

## 14.20 Social and cultural influences on gender role

### INFLUENCE OF PARENTS

Social Learning Theory holds parental influence works by:

- 1 modelling (through their own behaviour and by gender labelling objects and actions, e.g. clothing, allocation of toys and 'gender-appropriate' joint activities)
- 2 direct reinforcement of children's gender role imitation.

#### Evaluation

- **Modelling** – Lytton and Romney's (1991) meta-analysis of many studies found evidence of parental initiation of sex-typed activities, e.g. mothers cooking with daughters rather than sons. Other studies indicate that although children have a tendency to imitate same-sex models (Barkley *et al.*, 1977), the gender-labelling of the model's activity was more important (Masters *et al.*, 1979).
- **Reinforcement** – Maccoby and Jacklin's (1974) review, and others, have found little evidence for direct parental reward or punishment of gender role behaviour in children, although Langlois and Downs (1980) found greater discouragement of cross-sex play in fathers.

### INFLUENCE OF SCHOOLS

Despite educational efforts to the contrary, school environments may reinforce gender role behaviour via:

- **Teacher expectations** – which could create self-fulfilling prophecies.
- **Subject choice** and career advice – choosing traditionally stereotypical 'masculine' or 'feminine' subjects, e.g. physics or home economics may consolidate gender roles and lead to traditionally stereotypical careers.
- **Greater exposure to gender role peer group play and sporting activities.**

#### Evaluation

- Gender role development before school attendance and possible innate sex differences in verbal and spatial ability may be a cause rather than effect of later choices.

### CROSS-CULTURAL STUDIES OF GENDER ROLE

Cross-cultural studies are often presented as evidence for the impact of cultural and environmental factors on gender role development.

- Mead's (1935) study of different sex-role behaviour in three New Guinea tribes seems to count against innately, fixed gender roles:
- The Arapesh men and women both showed stereotypically Western 'feminine' characteristics, as boys and girls were raised to be sensitive to others, co-operative and non-aggressive.
  - The Mundugumour raised both sexes to show aggressive and emotional traits typical of 'masculine' Western gender roles.
  - The Tchambuli tribe showed a reversal of Western stereotypical gender roles – women were dominant and independent, men were passive, socially sensitive, and participated in child birth.
- Durkin (1995) cites a study (Goodale, 1980) of another Papua New Guinea tribe, the Kaulong, who raise their girls to strike and chase boys with sticks in preparation for later gender roles as women who dominate mate selection (sometimes even capturing men). He also cites evidence of cross-cultural differences in maternal style associated with gender role aggression (Kornadt, 1990).

### INFLUENCE OF THE MEDIA

Social Learning Theory's concepts of observational learning and vicarious reinforcement imply gender role behaviour can be automatically acquired from media sources, e.g. films, TV programmes/adverts, or teenage magazines, and imitated if desirable consequences for those behaviours are observed. The social psychological concepts of informational and referent social influence also provide motivation to conform to and imitate media portrayals of gender role behaviour.

#### Evaluation

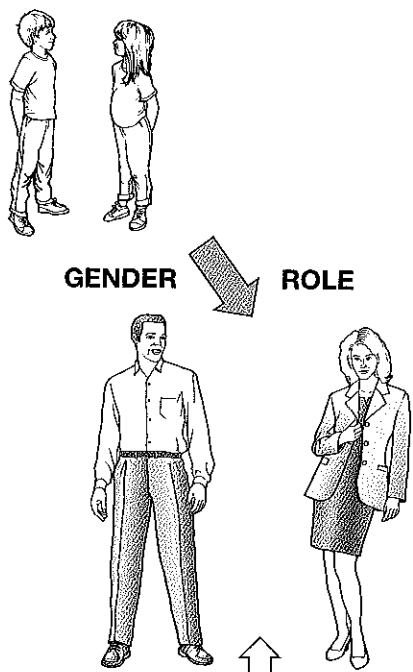
- Many studies find women are more likely to be presented in domestic, child-care, or sexual contexts and shown in submissive or minor roles in prime-time TV and adverts.
- Distinct sex-typing is found in toy adverts and catalogues.
- Some studies have found positive correlations between heavy TV viewing and: sex-typed activity preferences, highly stereotyped gender perceptions, and sexist views in both children and adults; although Durkin (1985) warns the effects are not strong and cannot indicate causation.

### INFLUENCE OF PEERS

Peer groups can exert influence on gender role behaviour through the Social Learning processes described above and are a particularly powerful source of normative, informational and referent social influences. Conforming to gender roles avoids ambiguity of social behaviour, peer group ridicule and identity confusion.

#### Evaluation

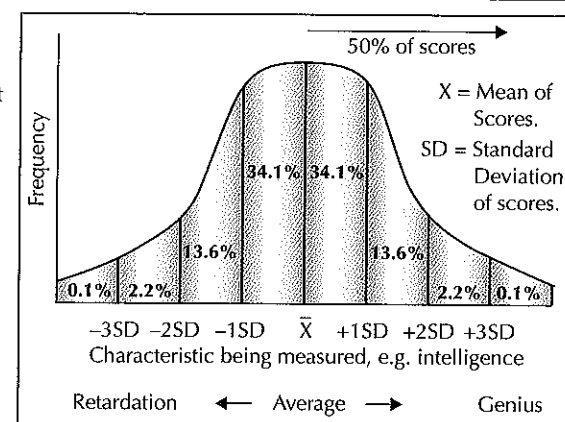
- Fagot (1985a, cited in Shaffer, 1996) reports peer pressure for sex-appropriate play is even shown at 2 years of age – boys criticise and disrupt each other for playing with girls or their toys, while girls are also critical of other girls who choose to play with boys.



## 15.1 Defining abnormality

### STATISTICAL INFREQUENCY

Abnormality can be defined as deviation from the average, where statistically common behaviour is defined as 'normal' while **statistically rare behaviour** is 'abnormal'. Thus autism is sufficiently statistically rare (it occurs in 2–4 children per 10,000) to be 'abnormal', as is multiple personality disorder. This does not necessarily mean the behaviour concerned is qualitatively different from 'normal' – many human characteristics are shown by everyone in the population to a certain degree, and if they can be measured every individual can be placed upon a dimensional scale or continuum that will reveal how common their score is in comparison to everybody else's. These comparisons can be standardised by the use of **normal distribution curves**. Many characteristics could be placed upon normal distribution curves as dimensions, such as intelligence. Most people fall somewhere in the middle of these continuums, but if an individual shows an extreme deviation from this average then they may be regarded as abnormal.



#### Evaluation

- 1 There are problems deciding how statistically rare (2 or 3 standard deviations?) behaviour has to be to be considered abnormal.
- 2 Some currently accepted mental disorders are probably not statistically rare enough to be defined as abnormal, e.g. phobias.
- 3 Statistical deviation from the average does not tell us about the desirability of the deviation – both mental retardation and genius are statistically rare but only the former is regarded as abnormal.
- 4 By this definition different subcultures may show behaviour that is statistically rare in the majority culture and be defined as abnormal.

### DEVIATION FROM SOCIAL NORMS

Norms are expected ways of behaving in a society according to the majority and those members of a society who do not think and behave like everyone else break these norms and so are often defined as abnormal. The definition is based on the facts that:

- 1 Abnormal behaviour is seen as vivid and unpredictable, causes observer discomfort and violates moral or ideal standards (Rosenhan and Seligman, 1989) because it differs from most other people's behaviour and standards.
- 2 Abnormal thinking is delusional, irrational or incomprehensible because it differs from commonly accepted or usual beliefs and ways of thinking.

The deviation from social norm definition of abnormal behaviour is thus a **socially based definition** and is explained by social constructionism and social identity theories. Researchers such as Szasz (1960) have argued that 'abnormality', especially relating to certain mental disorders, is a socially constructed concept that allows people who show different, unusual or disturbing (to the rest of society) behaviour to be labelled and thus treated differently from others – often confined, controlled and persecuted. Social identity theory would argue that people who do not share similar behaviour and beliefs are not included in the 'in-group' (in this case the majority in a society) and are therefore categorised as 'other' (abnormal) and discriminated against.

#### Evaluation

Since deviation from social norms is a socially based definition, it implies that different societies with different norms will define different behaviours as abnormal and may even disagree over whether the same behaviour is abnormal. This means that an objective definition of abnormal behaviour that is fixed and stable across cultures and time is difficult if not impossible to achieve, and this may lead to unfair and discriminatory treatment of minorities by majorities. Indeed concepts of abnormal behaviour have been shown to differ cross-culturally (a belief in voodoo in one culture may be thought to be paranoia in another) and in the same culture over time (unmarried mothers in Britain and political dissidents in the Soviet Union have been confined to institutions for their 'abnormal' behaviour).

### FAILURE TO FUNCTION ADEQUATELY

Maladaptive behaviour, which causes a failure to function adequately in the social and physical environment, seems a more objective way of defining abnormality. Everyone experiences difficulties coping with the world sometimes but if an individual's abnormal behaviour, mood or thinking adversely affects their well being (e.g. ability to maintain employment, a bearable quality of life, normal social relations etc.) then the definition will draw attention to the fact that help is needed. On a more extreme level, if an individual's abnormal behaviour becomes a danger to their own safety (e.g. neglecting self care, self mutilation, suicidal etc.) or the safety of others (e.g. dangerous behaviour) then they may be defined as abnormal and institutionalised ('sectioned' under the Mental Health Act, 1983, for example).

#### Evaluation

Failure to function adequately may not be recognised (e.g. by those who are in a psychotic state) or cared about (e.g. those with anti-social personality disorder), so the definition may have to be applied by others in society. However difficulties in functioning adequately may be the result of social rejection and 'adequate' functioning is, to some extent, a social judgement which may be based more on threats perceived by the majority in society than actual threats or a genuine concern to help.

### DEVIATION FROM IDEAL MENTAL HEALTH

The idea that a single characteristic can be used as the basis of a general definition of abnormality has been rejected by some in favour of a set of criterion characteristics of abnormality or normality. Jahoda (1958) has described several characteristics that mentally healthy people should possess, such as the ability to introspect, integration and balance of personality, self-actualisation, autonomy, ability to cope with stress and see the world as it really is, and environmental mastery.

#### Evaluation

Unfortunately this criterion approach has also had its problems as a definition, since just how many of these characteristics do you have to lack or possess, and to what degree, to be regarded as normal or abnormal? Jahoda's characteristics of mental health have been regarded as too idealistic, in fact it is 'normal' to fall short of such perfect standards, and humanistic psychologists such as Maslow would argue that very few people actually reach self-actualisation. Not everyone agrees with the ideal characteristics or that all are necessary for mental health, for example other cultures may disagree with the ideals of autonomy and independence, and view other characteristics as more important.