A STUDY ON HOW MEN DEFINE MASCULINITY, MALENESS AND THE INTRINSIC VALUE OF BEING A MAN

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Submitted as part of course requirement for Master of Community Health (by course work)

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June 1994
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ABSTRACT

This study is concerned with men's health and health-related behaviours. It examines statistical evidence from a wide variety of resources relating to men's mortality and morbidity and to men's health-related behaviours such as domestic violence, drug abuse and risk-taking. The study shows that there are gender-related deleterious effects on men's health and health-related behaviours which are sufficiently serious to warrant attention.

With men as the central focus, the study looks at socialisation practices employed by society to condition men to behave in ways expected of them. It then shows, through a study of the literature, how these socialisation practices lead to deleterious effects on men's health and health-related behaviours. Evidence is presented to indicate that this long standing form of conditioning is under challenge in the 1990s.

The study presents results of interviews with five individual men. The respondents were asked for their definitions of masculinity and maleness and their views on the value of men to society. What it found was an expressed desire for closer relationships with partners, more time with children, of sensitivity and growing emotional maturity and legitimisation. There still remained a legacy of a different time with a different role for men but there was definite evidence of changing attitudes and perceptions.
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INTRODUCTION

Over the past 30 years or so, there has been a marked and significant rise in feminine consciousness embracing all aspects of women's issues and concerns. The women's movement challenged the basic rationale of male/female relationships in a way it has never been challenged before. "The whole weight of social, political, philosophical and religious thought was up for re-examination from a new perspective - women's" (Collins, 1992).

In terms of health and health care-related issues, women have secured a gender-specific approach toward their needs. Specialised health services for women has become accepted now as a right in our society (Buckhorn, 1993). There are women's health centres to cater for women's needs and health promotion campaigns specifically targeting women's health issues (breast cancer, domestic violence etc). Women's health is recognised as a legitimate topic of study at a tertiary education level, the University of Sydney offers studies in Women's Health through the faculty of Community Health.

During the period that the gender-specific approach to women's health has been developed, it has been assumed that men have had sufficient and adequate health care (Buckhorn 1993). The accepted view has been that men have no gender-specific health needs which are not, or have not, been met by present services. Consequently, men are not in need of any special health services.

The realisation that men do have legitimate health and health-related behaviour concerns has never been more acute writes Warren Farrel (1994). Citing such areas as drug (alcohol) abuse, divorce, depression, suicide and isolation, as well as the early deaths of men, Farrel points out that as long as men are victim to these ills, then the whole of society is also a victim in an indirect way.
Raising the issues of men, masculinity, maleness, men’s health and men’s health-related behaviour in this way is relatively new. Those who have campaigned long and hard to improve the lot of women will no doubt be critical and suspicious about men’s motives. As one feminist pointed out on a recent debate screened on the SBS program, *The Cutting Edge*, women may fear that men are merely trying to hijack the debate and reassert their dominance by another means.

There are many health and health-related issues emerging, which are gender-specific to men, risk taking behaviour, domestic violence perpetrators and prostrate cancer for example. It is really only since the beginning of the 1990s that the community has started to recognise the real needs of men in a changing world. Never before have men stopped to look to their inner selves in such a way as they have begun to now. Until recently, men have been concerned with dealing with external demands such as being the breadwinner and society’s expectations, and have had little cause to examine themselves and their behaviour in the context of a liberated collective group.

In comparison, other groups in our society have found progressively louder voices and increasing legitimacy in what they say. Not only women, but also migrants, Aborigines and homosexuals have received a great deal of attention and research. They have achieved this by getting their causes on the public agenda, demanding equal rights and a more equitable share of society’s resources. The results of their efforts show up in such socially significant events as the passing of the Homosexual Vilification Bill, the ‘Mabo’ legislation and the recent passing in of the Maternity Allowance for women by the Federal Government.

This study is a response to an increasing awareness of the rights of men to a similar equitable share of those resources. The criteria, such as used by other groups to gain a better quality of life, also apply to men, because men continue to experience the same constraints and limitations that they have since the beginning of the Industrial Revolution. Men are, in fact, in need of the same attention and research. In
particular, men have health care concerns which are only just being recognised and health-related behaviours demanding closer attention.

This study looks at how men define themselves as men, what it means to be a man in the 1990s, and then equates that definition with effects on men's health and health-related behaviours.
AIM OF THE RESEARCH

There are three aims of this research. The first is to review the statistics pertaining to men's health and mortality. The second is to analyse the socialisation processes which may account for men's health status. Finally, the third component will, by means of field research, assess the effects of socialisation changes (if any) on how men perceive themselves now they have been challenged by feminism and the women's movement.
LITERATURE REVIEW

STATISTICAL EVIDENCE

Introduction

Theoretically, both sexes can be exposed to, or suffer from, the same ailments and injuries, we are all human beings (biological differences not withstanding). Yet, it would appear from the evidence to be presented that men have gender-specific health problems which are in need of attention. The statistics examined cover health issues which are not biologically specific between the sexes, such as mortality rates, self abusing and violent behaviours, risk taking and mental health. Where it is appropriate the statistics for males have been compared to those for females, but only to illustrate the disparity, and not to challenge the right of women to better health.

Mortality

The Australian Institute of Health and Welfare (1992) indicates that the death rate of men is higher than that of females in all demographic age groups up to the age of 70. Male babies born at this time can expect to live, on average, till they are 73, whilst their female counterparts will average a life expectancy of over 79 years (Australian Bureau of Statistics, 1991). Only 31% of aged pensioners are men (Department of Social Security, 1992). After retiring at age 65, men average 15 years of retirement, whereas women retiring at age 60 can expect 23 years of retirement (Australian Bureau of Statistics, 1991).

Bates and Linder-Pelz (1987) concluded from an analysis of available statistics that of 100,000 males and 100,000 females born between 1940 and 1980 in Australia, 372 men will be dead before the age of 44, whilst only 152 women will be dead at the same age. More significantly 267 of those men will have died violent deaths, either by accident or suiciding, whilst the overwhelming majority of female deaths will be non-violent and due to natural disease processes (Bates and Linder-Pelz, 1987).
Self-Abuse

Now that infectious diseases are no longer the major cause of mortality and morbidity, it can be argued that today’s big killers; heart disease, lung disease and accidents/suicides (Australia’s Health, 1992), are in fact preventable. Fletcher (1992) found that in the case of heart disease, men were:

- more likely to be smoking;
- more likely to be drinking;
- less likely to follow published advice;
- more likely to be adding salt to their diet and eating animal fat;
- less likely to follow weight reduction diets and have their blood pressure checked.

Men and the abuse of alcohol is well documented. Michael MacAvoy, Head of the NSW Drug and Alcohol Directorate, states:

- 95% of all people arrested for drunkenness in NSW are men;
- 95% of all those treated for alcoholism are men;
- many males are forced by the macho peer group pressure into using drugs or alcohol to keep up with their mates;
- 70% of all Australian men drink regularly;
- it is not until the age of about 45 that obvious health damages shows up in men—diseases of the liver and heart and eventual brain damage (MacAvoy, 1991).

According to Buckhorn (1993), alcohol is a major factor in many violent incidents as well, citing domestic violence as the most obvious example. Research on men’s health in Scotland found that men not only drink much more than women, but do it in
ways which are clearly related to accidents and violence, both self-inflicted and directed at others (Butler, 1991).

**Risk-Taking Behaviour**

The consequences of risk-taking behaviours shows a disproportionate percentage of men suffering injury and accident as a result of their actions.

- 80% of spinal injuries are male (Robinson, 1986).

- 78% of motor vehicle casualties are male. In the 30 to 59 age group, 48% of deaths were related to alcohol usage (Department of Community Services, 1990).

- 97% of AIDS cases are men (National Centre for HIV, 1991).

- Work related deaths are nine times more likely in men than in women. occupationally, mining, transport and rural show the highest death rates (Harrison, Frommer, Ruck and Blyth, 1989).

- 77% of deaths from preventable heart disease under the age of 65 are men (Australian Bureau of Statistics, 1986).

- Men are less likely to use seatbelts whilst driving, more likely to drink and drive, four times more likely to engage in risky and dangerous driving, and stand a three times greater risk of dying from fatal injuries sustained through car accidents (Fletcher, 1992).

**Violence**

According to Flood and West (1991) men’s violent behaviour is supported, encouraged and condoned in Australian society, through the family (father/son), the school (peer pressure), social relations and paid work. Male violence is trivialised and seen as an issue of public order rather than one of actual assault.
Compiling statistics on sexual violence Wildwood (1992) found that one in eleven boys will be sexually violated. Almost all sexual violence (97%) will be committed by men and that 26% of victims will be men.

In two recent *Sunday Spotlight* articles published in the *Sun Herald* (April 11, 1993 and Aug 22, 1993), the following statistics were published in relation to domestic violence:

- 20% of domestic violence cases in NSW ended in the killing of wives or de facto wives;
- 50% of NSW murders involved a family member;
- 47% of female homicide victims are killed by their spouse, de facto or ex boyfriend;
- one in five women presenting at hospital casualty departments have been attacked by their partner;
- in 1988 the national survey Community Attitudes to Domestic Violence in Australia, found that one in five members of the community (17% of women and 22% of men) approved of domestic violence.

Butler (1991) reported that crime figures generally (not violent crime specific) showed for all ages the sentencing rate for men is over seven and a half times compared with women. In the age group, 16 - 20, the difference is nearly ten times.

**Mental Health Statistics**

Of the statistics reported the following findings have emerged:

- The suicide rate of men is four times higher that of women (successful attempts) in the 15 to 24 age group. Overall, 82% of suicides are men (*Sun Herald*, 1991),
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- Unemployed men (as opposed to those in employment) have twice as many chronic symptoms and mental health problems and a much higher death rate (Australian Institute of Health, 1990),

- After separation and divorce men have 60% more time off work and have a death rate more than twice that of married men (Sun Herald, 1991),

- Person years of life lost from mental disorders are twice as high in men as in women (Public Health Unit, 1991),

- 95% of those in prison are male. Of all the men in Australia one in 500 are in gaol (Department of Community Services, 1989).

The facts and figures gathered in these statistics have no biological specificity between the sexes. That is, non-comparable health concerns such as breast cancer, prostrate problems etc, have been omitted. In theory, from a ‘nature’ perspective, and given that the sexes are equally divided, this disparity should not occur. The fact that it does becomes a ‘nurture’ issue which demands an examination of how men are socialised and conditioned to fit into Australian society.
SOCIALISATION

Introduction

In the beginnings of humanity, men’s greater physical strength, the physical dangers of a hostile environment, and women’s unique ability to bear children, dictated what roles each sex was to play in that early society. Farrell (1994) shows how this role definition has maintained itself throughout the development of human kind, with men actually becoming increasingly more enslaved to the concept of “doing through strength”, fighting, protecting, enduring. The author further points out that this type of socialisation was necessary in many human societies because of the constant threat and competition for resources. In contrast, in the Tahitian Islands men’s and women’s roles had always been equal because there was no threat or scramble for resources (Farrell, 1994).

The Australian Experience

In Australia, from the very beginning of settlement men had to ‘endure’ hardships. They developed what Collins (1992) calls a ‘frontier survival mentality’, hard, alone, distrusting, in an environment where aggression was the difference between surviving or perishing.

With the discovery of gold came the gold ‘diggers’, migrants, who were predominantly men and to whom the rugged Australian bush presented a constant struggle against a hostile land. Men now had the additional role as the ‘battler’ fighting for survival (Collins, 1992; Pilger, 1986).

The ‘battler’ image was further endorsed by the world wars and the Great Depression (Collins, 1992). Buckmaster (1993) tells how his early youth was conditioned by tales of the ‘ANZAC’ legend and how brave men were meant to act in the face of death. The result has been that society has to believe that being a man is all about ‘battling’ through and ‘toughing’ it out.
Agents of Male Socialisation

Fathers

The significance of the father in male socialisation is widely recognised (Collins, 1992; Farrell, 1994; Biddulph, 1994). Unfortunately, according to Collins the problem is that fathers are mostly absent, either in actual reality, or emotionally. Mothers are generally the immediate care givers in our society. This makes it twice as difficult for male adolescents, because not only do they need to seek their own identity, but they also need to do it after they have separated from their nurturing parent (Collins, 1992). The significance of 'absent' fathers is echoed by Biddulph who cites the increased emphasis this has on more external socialisation agents.

The Media

The power of the media to stereotype and to constantly reinforce that stereotype cannot be denied (Summers and Hogan, 1993). In American research on men in advertising it was found that from a random sample of 1000 advertisements 100% of male/female interactions depicted men as; ignorant, losers, smelling bad, objects of rejection, subjects of put-downs, angry, violent and the 'jerk' of the interaction (Biddulph citing Hayward, 1994). Gathering media data from various sources Sommers and Hogan profiled the typical Australian male. He consisted of someone "strong and silent", a mixture of "Mel Gibson, John Singleton and Vintage Grazier". He was good with "dogs and horses", a great mate to his mates but no good with his wife and kids (Sommers and Hogan, 1993).

Peer Groups

Peer group influences affect males at all ages, from exposure to other boys at school to the 'mateship' culture of adult Australian men (Biddulph, 1994). This mateship has detrimental effects on masculine interaction. Mates, claims Collins, deny each other intimacy and freedom of expression, they get together only for some specific, outwardly directed purpose such as sporting events and rarely get beyond into more intimate areas (Collins, 1992).
Women

Despite being recognised as being in part responsible for instigating social change, women have, and still are, colluding in continuing the same socialisation processes of men, as they have done before liberation (Kingma, 1993). Women still expect men to go off the war, work every day of their working lives, give up half their personal wealth and given up their children without flinching if divorce or separation occurs (Kingma, 1993). Farrell believes women have a vested interest in aiding and abetting male socialisation as they always have done because it actually favours their own well being (Farrell, 1994).

Development Stages in Men’s Personal Conditioning

According to Paul Whyte, co-editor of *Male* (1993), men are coerced into a gender role in each stage of their development. Table 1 shows a simplified outline of what Whyte proposes are the conditioners of male behaviour and how it affects men throughout their lifespan. Steve Biddulph, author of the new book *Manhood*, and a psychologist, offers a similar picture citing that the stage of life where men are working as being particularly isolating (Biddulph, 1994).

*Table 1: Stages of Male Development*

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth</td>
<td>Studies show that little boys get less attention, more often held so that they are pointed away from the person they are with. Men will demand attention and fight to get it.</td>
</tr>
<tr>
<td>Weaning</td>
<td>Boys are trained not to cry but to go off and handle things alone. The interference at the development stage of feelings expression is significant in later life.</td>
</tr>
</tbody>
</table>
| Primary School | So begins the, as Whyte calls it, ‘beat or be beaten culture’. Boys are beaten up for not being ‘male’ enough or being like ‘girls’ or ‘sissies’.  
*This is the beginning of the installation of sexism on boys. The anti-homosexual abuse in society issued as the tool of the installation of gender oppression.* |
| High School    | Boys are no longer allowed to be close to other boys, it is now that sexual conditioning begins. Boys have to prove their ‘manhood’. |
| Work           | Life is work. All the focus of men’s lives is through their work. This is the most isolating period of their lives. |
| Retiring       | When the period of work is over many men are just ‘disposed’ of. They either seize up or drop dead. Those that survive have little real contact with others and life often has no meaning. |

*(Whyte, 1993)*
This life-long conditioning proposed by Whyte may sound extreme, but is probable that many men would relate to it wholly or in part during the course of their own lives.

Socialisation and Health

There is little doubt that men are socialised in different ways than are females. From an early age according to Farmer (1992) boys are trained to be tough and not to cry when they are hurting. If they do they are considered to be 'girlish' or weak. The culturally dominant view of contemporary masculinity depicts men as unyielding, tough, durable, vigorous and “unaffected by the illnesses visited upon frail women” (Alexander, 1992). Ornstein (1992) found that men have been conditioned not to express their feelings because it would be seen as a sign of weakness, it would be ‘feminine’.

The normal way of releasing tensions and emotions are denied to most men because of their conditioning. The frustration caused by such containment and control often results in explosive outbursts which can hurt the individual and those around him. Orkin (1992) offers a similar view that men are forced to accept rules which, in effect, dehumanise them. Men are denied the right, through socialisation and society's expectations, to feel, nurture and act cooperatively with one another.

The consequences of this socialisation process, observes Fletcher (1992) is that men suffer disadvantages to their health. The disadvantages are compounded because not only does socialisation encourage unhealthy practices in terms of proof of 'manhood', as Whyte identified, but it further serves to isolate men from seeking help when they are in need of health care. It is only very recently that health services are being forced to admit that this kind of attitude and behaviour are seriously contributing to overall health outcomes (Wiesner, 1992).
Butler (1991) concluded from his research that men's health and men's health issues, could not be fully addressed without first examining patterns of behaviour in child-rearing practices, family life, unemployment, recreation and society and its institutions—in short, all those aspects of socialisation to which men are exposed and whose consequences result in poorer health for men.

The reality, writes Butler (1991) is that from the evidence of psychiatrists and counsellors men generally are so discouraged from expressing emotional or physical pain during their formative years that by the time they reach adulthood, they often don't realise when they are hurting, nor do they realise when they are hurting other people. They are encouraged to think risk taking behaviour is manly and often engage in abusing behaviour without realising the consequences of doing so.

How society socialises its men has a direct impact on the health of males and the well-being of the community itself. The presented statistics and socialisation factors show a cause and effect relationship. The socialisation process is however, dynamic. Over the past 20 or 30 years there has come a constantly increasing challenge, from a variety of sources, to the male socialisation process.
CHANGES AND CHALLENGES

Introduction

Prior to the mid 1960s the roles of men and women in our society had remained largely unchanged. However, the last 30 years has seen many changes in gender perceptions and expectations in relation to both men and women. The stereotypical male ‘role’ has come under pressure from a variety of sources from the women’s movement to unemployment. The challenge to change has never been greater, or come from so many different sources, as it now does in the 1990s.

Women and the Women's Movement

The predominant challenge to men has, of course, come from women. For the last two or three decades, according to Hawley (1993), women have been in group therapy, consciously thinking about, talking about and arguing about, what exactly it is to be a woman. Men on the other hand, have been content to just ‘role along’. The Women’s Movement has helped women to define themselves in terms of their femininity - now, however, they want to define men (Bennett, 1993).

Since the 1960s women have found economic independence through the workplace. This has, in turn, increased their expectations of men to a point where women’s critical view of men’s private behaviour “totally dominates the cultural dialogue” writes Bettina Arndt (1992). Women’s push for equal opportunity legislation has eroded men’s idea of themselves as ‘Lords of Society’. Everywhere the age old unchallenged rites of male superiority over women, in male dominated structures such as in government, the workplace, society and the family is being unravelled and subject to critical appraisal, according to Hawley (1993).

In the 1990s, according to Biddulph, the liberation of women and the work of the Women’s Movement appears to have stalled, or is in some cases going backwards. The rationale behind this theory, is the belief that society cannot liberate only half its
members, liberation must include the liberating of men as well as women (Biddulph, 1994). It is therefore in women’s own interests to press for men’s liberation.

**War Used to be Good**

War, and the ability and willingness of men to fight has always played a significant role in our society writes Farrell (1994). Either directly, or indirectly, real (Vietnam), or perceived (The Cold War), war or the threat of war, has been with us for many centuries. Farrell’s research shows how great the significance of the military has been on male socialisation and society’s expectations. With recruiting slogans such as “The Army will make a man of you” and the glorification of war in such movies as Rambo the influence of the military on men has been widespread and far reaching (Farrell, 1994).

However, the sudden and abrupt end to the Cold War, in conjunction with a greater economic interdependence throughout the world, has made much of the need for a strong militaristic socialiser redundant. The whole emphasis, in recent years, has slowly begun to move away from the military unit and hopefully to the family unit (Farrell, 1994).

**Changes and Challenges From Within**

The changes and challenges do not all originate externally, men themselves are reporting changes as well. Hawley (1993) quotes information from Institute of Family Studies surveys that men are giving more attention to their children than their fathers ever gave them. They are, it reports, feeling more comfortable about showing the sensitive and emotional side of their nature, although they are still concerned about projecting a ‘manly’ image to the world. Unfortunately, the media have not caught on to the more positive developments made in men’s make-up, writes Arndt (1993). They continue to portray men as: “Incompetent lovers, inept, often irrelevant family members, incapable of expressing emotions or showing intimacy”. Worse than that however, men are often seen as evil, violent and a dangerous threat to women and children (Arndt, 1993). Such is the power of the mass media and its strong influence on attitudes and values. However, this is an extreme view and one which should be judged as such.
Other Factors

Graham Riley, quoting from an interview with Peter West (1993), identifies several other sources of challenge. In addition to femininity he cites; the changing nature of the workplace; the emergence of male homosexuality as a legitimate form of masculinity and the effects of AIDS on sexuality; all of which have impacted on the traditional construction of masculinity.

Many men have, at least in part, defined their masculinity as an ability to work and be a good provider for their families (Riley 1993). Unfortunately, the recent high rate of unemployment has led men, especially, to feel frustration, a loss of self-esteem and even a sense of shame in not being able to fulfil the perceived male role of breadwinner and provider (Howard, 1993). In fact, the problematic relationship between men and their absence of work has in some cases forced men to take their own lives in what Hawley (1993) calls ‘breadwinner suicide’.

Robert Bly, in the preface to his book Iron John, believes that the stereotypical images of adult manhood given by our popular culture are basically ‘worn out’ and men can simply no longer depend on them, because in reality, they no longer work. Change is inevitable (Bly, 1990).

This literature review suggests that there may be a cause and effect relationship between the male socialisation processes employed by society, and men’s health problems highlighted in the statistics. However, the male socialisation process is being challenged and this should have an impact on men’s health in the future. Only time will tell. However, how changes in male socialisation are affecting men now can be measured, at least qualitatively. The following sections describe field research which examines the thoughts and feelings of a group of men in relation to their own experience of socialisation.
METHODOLOGY

Undertaking this type of research, which requires people to talk, not only of their own feelings about aspects of their lives, but perceptions of a general 'societal feeling' as well, requires a certain amount of liberal and spontaneous discourse. This would not be conducive to the more formalised quantitative form of research. Consequently, and in view of the fact that men are the subject of the study, a qualitative approach was adopted.

Background: The Participators

It was never going to be easy getting men to talk about themselves. Ask them about sport, sex or politics and the conversation is set for the duration, but something so personal is different altogether and even more so when you want to study what they say.

So, it was armed with this knowledge that a recruitment strategy was devised. Over the past twelve months or so relationships and interactions the author has with different men in daily life, the neighbours, husbands of family frierds, local shop assistants, and work colleagues were expanded, extended, and cultivated. This was calculated to build up a level of confidence and credibility which would hopefully facilitate their participation in this research.

Even after preparing the ground in such a way and over an extended period of time, only five out of ten men approached to participate agreed to be interviewed. Of the five who declined, two heard about the study and its aim and said they would think about it and give a reply. They never did. Another literally ran away and is yet to return. Yet another asked questions about how personal the interview would be and then declined on the grounds that he felt it was too personal for his participation. Finally the last of those who refused did so because he could see no value in such research. His attitude towards anything that bothered him was to "drink more beer".

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This, he said, was what a psychologist had told him after he was wounded in Vietnam. He had followed this advice ever since.

The five who did agree to participate ranged in age from 20 to 35, came from varied educational and occupational backgrounds. Two were married, two were single and one was divorced. Two had children and three lived with a wife or girlfriend.

**Background: The Questions**

During the interviews basically three questions were posed. What does masculinity mean to you? What does maleness mean? And what value are men to our society?

The differentiation between masculinity and maleness was a deliberate attempt to offer an option to the culturally recognised and societally prejudiced term of masculinity. This is a reflection of how society has separated the terms femininity and feminism as representing two different concepts. Whereas masculinity has an almost culturally recognised definition, maleness offers less of a stereotypical response and one more in keeping with a changing social ideology.

The importance of men’s value as an issue of discussion is founded on the changes that have occurred in our society. Fathers and grandfathers had a sense of value based on their ability to provide for, and protect their loved ones (women and children). Providing usually came in the form of often difficult and/or dangerous occupations which it was perceived that women could not, or should not have to do. Protecting often came in the form of the ability to fight, either in the macro sense of open warfare, or in the micro sense of the fight for survival.

Times, however, have changed and brought this perceived sense of value into question. The increasing role of women in society, the generally much safer environment in which we live and the providing capabilities of the state have all contributed to a changing sense of men’s value in our society. This component of the
study seeks to ascertain, from the study subjects, what, if any, new values are emerging for the men of the 1990s.

**Interview Structure**

Because of the nature of the subject under investigation, and the sensitive nature of the material, an in-depth interview style was the most appropriate approach. Based on the Funnelling Model proposed by Minichiollo, Aroni, Timewell and Alexander (1990), the interviewer controls the flow and type of information being asked. Initially broad, general questions are asked to start the subject thinking along certain lines. The researcher then guides the subject toward more specific questions pertaining to the nature of the study. The rationale for using this type of interview style is its ability to promote a more relaxed and non-threatening conversation. The subject can reflect at ease on general questions and later be eased into answering more specific questioning.

**Recording the Data**

Each interview was performed under similar circumstances and conditions. Each interview was recorded on cassette and then transcribed verbatim. The taped formal interview lasted approximately one hour. Informal discussions were held in relation to the interview and the study at different times after the formal interview and were added to the interview material where relevant. Key themes and comments were collated from the transcribed interviews. They were then classified according to relevance, significance and importance to the study. Also noted was body-language, non-verbal responses not captured on tape, hesitancy, evasion, enthusiasm etc. In some instances themes were only noticeable by their absence in the interview, and these too were included in the analysis.
FINDINGS

INTRODUCTION

This study was devised to access changes in how men perceive themselves as men. The guiding principle was that changes in that perception may improve men's health and help solve some of the community health problems related directly to men such as domestic violence.

Change was one of the predominating themes which emerged from the study. The participants readily identified preconceived and stereotypical aspects of masculinity, images handed down from fathers and through the media. However there was also a recognition that many of these images were false or had become obsolete in the 1990s. There were indications that men had a new more involved role to play and a different one to their fathers.

Social expectations and peer group pressures were important influencing factors in how men perceived themselves. However, by far the most influential factor, identified by all participants, was that of women. In all aspects of the study, whether it was masculinity, maleness or male value that was being discussed, the expectations, influences and significance of women dominated the dialogue.
THE IMPACT OF WOMEN

The demands of women for equal rights and their 'liberation' from the yoke of oppression, has not happened without an enormous impact on men's perception of themselves. When they tried to define aspects of their maleness, masculinity or value, each of the men interviewed spoke at length on the role that women play.

The Way it Was

"There was no grey areas in the past" laments Mike, age 30, women were women and men were men, you knew where you stood. Men were stronger and more defined than women, they had more direction, more focus said Dave, 24. Strength was what made the difference back then it was generally agreed. Because of men's greater physical strength over women, it made men dominant added Mike. There were jobs that men could do but women couldn't. John, 25, believed women used to be weaker, men made the big decisions in those days, men were in charge, even if a husband beat his wife, she still stayed, that's the way it was.

They Changed the Rules

"Women have changed since feminism came along" according to Paul, 20. "They're a lot stronger now". Mick agrees. The women's movement started it, the whole thing all that liberation and equality. Women have expectations now if you treat them badly they up and leave says John. Women's ideas have changed they're no longer happy being the homemaker, baby producing part of the team continues Mick.

The one factor that had been so readily identified in terms of men came under fire from Dave, "Women prove you don't have to be strong to survive". Strength doesn't mean anything these days. Nor it seems does being a provider according to Mick, the breadwinner can be the woman these days. They have taken over in all male areas, they changed all the rules.
Men Have to Keep Up

The more time goes by, the more people are working out that men are not better than women advises Paul, the reality is that men are really quite fragile. Males are quite threatened by females these days. Women don’t need us any more and I can’t see any specific value for us any more reflects Dave. Gary, 34, still believes men are in control but it’s changing he says.

Men are really confused to know where they stand these days, especially with feminism concedes Gary. Women have expectations of men now, you have to relate to them, recognise their feelings and emotions and stuff says Mick. Paul reckons men have to keep up with the increasing emotional strength of women or get left behind.

Not all the changes are seen in the negative by the participants however. Two of them thought it was perfectly acceptable for men to stay at home and look after the kids while their partners went off to work. Men can show what had been ‘feminine traits’ before, sensitivity, caring and the like. The truth is though according to John, men’s value is what women dictate they want.

Mike was philosophical “Men have got to keep up with the changes and if women continue to change men have to keep up”.

Discussion

The collected comments from the various interviews show the extent of impact that women have had on these men’s perception of being male. The study questions never actually addressed any women’s issues and yet each participant introduced the subject and then discussed it at various lengths.

In the main, what the comments indicated was how much notice these men were taking of what women were doing. They took notice partly because they felt they had no choice any more, women could not be ignored, nor would they remain silent, and partly because it seemed to be beneficial to do so. Several positive examples of
change were proffered, ranging from legitimacy in emotional expression to a fairer, and more involved distribution of child rearing responsibilities.

The perceived dominance of men because of their greater physical and, in some examples, emotional strength was seen as being in the past. Because strength, especially physical strength, is no longer deemed necessary for survival, as one respondent pointed out, it doesn’t really matter any more. Emotional strength was not so readily dismissed, however, with the respondents indicating that emotional control was important in a man’s life. At the same time, it was recognised that women did not have to exercise emotional control, but seemed to be managing better than men at the moment.

The influence of women over men’s perceptions highlights a number of positive implications for men’s health. Men can only benefit from the influence of women. A reduction in risk-taking behaviour by not having to prove ‘manhood’, greater emotional legitimacy, and better communications between men and women with a subsequent potential reduction in adverse health-related behaviours are all possible.
SOCIALISATION INFLUENCES

Any society or social group has a set of mores and norms to which, by and large, all members of the society conform. This allows the society to maintain itself. How those mores and norms are passed on depends on a variety of sources—parents, religions, media, peer groups etc. What is passed on reflects what society expects and what is deemed fashionable at that time.

You Can't Help Exposure to It

The imagery of men portrayed by the media seemed to be very strong with the participants. Gary, 34, accused the media of portraying men as 'macho' and 'okker'. Proving themselves in a physical way and where 'drinking with the boys' was all important, Dave, 24, echoed similar sentiments. Society sees that as 'normal' behaviour for men, citing the media for portraying the "men of iron with stiff upper lips", who "rarely showed emotion" image.

John, 25, was more specific. As he stated, the "Clint Eastwood" type of man was always the image of the real man that he recalls. The old cliché of 'a man's gotta do what a man's gotta do' often came to mind. The media always seem to deny that men can be sensitive and caring complained Gary, they make us out to be distant and insensitive. If they do show us as less macho its usually as some sort of weakling, he continued.

Men also socialise with other men points out Dave. If you behave differently from what's expected you cop a lot of flak from the other blokes, it keeps you in check. Paul, 20, felt the same. If you say anything that's a bit different, they call you gay. Some things you just can't talk about because the other blokes would dismiss you as being 'poofy' went on Dave. John also found peer groups a problem. Sometimes you feel one way but have to act another, he was afraid of appearing 'woosey' in front of them. Paul felt that sometimes he had to copy what his peer group did in order to fit in with them, even though he knew he would be happier acting the way he felt.

STEVE SWAN
Parental influences were also mentioned by the participants. Gary said his father was away at work a lot of the time, that was what he did, work. Emotionally he would bottle things up until it got too much and then just explode. John was adamant he would never behave like his father who was abusive toward his mother. “In that sense I learned what being a man was not about,” he said.

Socialisation is a necessary part of society’s cohesion, we are all conditioned to fit into it in some way. As Gary summed up “you just can’t help being exposed to it”.

**Doing What’s Expected**

The process of socialisation creates a series of expectations for those doing the socialising and those being socialised. The men in the study saw themselves as being expected to act, do and feel certain ways. Some of these expectations, those of women, have already been discussed. However, there are more general expectations that also contribute to a definition of manhood.

A summary of some of the comments made concerning the expectations of masculinity, reveals a series of shoulds and should-nots. Men aren’t expected to show emotions said John. You’re not supposed to get emotional or show your feelings was Paul’s comment. Dave expressed a similar view. You have to keep your emotions in check, its expected. Mike, 30, also added that he felt males were expected to be in control of their emotions.

On a practical level according to John, men were expected to have a job and go out to work. Dave thought that the pub on Friday nights and football on Sundays was expected behaviour for men, society had legitimised such activities. Despite admitting he did not feel that way himself, Paul said that society expected men to go out to work and was happier if the women looked after the children. Men are expected to be in control and should be able to sort things out offered John. If they don’t offered
Dave, everything would fall apart. You don’t display too much emotion said Mick, because its not acceptable for men to do so and most of us do what is expected.

**It’ll be Even Better in Another 10 Years**

Although the participants held a fairly clear idea of what society expected of them, there was also some tentative acknowledgment of changes occurring in those expectations. Society, offered Mick is more open now about a lot of things, like it’s much more acceptable for men to show their emotions like they couldn’t before. Gary also acknowledged some change albeit only slight. Men and women were more likely to do things together now.

Its better for kids, thought Paul, much better to have the influence of both parents at home. On the same subject of children, Mike felt that the role model influences on kids (boys) were much more positive these days they had definitely changed for the better. At 20, Paul was the most optimistic, he felt they were good now but in another 10 years it would be even better.

**Discussion**

The importance of socialisation, not just in the way men define themselves but in almost all aspects of our behaviour, should not be underestimated. Nor should the impact that technology has had on the socialisation process. Never in human history have we been subjected to so much external stimuli. Computers, videos, satellite TV, CD, VCRs, affect not only the young developing mind, but also the minds of parents, teachers and others influential adults. As a result, we take an increasing amount of our ‘collective identity’ from the imagery presented on these media.

Australian society, and for that matter western society, has no recognised rites of passage from boyhood to manhood, somewhere in our development they have been lost or abandoned. In a socialisation context this has meant that boys must make their own way into manhood using the images that the society provides, and what they see
of other men’s behaviour around them. So far, it would seem from the study, these images have not been very realistic or productive. The perceived expectations of society do not seem to equate with the feelings of the individual male and yet they are prepared to forsake this in order to fit in and be part of, society.

What was encouraging from the study is that all the participants felt that things were changing for the better, albeit only slowly. Those who were interviewed were all able to identify some aspects of change. There was a generalised agreement that it was getting easier to be more individual, such as not having to constantly display their strength, physical or emotional, and to be in control all the time was not essential to well being.

Socialisation is an important influence on men’s health. A collective legitimising of vulnerability, that is, societal recognition of men as not having to be so strong and emotionally controlled, would allow them to express health needs. It would not be a sign of weakness to be sick and would facilitate men’s emotional maturity through enabling them to more freely express their feelings.
MASCULINITY AND MALENESS

Up until now, men have had no need to think about what it was that actually made them men. They have relied on handed down perceptions, Hollywood and the powerful imagery of the advertising media, which has fed them a diet of rugged isolationism and emotional stereotyping. This was certainly reflected in the participants' responses to the question of masculinity.

You Don’t Take Shit From Anybody

The respondents’ perception of the emotional range permitted in order to meet the criteria of masculinity was narrow. Being crude and rude with the boys, said Paul, 20, its kind of expected. Aggression and dominance are synonymous with masculinity, offered Mike, 30. Again aggression was cited, this time by Gary, 34, along with ‘macho’. Being strong and protective featured in Dave’s, 24, definition, whilst John, 25, cited toughness and sexual prowess.

Masculinity means doing certain things as well. It means going out to work and not saying very much thought John. You just get on with it and keep going until you drop if you have to, was Dave’s response. You put on a front and don’t show people who you really are was Paul’s rather telling comment. To be masculine, said Gary, means being able to control and lead.

Being tough and strong and aggressive featured regularly during the course of the interviews. Paul thought that it was important to show everyone you can’t be pushed around. Mike was of a similar opinion, macho, tough, lots of bravado, and being gung-ho was how he summed up masculinity. Strong, silent and non-complaining, that’s masculinity said Dave. Gary felt that it seemed necessary to be constantly proving your masculinity through sporting feats, drinking or shows of physical strength or so it seemed to him. He continued that it conjured up visions of bodybuilder types with muscles, who didn’t take shit from anyone.
Without the Bullshit

There was a generalised hesitancy in response to the definition of maleness. However, most of the respondents seemed to take it as an opportunity to express how they felt personally and not to generalise as they had done when discussing masculinity.

The responses to the question of maleness required more intense probing and encouragement. Maleness, said Paul, is just about being male and not having to put up a front. It's a more equal term in relation to women, said Mike. You can allow yourself the idea of feelings, emotions and sensitivity according to Gary, he went on to say how it was more something within ourselves as men. Dave felt you could be more open and true to yourself with maleness. John, for his part, thought maleness was just being who you really are, without the bullshit.

Discussion

When discussing masculinity the descriptive language of the participants tended to be of an external nature. They spoke in generalisations and borrowed heavily from socialised imagery, often describing what 'most men' thought whilst in some cases disassociating themselves from that particular viewpoint. The emotions equated with masculinity were limited, toughness, aggression, machismo, stern, all those which had been identified as being acceptable by society.

On the other hand, when the respondents were asked about maleness, there were far less comment made. What was said was of a more personal nature, reflecting more of an individual response. It seemed that offering an alternative to masculinity gave legitimacy to what they themselves felt and not so much of what was expected of them. Actual expressions of emotion were limited but a general sense of something within the self was evident from the comments. Two of the respondents also expressed a closer affinity with women in the context of maleness.
Recognition of the distinction between masculinity and maleness reflects a change in the respondents' definitions of themselves as men. The implications of this change for men's health-related behaviours are perhaps only minimal at this stage. However, encouragement of the self-concepts the respondents associated with 'maleness' would have a liberating effect on the stereotypical perception that has developed around masculinity. The most significant concept to come out of this part of the study however, was the association between maleness and a closer affinity with women. That is certainly a seed worth nurturing in terms of men's health related behaviours.
VALUE PERCEPTION

The value to society of being a man once rested on men’s ability to fight, protect, provide and to procreate. For this, it was necessary for men to be physically strong and, to a great extent, to deny themselves a range of emotions which were not conducive to their role in society. Today, however, this value has become somewhat obsolete. There is no longer any real threat of war, women no longer need protection, or to be provided for, they have proved their capability to look after themselves and their children. Even procreation does not have to involve men any more, any man’s donation will do, women tell us.

When asked about the value of men to society the respondents generally acknowledged that this was a difficult question to answer. Initially the response was of not knowing or not being able to think of anything, but, with persistence some valuable insights came to light.

Men’s value? Ask me another one said Gary, 34, he couldn’t think of anything off-hand. Mike, 30, recalled his father and how he only ever seemed to be away working. “He provided us with the materialistic things so I suppose that’s valuable,” he said. At 20, Paul saw men as being valuable in helping out where women needed them to. There’s no great value in being a man these days, was Dave’s, 24, response, there’s nothing unique about men compared to women he continued. Not much I suppose said John, 25, it’s a tough question.

Being There for Your Kids

After the initial difficulty defining men’s value, however, the participants looked to the significance of men in relationship with their partners and their children.

Staying home and looking after the kids, that’s valuable thought Paul, who said he wouldn’t mind doing that if his wife could get a better paid job than him. He could see value in developing a close relationship with his children. Mike agreed, looking after your kids there’s value in that. John felt being there for the kids, having time for
them, was valuable. There's value in having a good relationship with your wife, supporting her when she needs it, was Dave's answer.

**Discussion**

From the limited responses to this line of questioning, it was difficult to define the respondents' view of the value of being a man. Several respondents commented that they had never even thought about it before. There was a generalised acknowledgment that 'doing', performing actions such as gardening, building, repairing, etc, had in fact been devalued by women's ability to now do what previously men had only been seen to do and expected to do. There was a tacit recognition that the mainstay of masculinity, physical strength, was becoming increasingly redundant as a value in an age of technology.

There were positive indications of change, as far as the importance of wife/partner and children were concerned. Closer more involved relationships, and a desire for more time spent with their children were indicated. Significantly missing from the responses however, were any emotional definitions. No one specified any particular emotion that was of value to men, only the ability to control emotions rated a mention as valuable.

With such limited responses, it is difficult to gauge the implications for men's health-related behaviour. Closer relationships with partners and children, a galvanising of the image of men as part of a family instead of the isolated work unit, are perhaps indicated. There still seems to be a long way to go before men develop more emotional maturity, but what we value, we treasure and it would seem the family represents considerable value to men.
CONCLUSION

In the development stages of humanity, man’s greater physical strength, the dangers of a hostile environment and the need to protect his mate, made his role easy to define. Men had a purpose, a sense of value, they had to be strong, aggressive, and emotionally ready to fight, and in some cases die.

Our predominantly Anglo Saxon history dictated that this concept of ‘masculinity’ was to prevail down through the centuries of our society’s development and into the Australian context. Men fought wars, they fought nature and they endured the hardships, they provided and protected but they rarely if ever doubted that this was their role or questioned why it was so.

However, the last thirty years or so has seen a gradual erosion of these aspects of the role of men in society. The environment is not so hostile, there is no immediate fear of war and women have been successfully able to prove they can do the tasks that once only men performed. It might be logical to assume that men’s health would improve as a result of these changes. Unfortunately it hasn’t. In fact in gender comparable terms it is getting worse, not only in relation to diseases and illness but also in health-related behaviours such as drug and alcohol abuse, violent behaviour and domestic violence.

It is only since the beginning of the 1990s that society has begun to realise that the definition of manhood needs closer scrutiny. Statistics on men’s health are evidence that problems exist. High rates of mortality, suicides, preventable diseases as well as problematic behaviours can all be linked to the socialisation practices from which our definitions of maleness and masculinity come.

This study went in search of a 1990s definition of manhood and signs of change in how men perceived themselves as men and what was really valuable about being a man. What it found was an expressed desire for closer relationship with partners,
more time spent with children, of sensitivity and growing emotional maturity and legitimisation. There still remained a lot of the past, a legacy of a different time with a different role for men, but the seeds of change were definitely there to be nurtured.

How these changes will affect men’s health and health-related behaviours is something which can only be observed in the future. However, closer relationships between men and women and with their children, can only be beneficial to everyone. As the debate gathers increasing momentum, and this type of research adds weight to the dialogue, society might see a different type of man emerging for the turn of the century.
RECOMMENDATION

Further Research

There are possibly as many men’s issues which would benefit from research as there are women’s issues which have already benefited. This study has introduced a broad spectrum of issues, any one of which could become the subject of further research. This study could also be extended to cover a larger sample of men, or repeated after a period of time to monitor further changes in attitudes to health and health-related behaviours.
REFERENCES

Department of Community Services and Health. (1989) *Statistics on Drug Abuse in Australia*, AGPS.


