1979

Androgyny and Occupational Choice

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Eastern Illinois University

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ANDROGYNY AND OCCUPATIONAL CHOICE

(TITLE)

BY

RUTH CAROL ELLERBUSCH

THESIS

SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE OF

Master of Arts in Clinical Psychology

IN THE GRADUATE SCHOOL, EASTERN ILLINOIS UNIVERSITY
CHARLESTON, ILLINOIS

1979

YEAR

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ANDROGYNY AND OCCUPATION CHOICE

BY

RUTH CAROL ELLERBUSCH

B.A., University of Cincinnati, 1978

ABSTRACT OF A THESIS

Submitted in partial fulfillment of the requirements
for the degree of Master of Arts in Psychology at the
Graduate School of Eastern Illinois University

CHARLESTON, ILLINOIS

1979

Abstract

Sex-role orientation was investigated in terms of how it related to occupational choice. Sex-role orientation was defined in the following manner: one was either androgynous, masculine, feminine or indeterminate (Bem, 1974). Androgyny is a term used to describe individuals who are flexible in their sex-role orientation, individuals who are capable of being both instrumental and expressive, assertive and yielding, independent and dependent. Masculinity is associated with an instrumental orientation, a concern for oneself and getting the job done and a fondness for what man can make. Femininity is associated with an expressive communal orientation, an affective concern for the welfare of others and the harmony of the group and a devotion to healing. One is indeterminate when one does not identify with either masculinity or femininity.

These categories were arrived at by using the PRF ANDRO Scale scoring system (Berzins, Welling & Wetter, 1976). Androgynous individuals are typically seen as more skillful and adjusted. It was hypothesized that there would be more male androgynous individuals in the nursing occupation than the teaching occupation, given that nursing is seen as a typically feminine occupation and teaching as a neutral occupation (Panek, Rush & Greenawalt, 1977).

Subjects were 27 male registered nurses from hospitals in Cincinnati, Ohio and 27 male high school teachers in Cincinnati, Ohio. A Chi-Square was performed and no significant relationship was found between sex-role orientation and occupational choice. This lack of relationship was discussed in terms of the possibility that androgynous individuals choose varied occupations, that the older age and higher educational level of the teachers may have confounded the study or that society may have become less rigid in occupational divisions. Future research is recommended.

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Abstract

Sex-role orientation was investigated in relationship to occupational choice. Sex-role orientation was defined in the following manner: one was either androgynous, masculine, feminine or indeterminate as measured by Berzins, Welling and Wetter's Personality Research Form Androgyny Scale. Androgyny is a term used to describe individuals who are flexible in their sex-role orientation, individuals who are capable of being both instrumental and expressive, assertive and yielding, independent and dependent (Bem, 1976). Androgynous individuals are typically seen as more skillful and adjusted (Campbell, 1978; Kaplan & Bean, 1976). It was hypothesized that there would be more male androgynous individuals in the nursing occupation than the teaching occupation, given that nursing is seen as a typically feminine occupation and teaching as a neutral occupation (Panek, Rush & Greenawalt, 1977). Subjects were 27 male registered nurses from hospitals in Cincinnati, Ohio and 27 male high school teachers in Cincinnati, Ohio. A Chi-Square analysis indicated no significant relationship between sex-role orientation and occupational choice. This lack of relationship was discussed in terms of the possibility that androgynous individuals choose varied occupations, that the older age and higher educational level of teachers may have confounded the study or that society may have become less rigid in occupational divisions.

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Chapter I

Introduction

Bem (1976) writes, ". . ., for a fully effective and healthy human functioning, both masculinity and femininity must each be tempered by the other, and the two must be integrated into a more balanced, a more fully human, a truly androgynous personality" (p. 48). Traditionally it has been expected that psychologically healthy boys would grow up to be masculine and psychologically healthy girls, feminine. Whether this expectation is biologically (Rosenberg, 1976), socially (Minuchin, 1976), chemically (Parlee, 1976) or politically based (Bem, 1976; Bernard, 1976; Block, 1976) is unclear and beyond the scope of this paper. What is clear is that these traditional expectations are being challenged (Kaplan & Bean, 1976).

According to Bem (1976) the view of healthy psychological functioning has traditionally included three basic components: that individuals sexually prefer members of the opposite sex; that one should be masculine or feminine depending upon one's gender and that one should have a secure sense of one's maleness or femaleness. Femininity has traditionally been associated (Bem, 1975; Broverman, Vogel, Broverman, Clarkson & Rosenkratz, 1972) with an expressive communal orientation, an affective concern for the welfare of others, a dependency upon others, a concern for the harmony of

the group and a devotion to healing. Masculinity has been associated with an instrumental orientation, a concern for oneself and getting the job done and a fondness for what man can make, whether it helps to build or destroy (Baken, 1966; Erikson, 1964; Parsons & Bales, 1955).

Bem and others (Spence, Helmrich & Strapp, 1975; Wetter, 1975) have challenged this traditional view that psychological healthiness or adjustment is associated with sex-role stereotypes. In the conclusion of Margaret Mead's work Male and female (1949), she asserts: "Every known society creates and maintains artificial occupational divisions and personality expectations for each sex that limit the humanity of the other sex" (p. 373). She proposes that for men and women to be fully human they must respond to encounters as human beings first as opposed to basing their actions on some stereotypically defined sex role. Many hold that in our complex society the ideal adjustment results from the integration of both femininity and masculinity in one personality (Bem, 1976; Berzins, 1975; Williams, 1977). This integration has been labeled androgyny.

Androgyny is a Greek word, which has its etymological roots in andro, referring to male and gyne, referring to female (Kaplan & Bean, 1976). The Greeks applied the word to hermaphrodites, plants or animals having both male and female reproductive organs. Today the word is used to define a flexibility of sex roles, to

describe individuals who are capable of being both instrumental and expressive, assertive and yielding, independent and dependent. These individuals are seen as having developed the skills of both sex-role stereotypes and using them appropriately given the diverse situations everyone encounters in this day and age. One should not confuse homosexuality with androgyny. While a homosexual may be androgynous, so may a heterosexual be androgynous (Kaplan & Bean, 1976).

Many have felt that these male and female characteristics are present in us all. Jung (1953) speaks of each individual's animus (the masculine side) and anima (the feminine side). Maslow (1971) hypothesized that the self-actualized person, the psychologically superior person, makes no real strong differentiation between the roles and personality appropriate for either sex. Singer (1977) and Johnson (1977) propose that there is much evidence of a trend toward androgyny in the Western world. Male hippies, a decade ago, began to doubt the male stereotype and explored their own expressiveness. Many women at the same time became very active in the feminist movement, exploring how to be assertive and outgoing but not domineering, how to be warm and capable but well aware of their anger.

Kaplan and Bean (1976) propose a model of adjustment that involves androgyny. They feel it would be more appropriate to allow the diversity of humanness to be

based on individual temperament rather than sex-role stereotypes. They see the goal as striving toward eliminating those behaviors that are extremes of either sex stereotype so as to help individuals maximize their strengths and ways of dealing effectively with their world.

Chapter II

Review of the Literature

Much research has been conducted to determine if androgynous people do exist and if so, whether or not these people are more skillful in diverse situations than the male who fits the masculine stereotype, the female who fits the feminine stereotype, the person who fits the opposite stereotype, or the person who has not identified with either stereotype, referred to as an indeterminate (Bem, 1975; Kaplan & Bean, 1976; Spence, et al., 1975).

To measure androgyny, Bem (1974) developed the Bem Sex Role Inventory (BSRI). The BSRI includes two scales, one masculine and one feminine and treats masculinity and femininity as two orthogonal dimensions. Therefore a high degree of stereotypic masculinity does not preclude a high degree of stereotypic femininity. People who have scores that are high or low on both scales are considered androgynous. Someone with a high feminine scale score and a low masculine scale score is labeled feminine. A person with a high masculine scale score and a low feminine scale is labeled masculine. Spence, et. al. (1975) criticized this inventory. Bem had labeled androgynous people as those that scored both high and low on both scales. Spence, et. al. (1975) felt that those individuals that scored high on both scales are different from individuals that scored low on both.

They felt that androgynous individuals were those that scored high on both scales, reflecting that they have possibly mastered the skills attributed to both sex stereotypes, whereas those scoring low on both scales have not mastered skills for either sex stereotype. Bem (1976) later revised her scoring to align with Spence's valid criticism and now reserves the term androgyny for those scoring high on both scales. Those that score low on both are labeled indeterminate.

Berzins, Welling and Wetter (1976) developed the Personality Research Form Androgyny Scale (PRF ANDRO Scale) which avoids the problem noted by Spence, et. al. (1975). On both the PRF ANDRO Scale and the BSRI, masculinity was construed as addressing the themes of social ascendance, intellectual ascendance, autonomy and orientation toward risk. Femininity was conceptualized as encompassing the themes of nurturance, affiliative-expressive concerns and self-subordination. The studies that follow use one of these inventories when measuring androgyny.

One of the first steps in studying androgyny and adjustment is to see if those who fit the traditional sex-role stereotypes are well adjusted. Gove (1976) did just this. He first recognized that in modern Western societies, women have higher rates of mental illness than men. Kaplan and Bean (1976) state that this is typically seen as a function of women being more in touch with their feelings, of it being more socially acceptable for women

to talk about their problems and seek help for them, and of women being more vulnerable to emotional disturbance because of their biological and hormonal makeup. Gove states that these reasons are incorrect. He feels the answer is found in the role that women play, particularly in marriage. He feels that it is not true that the more unstable women tend to marry, nor that women in general are more prone to mental illness than men. This study demonstrated that when comparing single men and women, and divorced or widowed men and women, the rates of mental illness are not significantly different. In fact if there are differences here, men tend to have the higher rates of mental illness. If the typical reasons were correct, higher rates for mental illness would be seen in all the roles that women occupy. This is not the case. When comparing married men to married women, women have the highest rates of mental illness. Marriage as our culture currently defines it, still involves many sex-role stereotypes. Perhaps the higher rates of mental illness among married women are due to these sex-role stereotypes. Perhaps a more androgynous approach in marriage would decrease this higher rate.

Williams (1976) looked at another aspect of adjustment and female sex-role stereotypes. She compared the personal adjustment of adolescent females who

identified with mothers who were passive or fathers who were dominant. She found that ascendant-dominant girls who identified with their fathers with respect to these characteristics were the healthiest in terms of current personality functioning. Williams also found that more females identified in this manner with their fathers than had previously been found (Rychlak & Leguski, 1967), suggesting that dominance may now be more socially acceptable for females.

Hoffman (1976) also studied women and found that non-working women had a lower sense of self-esteem and competence and tended to feel more lonely and unattractive than working women. These non-working women saw their child-rearing activities as a sacrifice, while their counterparts found this responsibility as enriching and self-fulfilling.

Cosentino and Heilbrun (1964) studied adolescents (12 year olds) and adults (20 year olds) and found for both groups that greater femininity in both sexes is correlated with greater aggression anxiety. Gall (1969) also found that feminine individuals were likely to admit to a higher level of anxiety than masculine individuals. Gray (1957) found children when higher in anxiety were significantly more sex-appropriate in behavior than children low in anxiety. Here boys were high in social acceptance when they were higher in sex-appropriate behavior while the amount of social acceptance a girl

received was not associated with her sex-appropriate behaviors. Harford, Willis and Deabler (1967) found masculinity to be associated with aloofness, unpretentiousness, a tough poise, guilt proneness, anxiety and a tendency to be neurotic. Sears (1970) found femininity to be associated with a poor self-concept. Therefore, on the basis of the literature it would appear that if one fits a sex-role stereotype, maladjustment may be the result.

Another step in studying adjustment and androgyny is to see how adjusted those individuals are that identify with opposite sex-role stereotypes. Gray's (1957) study provided one case where masculine boys had positive adjustment. However, Mussen (1962) found that masculine boys possess more self-confidence than boys with relative feminine interests during adolescence, but as adults, masculine boys are relatively lacking in qualities of leadership, dominance, self-confidence and self-acceptance. The feminine group changed in the positive direction with age. Mussen suggests that as adolescents these masculine boys failed to develop attributes of sociability and outgoingness which may be essential for the achievement of satisfactory interpersonal relationships and vocational success in adulthood. Maccoby (1966) also found better adjustment in cross-sex typed individuals. Boys and girls who were more stereotypically sex typed were found to have lower overall intelligence, lower spatial ability and lower creativity than cross-sex typed children.

Both of these studies were done before scales to measure androgyny existed. It may be that what Gray (1957) called "feminine boys" and what Maccoby (1966) called "cross-sex typed children" were actually androgynous individuals.

The research above which demonstrates that people who fit a sex-role stereotype are ineffectual or maladjusted in some way does not prove the converse, that is, that androgynous individuals are healthier; however, it does say something about the traditional view that adhering to sexual stereotypes results in adjustment. Studies investigating how adjusted androgynous individuals are in comparison to sex-typed or indeterminate individuals are also necessary. One approach to investigating androgyny would be to study those individuals who identify with opposite sex-role stereotypes. Unfortunately most authors group feminine females and feminine males together, masculine males and masculine females together and compare these to androgynous or indeterminate individuals. Studies by Bem (1976) tend to make this distinction.

Bem has been one of the forerunners in research on androgyny. She has shown that sex-role stereotyped individuals are more likely to select activities that are considered sex-role appropriate than do androgynous individuals (Bem, 1976). They also experience more discomfort and feel the worst about themselves when performing cross-sex activities. Bem feels that this suggests that

traditional sex roles produce unnecessary and perhaps even dysfunctional avoidance or at least anxiety for many people. In today's world being more flexible in activities could be seen as a clear advantage.

Bem (1976) has also shown that masculine and androgynous females did not differ significantly from each other on measures of independence, shown as not yielding to pressures to conform in a supposedly humorous situation. Both were significantly more independent than feminine subjects.

Bem (1976) expected to find feminine females as the most nurturant to a kitten or baby but this was not the case. Surprisingly, they did not differ from feminine and androgynous males. She hypothesized that this lack of difference was due to the feminine females' inability to be assertive when confronted with a passive stimulus. Bem then tested this and found feminine females were the most responsive when asked specifically to be empathic to a distressed individual. Again in this study, feminine and androgynous men were more responsive than masculine males.

Campbell (1978) found that androgynous individuals were more skillful than feminine women in empathic situations and more skillful than masculine men in conversation-opening and assertiveness. In fact they were the most skillful group. Woods (1975) found that

when compared to all others, androgynous individuals had higher levels of social maturity, verbal aggressiveness, independence and academic motivation, the greatest interest in cultural and literary pursuits and the lowest levels of social introversion.

In a review of the literature, no evidence was found to suggest that androgyny in any way resulted in maladjustment. Christensen (1976) and LaVanche and Gaske (1979) found no evidence that androgyny related to adjustment either. Pettus (1976), however, found that for females, androgyny appears to have positive consequences in terms of effective psychological functioning. An overall view of the findings suggest that androgyny is a much more effective, adjusted way of living. (Campbell, 1978; Kaplan & Bean, 1976; Forisha, 1978). If one accepts Maslow's (1971) view that self-actualized people are the "superior specimens" of our race, a final test might be to see how androgynous these individuals are. Cristall and Dean (1976) did this and found significantly more androgynous individuals found in the self-actualizers. The results did not indicate that all self-actualizers are androgynous. However, Cristall and Dean suggest that this study can be seen as tentative support that people who are highly self-actualized are also free from strong sex-role stereotypes. Hogan and McWilliams (1978) found just the opposite: self-actualizers scored low on androgyny

measures. They proposed that the rigidity in society toward sex-role stereotypes may inhibit androgynous individuals from self-actualizing because of their insecurity caused by being in a non-normative position.

Though many studies have investigated how sex-role stereotypes and androgyny relate to adjustment, scant research had been conducted to determine if androgynous people choose certain occupations over others. Considering the results mentioned earlier by Mussen (1962) and Maccoby (1966) where cross-sex typed individuals were seen as more adjusted than same-sex typed individuals, one might propose that androgynous individuals, if inherently more adjusted, might feel more mobility in turning to cross-sex type occupations as opposed to neutral or same-sex type occupations.

In 1977, Panek, Rush and Greenawalt investigated the sex stereotyping of various occupations. Results indicated that certain occupations are considered "male" or "female" occupations. The "male" occupations included the following: Lawyer, City Planner, Police Officer, Letter Carrier, Truck Driver, Banker, Baker and Office Manager. The "female" occupations included the following: Elementary School Teacher, Dietician, Social Worker, Typist, Librarian and Nurse. Nine occupations were seen as neutral occupations. They are: Art Historian, Linguist, Psychologist, Cook, Clerk, High School Teacher, Historian, Computer Operator and Speech Therapist.

In sum, the literature suggests that androgynous individuals are at least as adjusted as other individuals. Additionally they tend to be more skillful in a variety of social situations. However, studies have not yet been performed which have investigated the relationship between sex-role orientation and occupation choice. This study extended the literature to determine this relationship. Males were chosen as research subjects because there is very little androgyny research on males as a group as compared to females. Nurses were chosen as the representative group for individuals in cross-sex type occupations. High school teachers were chosen as the representative group for individuals in neutral occupations. Nurses and high school teachers were chosen as occupations because of the potential availability of large numbers of males as compared to the other occupations listed by Panek, et al. (1977).

Based on the review of the literature, it is hypothesized that there will be more androgynous individuals in a cross-sex type occupation than a neutral occupation.

Chapter III

Method

Subjects.

Subjects were 27 registered male nurse volunteers from hospitals in Cincinnati, Ohio and 27 male high school teacher volunteers who were currently teaching summer school in one of Cincinnati Public High Schools. Six Hospitals were contacted and of a combined total population of 67 male nurses, only 27 volunteered for testing. Eight high schools were contacted and of a combined total population of 41 male teachers, only 27 volunteered for testing.

Materials.

Jackson's Personality Research Form (PRF). (1967), Form AA, was given to each subject. The PRF is a paper and pencil inventory given in a true-false format so that subjects respond true if they feel a statement describes themselves and false if not. There are 440 items to be answered, requiring approximately one hour to complete. The PRF consists of 22 subscales ranging in content from abasement to harmavoidance. The PRF ANDRO Scale is contained within Jackson's PRF, Form AA, and consists of 56 items. This scale was chosen because it has demonstrated high reliability and validity (See Appendix A). The scale is designed to contain two different subscales: Masculinity (MASCUL, 29 items) and Femininity (FEMIN, 27 items) (See Appendix B). Within each subscale,

items are worded in both positive and negative direction. The MASCUL Scale was construed to measure a dominant-instrumental domain of personality including themes of social-intellectual ascendancy, autonomy and orientation toward risk. The FEMIN Scale was designed to measure a nurturant-expressive domain involving themes of nurturance, affiliative expressive concerns and self-subordination.

When developing the PRF ANDRO Scale, the authors followed the rationale that Bem had used when developing the BSRI in 1974. In addition to choosing items that reflected the themes stated above, her rationale also included provisions for (a) separate masculinity and femininity scales, (b) selecting items on the basis of sex-typed social desirability (i.e., a masculine trait is more desirable for a man than for a woman) and (c) selecting items that are generally positive in value. The authors applied this rationale to items on Jackson's PRF, Form AA, so that original PRF answer sheets could easily be reanalyzed to understand sex role implications.

When scoring the PRF ANDRO Scale, a score of 1 or 0 is assigned to each item for each subscale. These scores are totaled and each individual is given a total MASCUL scale score and a total FEMIN scale score. Generally if an individual scores 16 or below on the MASCUL and 17 or above on the FEMIN scale, he/she is labeled androgynous. If only one of these totals is reached, the

individual is labeled as feminine-typed or masculine-typed accordingly. If neither total is reached, the individual is labeled as indeterminate. The cut-off points, 16 and 17 mentioned above, may not always be the cut-off points used when labeling subjects. This may vary according to the group from which the subject is drawn.

Procedure.

All potential subjects were obtained by the head nurse of each hospital or the principal of each high school. Each subject was given Jackson's (1967) PRF, Form AA, from which the PRF ANDRO Scale was drawn. Appropriate numbers of PRF forms were given to the head nurses and principals by the examiner, either through personal contact or by mail. The head nurses and principals then distributed the PRFs to available subjects. The subjects were given written directions and informed that the PRF answer sheets were to be completely anonymous and confidential (See Appendix C). The forms were completed by subjects during their spare time and returned to the head nurses or principals within two to four weeks after distribution. The head nurses and principals then returned the forms to the examiner by mail or through personal contact. Subjects were unaware of the purpose of the study. All PRF answer sheets were scored by the examiner (See Appendix B for scoring criterion) and randomly spot checked for accuracy by a second rater.¹

Chapter IV

Results

In order to determine the cut-off totals for the MASCUL and the FEMIN subscales, a median split was performed on both subscales for all subjects. Sixteen was found to be the median for both subscale scores. A Chi-Square was then performed on the two occupational groups as related to sex role orientation. This relationship is presented in Table 1. The relationship between sex role orientation and occupational choice was not found to be significant ($\chi^2=2.648$, $df=3$, $p>.05$).

The mean age for nurses was 29.59 years ranging from 24 years to 58 years of age, with a standard deviation of 1.51. The mean age of teachers was 38.37 years, with a range from 23 to 54 years of age and a standard deviation of 7.57. The mean years of education for nurses was 14.9, ranging from 14 to 18 years of education. The mean years of education for teachers was 17.3, ranging from 14 to 20 years of education. Eighteen of the nurses were married, eight were single and one was divorced. Eighteen teachers were married, six were single and three were divorced.

Table 1

Frequency analysis of sex-role orientation and occupation choice

	Androgynous	Masculine	Feminine	Indeterminate
Nurses	10	7	5	5
Teachers	9	4	4	10

$$\chi^2 = 2.648$$

$$df = 3$$

$$p > .05$$

Discussion

Chapter V

Rebecca, Hefner and Oleshansky (1976) postulate that androgynous individuals are involved in "a process orientation allowing and fostering adaptation to varied occupations, life styles and expressive roles" (p. 96). The results of the present study offer support for their postulate. Sex-role orientation was found to be unrelated to occupational choice. Perhaps androgynous individuals are not drawn to specific types of occupations; rather they are able to function effectively in varied occupations and their occupational choice is made given their own specific interests and experiences.

Another possible reason for the lack of a significant relationship between sex-role orientation and occupation choice is a cohort effect. Schaie (1965) states that when doing research, the research design requires consideration of the components of age, cohort and time of measurement. Since the groups varied considerably by age (nurses $\bar{X}=29.59$ years of age while teachers $\bar{X}=38.37$ years of age), it may be that the teachers are more androgynous because of their added opportunities and experience given more years of life, i.e., a cohort effect. This would apply to the teachers' higher level of education (nurses $\bar{X}=14.9$ years of education while teachers $\bar{X}=17.3$ years of education). It may be that

had the groups been matched for age and educational level, that nurses would be more androgynous. Perhaps registered male nurses closer in age to 38 years old with approximately 17 years of education would be more androgynous than their younger counterparts. The fact that the teachers who volunteered to be subjects for this study were teaching summer-school may have had an effect on the matching of the two groups for age and educational level. Teachers chosen for teaching summer school often have a higher status than those teachers that do not teach summer school. They are often selected because of their seniority, which could be due to their higher age or educational level. Had teachers been tested during the normal school year, they probably would have been younger and closer in educational level to the nurses.

Lastly it may be that sex-role expectations are changing sufficiently to allow men to pursue traditionally female occupations without much pressure. However, Lee and Haskell (1976) would disagree. They feel men are faced with sex role conflicts when entering a woman's field.

The present research findings have implications for future research. Because this was a pilot study and the subject population was relatively small, it would be worthwhile to retest more male nurses and teachers. It would be helpful if all nurses and teachers in a given area could be available for testing. Additionally it

would be interesting to see if these males differ from males in a typically "male" occupation such as police officers. Comparison to any other occupation listed by Panek, et al. (1977) would be informative. It would be beneficial to see if these results differ at all from the relationship between sex-role orientation and occupation choice for women in our society.

Bem concludes her article "Probing the Promise of Androgyny" (1975, p. 61) with her own personal set of prescriptions for a liberated sexual identity: "Let sexual preference be ignored: Let sex roles be abolished: and Let gender move from figure to ground." With further evidence of how sex-role orientation affects one's occupational choice, we will be able to break through the old traditional prescriptions and move toward Bem's.

FOOTNOTES

¹Answer sheets were randomly spot checked for accuracy by Mark Balen.

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Appendix A

PRF ANDRO Scale Reliability and Validity

Reliability: Berzins, Welling and Wetter (1978) state that a retest coefficient of $r = .81$ was found for the scale.

Validity: Construct validity was obtained when the two subscales of this scale were compared to the comparable BSRI subscales (Welling, 1975). The PRF ANDRO MASCUL and the BSRI MASCUL subscales correlated with $r = .68$, $p < .0001$ and the PRF ANDRO FEMIN and BSRI FEMIN subscales correlate with $r = .61$, $p < .0001$. Berzins, et al. (1976) also report convergent validity coefficients ranging from .42 to .65, all of which are significant, $p < .05$. The two subscales were found to differ from one another in discriminate validity, with correlations ranging from .00 to .22.

Appendix B

Masculinity Scale items (MASCUL)

Items keyed true-numbers correspond to PRF number system

30. When someone opposes me on an issue, I usually find myself taking an even stronger stand than I did at first.
53. I try to control others rather than permit them to control me.
90. I will keep working on a problem after others have given up.
97. I feel confident when directing the activities of others.
99. I don't mind being conspicuous.
100. I would never pass up something that sounded like fun just because it was a little bit hazardous.
141. I am quite good at keeping others in line.
178. My goal is to do at least a little bit more than anyone else has done before.
185. I seek out positions of authority.
195. I usually make decisions without consulting others.
203. If I have a problem, I like to work it out alone.
216. I will not go out of my way to behave in an approved way.
218. When I see a new invention, I attempt to find out how it works.
229. When I am with someone else, I do most of the decision-making.
247. I delight in feeling unattached.
260. I don't care if my clothes are unstylish, as long as I like them.

273. When two persons are arguing, I often settle the argument for them.

283. I prefer to face my problems by myself.

317. If I were in politics, I would probably be seen as one of the forceful leaders of my party.

Items keyed false

49. Adventures where I am on my own are a little frightening to me.

119. I would make a poor judge because I dislike telling others what to do.

137. I usually try to share my problems with someone who can help me.

166. I avoid some hobbies and sports because of their dangerous nature.

228. I am only very rarely in a position where I feel a need to actively argue for a point of view I hold.

254. I prefer a quiet, secure life to an adventurous one.

318. If I get tired while playing a game, I generally stop playing.

339. I feel incapable of handling many situations.

342. Surf-board riding would be too dangerous for me.

420. It is unrealistic for me to insist on becoming the best in my field of work all of the time.

Femininity Scale items (FEMIN)

Items keyed true

36. When I see someone who looks confused, I usually ask if I can be of any assistance.

93. I don't want to be away from my family too much.

106. The good opinion of one's friends is one of the chief rewards for living a good life.
124. People like to tell me their troubles because they know I will do everything I can to help them.
126. Once in a while I enjoy acting as if I were tipsy.
167. I make certain that I speak softly when I am in a public place.
168. I believe in giving friends lots of help and advice.
173. I think it would be best to marry someone who is more mature and less dependent than I.
212. I am usually the first to offer a helping hand when it is needed.
245. To love and be loved is of greatest importance to me.
256. I would prefer to care for a sick child myself rather than hire a nurse.
282. One of the things which spurs me on to do my best is the realization that I will be praised for my work.
300. When I see a baby, I often ask to hold him.
309. Sometimes I let people push me around so they can feel important.
319. I try to get others to notice the way I dress.
349. I like to be with people who assume a protective attitude toward me.
388. Seeing an old or helpless person makes me feel that I would like to take care of him.

Items keyed false

4. I get a kick out of seeing someone I dislike appear foolish in front of others.
102. I dislike people who are always asking me for advice.

107. I would not like to be married to a protective person.

146. I get little satisfaction from serving others.

239. I prefer not being dependent on anyone for assistance.

267. I seldom go out of my way just to make others happy.

311. When I see someone I know from a distance, I don't
go out of my way to say "hello."

322. People's tears tend to irritate me more than to arouse
my sympathy.

399. I am quite independent of the people I know.

410. It doesn't affect me one way or another to see a
child being spanked.

APPENDIX C

Cover Letter Given to each Subject

You are being asked to participate in a research study investigating how male nurses compare to male high school teachers on certain variables. You are being asked to help by completing the enclosed questionnaire. Please do not put your name on the enclosed answer sheet. All information is completely confidential. On the space labeled "Birth Order" please write in where you rank as compared to your siblings. Examples are as follows: only child, first born of four, third born of five, youngest of eight. In the space labeled "Highest level of education" please put the level of the last year of schooling you have completed. Also list any degrees you have completed. In this blank, please also put your marital status. Please fill out the rest of the answer sheet as each blank indicates. If you would like to know the results of this study, write me at 6806 Kenbyrne Ct., Cincinnati, Ohio 45239. Please return your answer sheet and booklet as soon as possible. I will need these questionnaires in about a week for other volunteers. The answer sheet should take approximately an hour to complete. Your assistance in honestly and carefully completing the questionnaire is greatly appreciated.

Thank you,
Ruth Ellerbusch
Eastern Illinois U.
Psychology Dept.