

MEN CARE TOO

By Greg Smith

Results from the 2015 Australian Survey of Disability, Ageing and Carers¹ show that almost 1.2 million Australian men provide informal, unpaid care. This number could be even higher when considering 'Hidden' carers, a term used to define those who are unwilling or unaware of how to recognise the caring role as separate to the typical husband, partner, son, brother, mate relationship. The caring role may also go unrecognised where a care recipient is opposed to the concept of requiring support.

Men are largely underrepresented in carer research and so based upon the current evidence, planning and delivery of services and support is seldom targeted at men in an effective way. Studies focused solely on the male caregiving experience are few and generally report on condition specific caring roles with small study cohorts². In my experience as a carer, facilitator and working with men in caring roles, I don't often hear men say they are a carer. Alternatively they 'look after', 'help' or 'manage' whatever needs to be done, methodical and devoted, working towards improving quality of life for someone close to them.

The caring role can be a complex, challenging, beautiful and emotional experience that provides a unique perspective on life. Understanding the male perspective of the caring role presents a challenge for the research community, government, organisations, service providers and community groups to better assist men who are often only reaching out for assistance when at a crisis point³.

*Innovative research opportunities exist for the carer community to explore relationships between the male caring role and topics such as **masculinity, male suicide, health and social services workforce and social connectedness**. This research will help shape a more inclusive approach to the management, planning and delivery of carer policy and programs, resulting in improved social connectedness, physical and emotional wellbeing and utilisation of services amongst male carers.*

Masculinity is often perceived as the stereotypical measure of man's ability to be strong, aggressive, competitive, tough, intelligent, confident and independent⁴. His status in society relies upon these and other traits which make him desirable to women and a role model to other men. Imagine then how myself, and hundreds of other men may have felt when as carers we were offered flowers or scented soap as a gift for participating at fundraising events for a large Australian charity. Invitations to carer events and activities received over the years include craft

¹ Disability, Ageing and Carers, Australia: Summary of Findings, 2015 <http://www.abs.gov.au/ausstats/abs@.nsf/mf/4430.0>

² Spendelov, J. S., Adam, L. A., & Fairhurst, B. R. (2017). Coping and adjustment in informal male carers: A systematic review of qualitative studies. *Psychology of Men & Masculinity*, 18(2), 134.

³ Mansfield, A. K., Addis, M. E., & Courtenay, W. (2005). Measurement of Men's Help Seeking: Development and Evaluation of the Barriers to Help Seeking Scale. *Psychology of Men & Masculinity*, 6(2), 95.

⁴ Addis, M. E., & Mahalik, J. R. (2003). Men, masculinity, and the contexts of help seeking. *American psychologist*, 58(1), 5.

classes, shopping trips or an afternoon of pampering. As nice as they all sound, they don't appeal to my male psyche and sends me a message that I don't fit in.

The typical man is portrayed throughout media and popular culture as emotionally strong, able to overcome adversity and is successful in his pursuits. Sporting superstars, actors and musicians are admired by many, appearing on the surface to have all the qualities many men aim to achieve. Recent suicides of musicians who were idolised by millions around the world, including myself and public conversations our sporting hero's share about their challenges, show that all men can become vulnerable to the pressure and expectation of what it means to be a man. Real or perceived, the pressure on individuals to fit in with the expectations of society exists.

Nurture and caring responsibilities are generally seen as feminine roles within families and the community however there is a large number of men in caring roles and possibly many more unidentified 'hidden' carers who don't access services or support. It took me over ten years to recognise and acknowledge that my caring responsibilities and relationship were separate to my role as a son and brother. Identifying as a carer changed my perspective as a man and where I fit into society. Nearly another ten years down the track and I still don't know where that is.

Results from the 2015 Australian Survey of Disability, Ageing and Carers show that over 272k men with an average age 57 identified as a primary carer, meaning they provide the majority of assistance to the person being cared for. The same survey identified more than 927k men (avg. age 49) providing a secondary level of care that required less assistance than that of a primary care role. Together these numbers show almost 1.2 million Australian men are involved in the caring role. Overall men account for 31% of primary carers and make up 50.3% of the 1.84 million secondary informal carers in Australia. These numbers represent a need to engage and consider men in caring roles when developing policy, planning services and delivering supports programs.

Cultural and masculine influences mean some men prefer to interact with other men when accessing health or community services however Workplace Gender Equality Agency data reports less than 20% of the healthcare and social assistance workforces in Australia are men⁵. Enrolment of males in certificate and diploma fields of vocational education and training is 33%⁶. Courses in this area include Aged Care, Allied Health Assistant and Community Services, all of which would likely have direct contact with men in caring roles. Observations from service providers on engaging men in the health system found services specifically designed for men and

⁵ Workplace Gender Equality Agency, Healthcare and Social Assistance Workforce Composition <http://data.wgea.gov.au/industries/6>

⁶ National Centre for Vocational Education Research, VET Enrolments by Industry (Health) <https://www.ncver.edu.au/about/about-ncver/about-us>

boys was limited or non-existent and suggested male specific, male friendly and male run services to better cater for the way men access and use services⁷. At the neighbourhood and community centres I have visited there is rarely ever a male face or presence. I have sat in packed classrooms and lecture theatres with only a few other men attending. These are experiences that stay with me, that reinforce the message that I don't fit in.

Men are less likely than women to access traditional health and social services when problems arise⁸, but faced with the fact that suicide is the number one cause of death for Australian men aged between 15 and 44⁹ there is an urgent need to change the way organisations and providers work to help men, including men in caring roles.

I find the statistics and risk factors for suicide disturbing and faced with the reality that I meet all the criteria for an Australian male at risk of suicide is scary. The number of lives lost to suicide is devastating. A 2012 report on men's health seeking behaviour¹⁰ found on average, 6 Australian men are lost to suicide every day. The rate of death by suicide is approximately three times higher in males, consistent with statistics reported in other western countries. In 2001 a study explored the caring role and murder-suicide where, although incidence is rare, it was found that half the offenders in cases studied were in a caring role¹¹. Recently, here in Australia we have had tragic reports in the media where murder-suicide involved complex situations of family care. The topic of suicide and the male caring role is relatively unexplored as evidenced by a lack of literature. Men in general can find it difficult to cope when facing tough financial, relationship or health challenges. Isolation and lack of social supports for men in caring roles can add extra pressure and little is known about how men cope when caring responsibilities come to an end. What happens next?

During times of stress, having a supportive and reliable social network can help reduce isolation and encourage the important and vital conversations that men in caring roles don't

⁷ Monaem, A., Woods, M., Macdonald, J., Hughes, R., & Orchard, M. (2007). Engaging men in the health system: observations from service providers. *Australian Health Review*, 31(2), 211-216.

⁸ Galdas, P. M., Cheater, F., & Marshall, P. (2005). Men and health help-seeking behaviour: literature review. *Journal of advanced nursing*, 49(6), 616-623.

⁹ Australian Bureau of Statistics. (2016). *Causes of Death, Australia 2015, preliminary data.*, Cat. no. (3303.0). Canberra: ABS.

¹⁰ Beyond Blue Research Report, Men's Health Seeking Behaviour <https://www.beyondblue.org.au/about-us/research-projects/research-projects/men-s-help-seeking-behaviour>

¹¹ Malphurs, J. E., Eisdorfer, C., & Cohen, D. (2001). A comparison of antecedents of homicide-suicide and suicide in older married men. *The American Journal of Geriatric Psychiatry*, 9(1), 49-57.

get an opportunity to have. Research shows that men seek help less often than women and are also less likely to attend support groups which can mean that men in caring roles are at greater risk of social isolation¹².

In the Carers NSW 2016 Carer Survey¹³ conducted by Carers NSW, just 1 in 3 men felt their caring role was recognised and valued by their community and 75% reported below average wellbeing. These figures could suggest some men in caring roles are struggling to cope and that social isolation is playing a part in that. A 2014 scoping review of men caring for a person with dementia identified negative experiences with formal as well as informal supports as a powerful influence on help seeking behaviours in 3 of the 4 studies reviewed¹⁴. The review also reported that men often see it as a sign of weakness to ask for help and bad experiences when doing so only compound feelings of failure with their responsibilities.

On more than one occasion I have experienced indifference and lack of understanding from carer support services who made me feel like I didn't exist, reinforcing my belief that I didn't fit in. These experiences make it difficult for me to trust not only those particular services, but also others and I now avoid situations where this might occur.

According to Social Connectedness research of Australian men¹⁵, 25% in the study had no one outside their immediate family that they could rely on. The same research reported that men who feel part of a community were more likely to have strong social support however being part of a community can be challenging for men in caring roles.

Carers Trust in the UK stated in their report, titled 'Husband, Partner, Dad, Son, Carer?'¹⁶ that male carers are a socially isolated group. Their research found 8 out of 10 men who left employment or study to care full time expressed difficulty in spending time with family and friends. In the same report almost half of the men in caring roles identified as having their own long term health problem or disability and 48% acknowledged that being a carer had a negative impact on their mental health. In the book 'Stop Male Suicide'¹⁷ Glen Poole discusses pathways to male suicide which includes

¹² Robinson, C. A., Bottorff, J. L., Pesut, B., Oliffe, J. L., & Tomlinson, J. (2014). The male face of caregiving: A scoping review of men caring for a person with dementia. *American journal of men's health*, 8(5), 409-426.

¹³ Carers NSW 2016 Carer Survey <https://www.carersnsw.org.au/research/survey>

¹⁴ Robinson, C. A., Bottorff, J. L., Pesut, B., Oliffe, J. L., & Tomlinson, J. (2014). The male face of caregiving: A scoping review of men caring for a person with dementia. *American journal of men's health*, 8(5), 409-426.

¹⁵ Beyond Blue Research Project Men's social connectedness <https://www.beyondblue.org.au/about-us/research-projects/research-projects/men-social-connectedness>

¹⁶ Slack, K., & Fraser, M. (2014). *Husband, Partner, Dad, Son, Carer?: A Survey of the Experiences and Needs of Male Carers*. Carers Trust.

¹⁷ Poole, G. (2016) *How you can stop male suicide in 7 simple steps*. Glenroy, Victoria:Lightworks Publications.

men who are socially isolated and those coping with multiple relationship, finance and health issues putting them at greater risk of suicide.

There are more than 1.2 million Australian men in caring roles however current programs and services are not designed or structured to engage men. Discussion here about issues of concern for men in caring roles such as **masculinity, male suicide, health and social services workforce** and **social connectedness** should be examined collectively or as unique questions in carer research. Including carer themed questions in large and diverse cohorts such as the Australian 10 to Men¹⁸ longitudinal study would be ideal in developing a greater understanding of who men in caring roles are, identifying 'hidden' caring roles and knowing what happens in a man's life after the caring role changes or comes to an end.

Finding somewhere I belong has proven difficult and fitting in when it feels like no one can see you can be hard but it is my hope that everyone who reads this will remember one simple message whenever they have a conversation about the caring role - **Men Care Too**¹⁹.

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¹⁸ Pirkis, Jane & Macdonald, John & English, Dallas. (2016). Introducing Ten to Men, the Australian longitudinal study on male health. BMC Public Health. 16. 1-4. 10.1186/s12889-016-3697-2.

¹⁹ Men Care Too <https://www.mencaretoo.org>