In the Room With Men

A CASEBOOK OF THERAPEUTIC CHANGE

Edited by
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American Psychological Association • Washington, DC
In memory of my parents Raye and Jerry.
To my wife Jawai;
my kids Jamie, Jeremy, and Shawn;
my sister Laurie;
my aunt Dena;
and my uncle Eddie.
Thank you for your roots, branches, and leaves.
—Mark

To Alison, Jackson, Mom, and Dad,
Amor est vitae essentia.
—Matt
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I am delighted to have been asked to write this foreword to Matt Englar Carlson's and Mark Stevens's wonderful new casebook on psychotherapy with men because of the opportunity it affords to reflect on the field and look back on where we have come. The field of the new psychology of boys, men, and masculinity is quite young. Researchers still have much to learn, from a gender-aware perspective, about the unique socialization and developmental influences that shape the personalities of boys and men and how these influences affect their life experiences.

Those not familiar with the new work in this area sometimes ask, Why do we need to study boys and men? Isn't psychology in general the psychology of males? The answer is, Well, yes, of course, males have been the focal point of most psychological research. However, these were studies that viewed males as representative of humanity as a whole. Feminist scholars challenged this traditional viewpoint by arguing for a gender-specific approach and, over the past 4 decades, have developed a new psychology of women. In the same spirit, men's studies scholars over the past 25 years have examined masculinity not as a standard by which to measure humanity (both males and females) but rather as a complex and often problematic construct. In so doing, they have provided a framework for a perspective on men and masculinity that questions traditional norms of the male role, such as the emphasis on toughness, competition, status, and emotional stoicism, and views certain male problems (such as aggression and violence, devaluation of women, fear and hatred of homosexuals, neglect of health needs, and detached fathering) as unfortunate but predictable results of the male role socialization process (Levant & Pollack, 1995; Pleck, 1981). They have also provided a framework
for creating positive new definitions of masculinity that support the optimal
development of men, women, and children.

This new perspective on boys and men is both overdue and urgently needed. Boys and men are disproportionately represented among many prob-
lem populations. A new perspective might contribute to the understanding
of, and solution to, some of these male problems that have long impacted
women, men, boys, girls, and society in negative ways.

In addition, there is a “crisis of connection” between men and women
resulting from major structural changes in women’s roles over the past 40
years without compensatory changes in men’s roles (Levant, 1996). This has
resulted from women’s dramatically increased participation in the labor mar-
ket. There has been an almost 600% rise in the employment of mothers of
small children since the 1950s: Twelve percent of mothers of children under
the age of 6 were employed in 1950, whereas almost 70% were employed in
2000. Women have thus moved from having a sole emphasis on the family to
combining career and family focuses. In making this shift, women have inte-
grated traditional values such as love, family, and caring for others with newer
values such as independence, career, and defining themselves through their
own accomplishments. Men in general have been slow to make equivalent
and corresponding changes. Although there has been an increase in some
men’s openness to relationships and greater participation in the emotional
and domestic arenas, many men still cling to the older definitions of their
roles and emphasize work and individual accomplishment over emotional
intimacy and family involvement. As a result, the pressures on men to be-
have in ways that conflict with various aspects of traditional masculinity
ideology have never been greater. These new pressures—pressures to commit
to relationships, to communicate one’s innermost feelings, to share in house-
work, to nurture children, to integrate sexuality with love, and to curb ag-
gression and violence—have shaken traditional masculinity ideology to such
an extent there is now a “masculinity crisis” in which many men feel bewil-
dered and confused, and the pride associated with being a man is lower than
at any time in the recent past (Levant, 1997).

Finally, there is the growing awareness of cultural diversity in all of its
dimensions, including race, ethnicity, social class, age, religion, sexual orien-
tation, gender identity, and disability status. Researchers now understand
that definitions of masculinity are dimensional, are socially constructed, and
can vary in complex ways in different cultures and social conditions. Hence,
they speak of masculinities to denote this plurality. One prominent strength
of this casebook is the attention to multicultural diversity in men and psy-
chotherapeutic practice.

With regard to the matter of psychotherapy for males, the field has
come quite a long way. Beginning more than 15 years ago, the Task Force on
Men’s Roles and Psychotherapy of the American Psychological Association’s
(APA’s) Division 29, Psychotherapy, began sponsoring symposia at the an-
nual conventions of the APA and published a special series in the journal *Psychotherapy: Theory, Research, Practice, Training* (Levant, 1990) on men and psychotherapy. Growing out of this effort, and requiring a tremendous effort on the part of many people, a new division of the APA was formed—Division 51, the Society for the Psychological Study of Men and Masculinity (see Brooks & Levant, 1999, for a history of this effort). From this and other quarters, a new body of work on the treatment of men has emerged (e.g., Andronico, 1996; Brooks, 1998; Brooks & Good, 2001a, 2001b; Kiselica, 1995; Lynch & Kilmartin, 1999; Pollack & Levant, 1998; Rabinowitz & Cochran, 2002; the present casebook). Three major developments have emerged from this work.

First, this new literature has shown that boys and men need psychotherapy. Researchers have known for a while that although women have more reported psychological distress, men are closing the gap. For example, Kessler and McRae (1981) analyzed five national surveys on mental health conducted between 1957 and 1976 and found that men’s rates of symptoms of psychological distress increased three times as much as women’s and that, as a result, the “gender gap” in symptoms was 38% smaller at the end of the 2-decade period. Kessler and McRae (1983) also found a similar process occurring with regard to attempted suicides. Generalizing across a group of studies, the investigators reported that the ratio of females to males attempting suicide dropped from 2.3:10 in 1960 to 1.3:10 in 1980. It should also be noted that men continue to have substantially higher rates of completed suicides than women. Further, a large scale National Institutes of Mental Health study found that although women have higher rates of affective, anxiety, and somatization disorders, men have higher rates of substance abuse and antisocial personality disorders (Landers, 1989). Finally, we know that boys and men are disproportionately represented among many problem populations—schoolchildren with learning or behavior problems as well as those diagnosed with attention-deficit/hyperactivity disorder; parents estranged from their children; the homeless; substance abusers; perpetrators of family and interpersonal violence; sex addicts and sex offenders; victims of lifestyle- and stress-related fatal illnesses; and victims of homicide, suicide, and fatal automobile accidents (Brooks & Silverstein, 1995).

Second, this new literature has shown that psychotherapy, as traditionally practiced, does not serve men well. In this context, it should be recognized that traditional therapy was designed by men to treat women, primarily; thus, it reflects male assumptions about female personality development. Feminist psychotherapists have long ago pointed out the flaws in these assumptions and offered correctives. The next step was to design psychotherapy for men.

The code of masculinity requires that men be aggressive, dominant, achievement oriented, self-sufficient, adventure seeking, and emotionally restricted and that they avoid all things feminine (David & Brannon, 1976;
Levant & Fischer, 1998), characteristics that both take a toll on men’s mental health and make it difficult for them to use psychotherapy readily. Five factors appear to stand in the way:

1. difficulty in admitting the existence of a problem, which stems from the “sturdy oak” trait, in which the man feels he must conceal weakness, even from himself;
2. difficulty in asking for help, due to the requirement for extreme self-sufficiency and the related inability to tolerate dependence on others;
3. difficulty identifying and putting into words vulnerable and caring emotions, due to the ordeal of male emotion socialization which leaves many men at least mildly alexithymic (Levant & Kopecky, 1995);
4. difficulty with emotional intimacy, which as Bergman (1995) has pointed out, can never feel as good to men as it does to women; and
5. a tendency to sexualize close encounters with female therapists and experience homophobia in close encounters with male therapists.

Recently, Addis and Mahalik (2003) have argued that men’s low rates of seeking psychological health care can best be understood as an interaction between traditional male socialization and the social psychology of giving and receiving help. Such a perspective opens the door to considering individual difference in men’s propensity to receive psychological health care.

The task of designing psychotherapy for men can be conceptualized as a cross-cultural process, in which it is recognized that the culture of traditional psychotherapy requires behaviors that conflict with aspects of the male role (remember that psychotherapy was originally developed by male therapists to treat, primarily, female patients). Therapy is then modified to remove these conflicts.

Third, this new literature has taken that next step and has evolved new psychotherapeutic approaches for men on the basis of a more accurate understanding of male personality development and the male experience. This casebook is evidence that these efforts have matured.

I cannot conclude this brief foreword without also pointing out that the world has changed as we psychologists were busy at work developing this new psychology of men, particularly in regard to men’s openness to emotional experience and to psychotherapy, thus removing some of the barriers to our work. A perspective on how much has changed can be gained by reflecting on the ease with which U.S. presidents such as Bill Clinton and George W. Bush, and military generals such as Norman Schwartzkopf, have publicly expressed their sadness and tears, whereas when former Maine Senator and presidential candidate Ed Muskie shed his tears on a wintry day in New Hamp-
shire in 1968, it cost him his viability as a candidate. So too, athletes like St. Louis Cardinals and Oakland A’s slugger Mark McGuire and Pittsburgh Steelers Hall of Fame Quarterback Terry Bradshaw have openly acknowledged treatment for their emotional problems, as have public figures like Mike Wallace and Howard Dean; whereas, in an earlier era, former Missouri Senator Thomas Eagleton was dropped from the No. 2 slot on the 1972 democratic ticket by former Senator and presidential candidate George McGovern following the media hullabaloo about his having been treated for depression.

Finally, I want to express my enthusiasm for the new multidivisional APA task force for developing guidelines for psychological practices for boys and men, which was inaugurated early in 2005. The goal of this task force is to develop psychological practice guidelines for working with boys and men, reflecting current research, theory, and practice in the fields of counseling psychology; clinical psychology; psychology of women; psychology of men; psychology of gay, lesbian, bisexual, and transgendered people; and the psychology of ethnic minorities. The very existence of such a task force be-speaks the emerging maturation of the field of the psychology of boys and men. This task force will play a major role in shaping the future of this field.

REFERENCES


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I

EXPLORING THE
PSYCHOTHERAPY
PROCESS WITH MEN
A client you have never met before sits down in the chair across from you. From his appearance, you can gather an idea about his racial background, height and weight, and his relative age. He is dressed casually, but not in a sloppy manner. Your client has a hardened look to his face; he seems to fidget in his chair, as if he cannot get comfortable, but soon firmly settles in his chair. His gaze darts around the room, taking in the pictures on the wall, book titles on the shelf, and the plants on the floor, before his stare is placed firmly on you. His voice says nothing, but his eyes are asking you to begin, and so you do. Innocently, without passing judgment, you ask, “What brings you in today?” The next 5 minutes feel like a game of poker in which your client is playing the role of the unwa
vering house dealer—you ask about the man’s life and current concerns—in response you get short answers that seem to reflect some discomfort, yet an overall attitude that he can handle it and does not need your help. Each one of his statements feels like a little push or deflection. Your client keeps his cards close to his chest, revealing little of his inner world, yet more detail about those people around him who seem to be creating problems in his life (coworkers, family members, etc.). What is really happening with him? Is it a mistake for him to be here or is he bluffing? It is at that moment when you realize how truly uncomfortable your client seems to be feeling in your office. You notice his feet tapping on the floor, a little sweat on his brow, and he seems to be focused on the clock behind you. Although his statements that “this is just a phase, and there
is just a lot of stress happening right now, but it will pass” seem to be meant to reassure you (and him?), you find that you are trying a little harder with each question to probe a little deeper. With each attempt to get the client to open up and build some rapport, it seems that a wall is being built. You begin to wonder how you will be able to connect with this man. Clearly something is happening in his life; after all, he is in your office, yet in the present moment he seems like he does not want to be here. You get the sense that unless something changes between now and the end of the session, he will soon be leaving your office, never to return.

Does the scenario above seem like a familiar situation? Can you image sitting with a male client and having this experience? For most psychotherapists who work with men, this scenario is not an altogether unique or foreign situation but captures the feeling of what it can initially be like to be in the therapy room with a male client. For many male clients, however, the scenario reflects the difficulty they experience entering and engaging in psychotherapy. Many male clients are not sure how to behave, are confused about how to enter into a relationship with a psychotherapist (or if they really want or need to), and question how psychotherapy can really make a difference in their life. For both client and psychotherapist, the backdrop for psychotherapy with men creates unique challenges that can be overcome. In the Room With Men: A Casebook of Therapeutic Change is a volume dedicated to chronicling the features of psychotherapy with men with an eye toward showcasing how psychotherapy can be a powerful, effective, and life-changing experience for both client and psychotherapist.

This book is about not only the experience of being engaged in psychotherapy with male clients but also the ways in which psychotherapists can adapt their practice to best meet the needs of men. As Scher (1990) astutely noted, most men do not see therapy as something for them but instead see it as the result of something or someone external who has pushed them to seek psychological help. A great deal has been written and discussed recently regarding therapy with men (see Brooks & Good, 2001a, 2001b; Levant & Pollack, 1995; Pollack & Levant, 1998) to help clinicians understand working with them. This book looks to take discussions about men, masculinity, and psychotherapy one step further by specifically targeting psychotherapy experiences with men from a case study perspective. The promise in this book for readers is the rare opportunity for an inside view of the experience of client and psychotherapist when men enter psychotherapy. Further, this book highlights the best practices of competent and effective psychotherapists who have worked effectively with men for many years.

A NEW PSYCHOTHERAPY WITH MEN: CONTEXT AND CREDIT

Over the past 30 years, there has been an increased awareness and attention given to men as clients in psychotherapy. This focus has highlighted
that there is something unique about being a man (i.e., masculinity) that wholly influences how men experience the world both intrapersonally and interpersonally. It is the saliency of masculinity for men across all facets of life that has led researchers and clinicians alike to question the influence of masculinity on mental health, well-being, and ultimately, psychotherapy itself. One rationale for looking at masculinity and psychotherapy has been the understanding that little is known about psychotherapy with men (Brooks, 1998; Scher, 1990). That may seem like an odd statement, considering that historically most writers and researchers about psychotherapy, until more recently, were men. Males have traditionally been viewed as representative of humanity; thus, males and their characteristics have been the object of most psychological research (Levant, 1990). Further, ideas and theories of psychotherapy were created from a Western, male view of the world, despite the fact that the majority of clients were, and continue to be, women. In general, knowledge about psychotherapy appeared to be structured from a male perspective about treating women. Within this paradigm, specific information incorporating women's perspectives or worldviews was absent, yet at the same time attention about what it means to be a man in the broader culture and the specific culture as clients in psychotherapy was not considered. Hartman (1990) noted that psychological writing was both androcentric and gender blind, with an assumed male perspective that had "not really explored what it means to be a man any more than what it means to be a woman" (p. vii).

The women's movement created a needed critique of the practice of psychotherapy, highlighting how the roles of women and views about femininity influenced how women saw themselves and experienced the world. The resulting influence from the women's movement was the notion that women needed to be understood within the context of role restrictions and that they needed to be clinically treated with gender-appropriate models that acknowledged, considered, and adapted to the experience of women. One outcome of the women's movement within psychotherapy was the creation of specific therapies and treatments that acknowledged the experiences of women and outlined treatment tailored to women's ways of experiencing the world (Brown, 1986; Enns, 1997). The acknowledgment of the need for specific treatments has been further advanced by the American Psychological Association's (APA; 2005) development of Guidelines for Psychological Practice With Girls and Women. Building on these advances in conceptualizing both gender and psychotherapy, scholars and practitioners working with men began to acknowledge the need for conceptual paradigms to better understand the experiences of men and treatments that could be tailored to men's experiences of the world.

Another arena where the value of understanding gender roles and development has been appreciated is within multicultural counseling. Incorporating and considering multicultural factors is no longer viewed as a separate
approach or type of treatment. All counseling at its core is multicultural
counseling (Pedersen, 1990). In that context, a multitude of cultural vari-
ables, including sex and gender, are recognized as essential to understanding
cultural identities. The generally accepted and promoted effective and ethi-
cal treatment of any one individual must consider cultural factors and diver-
sity in the treatment process (APA, 2003). At the core of multicultural coun-
seling is the direct and purposeful consideration and exploration of the cultural
context and worldview that both a psychotherapist and client hold. Not so
long ago, the idea that clients are embedded within a cultural context that
dramatically influences clinical treatment would have been accepted only by
a small group of psychotherapists. Currently, however, this very same idea is
now a cornerstone and necessity to effective treatment planning. The women’s
movement, when paired with the multicultural counseling movement within
psychology, has led to the acknowledgment in current clinical practice that
cultural identity and memberships not only matter but are also considered an
integral aspect of ethical and effective clinical practice.

These influential movements on the practice of psychotherapy helped
practitioners of psychotherapy discover and begin to understand gender and
gender roles. What began as an effort to appropriately understand and con-
sider women specifically as women has broadened to include considering men
as first and foremost men in the clinical setting. Thus the main shift was
movement away from considering men as the model of humanity and instead
understanding both men and women from a perspective that acknowledges
the role of biological differences (sex) and social environment (gender roles)
on the development of men and women. This area of scholarly research and
writing has been labeled the “new psychology of men” and is represented
within APA as a specific division: Society for the Psychological Study of
Men and Masculinity (Division 51). The past 30 years have seen a remark-
able change in understanding the role of sex and gender on the development
of men and women.

For men, this concerted appreciation of masculinity in terms of mental
health and well-being could not come at a better time. There have been vast
changes in societal expectations for men. Scholars have documented chang-
ing gender roles for men (Bernard, 1981; Kilmartin, 2000), often highlight-
ing the difficulties that men have experienced when their gender role ap-
ppears outdated or out of line with current connotations of recent variations
of masculinity. Many researchers (Clare, 2000; Kimmel, 1995; Kupers, 1993;
Levant, 1997; Levant & Kopecky, 1996) have offered the observation that
masculinity is in crisis and is in need of “redefinition,” “revisioning,” or “re-
construction.” One example of the changing view of masculinity can be found
in the classic Broverman, Vogel, Broverman, Clarkson, and Rosenkrantz
(1972) study. This study, over 30 years ago, found that adjectives (e.g., asser-
tive, competitive, reasonable) associated with healthy adults and healthy men
were synonymous. Now words traditionally associated with femininity (e.g.,
relational, intimate, connected), and not the ones associated with masculinity, are equated with healthy adults (Jordan, Kaplan, Miller, Stiver, & Surrey, 1991). Levant (1996) suggested that masculinity has already collapsed, noting that this collapse could be positive for men, freeing them from restrictive gender role constraints. Clearly, it is a changing world for men.

In the clinical realm, however, incorporating advances in understanding about men and masculinity can be difficult. Working with men presents special challenges that are often contrary to the manner that most psychotherapists were trained to understand both the process of psychotherapy and client dynamics. Many men appear resistant or reluctant to be in therapy, appear skeptical about the value of disclosure, and seem evasive and uncertain about emotional expression. Further, many men come to psychotherapy viewing their presenting concerns as external and not related to their functioning or their responsibility. In addition, many presenting concerns of men (i.e., emotional restriction, interpersonal isolation and distance, anger and aggression, workaholism) appear closely tied to their enactment of masculinity and seem culturally sanctioned as appropriate. Within this context, it appears that masculinity plays a crucial role in a man's experience of psychotherapy and requires that psychotherapists understand how to incorporate men's experiences (i.e., their masculine selves) into therapeutic work. It is the goal of this book to clearly illuminate how men, masculinity, and psychotherapy can exist in the same healing space.

ABOUT THE CASEBOOK:
ORIGINS, INTENTIONS, AND INSPIRATIONS

This book was inspired and grew out of our passion and interest in working with men. At the University of Southern California, where we worked together as clinical supervisor (Mark) and predoctoral intern (Matt), we co-led a men's therapy group and spent numerous hours sharing our ideas and experiences of doing psychotherapy with male clients. Often we commented on how we wished we had audio- or videotaped our conversations. We wanted other clinicians to be in the room with us and join in our conversation. Our wish spoke to the perceived absence of hearing from other clinicians how they were integrating theory and practice and what it was “really like” working with male clients. In the Room With Men: A Casebook of Therapeutic Change attempts to fill part of that void and carry on the therapy conversations that we found so valuable. This book opens the discussion to include multiple voices about working with men.

In the Room With Men represents a unique moment in the psychological study of men and masculinity. Over the past 30 years, this field has grown by building a substantial base of research and theory about the psychological needs and experiences of men. A generation of psychotherapists has ben-
efited from these advances in the field by learning about the distinct concerns of men and how to best meet their clinical needs. What has been largely absent from the attention given to the psychology of men has been the focus on clinical application that represents actual clinical practice. There appears to be little actual documentation of the experiences that psychotherapists have while counseling men, as well as how the research findings and scholarly recommendations are being used in these therapeutic encounters. This book integrates contemporary theory about psychotherapy and the psychology of men with current masculinity research, and it displays how these ideas and concepts come to life in the practice of psychotherapy with actual male clients.

It was our intention to bring the reader into the therapy room in order to know the client, the therapist, and their clinical work together. We did this by specifically asking the contributors to share critical dialogue and conceptualizations, as well as their own reactions and pushes and pulls that they may or may not have shared with their clients. It is our hope that the professional and personal reflections of the contributors will motivate readers to do the same in regards to the psychotherapy work they are doing with men. Finally, we hope the readers, especially the less experienced clinicians, will recognize and find comfort from the humbleness, openness, and uncertainty that these experienced clinicians shared in regard to the work with their clients.

We selected contributors (both men and women) from across the country who have distinguished themselves in terms of their innovative research and national presentations about masculinity and psychotherapy with men. Additionally, and perhaps most important, these contributors are all practicing and excellent clinicians who have the ability to examine and reflect on their real-life case experiences with selected male clients.

THEORETICAL ORIENTATION AND THERAPEUTIC THEMES

Because we have drawn from a wide range of practitioners from various theoretical perspectives, the theoretical basis of this book is integrative. Throughout the chapters, contributors draw from a range of theoretical perspectives—psychodynamic, relational, interpersonal, cognitive–behavioral, feminist, and multicultural—yet all integrate a gender-aware approach to their work, with an emphasis on understanding masculinity. The range of theoretical perspectives is perhaps most reflective of current practices of psychotherapy with men. Currently, there is no one theoretical orientation that appears to be more effective than others in conceptualizing and doing psychotherapy with men. Instead, scholars and practitioners have looked to tailor existing theoretical views in accordance with perspectives on male socialization (chap. 2 further addresses the role of theory in treating men).
The integrative nature of this book allowed room for other types of themes to emerge that do not necessarily have a theoretical home. For example, most of the contributors highlighted and recognized the importance of having compassion and patience with their male clients. Another themed therapeutic stance acknowledged by the contributors was the importance of creating a safe therapeutic environment in which the male clients could save “masculine face” in the context of therapy while exploring and feeling their more “vulnerable” (some may say “feminine”) aspects of their personhood. The paradox of men feeling their strength through their vulnerability, while cocreating a safe enough therapeutic environment, was a powerful learning opportunity provided for many of the male clients in this book. Additionally, the relational nature of the therapy, although not said in so many words, seemed to be an integral part of the healing and learning process for both the client and author. Is this aspect of the therapy process more unique and salient to counseling men than counseling women? It is our hope that the clinical cases described in In the Room With Men are models of clinical expertise with men that will stimulate questions for further therapy research.

TURNING THE PAGES: AN OVERVIEW

Ron Levant, President of the APA and cofounder of the Society for the Psychological Study of Men and Masculinity (Division 51), provides a foreword to this book. He calls the reader’s attention to both the history of the “new psychology of men” and future directions, including the development of the Guidelines for Psychological Practice With Boys and Men. The second chapter of this book is a literature review by Matt Englar-Carlson, which summarizes the current knowledge base about psychotherapy with men, in terms of research and theory. Fourteen case study chapters covering a variety of client demographics, concerns, symptoms, and treatment settings are then presented. The case study chapters are divided into three discreet, yet not mutually exclusive, parts (beginning with Part II) that highlight the major themes and approaches to working with the particular clients.

Exploring Emotions: Awaking the Inner Worlds of Men offers powerful clinical stories of how men learn more fully to experience, communicate, and understand their feelings and how those feelings can also serve as a map for getting to better know themselves. Part III, Exploring Connection: Building the Therapeutic Alliance With Men, highlights how the humanity and sincerity of the therapist opens the door for his or her male clients to feel wanted and understood. Some of these men seemed disconnected from themselves and society yet were able to bond with the humanness and care shown by the therapist. Part IV, Exploring Masculinity: Examining Gender Role Conflicts With Men, speaks beautifully to the intersection of gender role
socialization issues and psychological distress, as a window to provide self-understanding and openness to being in the world in a different way.

In each case study chapter, the contributor first provides a context about his or her own personal and professional path into the world of understanding and working with male clients. Some of the contributors concentrate on influential readings and mentors, whereas others lean more toward sharing salient personal experiences. Each contributor also provides the reader with a framework of how he or she conceptualized the issues of men and masculinity and how he or she tends to work with male clients. The reader will notice both overlap and uniqueness amongst the contributors. The contributor then shares with the reader his or her work with a particular client. Infused in the text of the work are actual dialogue and professional-personal reactions and reflections about the nature of the session. At the end of each chapter, the contributor answers a series of questions from the editors regarding the work with the client. Along with standard questions that were asked to each contributor, the editors also asked questions that were unique to the contributor and their particular case study. Finally, each contributor provides a list of favorite resources for counseling men. It is important to note that each chapter is a reflection of an actual clinical case. Following APA guidelines, the contributors masked demographic and identifying details to ensure confidentiality of their clients.

It is our hope that a wide range of audiences can use In the Room With Men: A Casebook of Therapeutic Change. Although we originally viewed this book as being focused on men and masculinity, we are struck by how much of this book is about the actual process of psychotherapy. It could be used as a textbook for counseling skills classes, as it provides excellent role modeling of how important the therapist's process is to the therapy experience. This book also provides the most current research on the study of men and masculinity. For more seasoned mental health practitioners, bringing the reader into the counseling room, as described by informed practitioners, will help practitioners develop a better appreciation for the complexities and nuances of doing therapy with men. This book, we hope, offers a mirror to reflect on one's own personal reactions and clinical practice with male clients.

REFERENCES


For many years, an obvious but historically overlooked aspect of conducting psychotherapy with men was the fact that male clients were first and foremost men. The development of the scholarly discipline of the new psychology of men has drawn needed attention to the notion that being a man matters to the extent that masculinity is a focal organizing principle for all aspects of a man’s life (see Brooks & Good, 2001a, 2001b; Levant & Pollack, 1995; Pollack & Levant, 1998). Masculinity, therefore, can be an influential contributor to not only why (or why not) a man is in psychotherapy but also how therapy is ultimately enacted. This casebook is a testament to the ways that men “do” therapy as clients, but it is also an observation as to how male-sensitive psychotherapists “do” therapy with men. This chapter is a deviation from the remaining chapters in this book in that it does not contain a case study. Essentially, this chapter is a review of the existing scholarly literature that provides foundational material to explore psychotherapy with men. To begin this exploration into men and psychotherapy, one needs a base knowledge of research, theory, and practice about men, masculinity, psychology, and psychotherapy. This chapter provides an introduction to masculinity and gender socialization, models of masculinities, how masculine