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Understanding boys': Thinking through boys, masculinity and suicide

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ABSTRACT

In the UK, the media are reporting increasing rates of childhood suicide, while highlighting that increasing numbers of pre-adolescent boys (in relation to girls) are diagnosed as mentally ill. In response, academic, professional and political commentators are explaining this as a consequence of gender. One way of doing this has been to apply adult defined understandings of men and masculinities to the attitudes and behaviours of pre-adolescent boys. As a consequence, explanations of these trends point to either 'too much' masculinity, such as an inability to express feelings and seek help, or 'not enough' masculinity that results in isolation and rejection from significant others, such as peer groups. Using a discourse analysis of semi-structured interviews with 28 children aged 9-13 (12 male, 16 females) and 12 school staff at a school in North East England, this article questions the viability of using normative models of masculinity as an explanatory tool for explaining boys' behaviours and suggests that researchers in the field of gender and suicide consider how boys' genders may be constituted differently. We develop this argument in three ways. First, it is argued that studies that use masculinity tend to reduce the formation of gender to the articulation of power across and between men and other men and women. Second, we argue that approaches to understanding boys' behaviours are simplistically grafting masculinity as a conceptual frame onto boy's attitudes and behaviours. In response, we suggest that it is important to re-think how we gender younger boys. The final section focuses specifically on the ways that boys engage in friendships. The significance of this section is that we need to question how notions of communication, integration and isolation, key features of suicide behaviours, are framed through the local production of friendships.

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Introduction

At the beginning of the 21st century, a number of concerns about men and boys are emerging across Europe, each with their own local (national) inflections (Dudink, Clark & Haggermann, 2008; Hearn & Pringle, 2009). More specifically, the UK is presently witnessing a state-led anxiety, where themes such as a lack of role appropriate models, low achievement/failure at school (compared to girls) and increasing violent behaviour appear to be threatening an ascribed cultural sancticity of boyhood. Although suicide rates did rise in the UK in the latter decades of the 20th century — especially among young men (Congdon, 1996), they began to decline steadily from the 1990s, especially in London and, by 2005, rates for those aged 15–35 years were at their lowest for almost 30 years (Biddle, Brock, Brookes, & Gunnell, 2008). Nevertheless, statistics continue to suggest that the rate of suicide for

men in the UK in 2008 was 17.7 per 100,000 compared to 5.4 per 100,000 females (ONS, 2010). However, fuelled by information via hospital based studies and charity press releases, media reports suggest that suicide behaviour in pre-adolescent boys (between the ages of 7 and 12 years of age) is becoming increasingly problematic (Brookes, 2009). It was argued that in 2006–2007 there were more than 4000 recorded incidents of 'intentional self harm' by young people aged 14 and under. The latest worldwide annual suicide rates for children ages 5-14 are 0.5 per thousand for females and 0.9 per thousand for males (Pompili, Mancinelli, Girardi, Ruberto, & Tatarelli, 2005). Statistics from the Information Centre for Health and Social Care (2007) suggest that boys under 10 were twice as likely to experience behavioural, emotional and mental health issues and in response a UK Minister for Education explained: 'We know that girls are better than boys at asking for help when they need it. That is why we are calling on professionals working with children to keep a close eye on boys in particular and spot when they are distressed' (Revill & Lawless, 2007: 2). Coyle and MacWhannell (2002) highlight how media reports use moral templates to make suicidality understandable and thus socially and

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culturally intelligible. In a similar way, suicide behaviour is emblematic of a collective national responsibility for social, emotional and psychological failure (see for example, Bow, 2009; Campsie, 2009; Jones, 2008). Of key importance for those working in the field of gender and suicide is that explanations, interventions and the suggested resolutions of such failure are read through a model of gender with a dependence upon fixed binary oppositions of masculinity and femininity (see Canetto, 1995: Cleary, 2005; Scourfield, 2005). More specifically, masculinity has become a 'catch all' phrase to explain all male behaviour. Male behaviours are being explained by either 'too much' or 'not enough' masculinity and 'unhealthy' masculinities have been documented (Robertson, 2006; Seymour-Smith, Wetherell, & Pheonix, 2002). Importantly, a cause and effect model of masculinity has emerged. In response, we argue that it is important for those working in the field of gender and suicide to consider how gender identities may be differently constructed, organized and cohered. Paradoxically, this may mean identifying the gendered nature of suicidality, whilst simultaneously questioning dominant explanations of gender identity formation.

There has been a growing use of the concept of masculinity to examine a range of social and cultural arenas and more recently it has been applied to male suicide (Dourais & Lajeunesse, 2004; Rudmin, Ferrada—Noli, Skolbekken, & Arne, 2003; Stice & Canetto, 2008). However, masculinity often operates along a continuum, with too much masculinity perceived as producing violence and aggression, and with too little masculinity perceived as creating vulnerability and risk. For example, as Miller and Bell (1996: 318) point out:

Any coherent account of men's mental health must include an appreciation of two important elements and the ways that they are linked and sustained through socialization and social structure. The first element is the male capacity to harm as both internally and socially validated; the second, the experience and form of male vulnerability and distress.

This 'cause and effect' model of masculinity presents men as 'damaged and damage doing', with masculinity providing the normative parameters through which males undertake destructive behaviours. One of the features of the masculinity literature is that all males, irrespective of social class, 'race'/ethnicity or sexuality can be located within the masculinity continuum. Much of this work provides an excellent insight into the dynamics of masculinity practices. For example, O'Brien, Hunt, and Hart (2005) identify a range of ways in which masculinity shapes men's relationship to healthcare. Their focus groups with a diverse range of men identify how certain groups of men view engaging in healthcare as 'less manly'. As a consequence, conventional notions of masculinity filtered out acceptable and unacceptable heath practices. One of the interesting aspects of O'Brien. Hunt and Hart's work is that it differentiates men across a number of social characteristics and highlights how age appears to be an important aspect of how masculinities are constructed. They found that groups of younger men who had stronger investments in masculinity produced less engagement with healthcare practices. At the same time, more psychologically orientated work assumes that the meaning of 'boy', 'masculine' and 'masculinity' are interchangeable. For example, Gini and Pozzoli (2006) in their self-report study on bullying with 113 six-to-ten year old children use femininity - masculinity scales that were based on typically masculine/feminine personality traits. Therefore, 'noisy' is deemed masculine and 'chatterer' is deemed feminine. In their analysis, boys with more feminine traits are more likely to be subject to physical abuse and participate in suicidal behaviour. This article argues that it is useful to think about boys' gender outside of this model of identity. Scourfield (2005) usefully

points out that one of the consequences of adopting a simple gendered frame based upon singular categories of male and female is that the complexity of social and cultural location become concealed. In other words, the dynamic nature of identity formation becomes simplified by a monolithic male/female binary. Furthermore, as Addis and Cohane (2005: 635) highlight: 'Approaching important questions only from a perspective of difference is a bit like assuming we can only understand one racial, cultural, or ethnic group by comparing it with another'. Embedded in a gender dichotomy framework is an assumption that: '...like has only to identify with like and acknowledging difference means respecting the boundary between what one is and what one cannot be' (Benjamin, 1995: 50). In effect, when trying to understand boys' behaviours it is important to reflect upon how 'boyness' requires a uniformity and coherency between that which is deemed the same and that which is identified as different. We wish to develop this point and suggest that approaches to suicide behaviour may benefit by considering models of gender that may not be captured by conventional models of gender that rely on masculinity or masculinities.

Study description

Aims

This study was part of a broader intellectual project that is exploring the formation and practice of masculinities with boys, adolescents and older men (Haywood & Mac an Ghaill, 1996; Mac an Ghaill & Haywood, 2005, 2007). In effect, we are involved in critically evaluating theory-led and practice-based approaches that draw upon the concept of masculinity, in order to develop new ways of conceptualising how we *gender* bodies. The overall focus of the research was to explore boys' understandings and experiences of schooling in North East England, examining relationships between pupils and teachers, pupils and pupils and the wider schooling environment. Discussions included issues about home, family life and leisure activities.

Sample and process

Located in the North East of England, Walcote West (all references to place and names of participants are pseudonyms) is a 'middle school' that provides a bridge between elementary and high school education for over 400 pupils aged between 9 and 13. As a key part of the research involved building upon existing knowledge and hypotheses on masculinity, pre-adolescence and schooling, the school selected had to meet a number of criteria. This selective sampling in advance of the fieldwork ensures that the sample provides a "preconceived, but reasonable initial set of dimensions' (Glaser, 1978: 37). Due to access and cost logistics, a North East conurbation was selected. Two potential schools within the locality met the criteria of being state funded, had an age roll between 9 and 13 and were co-educational. However, Walcote West was the only school with a catchment area of pupils from a diversity of social and economic backgrounds, and was thus selected. The data collection for this project took place during 2002-2003. However, despite a number of changes, such as intensification of government initiatives to address boys' underachievement and the increasing centrality of mobile communications in children's lives, the data collected continues to operate as a productive catalyst to explore current theoretical and conceptual approaches. Access to the research site was relatively unproblematic and after a number of meetings between the Head and the Deputy Head teacher, the researcher shadowed a randomly selected class one day a week over the course of one term. A letter to the parents of all pupils within the school was sent to ensure a greater population for sampling.

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