
Male carers: a study of the inter-relations between caring, male identity and age

Tim Gollins

University of Sheffield, UK

Abstract

This paper explores the findings, to date, of 20 semi-structured qualitative interviews conducted with men who are, or have until relatively recently, been informal carers for their spouse. I argue that male carers see themselves as caring but not as carers, and that this is rooted in the age related relationship between employment based male identity and notions of informal caring. The analysis of the results is split in to five sections: the first introduces conceptual issues regarding the relationship between caring and male identity; the second discusses gendered divisions in the home; the third considers links between rationality, caring and male identity; the fourth looks at the impact of identity on the communication of emotion; and the fifth section considers the importance of understanding carers transitions into retirement. Finally, the article concludes with a summary of the findings. This article is drawn from PhD research in progress.

The Aims of The Research

This research has three aims:

- 1) To carry out a grounded study of male carers. The study will aim to understand not only what caring tasks male carers do but also how they view their caring activities:

Phenomenological studies of male informal carers tend to concentrate on older male spousal carers (Bytheway 1985). Many of the studies considering the experience and activities of male carers take an unsympathetic approach, concentrating on the men's 'business efficiency' (Ungerson, 1987). Indeed, in one study, the manner in which male carers care for their wives with Alzheimer's Disease was linked to how the owners of rabbits care for them - conscientiously and with pride for their survival, but with no emotional investment (Rose and Bruce, 1995). This is despite large-scale studies from North America, which suggest that as many as 70% of older husbands (the figure is 78% for wives) assist their wives with personal care, and further research that suggests that older men can develop a 'family care-giving orientation' which is different from stereotypical male norms (Kaye and Applegate, 1994).

The lack of British phenomenological studies of male informal carers means that we know relatively little about male carers' experiences of caring in this country. There is a need to begin to unravel both the similarities as well as the differences between the caring done by men and women. This is important, since currently practitioners in the field such as social workers and health care professionals have to work without information on the commonalities between male and female carers. Commonly, they face stereotypical gender ideologies, which exaggerate the differences between male and female carers.

- 2) To investigate the interaction between notions of masculinity and notions of being an informal carer, particularly focusing upon how such notions may or may not affect men's transitions into caring roles:

The interaction (if any) between male carers' gendered understanding of themselves and any notion they may have of being 'a carer' has not been researched in any depth. This work is particularly important as it may help to illuminate the ways in which constructions of masculinity and also of caring identities may influence men's transitions into caring roles.

- 3) To explore the relationship between masculinity, informal caring and age, and the implications of this for men's roles as carers:

The social, political and economic circumstances in which carers take on caring roles vary for different generations. The differential impact of feminism across generations particularly on the educational and employment opportunities for women (Walby, 1997), the variation in discourses of The Family and the changing importance of marriage, (Arber and Ginn, 1995), suggests that caring may carry different levels of significance for carers of different ages.

Background

Feminists have documented how masculine perspectives have been the benchmark for judgements about public behaviour at work and how these norms can become enshrined in both legislation and work culture (Williams, 1995). Feminist researchers have also demonstrated how, in contrast to the public sphere, women are centre stage where labour in the home is concerned (Dalley, 1988; Garmanicow, 1983).

Feminists have shown how notions of femininity encourage women to stay at home and 'make' the 'gender deal', where men take public breadwinner roles and women the private caring responsibilities within the family. This often extends into the community where women's unpaid caring labour saves the government millions of pounds a year (Dalley, 1988, Finch and Groves 1983; Walker 1982).

Feminist work on issues like Community Care policies, the public-private divide and women's unpaid labour in the family has led to a rich literature on power imbalances and gendered inequality (Finch and Groves, 1983; Finch and Mason, 1986; Garmanicow, 1986; Malos, 1995). In particular it has led to a critique of men's involvement in family life, focussing on men as fathers (Burghes, Clarke and Cronin, 1997), and also as carers (Arber and Gilbert, 1989; Green, 1986; Parker and Lawton, 1991).

One of the great successes of feminist research and debate has been the questioning of gendered assumptions regarding informal care in the family and the community. By questioning the normative gendered judgements made by successive governments about the concept of care in the community, feminists also challenged the notion that men do not care.

Feminist researchers have begun to look at men as active participants in the informal caring economy. The General Household Survey (1985) showed larger than expected numbers of men caring within the family, 40% of all spousal carers being male (Evandrou, 1990). A number of studies followed the General Household Survey 1985, which illustrated how male carers care in a variety of circumstances. By far the largest group of male carers are men who care for their spouse (Arber and Gilbert, 1989; Parker and Lawton, 1991).

The research on male spousal carers indicates that male carers are often caring intensively for their spouse, and where that caring is heavy they are doing very similar tasks to female carers (Arber and Gilbert, 1989). The studies showed that the major persistent difference between the caring of female carers and male carers was in the extent to which personal caring activities were carried out, there being more of a taboo for male carers than female, especially where this was connected to 'dirty work' such as dealing with incontinence (Gold, 1989).

Unsurprisingly however, the norm feminists used for researching caring was women's experiences, not least because this made up, and largely continues to make up the academic knowledge base on the subject. Where the qualitative study of male carers has been undertaken the sample group has been small (Ungerson, 1987).

Early research on male carers and caring tends to show how male carers view caring through their paid work experiences, and articulate how it is provoked by reference to feelings of duty to the fulfilment of marriage vows, rather than to notions of love and reciprocity which is the language female carers tend to use (Ungerson, 1987).

More recent research indicates that male carers are very good at caring in a practical sense, but are not very good at engaging at an emotional level. In short, male carers are thought to be executing tasks and not caring for an individual person to the same extent as female carers (Rose and Bruce, 1995). The exception to this trend are older men, who seem able to develop a caring orientation that can help them break away from their gender perspective (Kaye and Applegate, 1994).

The Study

This study is important because firstly, it seeks to place men's phenomenological experiences of caring at its centre. This study takes a look at the stereotypically female phenomenological world of caring and it locates men who are fully 'employed' (in an unpaid capacity) in this world. The study seeks to find out what the men do, how they came to be caring and what they think and feel about it.

Secondly, this research is valuable because while it learns from the knowledge base of feminists and recent work on male caring, it considers their experience of caring within both a gendered and an age related perspective, specifically considering the caring experiences of male carers pre and post retirement. In doing this, my research challenges both gender and age related discrimination.

Finally, the research is important because, although it is not primarily focussed on social policy, it should be noted that the growing numbers of older people combined with the entrenchment of welfare and the uncertainty of the government's commitment to long-term care, suggest that in the future it will be more and more important to understand the views, problems, and service needs of male carers.

Methods

The fieldwork is ongoing. It is made up of three non-representative samples drawn from the South Yorkshire area. In each case the carer is a man who is currently caring or has recently, (within the last 5 years) cared for their spouse or partner. The first group is a group of 10 male carers who are over 65 years of age. The second is made up of 10 male carers who are under 65 years of age, and the last is a group of 10 male carers who have cared across retirement. That is, they took up a caring role prior to retirement and continued it after retiring.

The lower age limit is 18; there is no upper age limit. Two interviews are conducted with each participant. The first tends to be centred upon hearing the carer's 'story' and the second more focussed on the key research themes, and checking and clarifying information from the first interview. All interviews are recorded and transcribed.

Qualitative analysis is completed on all the interviews by using QSR NUD.IST software. Anonymity and confidentiality are closely observed in all cases. It should be noted that the findings to date are produced from 20 fully analysed interviews, 8 from the group of carers under 65 years of age; 7 from the group of carers over 65 years of age, and 5 from the group of carers who have cared through retirement.

The Findings

The findings to date of this study are presented through four themes, which have emerged from the analysis of the 20 interviews. These four themes are: Identity; the Gender Deal; Instrumental and Emotional Caring; and finally, Caring and Retirement.

Identity

Feminists have done a lot of research on the relation between caring and female identity (Groves 1983; 1985; Finch and Mason, 1996; Graham, 1991; Ungerson, 1983; 1990). Early work, in the 1980's, on the concept of 'care' identified a dual meaning to caring, 'caring for someone' - carrying out caring work, and 'caring about someone' - having caring feelings (Groves, 1983; Thomas, 1993).

In the early 1990's, however, the concept was seen as much more problematic. The major difficulty with the concept was that it identified a specific identity for the carer, and assumed a specific social domain for their activities. That is, the carer in the early definitions of caring was a woman, and she was seen to be caring in the family, at home, in an unwaged capacity - a home-based kin-care concept (Thomas, 1993).

This conceptualisation of caring and the carer was re-worked by Graham, (1991) who showed how the home-based kin-care conceptualisation prevented researchers from seeing other differently organised forms of caring, such as that performed by domestic workers who are disproportionately black women (Graham, 1991). Similarly, Arber and Ginn (1992) showed how the home-based kin-care concept limited the extent to which differences in the caring activities and experiences of middle-class and working-class carers could be identified.

Ungerson (1983; 1990) also appreciated that the home-based kin-care concept was over restrictive. She showed that not only was there a need to address race and class differences in the concept of caring, but that the home-based kin-care concept sets up a false dichotomy between formal and informal spheres of caring. Ungerson (1990), challenged the view that caring in the private domain was 'better' than caring in the public domain because it involved emotion, and indeed, many researchers have documented how caring in the formal waged economy can and does often involve emotional investment from the carer (Ungerson, 1983; 1987).

In all these re-conceptualisations of 'care' the primary factor indicating the identity of the carer is gender. For Graham, caring is women's work, albeit women of different class and racial backgrounds. For Ungerson (1987), caring is intrinsically gendered too, but she accepts that caring is not inherently female (Arber and Gilbert, 1989). The gendered nature of the concept of caring has important implications for carers. Caring activity affirms women's female identity, even femininity, and this can be an important factor influencing how caring roles are negotiated in the family (Finch and Mason, 1996).

Women will tend to take on caring roles 'naturally' as if it were an integral aspect of their everyday identity (Groves 1983, Finch and Mason 1996), whilst men it seems, will only accept a role if there is no one else who can take on the responsibility, indeed, research suggests that men will take on caring responsibilities only when there is a crisis in care provision (Qureshi and Walker, 1989). The exception to this, however, is men who are married or partners of their ill spouse. In this case, the male carers identify their caring responsibilities as a duty that they perform because of marriage vows they made (Ungerson, 1987).

The research on caring and identity suggests that caring is intimately bound up with female identity, and that the concept of 'caring' is constructed upon female experience. However, caring is also a male activity although this activity does not seem to constitute male identity. A greater awareness of how male carers identify themselves will help establish a more accurate understanding of the social identity of carers. This in turn may lead to a re-consideration of how we view 'caring'.

In the excerpts which follow I show extracts of several men talking about how they identify themselves. In the interview I ask them to tell me if they see themselves as carers or not. The accounts suggest that the men see themselves in a number of different ways, but never primarily as a carer.

Please note () signifies a comment about the context of the interview and [] encloses interviewer dialogue.

Not a carer - a worker

- Mr Aiden: I have never thought of it as a carers role, never thought of it...I have made the wife an excuse sometimes, not to do certain things err, like err, if they want me to work over, an you know I'll call her back I don't like letting people down, you know I have worked all hours I have worked 36 hour shifts, [mm] because I have struggled, to to, to get a good living for us [mm] and that's what we have got now, I have put some work in, I shall always be working me.

And later Mr Aiden says in relation to caring

- I don't take it on, I just don't, I take it I think I should do it anyway I don't feel as if I am a carer because I have always been a worker
- Mr Alexander: I don't make a fuss of it at all, it never occurs to me most of the time, that I'm caring you know, I'm just doing, doing what we do you know' I go to work so we have some money, and we go away at week ends if she's well, I mean just carry on our lives as normal.
- Mr Anthony: I don't really know, I suppose I am a carer; I reckon its just part of the job isn't it!

Mr Aiden, Alexander and Anthony are from group 1 - carers under 65 years of age

Not a carer - a husband

- Mr Aiden: I am a husband (laughing) [right] If I thought I would be getting paid for it I think I would be, no don't pay me for it because I don't think I am doing anything

more than what I should be, because to me a husband should be there if his wife's ill

- Mr Alexander: I think there is more around than what you think there's more because they don't think they realise that they are carers, it's just somebody who's helping the missus out, a carer is a woman
- Mr Anthony: oh oh I don't mean I'm just doing it because the government are paying me to do it, because I don't know whether they are or not, they are aren't they? For better or for worse, it can't be helped, now we're having it worse aren't we? We had us kids when we were young.

Mr Aiden, Alexander and Anthony are from group 1 - carers under 65 years of age

Not a carer - a loving husband

- Mr Aiden; As far as caring is concerned, I have always cared but I don't call myself a carer, I'm a loving husband [mm] what more can I say?
- Mr Aiden again: But to be fair I don't class myself as a carer, I just class myself as a loving husband, because to be honest if I wasn't in love I wouldn't want to do it anyway.

Mr Aiden, is from group 1 - carers under 65 years of age

Not a carer - Mr anyone

- Mr Alexander: I don't think you will find I'm any different to anybody else, wouldn't have thought so unless somebody is not telling me something, unless I don't know some trick I don't know I don't think so.
- Mr Alexander: Amazingly simple no tricks of the trade no sort of special features I've got no better or worse than anybody else I've got my failings

Mr Alexander, is from group 1 - carers under 65 years of age

The Gender Deal

It has predominantly been feminist authors who have discussed the gendered aspects of the public - private divide, how these spheres operate differently for

men and for women and also how these spheres are mutually inter-dependant (Garmanicow, 1983). The Gender Deal is used explicitly as a concept by Pat Carlen (1988) alongside the notion of a 'class deal', to explain the social control mechanisms working upon young working class women in trouble with the law. She identifies the gender deal as follows; *male-related domesticity coupled with a wage-earning job* (Carlen, 1988: 13 emphasis in original)

The 'gender deal' as it is used in this paper refers to an implicit or tacit agreement between men and women based upon gender norms and values. That is, a normative heterosexual relationship with the twin ideals of a wage-earning male, and informal care giving within the family, by a female.

The gender deal is sustained and supported through concepts like marriage, the family and gendered employment markets which favour men and disfavour women's participation in them. However, recent changes in industrialised society, including: the destruction of heavy industry and the loss of jobs traditionally undertaken by men, the increase in the Service economy and the increasing employment of women in that economy, better educational opportunities for women particularly middle-class women (Walby, 1997), and the increasing rate of divorce and the decreasing rate of marriage, all suggest that the gender deal is an arrangement less likely in modern society than it has been in the past.

This study, however, suggests that even though this gender deal may be a fiction in many respects, for most male carers, especially older ones, it remains a principle psychological perspective which 'frames' the experience of caring. The gender deal defines certain wage-related tasks as masculine, in the sense that they are in the male domain and 'natural', and it also defines certain other activities as feminine, in so far as they are tasks done by women within the female domain.

The significance of this ideology seems to be that it regulates the extent to which the male carers are able respond to the demands of caring. In particular it seems to influence the extent to which the male carers are prepared to do certain 'women's' tasks, the extent to which they are skilled or unskilled in certain areas of practical household tasks, and the extent to which they are skilled in emotional terms to manage the difficulties of caring. Unfortunately, there is not enough time to

cover these aspects of the analysis in this paper. However, below, I illustrate how differences in the experience of 'the gender deal' by different generations of men and women, means differences in the experience of being a male carer.

The gendered division of responsibilities can be quite stark:

- Mr Amber: My Father was quite Victorian, my mother was quite liberal but my father quite strict you see. I believed that my wife's place was in the home, and that she should look after the family otherwise the kids would not have a proper upbringing. It was my job to provide. So that she didn't have to work, but that's just my chauvinistic attitude to it, but by the same token I expected myself to work hard and the house to be cleaned, and she enjoyed it. We've got three sons and when they all came home we expected a hot meal. You know she might have to cook three or four times [right] but that was ok, she enjoyed it, that's what she liked to do and erm it was my job to provide.

Mr Amber is from group 1 - carers over 65 years of age

There were many examples of how the individuals had altered stringent understandings of the gender deal so as to entertain caring responsibilities within it. This seems to be the case even when the gender deal is mediated by time spent in the Navy. I ask Mr Anderson how he understands caring:

- Mr Anderson: You work as a team, teamwork is like working in any family you work like a team. Everybody helping other members of the family

Mr Anderson goes on:

- Mr Anderson: Its like a family unit, especially in the Navy, when you would see there's no way you can run away and hide, in there you all work together and you live together, its like a family, so therefore you get on. I'm not saying that everybody gets on all the time, and you got to work together, you can't, especially like it was in the navy, you can't run away and hide.

Mr Anderson is from group 1 - carers under 65 years of age

The interview analysis also suggests, however, that gendered arrangements in relationships can often become entrenched and difficult to change. Here Mr Anthony is talking about his behaviour in his relationship with his spouse for whom he cares. He seems to suggest that the gender deal had changed for him since he has taken on caring responsibilities for his wife. However, he now seems to find himself unable to initiate change in his relationship with his wife:

- Mr Anthony: I mean because we are lucky because we have always been able to talk about anything and I dare not alter, but if I stop picking on her, you know if I am being you know cheeky with her, which we have always done, haven't we? (To wife) she'd start thinking, 'what the hell's up with you?' 'Something's wrong?' So I have to keep going.

Mr Anthony is from group 1 - carers over 65 years of age

Instrumental Rationality

'Instrumental Rationality' is a term used by Habermas (1972) to denote a human interest in knowing and controlling the world around us. Taylor (1997) defines Instrumental Rationality as 'applying technical means to achieve specific ends, using whatever means are deemed to be most rational or efficient to achieve the end' (p.242). Weber also applied this notion in his work on bureaucratic, rationally structured organisations (Weber 1930).

Work, at least for the most part, takes place in such organisations, and the instrumental rationality created and fostered within the work environment has been recognised as central to dominant male identity (Connell, 1987; 1995; Morgan, 1992; Seidler, 1989) and specifically male carers (Ungerson, 1987). Many authors from the 'academic men's movement' (Clattenbaugh, 1997) have articulated feeling constrained by a domineering rationality and need for control (Cohen, 1990; Horrocks, 1994; Stoltenberg, 1990; 1993) often seen to be emanating from the times of the Victorian industrial revolution (Humphries & Gordon, 1996; Roper & Tosh, 1991).

This study suggests that a notion of Instrumental Rationality is important to understand the perspective that men bring to caring. The study also suggests that this concept informs not only how men talk about caring (Ungerson, 1987), but also

that thinking instrumentally about caring helps the male carers feel at ease with a caring role, by defining the caring duties as work, albeit of an unpaid kind:

- Mr Alexander: Just plough on you get through it some how its no good moaning if things got really bad, I'd think of [wife's name] first, she wouldn't want to go to her mothers, her mother's too difficult to get on with so ... if [wife's name] was so ill that I couldn't cope and I couldn't cope well. She'd be no good going to her mother's cause her mother would make her worse she'd have to go in [to hospital] I suppose and I'd just have to have a rest, but it ain't come to that yet. Time might come if it really comes to that then I will take time off work, which I do quite regular, days off here and there and everywhere. If I've been up all night with her then I can't go to work.

Mr Alexander is from group 1 - carers under 65 years of age

- Mr Chase: Everything I do if you look at this flat is made for ease and I'll show you if you want to come round and look make a point of it. Everything is open space right everything all new switches can't do with little switches the whole house is situated like it is a ground floor flat to start with, its patio I do that, that's my job.

Mr Chase is from group 3 - carers who have cared through retirement

Communicating Emotion

Many of the men behaved very sensitively and talked with great feeling for their spouse and the feelings they experienced when caring. However, most of the carers expressed feelings about the need to avoid discussing emotions. The men seemed to have a significant problem discussing emotions that did not feature as part of the gender deal. By that I mean emotions which are publicly acceptable and 'naturally' assumed to exist within a marriage or marriage like relationship, such as love, desire, duty and commitment.

Feelings of loneliness or sadness, bereavement and need were rarely discussed openly, but frequently alluded to as significant issues through the interviews. This is in contrast to the ease with which the male carers discussed their feelings for their wives.

The analysis thus far seems to suggest therefore, that through the gender deal and instrumental caring male carers manage caring responsibilities in ways that enable them to show emotions suitable of husbands, while talking about caring in ways that are appropriate for workers:

- Mr Bremen:If you just try, you can do it you just keep going if it's not a problem it don't hurt you. That's what I can't get you to really understand, it's not like...if it's the woman you love it doesn't matter how tired you are you seem to be able to do it.

Mr Bremen is from group 2 - carers over 65 years of age

- Mr Amber: Err, yer I suppose, Err unless one is bathing and I must admit we have bathed together in the past but err e ahh I have not thought about it this way before but I suppose its like treating your wife as a piece of meat as a thing this object, I think this aspect kills the personal aspect of it you know. If you just go about it very clinically [right] its not erm, you can't do it with affection, if you are not looking at it as a husband and wife situation, you are becoming a male nurse.

Mr Amber is from group 1 - carers under 65 years of age

- Mr Aiden: Oh for a long time she was full-time and then she had to go part-time, and she came up to me and she said what would you say if I had to pack up work? I says, err the kids will be flying the nest soon anyway, so we haven't got too many debts, we have always worked with each other err we have never hid anything from each other, like I said we have been married 10 years so I just take it as my chore now.

Mr Aiden is from group 1 - carers under 65 years of age

Retirement, employment and caring

One aspect of research into caring and gender that has not been covered in great depth previously, especially where male carers are concerned, is that of ageing. The study specifically set out to see if age alters the experience of caring for male carers. The analysis indicates that the inter-play between retirement, employment and the adoption of caring responsibilities is not straightforward.

Retirement

Caring demands were accepted in a much more positive emotional and psychological manner when retirement had been successfully negotiated, or not yet confronted, than if retirement had been necessary through ill health or because of the demands of caring.

Caring after retirement

- [So being a breadwinner a few years ago was important for you was it?]

Mr Bremen: Oh yes it had to be, I'd got a mortgage, I'd got a wife to look after as well and things like that, I'm more secure now so it doesn't matter

Mr Bremen is from group 2 - carers over 65 years of age

Early retirement and caring:

Mr Anthony was off work with a back injury while his wife who suffered from Huntington's disease continued to work for a short while part-time.

- Mr Anthony: I used to keep the house clean, I used to go and fetch her, I used to go and pick her up, have tea ready, and everything like that was all I was virtually useful for, I couldn't do much else

[I get the impression that that was quite a difficult time?]

Mr Anthony: It was it was yes yes, but it was more difficult up here (pointing to his head) same with (wife's name) It took a hell of a time for me not to be going to work, you know even doing a bit of house work, pottering about in the garden, [mm] its what 15 years now, I think I'm just about resigned to it, but now mine has gone on the back burner (meaning his back problems), I still keep taking the tablets.

There seems to be some evidence that loss of employment may be tempered by the gain of a caring role:

- [Was it easier to become a carer when your wife became ill because you'd stopped work already?]

Mr Anthony: I think it was, yes yes, I think it was, because as I say I was virtually doing most of the house work and everything else, I mean when I was working I usually had to keep my shirts, make sure she had a clean shirt, you now she had to keep smart like, I had to kept it clean and that you know, and I suppose it just sort of came natural then.

Mr Anthony is from group 1 - carers under 65 years of age

Paid work and caring responsibilities

Where the carer was in paid work, the adoption of caring responsibilities seems to be a practical issue requiring a substantial change of lifestyle. This change in lifestyle seems to require time and energy and is not without its problems (an issue I do not have the time to explore in this paper), but psychologically it does not seem to pose a threat to the male carer's sense of who they are, they remain a worker and a husband. For example, Mr Aiden has a part-time job running his own business:

- Mr Aiden: I do the carpets, I Hoover them, anything that she wants putting out, the bedding out in there, I don't want her to fall, I just took it on myself that, I see to it. Because it's like toil sometimes, but it it's grown on me. At first it was a bind, I must admit, coming home from work to cook your tea. It's like treating it like a pile, prioritising like.

Mr Aiden is from group 1- carers under 65 years of age

Mr Crow's wife suffered from Alzheimer's disease and he began caring for her just prior to retirement.

- Mr Crow She can't really do anything apart from open her mouth for her spoon and I go in everyday apart from when I have got meetings with Community Health and that sort of thing at lunch time, and I go in each day at lunch time to feed her cause that helps the staff.

Mr Crow is from group 3 - carers who have cared through retirement

Conclusions

- 1) Shedding light on male carers experiences of caring can help define caring in a broader way than has been done to date, since caring has previously only been considered through women's experiences.
- 2) Male carers experience caring in quite different ways to women, although many caring activities are the same.
- 3) Male carers approach to caring is to see it as an activity, and not as part of their identity. Male carers do not 'see' themselves as carers. Their self-concepts are established through paid employment and where this is not possible through other activities.
- 4) Male carers 'buy into' the gender deal. That is, the idea of a male breadwinner and a female carer at home. The study indicates that male carers tend to do this even when the material circumstances are far from matching this notional arrangement.
- 5) Male carers avoid expressing certain aspects of being a carer, the emotional aspects, while they will speak easily about the emotions they feel as husbands or partners. The absences of discussion about 'problematic emotions' seem to relate to a notion of Instrumental Rationality, fostered within work, which informs the men's identity.
- 6) The study suggests that it is important to understand male carers relation to retirement in order to understand male carers experiences of caring.

Bibliography

Arber, S and Ginn, J. (eds.) (1997) *Connecting Gender and Ageing : A Sociological Approach*. OUP: Buckingham

Arber, S. and Ginn, J. (1992) *Class and Caring: A forgotten Dimension Sociology* Vol. 26 No. 4 November p. 619-634

Burghes, L. Clarke, L. and Cronin, N. (1997) *Fathers and Fatherhood in Britain*

Occasional Paper 23 London: Family Policy Studies Centre

Bytheway, B. Keil, T. Allatt, P. and Bryman, A. (eds.) (1985) *Becoming and Being Old: Sociological Approaches to Later Life*. London: Sage.

- Carlen, P. (1988) *Women Crime and Poverty* London: OUP
- Clatterbaugh, K. (1997) *Contemporary Perspectives on masculinity: Men, Women, and Politics in Modern Society*. London: Westview Press
- Cohen, D. (1990) *Being A Man* London: Routledge
- Connell, R.W. (1987) *Gender and Power* Cambridge: Blackwell
- (1995) *Masculinities* Cambridge: Polity Press
- Dalley, G. (1988) *Ideologies of Caring*. London: Macmillan.
- Evandrou, M. (1990) *Challenging the Invisibility of Carers: Mapping Informal Care Nationally*. London: LSE
- Finch, J. and Groves, D. (eds) (1983). *A Labour of Love*. London: Routledge and Keegan Paul.
- Finch, J. and Mason, J. (1993) *Negotiating Family Responsibilities*. London: Routledge
- Garmanicow, E; Morgan, D; Purvis, J and Taylorson, D. (1983) *The Public and The Private* London: Heinemann
- Graham, H. (1991) The Concept of caring in Feminist Research: The case of Domestic Service *Sociology*, 25(1): 61-78
- Habermas, J (1972) *Knowledge and Human Interests* London: Heinemann
- Horrocks, R. (1994) *Masculinity in Crisis* London; Macmillan
- Humphries, S. and Gordon, P. (1996) *A Man's World: From Boyhood to Manhood 1900-1960* London: BBC
- Jackson, D. (1990) *Unmasking Masculinity*. London: Unwin Hyman Ltd.
- Kaye, L. W. and Applegate, J. S. (1994) Older Men and The Family Caregiving Orientation in Thompson, E. H. (Jnr.) (ed.), *Older Men's Lives*, sage Publications, London, pp. 218-36.
- Malos, E. (1995) *The Politics of Housework* London: New Clarion press
- Morgan, D. (1992) *Discovering Men* London: Routledge
- Parker, G. and Lawton, D. (1991) *Further Analysis of The General Household Survey Data on Informal Care. Report 4. Male Carers*. University of York: Social Policy Research Unit

- Qureshi, H. and Walker, A. (1989) *The Caring relationship*. London: Macmillan
- Roper, M. and Tosh, J. (eds) (1991) *Manfull Assertions: Masculinities in Britain since 1800*. London: Routledge
- Rose, H. and Bruice, E. (1995) Mutual care but Differential Esteem: Caring Between Older Couples, in S. Arber and J. Ginn (eds) *Connecting Gender and Ageing: A Sociological Approach* Buckingham. OUP pp. 114-28.
- Seidler, V. (1994) *Unreasonable Men: Masculinity and Social Theory* London: Routledge
- Seidler, V. (1989) *Rediscovering Masculinity: Reason, Language and Sexuality*, New York: Routledge
- Stoltenberg, J. (1990) *Refusing to Be A Man*, New York: Meridan
- Stoltenberg, J. (1993) *The End of Manhood: Parables on Sex and Selfhood* London: UCL
- Taylor, P. (1997) *Investigating Culture and Identity* London: Harper Collins Publishers
- Thomas, C. (1993) De-constructing Concepts of Care, *Sociology*, 27(4): 649-669
- Thompson, E.H. (Ed.) (1994) *Older Men's Lives* London: Sage.
- Ungerson, C. (1983) Why do Women care in Finch, J. and Groves, D. (eds.) *A Labour of Love: Women, Work and Caring* London: Routledge and Keegan Paul pp. 31-51
- Ungerson, C. (1987) *Policy is Personal* London: Tavistock
- Ungerson, C. (ed) (1990) *Gender and caring: Work and Welfare in Britain and Scandinavia*. London: Harvester Wheatsheaf.
- Walby, S. (1997) *Gender Transformations*, London: Routledge.
- Walker, A. (ed) (1982) *Community Care: the Family, The State and Social Policy* Oxford: Basil Blackwell
- Weber, M (1930) *The Protestant Ethic and the Spirit of Capitalism* London: Allen and Unwin
- Williams, Christine L. (1995) *Still A Man's World: Men Who Do 'Women's Work'* London: University of California Press
-

Tim Gollins is a part-time Post-Graduate student in the Sociological Studies department at the University of Sheffield. Tim Gollins graduated from Warwick University and then completed a Masters Degree in Criminology at Keele University. Currently he works full-time for a special needs housing association in partnership with the Probation Service in South Yorkshire. Initial academic interest in the field of Men's Studies turned into a research interest in male carers, and notions of male identity, and ageing. As well as his academic and employment occupations Tim Gollins is a full-time father and partner.