Masculinity, infertility, stigma and media reports

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Abstract

There is growing concern about the health of men in the developed West. Compared with women they have higher rates of morbidity and mortality and are less likely to seek out and employ medical services. Several authors have drawn on social constructionist models, such as the concept of hegemonic masculinity, to account for these gender differences in risk and behaviour. One might anticipate that certain conditions, such as male infertility, would be perceived as posing a particular threat to conventional views of masculinity. There is some support for this, although there is little research into the social construction of male infertility. In this study Discourse Analysis was employed to analyse newspaper accounts of a reported decline in sperm counts in order to study the way in which infertility and masculinity were represented and constructed in the media. The results indicate a construction of fertility as being in crisis and of male infertility as conflated with impotence. Men were positioned as vulnerable and threatened by forces outside their control. The accounts drew on a range of stereotypically masculine reference points, such as warfare and mechanical analogies. These results are consistent with concepts of hegemonic masculinity and suggest that men are offered a highly restricted set of options in terms of perceiving and representing their bodies and their health.

Keywords: Male infertility; Sperm counts; Media; Masculinity; UK

Introduction

There is a growing consensus among commentators that men, at least in developed Western societies, are in crisis (e.g. Clare, 2000; Lee, 1996). Particular concern has been expressed in relation to men’s health. Men in the UK and the US die on average five years earlier than women and they are more likely to suffer from serious and life-threatening illnesses, to commit suicide and to abuse alcohol and other substances (Griffiths, 1996). To compound this situation men frequently have a poor knowledge of matters related to health and they are less likely than women to seek help from healthcare professionals when they are ill (Banks, 2001).

Many explanations for this state of affairs have been proposed. Some have been biological in nature, for example, suggesting an increased vulnerability among men (e.g. Kraemer, 2000). Social theorists, on the other hand, have sought explanations based on social roles and cultural stereotypes (e.g. Moynihan, 1998). One such approach is the concept of hegemonic masculinity, which is taken to describe the idealised form of masculinity at a given place and time (Courtenay, 2000). Beliefs and behaviours associated with contemporary western hegemonic masculinity include the denial of weakness or vulnerability, emotional and physical control, the appearance of being strong and robust, dismissal of any need for help, a ceaseless interest in sex, the display of aggressive behaviour and physical dominance (Courtenay, 2000). The characteristics of men embodied in this description could potentially account for some of the behaviours underpinning the health problems confronting men. For example, the
belief in invulnerability could lead to a lack of concern for risk and the need to appear in control could militate against seeking assistance.

It might be expected that some physical conditions would be likely to pose a particular challenge to this conception of masculinity. One such condition is male infertility. Infertility is a problem that affects a significant proportion of the adult population, with approximately 20% of cases being entirely due to male factor problems such as low sperm count and abnormal sperm morphology (Hargreave, 1994; Hirsch, 2003). There is a growing body of research suggesting that male-factor infertility has a specific impact on men (e.g. Glover, Gannon, Sherr, & Abel, 1996; Nachtigall, Becker, & Wozny, 1992; Slade, Raval, Buck, & Lieberman, 1992). How men cope with the condition is likely to have implications for their responses to investigation and treatment (e.g. Demyttenaere, Nijs, Evers-Kiebooms, & Koninckx, 1991; James & Hughes, 1982).

In most, if not all, societies fertility and parenthood are highly valued. However, the particular implications of this may be different for men and women. It has been suggested that a fundamental view of society is that motherhood is the ultimate expression of being a woman (Ussher, 1989; Phoenix & Woolett, 1991). While motherhood is central to the ways in which women are defined both by themselves and by others (Phoenix & Woolett, 1991), fatherhood remains simply one aspect of men’s lives and the ways in which they define themselves. In a study exploring attitudes to parenthood, Humphrey (1977) found that men, especially childless men, were likely to associate fatherhood with masculinity while women associated motherhood with contentment. Mason (1993) asserted that manliness is traditionally viewed as relating more to the ability to make a woman pregnant than to undertaking the role of father. This seems to be expressed in an underlying societal assumption that infertility is a threat to male sexuality or to masculinity (Mason, 1993; Edelman, Humphrey, & Owens, 1994). Nachtigall et al. (1992) interviewed infertile men and concluded that fertility is central to men’s gender identity. The apparent threat posed to masculinity by infertility seems to reflect the perceived relationship between manliness and the ability to father children and is in turn reflected in the common conflation of the terms impotence and infertility. Some years ago Bents (1985) suggested that male infertility had not been researched because the confusion between potency and fertility led to it being a taboo subject. This conflation of fertility, potency and masculinity has consequences for infertile men. Fathering a child is seen as proof of masculinity (Owens, 1982) and, in consequence, not fathering one is seen as a failure of masculinity. Nachtigall et al. (1992) found that approximately two-thirds of infertile men reported being preoccupied with the loss of their “physical potency”.

They also found that two-thirds of the infertile men in their sample felt stigmatised and identified this as relating to their perceived loss of masculinity. Miall (1994) interviewed men and women with no fertility problems about their views of infertile men and women. Male infertility was associated with higher levels of stigma than female infertility. Furthermore, when the cause of infertility was attributed to the man it was seen as the result of sexual dysfunction. The majority of men and half the women in the sample felt that infertile men would experience more difficulty than infertile women would, linking these difficulties with concern about their “tarnished” male ego or to worries about male sexual prowess.

There is, therefore, a body of evidence to suggest that infertile and sub-fertile men are likely to experience stigma and a consequent impact on their self-esteem, within the context of a pro-natalist society that links fertility with potency. Nevertheless, the direct evidence for such stigma is lacking, the claims for its existence being based primarily on the studies described above. It is an important issue because of the evidence that infertile men suffer from distress, which reaches clinically significant levels in some cases (e.g. Glover et al., 1996). An opportunity for investigating this issue has been presented by the media coverage of the debate over a supposed decline in human sperm counts.

In 1992 Carlsen and colleagues (Carlsen, Giwercman, Keiding, & Skakkebaek, 1992) published a paper in the British Medical Journal in which they reviewed papers dealing with sperm counts that had been published in the previous 50 years. They concluded that there had been a “highly significant” decrease in sperm counts over this period. A number of subsequent papers appeared to confirm these conclusions. A consensus began to develop that sperm counts in human males were in decline. The media, both print and broadcast, picked up on these findings and this resulted in a series of newspaper reports and television programmes. More recently, the claims of a decline in sperm counts have been challenged (Becker & Birhane, 1997), although this has been given rather less publicity. This episode, therefore, provides a valuable opportunity to study the way in which masculinity was discussed and, in the process, constructed within Western culture in the later-twentieth century. Lyons (2000) has argued that an analysis of media texts in relation to health is valuable because people develop their understandings and beliefs about health and illness from surrounding constructions and discourses.

This paper draws on newspaper reports of declining sperm counts to gain insight into the relationships between fertility and masculinity as expressed in the popular media. Given this aim, and the fact that it was not intended to test any specific hypotheses relating to it, a qualitative approach was judged to be appropriate. As
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