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## ‘I don't really have any issue with masculinity’: Older Canadian men's perceptions and experiences of embodied masculinity

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### ABSTRACT

The article explores what older Canadian men consider to be the definition of masculinity, how they evaluate their own masculinity relative to their definition, and how and why they use particular forms of body work in response to aging and their understandings of masculinity. Data are presented from qualitative interviews with 29 community-dwelling men aged 65–89. The men in our study defined masculinity relationally with femininity and homosexuality and identified three hallmarks of masculinity, namely: physical strength, leadership, and virility. While the men tended to emphasize that they were secure in their own masculine identities, some conceded that they diverged from societal definitions of masculinity with respect to their preferred activities, physical attributes, or personal qualities. Many of the men also perceived that aging and the accompanying physical and social changes were threats to their continued ability to be masculine. In an effort to slow down or redress bodily changes that were perceived to be undermining or diminishing their masculinity, the men engaged in exercise and/or were using or considering pharmaceutical interventions such as Viagra and Cialis. We discuss our findings in light of the masculinity literature and age relations theorizing.

### Introduction

Later life masculinities have increasingly been the focus of sociological theorizing and research. Scholars have highlighted the importance of age relations, or the systematic, cultural privileging of the young at the expense of the old, in the construction and relational organization of plural masculinities (Calasanti & King, 2015; Calasanti & Slevin, 2006; Jackson, 2016; King & Calasanti, 2013). Multiple masculinities derive from and reflect the dynamic intersections of class, race/ethnicity, sexuality and age, which combine in various ways across time and geography as well as within persons (Calasanti, 2004; Connell & Messerschmidt, 2005; Slevin & Linneman, 2010; Spector-Mersel, 2006). Within this complex plurality of masculinities, exalted or hegemonic masculinities reinforce ageism because of their association with and valuing of youthful bodies that are healthy, strong, productive, self-reliant, and hypersexual (Calasanti & King, 2005; Cecil, McCaughan, & Parahoo, 2010; Marshall, 2006; Meadows & Davidson, 2006; Thompson Jr. & Langendoerfer, 2016). In contrast, later life is stereotyped as a time of frailty, dependence, social disengagement, asexuality, and obsolescence (Bytheway, 1995; Nelson, 2002). Consequently, aging masculinities are equated with the loss of social capital and gender (Silver, 2003; Spector-Mersel, 2006; Thompson Jr. &

Langendoerfer, 2016) and older men are relegated to subordinate or complicit positions within the masculinities hierarchy (Calasanti, 2004; Connell & Messerschmidt, 2005; Slevin & Linneman, 2010).

At the same time, Third Age narratives suggest the possibility of an alternative aging masculinity that is associated with power, wealth, leisure, and active sexuality (Higgs & McGowan, 2013), and is thus consistent with hegemonic masculinity (Slevin & Linneman, 2010). Promoted in the media and harnessed by consumer culture (Hurd Clarke, Bennett, & Liu, 2014; Katz & Marshall, 2003; Marshall & Rahman, 2015; Wada, Hurd Clarke, & Rozanova, 2015), Third Age masculinity reflects “an aging youth culture” (Higgs & McGowan, 2013: 22) in which older men avoid or postpone capitulation to ageist stereotypes. The ability to age without becoming old is assumed to result from engagement with consumer culture as individuals demonstrate the “will to health” (Higgs, Leontowitsch, Stevenson, & Rees Jones, 2009: 687) by using a variety of health promotion and body work practices (Calasanti, Pietilä, Ojala, & King, 2013). Given that health promotion through consumption is delimited by socio-economic status and the concomitant access to resources, Third Age masculinities reflect particular intersections of social class, culture, and age (Higgs & McGowan, 2013).

There is a growing body of research that has explored how older

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men internalize and act on often taken-for-granted and conflicting assumptions about masculinities and aging in both the Third and Fourth Ages. These literatures reveal that older men may downplay health concerns (Hurd Clarke & Bennett, 2013) and perceive themselves as having been emasculated in the face of declining physical and sexual abilities (Apeosa-Varano, Barker, & Hinton, 2015; Cecil et al., 2010; Gibson & Kierans, 2016; Marshall, 2006; Ojala, Calasanti, King, & Pietilä, 2016; Oliffe, 2006; Sandberg, 2016; Slevin & Linneman, 2010; Tannenbaum & Frank, 2011; Wentzell, 2013a,b). Older men may further deny or suppress outward expressions of emotional or physical pain (Bennett, 2007; Flurey et al., 2017; O'Brien, Hart, & Hunt, 2007), partake in aggressive or risky behaviors (Robertson, 2007; Thompson Jr. & Langendoerfer, 2016), and/or avoid seeking help (McVittie & Willock, 2006; Yousaf, Grunfeld, & Hunter, 2015). Older men may additionally experience life course transitions such as retirement and widowhood or the inability to remain in the paid labor force due to illness as challenges to their masculinity (Emslie, Hunt, & O'Brien, 2004; Oliffe et al., 2013; Oliffe, Han, Ogrodniczuk, Phillips, & Roy, 2011; van den Hoonaard, 2010).

However, some studies have found that older men may also re-interpret masculinities in response to life changes. For example, older men may embrace help-seeking behaviors and experiences of vulnerability as well as reimagine risk-taking permissible social roles (Courtenay, 2000; McVittie & Willock, 2006; Oliffe, 2009; Potts, Grace, Gavey, & Vares, 2004; Potts, Grace, Vares, & Gavey, 2006). Some older men express “resilient acceptance” (Tolhurst & Weicht, 2017: 32) of dementia and counter negative depictions of later life decline with more sanguine interpretations so as to reaffirm their masculinity. Older men have also been found to reframe erectile dysfunction as a normal part of aging rather than as a signifier of failed masculinity (Gannon, Guerra-Blanco, Patel, & Abel, 2010; Potts et al., 2004; Wentzell, 2013a,b). Older men may further view their changing sexuality as a sign of maturity and an opportunity to focus attention on other important aspects of their identity, like family (Wentzell, 2013a,b) or as a means to counter the negative stereotype of the ‘dirty old man’ (Sandberg, 2016). Similarly, leaving hyper masculine work culture may be experienced as liberating for some men as they are afforded new opportunities to acknowledge and cultivate aspects of their identities that were previously hidden or suppressed (Slevin & Linneman, 2010).

The literature additionally suggests that older men may distance themselves from particular forms of masculinity as they age. Rather than accepting and internalizing contemporary ideals, older men's definitions of hegemonic masculinity may echo masculine norms from when they were younger (Slevin & Linneman, 2010; Thompson Jr. & Langendoerfer, 2016). Older men may also intentionally reflect on the ways in which their masculinities have evolved or shifted over time thereby marking a clear departure from a previous identity (Wentzell, 2013a,b). Other research has found that some older men reject a macho depiction of manhood, by ironically enacting that masculinity in a different way, such as through the assertion of their authority (Gill, Henwood, & McLean, 2005; Speer, 2001; Wong & Rochlen, 2005). Finally, some scholars have noted that in the context of qualitative interviews, men may conform to specific masculine characteristics, such as heterosexuality, expertise or authority, control, and competition even as they express vulnerability through the sharing of personal stories (Cameron, 1997; Oliffe & Mróz, 2005; Pini, 2005; Sallee & Harris III, 2011; Williams & Heikes, 1993).

Given that masculinity is “constantly in flux because it is relational, often times co-constructed, and deeply reliant on context” (Mackenzie et al., 2017: 2), there is an important need to explicate taken-for-granted assumptions about the nature and practice of masculinity and how they intersect with age relations (Calasanti et al., 2013). Building on the existing literature and using the lens of age relations, we sought to address the following research questions in our study: 1) How do older Canadian men define masculinity? 2) How do they evaluate themselves relative to their understanding of masculinity? and 3) How

do they respond to the social and physical realities of growing older relative to their practice and understanding of masculinity?

## Methods

The study received ethical approval from [our university's ethics board]. In the sections that follow, we outline the design of the study, our sample characteristics, and our analytic procedures.

### Design

We recruited 29 participants from the greater Vancouver area through advertisements in local newspapers and posters in public facilities. To be included in the study, participants needed to be 65+ and self-identify as male. In addition to reimbursing their travel expenses, we offered participants a \$25 gift card from a merchant of their choice as compensation for their time, although seven men declined the honorarium.

The interviews were conducted by the first author and two graduate students, all of whom were women. Interviews lasted for between 1.5 and 7.5 h (average of 2.5 h) for a total of 73 interview hours. In most cases, we interviewed participants only once. However, in situations where the participants' responses were expansive (two participants), their availability was limited (three participants), or their health conditions made it difficult to sit for prolonged periods of time (one participant), we spread the interview time across two meetings. We interviewed 15 participants in their own homes, 10 at the university, three in public locations of their own choosing, and one by Skype. We developed the interview schedule through a close reading of the extant literature pertaining to aging, men, and masculinity as well as in relation to our previously stated research questions. We asked the men to define masculinity, to reflect on the types of behaviors and traits that they felt rendered someone more or less masculine, to consider if, how, and why they themselves achieved or deviated from idealized masculinity, and to describe how aging had influenced their masculinity, if at all.

### Sample

The men in our sample ranged in age from 65 to 89 years (average age of 74). As noted in Table 1, the participants varied in terms of their ages, places of birth, marital statuses, levels of education, employment statuses, and household incomes. That said, most of the men were Canadian born, married, well-educated, retired, and of middle or upper class. While 28 of the men identified as heterosexual, one man identified as homosexual. Fifteen men rated their health as excellent, 11 perceived their health to be good, and three indicated that they were in poor health. All of the participants resided independently in the community.

### Data analysis

All interviews were digitally recorded and transcribed verbatim by trained research assistants. Following Green and Thorogood's (2009) thematic analysis guidelines, the first author read and reread the transcribed data in order to generate a code book in consultation with the research assistants. Broad thematic categories largely reflected the interview questions and included definitions of masculinity, personal assessments of one's own masculinity, and aging as a threat to masculinity. Further analysis of the data subsumed under the broad categories resulted in the generation of additional sub-codes. Thus, the data within the definitions of masculinity code were broken down into personality traits, physical attributes, social roles, sexuality, and gender relations. The personal assessment of one's own masculinity was sub-divided into adherence to the social ideal of masculinity and different forms of masculinity. Aging as a threat to masculinity was sub-divided into

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