

The “War” *For* Boys: Hearing “Real Boys” Voices, Healing Their Pain

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Boys are in a crisis—boys in treatment and boys next door. Practitioners need to know more about research that helps to elucidate this crisis of boyhood as well as new clinical insights, derived from a modern rethinking of boyhood. The results of the Listening to Boys’ Voices project (see W. S. Pollack, 1999) are reviewed as a springboard for pragmatic suggestions for changes in clinical attitudes toward, and treatment of, boys and young men. Practitioners are also urged to help society stem the tide of pain that today’s boys must face in the midst of changing attitudes toward the normative journey toward masculinity.

Keywords: boys, male adolescents, boy code, real boys, male or gender development

Traditional psychological models of strength and healthy development for boys have emphasized the development of autonomy, separation, and individualistic coping styles, especially enforcing premature separation from nurture and an early silencing of boys’ genuine expression of an interdependent, humanly vulnerable self or *voice*—often beginning as early as ages 3–5. Representing the values of the dominant Caucasian Euro-American culture, this creates a “boy code” (Pollack, 1998, 2000) that shames boys toward extremes of self-containment, toughness, and separation. It is a pervasive socialization system, which too often permeates traditional psychological assessments and treatments of boys. In turn, it shames boys away from their emotional vulnerability and basic need for human connection, just when they need it most. This pervasive male-based socialization code creates what I’ve referred to as *gender straitjacketing* (Pollack, 1998, 2000). Through an all too well-known series of admonitions to boys (especially as they enter into organized settings of growth such as schools and sports at approximately ages 4 or 5)—such as “Stand on your own two feet”; “Be a little man”; and “Don’t be a . . . mamma’s boy, a sissy, a wimp, or a fag!”—we diminish their genuine emotional voices. By these standards, therefore, too many boys self-critically judge themselves (and are judged) as immature, undeveloped, or deficient in intellectual–emotional skills and as failing the impossible test of masculinity. Boys are shamed away from exhibiting their species’ normative characteristics of vulnerability and thereby cut off from healthy relations with each other and a full range of emotions within their own selves.

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This article briefly shares aspects of an empirical research study on boys’ lives and the recording of their own voices (Pollack, 1998, 1999, 2000). In particular, it attempts to bring to clinical consciousness the struggles and pain everyday boys next door are struggling with, often in silence, because of the boy code. Indeed, it seems present socialization systems are dangerous to boys’ physical and mental health and to those around them, leading to increased school failure, depression, suicide, lonely isolation, and, in extremis, violence. Visions and programs for change—clinical, cultural, and individual—are suggested.

Boys Are in Crisis

Boys today, indeed, are in serious trouble, including many who seem “normal” and to be doing just fine. Confused by society’s mixed messages about what’s expected of them as boys, and later as men, and pushed prematurely to separate from the bonded and connected love their “sisters” rely on for psychological sustenance, many feel a sadness and disconnection they cannot even name (Pollack, 1999). Research (Levant, 2001; Pollack, 1998, 1999) has begun to show that boys are faring less well in school than they did in the past and in comparison to girls, that many boys have remarkably fragile self-esteem, and that the rates of both depression and suicide in boys are rapidly on the rise (see also Poe, 2004).

The boys whom psychologists treat, much like the girls whom psychologists treat, frequently experience intense sadness, vulnerability, and a troubling sense of isolation, disconnection, and despair. Although many boys are in deep emotional pain, their suffering often remains difficult to detect, sometimes invisible. On the outside a boy may seem cheerful, playful, and resilient. But on the inside he may actually feel lonely, afraid, and desperate. Because of the pressure society places on boys to act tough, follow a strict code of masculinity, and hide their emotions at all costs, it is often terribly hard to notice when boys are actually fairing poorly at school, when their friendships are not working out, and when they’re feeling depressed or even suicidal. Clinicians and parents are often fooled by the cheerfulness, the rambunctiousness, the ruggedness boys project on the outside.

Society has a unique set of expectations placed on boys that calls on them to brave life’s ups and downs independently (auton-

omously), stoically cover their pain, and, above all, avoid doing anything that might shame either themselves or their parents. These rigid gender guidelines, or gender straitjackets, push many boys to repress their yearnings for love and connection and to build an invisible, impenetrable wall of toughness around themselves—a “cool pose” (Majors & Billson, 1992) hidden by an emotional “mask” of masculine bravado or invulnerability, leaving them to experience a gamut of lonely painful problems that range from academic failure to drug abuse, from struggles with friends to clinical depression, and from attention deficit disorder to suicide and murder. Behind their masks of pseudo-invulnerability and the drama of action, it is often hard to hear boys’ stifled but genuine voices of pain and struggle, their yearning for connection. Indeed, the same kind of shame that silences girls from expressing their voice as adolescents takes a toll on boys at a much earlier age.

Boys Are Failing

A new “gender gap”—with boys at the bottom of the heap—is academic, attitudinal, and emotional. When eighth-grade students are asked about their futures, girls are twice as likely as boys to aspire to a career in management, the professions, or business. Boys experience more difficulty adjusting to school, are five times more likely to suffer from hyperactivity, and account for 71% of all school suspensions (see Pollack, 1998). In fact, while girls have been making great strides toward closing the gap in math and science, boys have been severely lagging behind in the arenas of reading and writing—skills essential in the capacity to express oneself without having to fall victim to endless bouts of action. Their reading scores lag behind girls’ scores throughout elementary and high school, and they are less likely to graduate high school or go on to college or graduate school programs than girls are, at the present time. Indeed, from the ages of 15 to 24, young men are four times more likely to be the victim of a homicide than are young women and five times more likely to kill themselves (to commit suicide). African American male youths are at such risk that some have suggested they are an “endangered species” (Centers for Disease Control, 2004; Conlin, 2003; National Institutes of Health, 2003; Poe, 2004; Pollack, 1998).

Given the profound insights being uncovered about the social and emotional struggles of today’s girls, it is striking how scant research on boys has been over the last several decades. American society has not yet sufficiently studied the experience of boys and young men and thus has come to misunderstand how they truly feel and who they really are. In particular, we have developed a set of outdated, inaccurate assumptions; myths have developed about the range of boys’ emotional experience (which we tend to see as far more limited than it actually is) and the basic capacity boys have to be loving and empathic.

In much of current culture boys (and men) continue to be portrayed as psychologically unaware, emotionally inept, physically dangerous creatures. Yet clinical experiences (Pollack, 1998, 1999, 2000; see also Levant, 2001) have shown a more complex picture. Far from fulfilling the stereotype of the tough, unfeeling, toxic male, the boys—in a “male friendly” treatment—often voiced profound feelings of sadness and fear, were concerned about the quality of their relationships, and expressed the importance of having good male and female friends. Boys are far more emotional and empathic than our clinical stereotypes would lead most practitioners to believe.

Listening to Boys’ Voices: Initial Study

The Listening to Boys’ Voices Study, conducted with the collaboration of colleagues from the Harvard Medical School and the McLean Hospital Centers for Men and Young Men is an ongoing research program that formally began in 1996. In addition to collecting clinical stories involving boys, young men, and their parents gathered from my own and my colleagues’ years of practice, Phase I of the study (Pollack, 1999) conducted an intensive phase of empirical testing and one-on-one interviews with boys that have been reported more completely elsewhere (Pollack, 1998, 1999, 2000). For this phase of the study, over 200 boys between the ages of 12 and 18 (Grades 7–12) were recruited. All the boys who participated in the study lived in the Northeastern United States and were primarily middle-class White Euro-Americans. Some boys (approximately 10%) were of working-class backgrounds, and another subgroup (10%) comprised African American, Hispanic, and Asian American subjects.

Of the 200 potential subjects involved in the first 2-year phase of this study, 175 boys agreed to undergo (and 150 completely finished) a 2-hr quantitative battery of confidential tests that measured the following:

1. Self-esteem (the Coopersmith Inventory; Coopersmith, 1981).
2. Traditional views of masculinity (Pleck’s Male Role Attitude Scale—modified for young men and boys; Pleck, Sonenestein, & Ku, 1993; see also Pollack, 1998, 1999).
3. Egalitarian attitudes toward boys and girls, men, and women (King & King’s, 1993, Sex-Role Egalitarianism Scale [SRES]).
4. Inner attitudes about gender roles (a complete-the-sentence questionnaire developed specifically for this study to generate rapid responses to probative questions about boyhood and gender dilemmas in such arenas as sports, relationships, gender roles, and sex).
5. Unconscious attitudes and feelings about other people, self, and relationships (a modified Thematic Apperception Test [TAT]—see Morgan & Murray, 1938—or picture-story exercise—see Pollack, 1998, 1999): This consisted of a series of pen and ink drawings used as stimuli for boys to write stories about the central figures in the drawings, expressing their fantasies about the protagonists’ behaviors, feelings, and relationships. The specific drawings used in this research unit are described more particularly later in this report.
6. Depression and sad feelings (Beck Depression Inventory; Beck, Ward, Mendelsohn, & Erbaugh, 1961): This is one of the most simple but widely utilized batteries to pick up on depression and sad feelings. Although it is used for diagnosis in a clinical population, in our series it was meant primarily to pick up on the experience of sad thoughts and feelings among the boys in the study.

In addition to completing the test battery, boys in the study also participated in a semistructured one-to-one, up to 2-hr private

interview designed to evoke their genuine voices—the true feelings and thoughts boys have that they might not usually feel safe sharing with others. In these interviews, we attempted to cover the following areas:

1. Extent of emotional connection to (or disconnection from) mother and father, relationship with larger family, friendships with girls and other boys, use of talking to communicate emotion, and use of action (including sports and play) to release emotions.
2. How expressing emotions affects boys' self-esteem; romantic relationships; interpersonal conflicts; emotional pain; masculinity and the fear of being shamed by peers; teasing, razing, and bullying; and sexuality and sexual orientation.
3. Advice they would give to younger boys on maintaining their integrity and identity.
4. Handling complex feelings such as shame, vulnerability, anger, and sadness.
5. The role of sports in their lives and the mentors and heroes (male or female) in their life and why they look up to these individuals.

At the end of each interview, we also allotted time for open-ended discussion between the interviewer and the individual boy. (For a more complete report of the research aspects, see Pollack, 1998, 1999.)

On the basis of academic study and clinical experience pertaining to boys, men, and masculinity, we began our work on this study with several hypotheses about what we might discover about boys and their inner emotional experience. We hypothesized, first, that the boys in this study would manifest subconscious feelings of emotional pain associated with what I've referred to as the "trauma of premature separation" (Pollack, 1995, 1998; see also Levant & Pollack, 1995). In clinical work with men, we have learned that many of the psychological and emotional issues that men face as adults are linked, in one way or another, to the way in which society traumatically pushes boys "out on their own" by removing them from the succor and support of mother (and father) at too early an age (often at the time they enter school, between the ages of 4 and 6) and by heaping shame on boys if they attempt to reunite with their parents. Accordingly, we anticipated that in this study we would uncover boys' unconscious feelings of loneliness and alienation related to this trauma of premature separation.

Second, we hypothesized that although the boys' outward expressions of self-esteem would be in the normal range, consistent with past research conducted with children, measures of underlying covert insecurity would be found among the sample and that correlations might occur between such masked insecurity and the depression scores registered by the boys.

Third, given the rigid social code of masculinity and the system of socialization still used to bring up young boys whereby they are teased and mistreated when they fail to conform to this code, we expected that the boys would express ambivalence about fulfilling masculine roles and resistance to "becoming a man." In particular, because society has changed so radically for girls and women—thus putting pressure on boys to become open and vulnerable while

encouraging them to meet traditional macho standards of being a "real boy"—we expected the boys to express confusion about what behaviors are considered "masculine" today. We thought that much of this could be found only by tapping into the boys' deeper psychological processes. Accordingly, a two-pronged empirical approach usually not attempted in gender studies was used, simultaneously giving the boys two different measures about masculinity (one traditional and one egalitarian). We also collected related data through in-depth interviews and psychological tests such as the picture-story exercise.

Finally, we hypothesized that boys would show specific patterns of resistance to society's rules about male behavior and masculinity. Specifically, we hypothesized that within the privacy of an intimate interview, the boys would reveal themselves to be just as relationship and friendship oriented, loving, and empathic as girls but that they would manifest these attributes through different behavioral mechanisms and approaches.

The full results of this study of "normal" everyday boys are presented elsewhere (Pollack, 1999). It is reasonable, however, to frame the results pragmatically for use by professional psychologists, by commenting that the results showed that although boys on the surface appear to be doing fine, beneath the outward bravado—what I have call the "mask of masculinity"—many of the boys we often believe from their outer demeanor to be doing just fine are, indeed, in developmental and emotional crisis. As I discuss in greater detail below, this initial phase of the study reflected the following:

1. Boys feel deeply conflicted about what is expected of them as males in American society (i.e., about what behaviors and attitudes reflect healthy masculinity).
2. As they grow older, the inner conflict boys feel about masculinity is exacerbated, and they feel compelled to hide their confusion by acting more self-confident than they truly feel (a sense of false self-esteem, leading to increased sadness).
3. Boys have grave concerns about growing up to be men: They overwhelmingly see manhood as filled with unrewarding work, isolation from friends and family, unhappiness, and disappointment.
4. Despite the outward appearance they often give of being cheerful and contented, many boys of all ages feel deep feelings of loneliness and alienation.

Discussion

Although hundreds of analyzed responses and their categorizations are reported in the original research (see Pollack, 1998, 1999), for purposes of policy and clinical intervention, listen particularly to the voice of Hamilton in regard to what a boy's future as a male adult is looming in response to one card of the TAT:

This guy is sick of working, and he doesn't want to deal with his job or family anymore. He is thinking about what his life would be like if he hadn't married and how much it sucks to work all the time. He wishes he could leave and be by himself and have fun. But he'll work for 25 more years, hate it and then retire. The kids will move out and he'll realize his life was dull and boring. He'll be old then and what will he have to show for all this? Not much.

A negligible number (only 15%) of the boys projected positive, forward-looking sentiment regarding their futures as men. Also, scores on the Beck Depression Inventory were negatively corre-

lated with Coopersmith Inventory scores; more depression was associated with less positive self-esteem in our subjects. An increased depression score was also shown in boys who, on the basis of their response to questions included in the Pleck's Male Role Attitude Scale, appeared to feel pressured to fulfill traditional roles relating to masculinity and male sexuality. (See Pollack, 1999, for full data set and correlations.)

These findings about boys are unusual in the literature of research psychology of "normal" samples. I believe the boys in this study expressed painful feelings so intensely and pervasively because we used psychological inventories specifically designed to measure subconscious emotional states—states that boys may avoid showing in social contexts. If questioned directly, especially in the presence of their peers, boys will tend not to express the feelings of sadness, fear, and isolation elicited in this study.

Because boys feel ashamed of the painful feelings that surround separation from their parents and are often teased or mistreated if they openly express such dependency and vulnerability, many of them feel pressured to cover this shame and replace it with false displays of confidence and bravado. Indeed, the second hypothesis—that boys in this study might show covert expressions of low self-esteem and possibly achieve self-esteem scores correlated with depression—was also corroborated. Although, as expected, the boys did not show overall low scores on self-esteem, we found correlations not only between relatively low self-esteem scores and increased incidence of depression (as described above) but also between age and "false" self-esteem (bravado in the face of actually diminished genuine self-view as measured on the Coopersmith "Lie" Scale), with the degree of false-positive responses increasing significantly in older boys.

Therefore, as boys become older (and closer to manhood), they feel increasing confusion about who they are, whether they are sufficiently masculine, and how well liked they are by their peers. Because these feelings increase in intensity and frequency during adolescence, older boys are more likely to project a personality that appears to be cheerful, confident, and forward looking when, in reality, they may be feeling unhappy, uncertain, and afraid about the future. It is not that boys suffer decreasing self-esteem over time. Rather, it seems that the older they become, the more pressured they feel to hide their feelings of insecurity and vulnerability. Their mask hardens. Likewise, we also found that among older boys, the subgroup that endorses the idea that boys will "lose respect" if they talk about their problems significantly increases in size.

At the heart of boys' fears is their concern over masculinity. Our hypothesis—that the boys in this study would express ambivalence about becoming men and about society's expectations of them as males—was also affirmed in several portions of the research. By taking the research step of administering both the SRES and Pleck's Male Role Attitude Scale, we were able to show that many boys simultaneously endorse both egalitarian and traditional notions about men and masculinity. Today's boys, in other words, are being socialized not only to conform to conventional rules about masculinity and maleness but also to support "new" rules that enforce notions of equality between the sexes. I term this dual set of expectations as the *double standard of masculinity* because many of the boys in this study seemed confused about how to reconcile the conflicts inherent in these competing sets of rules and expectations. Indeed, the boys' scores on the two contrasting scales (on the SRES and Pleck scale) increased as they got older,

and as discussed above, correlations were shown between those boys who frequently endorsed traditional macho expectations about male sexuality on the Pleck scale and those with higher depression scores (and therefore with lower self-esteem).

Implications for Practitioners

Our data (Pollack, 1999) suggest that as boys become older, they feel increasing social pressures pertaining to their masculinity. Specifically, just as they feel increasing pressure to acknowledge the social parity of girls and women, they also feel they must close off their emotions, stay silent, act tough and cool, and fulfill many other requirements of traditional masculinity. As the pressure and confusion escalate, boys begin to wonder about their true selves, fear the disapproval of others, and feel they must distort what they say and do in order to be perceived as strong, confident, and masculine. They also seem to grow increasingly anxious and concerned about what the future holds in store for them. The great majority of them associate the prospect of becoming a man with negative outcomes—being overworked, lonely, depressed, and/or unloved. Sadly, rather than expressing their fears and unhappiness directly, most boys appear to harden themselves against these feelings. It is this hardening or "toughening up" that, I believe, leads to the increased number of older boys who suffer increased depression and feel they need to lie about their self-esteem.

What this study did not measure directly, and is an important next step in our research, is the extent to which parents, teachers, and psychologists are aware of the unhappiness, fears, and anxieties of so-called "normal" boys. Because of the way boys harden themselves and cover up feelings of pain and susceptibility and because they may actually lie about how they are feeling and how they perceive themselves, many clinicians may fail to hear these boys' genuine voices and ascertain the full scope of their true feelings and thoughts. Much of the pain they may be feeling may go dangerously unnoticed, not only by society as a whole but also by clinicians inevitably intertwined with these cultural scotomas about "normal" boys.

Boys must not give voice to their pain. They may say, as did Cam, a 16-year-old boy whose girlfriend didn't love him anymore,

Cam: You just keep it inside, don't tell anybody about it, feel sick inside, and then maybe after a while it just sort of goes away.

Interviewer: It must feel like such a terrible burden though, being so alone with it.

Cam: Yep, but that's what a guy's got to do, don't he?

Or as Jason explained,

If something happens to you, you have to say, "Yeah, no big deal," even when you're really hurting. When it's a tragedy—like my friend's father died—you can go up to a guy and give him a hug. But if it's . . . [anything less] . . . you have to punch things and brush it off. I've punched so many lockers in my life, it's not even funny. When I get home, I'll cry about it.

Although we cannot eliminate the pain from boyhood or from adolescence, we can lessen it and make it more tolerable by giving boys in consulting rooms, school clinics, and so forth the chance to voice it without being shamed. In the next phases of this research program, we will attempt an intervention phase of this study to

measure what happens to boys' psychological well-being when they are given the opportunity to connect with an empathic other, such as a friend, parent, teacher, or psychologist in "shame-free zones," with a model of what our research has dubbed *action talk* (Fein et al., 2002; Pollack, 1998, 2000, 2001). It is likely from other research in this arena (Resnick et al., 1997) that this chance for connection and for honest emotional expression will lead boys to feel greater self-confidence, a clear sense of self, diminished fear, and greater overall happiness, optimism, and personal success.

The private one-on-one interviews conducted with boys in this study provided initial data points consistent with this theory. By removing boys from the crucible of peer pressure; speaking to them openly and thoughtfully; and, above all, listening to them in a patient, nonjudgmental way, we were able to elicit voices reflecting the gentle, caring, loving sides of our study subjects. The boys spoke passionately about the importance of their relationships with girls and with other boys, about how much they cared about maintaining these friendships, and about the critical role their parents, grandparents, and, in some cases, older siblings played in mentoring them toward adulthood.

Curtis, a 16-year-old raised almost exclusively by his divorced mother, named her as his foremost model and inspiration:

My mom is everything to me. She's sacrificed so much so that I can go to good schools. She got me into art, which is what keeps me going, and what I hope will be my profession someday. She's opened a lot of doors for me. All the opportunities I have now are because of her.

We found that, underneath the mask of masculinity—underneath the bragging, braggadocio, shame hardening, and puffed up self-confidence—were *relational* boys, boys who worried a lot about the quality of their relationships with friends and families and who were eminently sensitive to the emotional needs of others. We concluded that if we show our empathy to boys, boys will return it to us in abundance.

To help young men become more empathic, we must, in turn, become more empathic to young men. In psychotherapy we see many boys who are frightened about some aspect of their developing life that they cannot master. These boys are most afraid of the very fact that they are afraid. They have been brought up to believe that a man must not seek help at a time when he needs it most. So they may deny their dependence on the therapy or the therapist. If pushed prematurely to face the truth, they will resort to more drastic protection of their fragile self, their "independence"—they will flee from treatment or devalue the therapy or the therapist. If, however, the therapist remains calm and does not criticize in return and if he or she recognizes and supports the boy or male adolescent's need to save face when receiving help, then internal changes of great consequence may occur. We must be sensitive to young men's shame and not further shame them in psychotherapy (see Pollack & Levant, 1998).

Winnicott (1974) wrote that one should never ask, "Did you conceive of this or was it presented to you from without?" If we can sustain the process of change without putting demands on boys before they can accept them, transformation can occur.

With many young men I have treated, I found it necessary to modify depth psychotherapy—not so much in its frequency, duration, or self-reflective model, but rather in the arena of supporting the patient's need to believe, for long periods of time and

without challenge to his denial, that both the therapy and therapist are almost unimportant to him (Pollack, 2003).

Young men are not true lone rangers or disconnected independent beings. Like the rest of the species, they yearn for connection but remain frightened of the revived sense of abandonment, depression, and traumatic premature separation such bonding may rekindle. Nowhere is this male conundrum more salient than in both the real and transference relationship, which forms the heart of in-depth psychotherapy with young men and boys. Recognized for its true source, such pain can become the basis of lasting personal change (even at times the beginning of the lifting of a covert depression). But misapprehended in a nonempathic fashion as mere rage, sexual enactment, or antisocial tendencies, and the therapy and therapist may run the risk of retraumatizing an already hurt boy because his mask of false bravado hoodwinks them.

While maintaining appropriate boundaries, clinicians must reach out to the young men and boys under their care and, without making them admit their frailties, lend support, creating a broader sense of what it means to become a man or, for that matter, a person. And given the great suffering of male adolescents and the pain it causes them and their loved ones, such actions must be taken swiftly.

In our study, we examined the sense of pain, loneliness, and alienation experienced in "normal" populations of relatively successful, psychologically "healthy" middle-class boys. We uncovered the silent crisis of the boy next door. But these findings also carry massive implications for what appears to be a larger national crisis, one that can occasion serious violence (both toward self and others) in less well-adjusted or less privileged groups of young men and boys. In this study, we have uncovered the tip of a deeper and more frightening iceberg, one that might properly be characterized as including the recent tragic deaths in Jonesboro, Arkansas; Pearl, Mississippi; Springfield, Oregon; and Littleton (Columbine), Colorado. What society has written off as normal boyhood disconnection is in fact indicative of a deeper aloneness and disaffection that boys experience as they move toward adolescence and manhood. It can lead not only to painful feelings but also to injurious action against self and others.

Arguably, it may still be a man's world in relation to status and power, but it has never been, and certainly is not now, a boy's world. What can we do to begin to make the requisite changes necessary to make it possible for America's sons to grow into healthy and happy men?

What is heartening in this study's initial findings is how the sample of "healthier" boys it examined shows that they are beginning to reject and rebel against outdated rules of masculinity and manhood. Even as society continues to inculcate a macho model of disconnected male autonomy, the boys in this study showed that they wish to maintain an emotional connection with loved ones. When given the opportunity, these boys spoke about the importance of their family relationships, their friendships with other boys, and their close platonic relationships with girls. These are the loving and empathic qualities inherent in boys' inner lives that often go unnoticed or remain hidden, even in some clinical settings.

We're getting ready for a second gender revolution. The boys' voices we've heard seem to be telling us, some directly and some more subtly, "I want out of the old boy code," "I'm sick of hiding important parts of who I really am," and "I want to be able to be myself."

Today it would be virtually unheard of in treatment to require a girl to stick to old rules about being a “good little girl,” refrain from showing qualities historically celebrated as masculine such as assertiveness or independence, or restrict herself to expressing only half of the person she genuinely is. Boys are finally catching on to that, in a very similar way. It is simply no longer acceptable for boys to have to follow the old boy code rules, stuff away feelings and behaviors once labeled *feminine*, and suppress half of themselves to avoid being shamed.

The time has come for clinicians to allow boys to craft this new, far more flexible code of manhood. As tough, cool, and independent as they may sometimes seem, boys yearn desperately for friendships and relationships. Despite the surface bragging and bravado, boys, just like most girls and women, may feel devastated when these friendships or relationships are suffering or fail. They too can become sad, frightened, and lonely; suffer low self-esteem; and tumble toward serious depression, requiring a new model of therapeutic intervention empathic to these needs.

Unless they are conditioned not to be, boys are eminently loving and caring human beings. Today’s real boy sincerely wants to help others. He’s sensitive to what other people feel and he does not want to hurt them. He takes action not only because he knows that it’s right or just but also because he feels genuine empathy. But as we’ve seen, if this empathy is to stay alive, a boy must feel practitioners will reciprocate it. If clinicians withhold love and affection, a boy feels ashamed and then hardens himself. If practitioners don’t stay active in his emotional life and listen to his feelings well, he comes to believe that his emotions are not welcomed. In summary, if we don’t give him our empathy, he won’t give empathy to us. If we don’t abandon a separation model of mental health, he will remain walled off.

Real boys need places to go and people to be with who allow them to show *all* of their emotions, including their most intense feelings of sadness, disappointment, and fear. Real boys need to hear from clinicians that these feelings are normal, good, and masculine. They need to know that there really isn’t any feeling, activity, or behavior that is forbidden to them as boys (other than those that could end up seriously hurting them or somebody else). They need to be taught connection rather than pseudo-independence or disconnection is the hallmark of mental health. They need to be treated by the clinicians who have taken up the responsibility for their care with the same kind of caring and affection we hope they’ll be able to express when they become men in the next century. They need to be convinced, above all, that both their strengths and their vulnerabilities are good, that all sides of them will be celebrated, and that we’ll genuinely accept them for being just the boys they really are.

In this empirically based, new practitioner approach to boys, I believe that both practitioners and boys may be guided by the ancient Biblical sage whose wisdom frames this article, urging for a balance between support for the self and connection to the significant-therapeutic other and between classic independence and modern interdependence and supporting the existential pleas for judicious alacrity, without the requirement for harmful warfare. In the words of the Talmudic Hebrew sage Hillel, “If I am not for

myself, who will be for me? But if I am for myself alone, then what am I? *If not now, then when?*”

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