words such as stomach and not belly. Smith has begun

the stereotypical male socialization of her baby boy even though she has strong opposition to those that do. She reports,

if even the most conscious and critical mothers do not escape this endemic, gender socializing process, and are bound, through generations of indoctrination, to pass it on, what hope do we have as a society to escape such heavily engulfed stereotypes. (p. 52)

What message is this sending to the already “stereotyped” male? This is not a message of acceptance and nurturing. Smith is inferring that indoctrinating males to have a strong sex-stereotype is wrong. This drive to change male stereotyping may negatively influence the encoding of the male sexual identity and create confusion for the male. Teaching boys to be strong and independent may conflict with women’s expectations for a nurturing and sensitive adult male; yet, mothers do it everyday.

Boys do show an increase in sensitivity than girls to prenatal chemical exposure. In utero exposure to Polychlorinated biphenyls (PCBs), dibenzofurans (PCDFs) and other polysubstance such as drugs, alcohol and tobacco has a greater impact on boys than they do on girls (Moe & Slinning, 2001; Hsu et al., 2005). These substances disrupt the endocrine functions of males. In the case of drugs, alcohol and tobacco, the boys comprised the majority of the developmentally delayed (Moe & Slinning). Delayed developmentally and reared by an addict mother compounds the issue for the boy. Moe et al. suggest the boys can regain lost development if placed in a nurturing environment. This author questions how many of these boys are remaining with their addict mothers without a father to learn about their sexual identity. Sexual identity encoding for these boys affected by their sensitivity to substances may present several extreme challenges. In addition, Fink et al. (2003) report that male sexual dimorphism can be “determined as early as

the 14th week of fetal life” (p.728) by examining the ratio of the second digit to the fourth digit. This author questions the mother’s response to the baby if there is a detection of dimorphism.

For the male who faces the above challenges, sex stereotyping may be inhibited. For the male that is strongly sex-stereotyped, categorizing the masculine and feminine assists and confounds encoding of certain memories (Cherney, 2005; D. Frable & Bem, 1985; Mills & Tyrrell, 1983). Cherney suggests males have a stronger opposition to female toys than females have towards male toys. This implies that males have a stronger identity with their gender than females do. The sexual or gender identity for the male seems to be highly protected in the sex-stereotyped males. In addition, sex stereotyped males confused the identity of females with other females more than males with other males (Frable et al.). Mills et al. suggest that males tend to view occupations with not much gender specificity as women may unless presenting a clearly feminine occupation first. When men are initiated into the gender specific feminine to masculine schema, they clearly delineate and encode the dyadic schema. While the preceding studies did not find any significant indications of racial identity, Golby, Gabrieli, Chiao, and Eberhardt (2001) found a significant fusiform region response, as measured with a functional MRI, to same race facial presentations. Golby et al. suggest this increase in activity results in a better same race identity than from a different race. This author suggest the strongly sex-stereotyped male may feel more comfortable with his own gender and race while others typed as feminine or androgynous may be able to form a less stereotypical sexual identity.

Even if the sex stereotypical male is comfortable with his sexual identity through out life, aging with a decrease in testosterone or circulatory issues may cause the male to present for erectile dysfunction (ED) treatment. However, many men do not seek treatment for ED (DiMeo, 2006). Some men do not feel comfortable in discussing ED. Confidence is an important construct

for men. Scales have been developed to measure confidence in men with ED (Cappelleri et al., 2004). Modern medicine can usually give a male an erection. Even though, Althof (2002) reports that men do not usually seek or comply with medical interventions for ED. Althof suggest other parameters need to be addressed such as expectations, partner's willingness, and the non-sexual intimate relationship dynamics. Having to retain an erection presents a different dilemma to the male as opposed to the female. Though female anatomy does change with arousal, it is not necessary for intercourse. Plainly said, women do not have to perform physically for intercourse to happen. Performance expectations can shame a man, which may affect his encoding of his sexual identity. Watching television for a few hours, one will probably view an advertisement for an ED medication. The infamous "Bob" commercial shows a man that woman love, simply because of an implied enlarged penis and his "regained confidence" while portraying other men as shamed. Men's bodies are expected to "do" things while women's bodies are expected to "be" something—sexy.

Interrelational Influences

Interrelational expectations and desires can influence encoding of male sexual identity. Interrelational influences such as marital equity (McCarthy & Bodnar, 2005) and privilege (Rampage, 2002) can challenge some males encoding of stereotypical sexual identity. In addition, women can utilize manipulation and physical force to obtain sex from males (Anderson, Kontos, Tanigoshi, & Struckman-Johnson, 2005). Males tend to maintain a mate-search goal (Maner et al., 2005) that may be influenced by constructs presented by Anderson et al. Moreover, male and female children can be influenced to forget certain events that may have an influence on their sexual identity (Williams, Wright, & Feeman, 2002)

McCarthy and Bodnar (2005) report, “The mandate that a ‘real man has sex with any woman, at any time, in any situation’ is a powerful, pervasive cultural myth. For young men, sex is about his penis, intercourse and ejaculation” (p. 225). McCarthy et al. suggests that a marriage where there is more equity even with gender differences can be more satisfying for both partners. For some males who are sex-stereotypical, considering equality may be threatening to their sexual identity. This author suggests that challenging the male demand for sexual frequency and dominance, may initiate a sexual identity crisis. Rampage (2002) discusses the influence of power struggles between partners. To obtain fulfillment, Rampage suggests that male gender roles need not be a power position and that respect must enter into couple’s relationship. This author posits that a stereotypical male may read this and feel that all male sexual identity is harmful. Taking on the blame for this harm can turn into shame and further inhibit a male to reconsider his encoded sexual identity.

Interestingly, Rampage (2002) reports that cultural influences determine gender identity while sexual identity is biologically determined. She does not expound further on this concept or defend its premise. For the purpose of this paper, the two terms are interchangeable. This author understands that sexual identity can be reduced to partner sex preference while gender identity is more personality and role driven. These two concepts affect each other and thus will be used interchangeably in this paper.

Non-traditional females may influence males’ sexual identity. Anderson et al. (2005) suggests that woman who showed past sexual abuse “used no sexual strategies” (p. 339) to get sex from men. In addition, women who had sexual intercourse at an earlier age tend to use more physical force strategies to obtain sex. One might think that sexually abused women might have had intercourse earlier than most women might and that the subset of those woman who use

physical force are largely made up of past abuse participants. The type of woman that confronts a man for sex may influence male sexual identity encoding. If an older girl who uses physical force to obtain sex approaches a young boy, how would the young boy interpret her behavior and internalize it? This topic needs further research.

Maner et al. (2005) suggest that males seek out pleasant attractive mates. While white males view black males as angry, white males do not have the same perception of black women. As with the previous example of a woman using physical force for sex, it is logical to imagine the male not having a mate attraction for that aggressive female. If the male was young, sexual encoding may be one of submissive and suppressed yet angry. This author has seen several clinical examples of this phenomenon.

To further the confusion for male sexual identity in a young boy, Williams et al. (2002) presented a series of task for children to remember (cooking). The day after the presentation, the children watched a video tape of the class with one piece of the event missing. The information on the video tape is “post-event information (PEI)” (Williams et al., p .651). When presented with one piece of information missing, the child will not remember the information excluded. The implication is that an abuser can surround the abuse with pleasant experience and always refer to them and not the abuse. The child may forget the context of the abuse; however, this author questions if the affect of the abuse is also forgotten. These feelings may encode anger and sexual identity portrayed as aggressive behavior just as the woman Anderson et al. (2005) presents.

Intrapersonal Influences

While this paper does not expound on homosexual identity, for those readers interested in a more in depth discussion of such might find Yarhouse (2001) an interesting read. Yarhouse

lists several theories of the homosexual identity construct. It is not the purpose of this paper to give specific identity labels, but to explain how labels are influenced.

This last section discusses intrapersonal influences. Presented are Stories from boyhood (Pattman, Frosh, & Phoenix, 2005) and a male athlete (Pattman et al., 2005). As with erectile dysfunction discussed in a previous section, premature ejaculation (PE) can also have an influence on male sexual identity (Symonds, Roblin, Hart, & Althof, 2003). Mentioning PE in this section is because it has no approved medical intervention (Symond et al.). Finally, men who assault their wives may reveal some influences of sexual identity encoding (Dutton, 1986).

Papathomas and Lavallee (2006) suggest that life history is becoming a legitimate research method. Asking a person to reveal aspects of ones life helps tell the human story of research. One of the researchers in this article is actually the subject. He is telling his story of being an athlete and having an eating disorder and how it has influenced his life. Mike, the subject, was reared in a stable supportive environment free from trauma. Mike began to play football (soccer) and succeeded in doing such. He was a sought after player which may have boosted his self worth. This self worth was challenged when he started attending another club and was no longer the best player. His identity was completely wrapped up in his ability to play football. He was moving from a child's game to a more professional arena. He had to think about being fit and concerned about his diet. Becoming a perfectionist, Mike began controlling his diet. He became known as the guy with the perfect diet. His identity was becoming ensnared with being lean and performing at peak levels. During this time, Mike's teachers were telling him and his parents that he was not a very bright boy and he would not amount to much of anything. This belief further entrenched his identity in football. Mike soon became enthusiastic about school when he moved to a new school. He applied himself in his studies as much as he did in his

football. At the age of 17 years old, Mike met the criteria for bulimia nervosa. This pattern continued in Mike until he became 22 years old. He received treatment and began a healing process. Mike reports that it was only after an injury where he had to take a break from football that he began to realize the full impact of his identity wrapped in the game of football. Elite sports can influence the identity of males even to the extent of forming an eating disorder.

Another such team of researchers (Pattman et al., 2005) desired to identify how boyhood was experienced in a group of boys attending schools in London. One of the researchers preference the abstract with, "When Rob was about 14-years-old, at an all male boarding school, he was glad that he did not have a tiny penis like another boy who was called 'girl'" (p. 555). Rob was an athlete. His sexual identity was being formed as a doer. Pattman et al. after interviewing the boys, saw a different aspect of the stereotypical boy. The boys interviewed were engaging and not unintelligent hyperactive children that require "hard sports" to help them deal with life. These researchers identified that boys, when in groups, tend to play off one another to create a hierarchy of toughness. Pattman et al. suggest that helping boys fulfill their very real feminine side that they will be able to gain a better self-identity.

If boys are not assisted in developing such identities, the opposite may take hold. Dutton (1986) reports that some husbands who assault their wives attribute the abuse to cultural norms. This is an amazing finding while not shocking. One third of the men attributed the abuse to the actions of the wife. Presenting the abusive husband with incident reports from any one other than the wife may help the abuser take responsibility. In addition, cross-cultural reference may enlighten the abuser as to the cultural norms that do not abuse wives.

Summary

Encoding of male sexual identity is a complicated subject. There are biopsychological aspects as well as social aspects of the process. In addition, interpersonal relationship can either deepen the negative stereotype or encourage a deeper level of understanding between the sexes. Even mother's influence influences the baby in utero. If our society is going to accept males in an understanding male role, they must be given the opportunity to be boys and learn to identify the feminine side of themselves and to express it.

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