The social construction of familial masculinities: Creating a context for change through an exploration of masculinities

Matthew Adam

Introduction

Masculinities, which are understood to be socially constructed, are of primary importance to the construction of gendered identities for boys and girls and men and women. Gendered studies about masculine identities and their influence on society can be found in abundance in contemporary literature, and significant concepts, such as ‘hegemonic’ masculinity, were first discussed over 30 years ago (Connell, 1982; Connell & Messerschmidt, 2005; Jefferson, 2002).

As the field of masculinities has expanded, what were once revolutionary ideas and concepts are now the grounding framework for further studies. The construct is derived from the emergence of feminist theory, an examination of the role of a patriarchal society upon social development, sex-role theory, equity theory and gay liberation, all of which consider the influence power plays in gendered relationships (Adams & Coltrane, 2005; Connell, 2006; Edwards, 2005; Frosh, 2002, Frosh et al., 2005; Gardiner, 2005; Garlick, 2003; Haywood & Mac an Ghaill, 2003; Peterson, 2003). Further developments in this field have focused on differences in the performance of masculinities according to class, ethnicity, and culture (Alexander, 2000; Archer, 2001; Evans, 2007; Farrell, 2003; Fine, 2006; Morgan, 2005; O’Donnell & Sharpe, 2000; Seidler, 2006; Sewell, 1997; Sinfield, 2006) with particular attention being given to masculine identities in the school setting (Epstein et al., 2001; Frosh et al., 2002; Kehily, 2001; Mac an Ghaill, 1994; Renold, 2001, 2007; Swain, 2006). Surprisingly, despite these advances in the understanding of gendered identities, there remains very little written about how the development of masculinities in boys, and the social discourses that govern them, may have an impact upon family relationships.

To incorporate these ideas into a systemic perspective, I categorise masculine identity into two distinct categories; institutional masculinities and familial masculinities. Institutional masculinities include domains where boys and men are influenced by social discourses related to work and education, whereas familial masculinities are influential within the make-up of the family and the wider context. Institutional masculinities are most often organised by a hierarchical structure with the most dominant masculine figure at the apex and the least dominant and, in some locations, most effeminate masculine figure at the bottom. Familial masculinities are most often organised by aspects of culture, life-stories, and family scripts that inform individuals ‘how’ men should behave within intimate relationships. By having two distinct domains, attention can be given to how one might be more influential than the other, dependent upon the context in which it is embedded. Furthermore, these two domains create opportunities to consider how the domains of masculinities can recursively influence each other.

Whilst there is great scope to develop further ideas related to the influence of both domains upon family life, the focus of this paper is to illustrate, through the use of a case study, how exploring and discussing familial masculinities can create a context for relational change at multiple levels.

The social construction of familial masculinities

As I grew up, my family made a series of moves as we followed the jobs available to my father at the time. He was committed to providing for his family and had been encouraged to achieve great things in life, scripts which were handed down to him from his father before him. Unsurprisingly, commitment to work was highly valued by my father and he often brought his work home with him. I have memories of him secluding himself away to reflect on complex mathematical problems, or marking papers and tests in the evenings and over weekends. Although busy with work, my father was also caring and loving and made me feel special when we were together. He privileged his relationship with Christianity highly and, over time, I learned that men ‘should be committed to work’, ‘have permission to be absent from family life’ and ‘should have complete reverence to God’. These masculine narratives of availability, absence and Godliness defined my relationship with my father as ‘available in the presence of God’ but left me confused about whether relational availability could be achieved outside the presence of God, and I began to distance myself from the father-son relationship. As an adult, I have reflected upon the social discourses and family scripts that defined masculinity and fatherhood in my family, and I have challenged those narratives that I was dissatisfied with in my youth, whilst retaining and building on those which allow me to be defined by others as I wish to be. What has ultimately occurred as a result of this examination and movement in my gendered identity has been a journey away from the familial masculinities that had created tension in our relationship, arriving at an altogether different place where I have been able to appreciate the value and worth of my father’s familial masculinity without compromising my own chosen masculine narratives.

The social construction of familial masculinities begins before a child is born and continues on until that individual dies. It is dependent upon the social discourses...
governing the social environments the individual encounters. To unpack the complexity of familial masculinities, it is useful to consider which discourses influence families on a day-to-day basis. The social ‘GRRAACEESS’, a much used and useful acronym in systemic thinking for social contexts, which include gender, race, religion, age, ability, culture, class, ethnicity, education, sexuality and spirituality, has been widely used within training contexts to encourage training systemic practitioners to reflect upon their personal experiences that may generate strong responses to families they may encounter (Burnham 1993). But, this framework is by no means only useful in terms of the development of the clinician’s self-reflexivity.

By using the framework to explore with a family the nature of the production and performance of masculinities, a greater understanding about how relationships are affected by them is gained. Some important context-markers to consider when thinking about familial masculinities are: Age; how does the belief about ‘how boys should be’ change over time within the family context? At what point in the family of origin does a boy become a man and what aspects of masculinity need to be evident for this to be the case? Ability; are there familial beliefs that boys sometimes need to become the ‘man’ of the house? What attributes are required to meet this belief and are they appropriate for the age and ability of that boy? Class; what aspects of ‘being a boy’ are valued and what narratives or scripts inform families of the direction boys should take? Are boys from working-class backgrounds expected to be ‘tearaways’ and eschew education? Are boys from middle-class backgrounds expected to be ‘obedient’ and work hard to achieve middle-class backgrounds expected to be ‘obedient’ and work hard to achieve? Education; institutional masculinities are different from those performed in the family home. In schools, acquiring popularity through masculinity is achieved by being physically competent and skilful (proficiency at sports, fighting), rejecting academic achievement, being dismissive of emotions, highlighting heterosexuality and/or misogyny through relationships with girls or through expressed narratives, and being adept at humour. Does a boy’s attempts to be accepted by his peers in school get mistaken for disruptive and problematic behaviour? How does this challenge familial masculinities defined by class, culture, or ethnicity? Sexuality; familial masculinities are usually aligned with heterosexual masculinities. Does a perceived deviation from these mean a boy displaying gay masculinities is therefore marginalised or labelled as a ‘problem’? Of course, these are only some of the social contexts which may have an influence on the development of familial masculinities and they are by no means exhaustive.

### Jason and his father

I hope to be able to illustrate the aforementioned ideas through a case study of a family where familial masculinities seemed to be an important part of the family’s interaction and beliefs about the other. The relationship most affected by these beliefs and narratives was the father-son relationship, though a secondary gain was achieved within the mother-son relationship through this relational breakdown, thereby perpetuating the problematic interactions. When I became involved with this family, it seemed their defences were high, which prevented much therapeutic change from occurring. The family, it seemed, were at a relational impasse where the ‘problem’ was serving a greater purpose than any ‘solution’ could possible create.

'Jason’, a 16-year-old boy, was admitted to an inpatient unit with a diagnosis of anorexia nervosa. He was extremely emaciated, had untidy long blonde hair that was often matted, and valued fashion a great deal. He often wore nice shoes with mismatching socks - an outward gesture of his flair for difference - skinny jeans, trendy shirts, and bracelets and necklaces. This was Jason’s third admission to an inpatient hospital and he was deeply entrenched in anorectic thinking. His mother and father had divorced when he was ten years old and, while they were ‘civil’ to each other, both parents did not interact with each other if they did not have to, leaving Jason as the ‘go-between’.

Jason did not exude the bravado or machismo that many adolescent boys attempt to perform. He was instead a gentle and soft-spoken boy who had an avid interest in making food. Many of the ‘celebrity’ chefs he admired were women, and he spent a great deal of his time on the eating disorder unit thinking about making food, despite not eating it. Jason’s paradoxical thinking and subsequent eating-disordered behaviour was confusing to his mother and father, and they both struggled to understand their son and his problems.

His mother, ‘Rebecca’, was a kind and well-intentioned woman who expressed her desire to do whatever it took to help her son recover from his illness. She was a 45-year-old woman who had a diagnosis of bipolar disorder. She was adamant she did not want to be ‘labelled’ by mental illness, and studiously avoided any conversations about mental illness, citing it as ‘unimportant’ to Jason’s recovery. Rather than enabling openness and honesty, Rebecca’s position prevented Jason from communicating his experiences of her and his mental illness, and he began to find family therapy a threat to the strategies he had developed to manage complex negative-emotions.

Jason’s father, ‘Charles’, was a soft spoken and well-intentioned man. Standing at 6’ 4” and being broadly built, he was a joiner by trade and enjoyed his work immensely. The visible differences between Jason and his father were pronounced. Jason was malnourished and enjoyed reading GQ magazine; Charles was stocky, loved football and going to the pub. As though these differences defined their relationship as being at odds with each other, Jason was extremely vocal in his insistence that he would not attend any family therapy sessions that included his father, because he resented his father. Charles’ lament was not, as one would expect, that he had lost his relationship with his son over the last few years, but rather in his confusion about why his son was not the ‘lad’ he had always hoped for.

For this family, developing a greater understanding about the function of the
The social construction of familial masculinities: Creating a context for change through an exploration of masculinities

October 2013

Before I began this work, I developed some hypotheses related to gender about Jason and his father. Because he was a tradesman who worked with his hands and used a variety of tools to build and construct objects out of wood, I assumed Charles could ‘fix’ and build things, used power tools (which for some men hold the same worth as cars) and was likely to be reasonably strong. Jason was the antithesis of his father. Jason was physiologically weak due to his malnourished state, loved clothes and dressing differently, and cooked and baked food. The only power tool Jason used was a sewing machine which, as many men might agree, holds little worth compared to circular saws, power drills or cars. Charles knew his son shared little interest in the aspects of life he enjoyed, which meant he was uncomfortable when they were together. This discomfort, which grew out of a deviation from a father’s hope that his son could be a ‘real lad’, meant neither father nor son could acknowledge those aspects of their masculinity which they could share. Such perceived separateness in masculinity meant there was little basis for a meaningful relationship.

Although Jason reluctantly met with me individually, Charles was initially eager to demonstrate to his son that he cared and wanted to be part of his life. In clinical domains, it is not unusual if a father does not attend therapy sessions at all (see Dienhart, 2001; Schnitzer, 1993; Walters et al., 2001), so Charles’ initial commitment to the therapeutic process, despite his son’s absence from the sessions, invited the possibility that he was willing to challenge his belief system about his perception of his son’s masculinity. In the first session, in order to explore how men performed their masculinity in his family of origin, Charles and I spoke about his relationship with his own father. It emerged that, for much of his childhood, Charles was not ‘close’ to his father. Their early relationship was not characterised by arguments or violence but defined by distance.

Charles had always wanted to be closer to his father and longed for a more involved relationship. When he turned 15, Charles reported that something ‘just changed’ in the relationship and they became more attuned to each other. Investigation of this found Charles had begun to develop an interest in the activities his father enjoyed, and it was this shift in their relationship that brought father and son closer together. Charles was both desperate for Jason to align himself with him and despondent that this could never be the case because, although he had never spoken to Jason about this, Charles suspected his son was ‘gay’. Charles’ ‘acceptance’ that his son could never be the masculine entity he desired, though not stated directly, was clearly communicated in the language he used. When I enquired whether he was disappointed in his son for not being the ‘boy’ he wanted, Charles wearily replied that he supposed he was and that Jason had even asked him that same question.

When Charles did not attend the second scheduled session, I wondered whether having conversations that could be perceived as condemning had undermined the process of Charles’ engagement in therapy. Perhaps the conversation about disappointment in one’s own son ran in parallel with a family narrative about men not failing. Had this conversation invalidated this father’s belief that he had done all he needed to do to have a relationship with his son? Two weeks later, Charles returned for the next family therapy session. He was extremely apologetic for not attending the last appointment, and offered the well-known discourse that ‘men are often organised’ as a reason for this. I agreed with him there is often a belief in society that men are disorganised and I wondered if this was always the case for him or whether there had been occasions when he or others had noticed he acted outside of the ‘norms’ for men. Charles thought about this before replying that, when it came to his relationship with his wife, he was always thoughtful and tried to be helpful. Charles was also a romantic and enjoyed surprising his wife with small gifts for no reason. These differences, again, offered the possibility that this father, who aspired to hegemonic masculinity in both his and his son’s life, was capable of challenging the dominant narratives, and experiment with relational masculinity in order that he and his son could develop a closer relationship.

I was aware there was an increased likelihood Charles might disengage from the therapy at any point, given he had offered a gendered discourse as a reason for missing our last appointment, which provided me the impetus to encourage him to interact inversely to how he believed his relationship with Jason would develop.
Rather than waiting for Jason to become interested in his father’s interests like his father before him, I asked Charles how he would feel taking up his son’s interests. I asked Charles what he thought of Jason’s talents when it came to cooking (he liked to eat what Jason cooked and thought it was very good) and dressing (he thought Jason was a bit ‘camp’ but recognised he was different and had good taste) and then asked him whether or not he could suspend his own beliefs about what men ‘should’ do in order to ‘join’ Jason in his interests.

Charles found this question difficult. He genuinely wanted a better relationship with his son but also found deviating from his own perception of masculinity difficult to imagine. Charles was so embedded in the social perceptions of masculinity that any suggestion of performing masculinity in an alternative way was uncomfortable. After some time digesting this question, Charles asked me what I meant. I asked him if he liked to dress well and whether he had ever gone clothes shopping with his son. My thinking was, if Charles could find a usefulness in engaging in Jason’s interest in clothes (a provocative challenge to the script of being a ‘lad’), he might then be able to help Jason take an interest in him. We discussed this in further detail before I gave him the task to take Jason clothes shopping, with the message he wanted to take Jason’s stepmother out for a nice meal and needed a new shirt. Charles was instructed to ask Jason to help him find a shirt fit for the purpose.

Though initially uncertain about this task, Charles left the session saying it was useful to see that interest in a relationship could come from either father or son. I never met with Charles again after that but I did continue to see Jason individually and with his mother. Jason did go shopping with his father following that session, and he did help his father buy a shirt, but it was adequately embarrassing for Jason that he didn’t ever want to have to do that again. Although on the surface it seemed Jason and his father’s relationship had not changed, some months later, Jason reported his father had bought him some ‘Le Creuset’ cooking pans for his birthday, which had surprised him greatly. Jason was more certain of his father’s investment in him, which seemed a valuable development for him.

As my work with Jason came to an end, reports by the multi-disciplinary team stated he was exploring his sexuality and was pleased his voice was beginning to change. I began to look for interactions or behaviours that could be considered definitively masculine and made a point to notice these with Jason. At this stage in our work, Jason had become more vocal in sessions and, in one session, was speaking about making a giraffe-shaped cushion. He had made an object that resembled a shape rather than an animal and it turned out Jason had cut out the fabric and made the cushion without following the directions, a decisively masculine trait many would recognise in most men. I noticed this was a masculine behaviour and asked Jason if he saw it that way. Jason seemed to appreciate this confirmation of his masculinity.

In my last session with Jason and his mother, I was particularly impressed by his contribution to the sessions. He was speaking more freely and openly and he had even begun to challenge the dominant narrative that mental illness is not to be discussed. He did this very subtly by telling a story of how, one year, Christmas had been enthusiastically prepared-for at the end of November and the momentum had only lasted till the middle of December. That year, Christmas was a rather deflated affair, he remarked. His use of humour in his storytelling had enabled him to talk sensitively about his personal experience of his mother’s manic episode without upsetting his mother or explicitly revealing...
what the episode involved. It seemed to me that change was beginning to emerge in Jason’s relationships with his family. What were once taboo subjects were beginning to be spoken-about in a meaningful way. I cannot be certain the shift in the father-son relationship was the catalyst for such change to occur, but I can be certain Jason genuinely appreciated his father’s interest in his ‘alternative’ masculinity and that he began to reflect upon his heterosexuality as a result.

Discussion

As illustrated in the case study, an examination of a father’s perspective on masculinity revealed he was heavily influenced by family scripts about the performance of masculinity within the father-son relationship, cultural beliefs about what constituted masculine interests and activities and narratives about masculine sexual identity and belonging. So powerful were these narratives and discourses that neither father nor son was able to access their relationship as a potential resource and strength that might enable Jason to instigate change in other aspects of his life.

Through the development and exploration of hypotheses about masculinity, in the course of the brief systemic therapy, Jason’s father became aware of his family script that ‘fathers wait for their sons to engage them’. This was possible because an emphasis had been placed on exploring Charles’ construct of masculinity in the role of a father. One of the narratives that became apparent through this exploration was that fathers were distant figures for sons to connect with by taking on masculine interests. In this case, this script was not fulfilled and the emptiness Charles felt as a result of Jason’s disengagement was interpreted by him as a failing of his son’s attainment of familial masculinity rather than an assertion of his own sense of ‘self’.

As this was tracked further, it became clear that Charles was also responding to social discourses about males who appear effeminate as confirmation he could never relate to his son because they were disconnected in their masculine identity. Charles managed to gain a different perspective on the barriers to his commitment to engaging his son, which may very well have seemed both disloyal to his familial masculinity and uncomfortable in his ‘self’. This shift in beliefs about what constituted a father-son relationship offered him a new position in relation to his son’s masculinity and he was able to extend to Jason an invitation to re-write the family script to ‘fathers can engage their sons in their masculine interests and become available figures’. Although Jason did not speak about the changes in his relationship with his father that came about because Charles challenged himself to co-construct a new belief about masculinity, he seemed to find more confidence in communicating with others how he was experiencing his life and gendered identity.

Conclusion

The social construction of masculinities is a useful concept to incorporate into both case formulation when working with families and clinical supervision and training. Recognising that masculinities are developed in both institutional and familial domains and that the discourses and narratives associated with these domains are vital to this form of gendered identity, can create a context for change to occur. I believe there is an argument for clinicians to become interested in familial masculinities and how they are influential in family relationships so that so-called ‘problem’ behaviours or actions can potentially be recognised as ‘possibilities’ to the development of resources in relationships (Burnham, 2011). By enabling families also to become interested in aspects of their ‘self’ and what stories and experiences have led them to perform masculinity in the way they do, new opportunities and pathways for change are created and families may be better able to adjust to their dilemmas and problems in new and varied ways.

It would be remiss to disregard the construct of femininity in its entirety in this paper, given that femininity is socially constructed in a similar way to masculinity. It is likely girls and women face their own challenges in the construction of a gendered identity that has to take into account both feminine and masculine discourses and narratives as well as institutional masculinities and femininities in addition to familial masculinities and femininities. This overarching complexity of the social construction of femininity requires further input and exploration in the future because of the far-reaching implications of power and influence between the genders and within family relationships. A greater understanding about how male and female relationships become defined by the social construction of familial femininity would also create significant scope to help families begin to identify alternative ways of viewing relationships as resourceful.

References


Farrell, K. (2003) Naked nation: The full monty, masculinity, in the course of the brief systemic therapy, Jason’s father became aware of his family script that ‘fathers wait for their sons to engage them’. This was possible because an emphasis had been placed on exploring Charles’ construct of masculinity in the role of a father. One of the narratives that became apparent through this exploration was that fathers were distant figures for sons to connect with by taking on masculine interests. In this case, this script was not fulfilled and the emptiness Charles felt as a result of Jason’s disengagement was interpreted by him as a failing of his son’s attainment of familial masculinity rather than an assertion of his own sense of ‘self’. As this was tracked further, it became clear that Charles was also responding to social discourses about males who appear effeminate as confirmation he could never relate to his son because they were disconnected in their masculine identity. Charles managed to gain a different perspective on the barriers to his commitment to engaging his son, which may very well have seemed both disloyal to his familial masculinity and uncomfortable in his ‘self’. This shift in beliefs about what constituted a father-son relationship
Reflections on ‘Masculinities’ ten years on

Liz Burns

It often feels risky to re-visit the past. Not only is it “a foreign country: they do things differently there” (Hartley, 1953), but there is often an emotional charge attached to looking back, which makes the nature of the experience hard to predict in the present.

In 2003, I penned a modest piece for Context about the part played by literary reading in the construction of a masculine identity by four young men in their 20s: my sons Joe, Patrick and Dan and their flat-mate, Mo. My husband, Mike, a man then in his 50s, contributed too. The information was gathered at a Sunday meal in a flat in Stoke Newington.

Ten years on, I have been asked to revisit the conversation. The same participants are mostly still available and have agreed to consider the same kinds of questions and explore the way they see things now. We are all ten years older, much water has passed under the bridge and it is hard to know what to expect.

We met in relays on a couple of days in April 2013 and filled an hour or two with discussion. I identified some themes, which are set out and elaborated below. As always, there are more questions than answers, and I have highlighted those I found thought provoking in relation to systemic practice.

But…how to write it up?

My main thought since gathering the material has been, “How on earth do I write that up?” I wanted to explore a few thoughts about cultural influences (maybe reading, but also TV programmes, film etc.) on notions, and performances, of masculinity. My method was to set up a discussion with some questions, listen to what was said, and try to produce an interesting article: a quick skate over the surface of this fascinating topic.

I find that, inadvertently, I have taken on a little piece of ‘qualitative research’. I was always very influenced by Norman Denzin’s view: “In the social sciences there is only interpretation. Nothing speaks for itself … I call making sense of what has been learned the art of interpretation” (Denzin, 1998, p. 313). These reflections are strictly local, but it is important to interpret and ground what may otherwise seem just a piece of idle chat in something more solid. It has been a great learning exercise for me and I found my interpretive role absorbing, taking me in some unexpected directions.

Above all, I really want to do our family views justice, if I can. So here goes!

The scene

Ten years on, another family meal is being prepared, again by male members. There are some striking differences. In 2003, we met in a flat in London. In 2013, the setting is our house in the far west of Cornwall. In 2003, my three sons and their flat-mate were single. In 2013, they all have partners, two are married and we are planning my daughter’s wedding in the autumn. Her fiancé has agreed to bring his views to this conversation. In 2003, the discussion was exclusively between men about ‘masculinities’; but in 2013, it seems natural that this one must involve the women too, if only because they have so much to say and are definitely unwilling to be excluded.

As our personal relationships have moved on, the circle has widened. Two of the original group are missing, but this is no problem as they can be caught up with by email, and I can collect feedback electronically. The means of communication in 2013, and the information available at the touch of a button, are transformed in ways we would have found difficult to predict ten years ago.

Question: How much do changes in our therapeutic practice reflect and respond to these omnipresent, influential technological developments? How has the ‘explosion’ of electronic media affected the way we look at ourselves and those who are close to us? In 2003, it was easy to talk about ‘reading’ and

Matthew Adam is a systemic psychotherapist and systemic supervisor. He works at Cheadle Royal Hospital near Manchester and can be contacted at matthew.adam77@gmail.com