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Caring Masculinities at Work: Theoretical and Empirical Perspectives Across Europe

Caring masculinities at work in later life: Exploring relational care work in retirement

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Abstract

The paper reports on research that investigates older men's care practices and how their caring for others opens new ways of exploring the intersections of aging, gender, and care work. Using the concept caring masculinities as a sensitizing concept, the onus is on exploring patterns of power, interdependence, and relationality within men's care practices. Aging masculinities often remain constructed around paid-for occupational work (in opposition to unpaid care work) despite the transition into retirement. Little work exists on how caring is *at work* in later life potentially transforming gender relations and enacted masculinities. Moreover, much of the research on aging masculinities have not considered the expansiveness of retirement and the discourses as well as subjective expectations around the activity in later life that create an uncertain terrain of socioculturally structured mandates to be navigated. This paper draws on data from two qualitative interview studies conducted with retired men in England and Germany, in which the role of caregiving emerged as an inductive theme in their narratives. The paper makes a specific contribution to developing empirical and theoretical knowledge of caring masculinities and power relations by providing insights on men's trajectories into caring, and how they make sense of their caring for and about others.

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KEYWORDS

caring masculinities, later life, men, power, reflexivity, relationality

1 | INTRODUCTION

Older men's pathways into care are varied, change over time, are imbued by life course events, and are situated in a nexus of gendered privileges and age-related inequalities that can be mitigated or extenuated by other social differences. Men¹ can be pushed into care by personal circumstances (e.g., poor health of a spouse or partner and care for grandchildren), weak welfare responsibilities (e.g., onus on individual responsibility and those of kin for caring for dependents), as well as structural circumstances (e.g., not being able to afford professional care services). These factors have in common that they create a situation in which personal agency is dependent on economic and social capital. However, there are pull factors that can draw men into care, which may be influenced by notions of agency, autonomy, and skill. Despite these push and pull factors, care continues to be seen as women's work, both in terms of cultural understandings regarding the division of labor as well as in quantitative terms measured by the hours men, and women are involved in care work. In light of growing gender equality, at the level of policy and in everyday language, and extended life expectancy, particularly among men, issues of care and caring are becoming more relevant in the lives of older men.

The paper reports on research that investigates older men's care practices and how their caring for others opens new ways of exploring the intersections of aging, gender and care work. Using the concept caring masculinities as a sensitizing concept the onus is on exploring patterns of power, interdependence and relationality within men's care practices. Aging masculinities often remain constructed around paid-for occupational work (in opposition to unpaid care work) despite the transition into retirement.² Little work exists on how caring is *at work* in later life, thereby transforming gender relations and enacted masculinities. Moreover, much of the research on aging masculinities has not considered the expansiveness of life after occupational work and the discourses as well as subjective expectations around the activities in later life that create an uncertain terrain of socioculturally structured mandates to be navigated. Against this backdrop, it is important to examine gendered power relationships, in which older men's care work can be imbued by notions of hegemony where they provide for dependents within a traditional power hierarchy, or whether a different, more emotionally invested and relational understanding of care work is discernible. This paper draws on data from two qualitative interview studies conducted with men aged 52–72 years in England and Germany, in which the role of caregiving emerged as a theme in their narratives. Before turning to the data, the paper will consider the construction of masculinities in later life, studies that have examined the role of caring in older men's lives, and then will explore the concepts caring by Ungerson (2006) and caring masculinities (Elliott, 2016) and its relevance for understanding caregiving in older men's lives.

2 | MASCULINITIES IN LATER LIFE

As a category of gender, the term masculinities is used here in the context of critical studies on men and masculinities that call for a feminist perspective to analyze gendered power relations (Hearn & Morgan, 1990; Kimmel et al., 2005). Using the plural "masculinities" and drawing on Connell's and colleagues' sociological concept of hegemonic masculinity (Connell et al., 1982; Connell & Messerschmidt, 2005) underscore the importance of social class and the temporal-spatial aspect of gender construction and how these vary across time and place and within hierarchies of power constituted in patriarchy and capitalist economic systems (Connell, 2005). In this context, "hegemony" refers to hierarchies operating within social relations that provide some men (especially those privileged by heteronormativity, "race", class, and economic wealth) with power (Connell & Messerschmidt, 2005). King et al. (2021) argue that although neither the original conception of hegemonic masculinity nor its later reconceptualizations considers age,

it is possible to theorize old men as marginalized masculinities, not least as consent to this lower status can be found among some men. This goes some ways to explain that the concept hegemonic masculinities has kept its analytical strength in explaining how some men can preserve privileges and power with others (e.g., old men) supporting the system through subordination.

In Western capitalist societies, employment and masculinities are closely linked so that employment frames the normative expectation of male biographies (Emslie et al., 2004; Lengersdorf & Meuser, 2010) and provides the basis on which to construct masculinities in terms of prestige and recognition, particularly if the work is coded as masculine. Thus, identification with work becomes the central component of being a man (Connell, 2005) and is ideally expressed in stable, full-time employment that provides a family income and thus frees men from domestic duties (Acker, 1991). More recent work on fatherhood indicates that care for children has developed to a field in which men can construct masculinities (Tarrant, 2018) but which still excludes housework (Scholz, 2004). However, as these cohorts of active fathers have not yet reached later life, retirement (as a structural marker of aging) and the physical move into the domestic sphere of the home can be read as threats to the construction of masculinities (Gildemeister & Robert, 2008). Next to the exit from the labor market, age-related bodily changes render aging men's masculinities more permeable (Hearn & Sandberg, 2009) in particular where markers of the "fourth age" signified by dependency and social exclusion (Higgs & Gilleard, 2015) are at play.

At the same time, there is a relative gendered comfort to older men's lives due to higher pensions, paid mortgages, living with spouse, and being cared for rather than caring (Gildemeister & Robert, 2008). Critical research on aging and gender in the past 20 years has focused on these privileges and how they are produced and reproduced through economic structures and cultural contexts (Denninger et al., 2014; Götz, 2019; Jackson, 2016), and how such privileges do not include all men due to vulnerable life courses of those in minority positions (Calasanti, 2004). What has received less attention in this line of study is the reconfiguration of old age and how extended life expectancy and changed understandings of how to live post retirement and into old age have had an impact on gender relations. Much of the cultural changes to later life have been facilitated by post-war baby boomers (e.g., cohorts 1955–1965 in Germany and 1945–1955 in the UK) bringing their own dispositions and aspirations into retirement, and by not accepting the ascriptive passive status, which previously defined the old (Gilleard & Higgs, 2011; Krekula, 2007). Thus, an analysis of men's care practices in later life needs to be cognizant of how later life has become an arena of change in terms of increased agency (Gilleard & Higgs, 2011) with little to distinguish it from middle life (Denninger et al., 2014; Featherstone & Hepworth, 1991), but that remains imbued with gendered inequalities.

3 | CARE WORK AND MEN'S CARING

Care and care work have been at the center of much feminist research since the 1970s examining the low paid and often invisible work of women. Current gender-theoretical work has shifted its focus to the commodification and externalization of care work into professional or semi-professional spheres, in which migrant women predominantly work (Lutz, 2018). Here, care work involves intense physical and emotional work in care homes or households with children or frail older people. Juxtaposed is a wider understanding of care that includes various aspects of care, such as care for others in relation to health, learning, and family. This understanding has evolved from the work by Nancy Fraser, who in her feminist utopia defines care as a human norm and a basis for social and economic cooperation of all genders rather than a task of women (Fraser, 1996). As Ruby and Scholz (2018) have argued, it is important to consider all forms of care to render visible the care practices done by different people in different contexts. At the same time, it is important to exclude practices that mask traditional gendered labor division, such as male bread winning (Ruby & Scholz, 2018).

From this vantage point, it is possible to examine the care work of men in later life and the contexts in which it is brought about and developed. The body of work available on care in later life shows that care continues to be predominantly provided by women, but that there is an increasing number of men caring for spouses or partners,

particularly in the 80+ age group (Klaus & Vogel, 2019). Next to push factors into caring, there are pull factors associated with more traditional notions of spousal obligation (Ribeiro et al., 2007) or indeed notions of caring that are based on equal division of care and work practiced by couples across longer stretches of time (Emslie et al., 2004). Research on learning to care and integrating care work into notions of masculinities show that similar to the experience of women, men who care can experience social isolation not only due to time constraint but also because they no longer feel part of male networks relevant to them prior to taking on care responsibility (Baker et al., 2010; Calasanti & King, 2007; Russell, 2001, 2007). Research by Ribeiro et al. (2007) highlights a pioneering aspect of the care work with interviewed men not knowing of other men who care and not wishing to ask other caring women for advice. Studies of widowers have shown that bereavement was often preceded by care that brought about a process of reflection in which the men became aware of the care work their wives or partners had provided for them throughout their relationship (Moore & Stratton, 2003). This relational aspect of care is also relevant in a study on the meaning of love and intimacy in later life where men-made arrangements so that their new partner would not have to take on care duties (Bildtgård & Öberg, 2014). Another area of care giving in the lives of older men can arise from becoming a grandparent. Research here has highlighted the emergence of this active role in terms of child minding (Mann, 2007; Wenzl & Blätzel-Mink, 2018), and how men negotiate their grandfather role with bodily changes most notably loss of physical strength (Mann & Leeson, 2010). However, critical research highlights power relations between grandfathers and their children (the parents of their grandchildren), especially where lifestyles are considered inappropriate (Mann et al., 2016). In keeping with a wide definition of care, work by Sandberg (2018) on experiences of sexuality in later life gives insights into how age-related physical and emotional changes bring men to relate differently to significant others and to develop more caring and empathic stances. These studies suggest that later life constitutes an arena of change for masculinities (Leontowitsch, 2017) and provides a context in which the concept caring masculinities can be applied.

4 | CARING MASCULINITIES

The concept caring masculinities emerged in critical studies on men and masculinities as an antidote to hegemonic masculinities and has been used as a practice model in European policy on gender equality (Scambor et al., 2014). In her important contribution to theorizing the concept, Elliott (2016) draws on feminist care theory to construct a theoretical framework of caring masculinities. In her argument, she describes the central features of caring masculinities as the rejection of dominance and the integration of values, such as interdependency and relationality into masculine care work and caring. Drawing on the work of Gärtner et al. (2007), Elliott makes the case that caring masculinities are rarely entirely new in men's lives and that care can be found in various forms even if they have to be fostered or modified. She stresses that "the framework is not intended as a homogenizing character description of the 'new man'. It is an attempt to conceptualize caring masculinities theoretically and to open up debate and discussion around the concept of care in men's lives." (Elliott, 2016, p. 241). Following this line of argument, Heilmann et al. (2019) have called for applying Elliott's practice-based framework of the concept as a sensitizing concept with which to analyze power relations at a societal level and their reverberations in discourses, language, and practices. For Elliott (2016), "the power the male caregiver possesses as a result of his status as male does not mean an inequality of people as long as domination is absent from this relationship. Caring masculinities therefore need to ensure the absence of domination to ensure the presence of equality" (p. 252). Building on the work of Ungerson (2006) who differentiates between caring for (the practical tasks of care) and caring about (the affective relations of care), Elliott (2016) suggests that "both can be seen as important components of care" (p. 248) and that they are connected and procedural: "it does not matter if men do not care *about* initially because when men care *for*, they can begin to develop the affective, emotional aspects of care" (p. 249, emphasis in original). By looking at care not only as a practical task but as relational, emotional, intimate, and affective, relationality becomes central to the concept caring masculinities. At a practical level, it can be expressed through the development of caring for to caring about and the recognition of lifelong dependency on others.

Research on the lives of Older Men Living Alone (OMLA) (Leontowitsch et al., 2019) has shown that caring for themselves and others was both a reaction to changed social circumstances and a way of maintaining a sense of autonomy as

well as a more emotionally invested way of relating to others. Being aware of oneself in relation to others involves reflexivity, the ability to react to changed circumstances by building on existing ideas and finding new ways of negotiating social change. From a philosophical perspective, Archer (2007) discusses reflexivity as the mental capacity of people to consider themselves in relation to their social contexts and their social contexts in relation to themselves. Holmes (2010) takes this to a symbolic-interactionist level, where reflexivity is not merely a cognitive deliberation of social situatedness but the ability to be agentic through emotional agency in social interaction involving other persons and things.

In the following, the aim is to link reflexivity with caring masculinities to get a better understanding of how relational older men's care work is. More specifically, the paper examines the role of reflexivity in the development of caring masculinities both as a possible precursor and a consequence of taking on care practices. Thus, the paper makes a specific contribution to developing empirical and theoretical knowledge of caring masculinities and power relations by providing insights into the trajectories into care work and the connections between caring and relationality for men in later life.

5 | METHODS

The data presented in this paper are drawn from two qualitative interview studies conducted with men in England and Germany. The first study (Early Retirement among Senior Managers [ER]) was a qualitative longitudinal study conducted in England in which senior managers were interviewed about their experiences of early retirement (Jones et al., 2010). The first set of semi-structured interviews was conducted between 2004 and 2006 with 18 men and two women (aged 52–61) who had retired from executive positions. Follow-up interviews were collected between 2012 and 2016 and involved nine men and one woman (aged 63–72) of the previous sample about their experiences since the first interview. Participants were recruited in the first instance through retirement organizations. All participants from the first set of interviews were contacted for follow-up interviews, but only half the sample took part. This was due to changed contact details or not being available for a second interview. Details on the participants' age as well as previous occupation are given in Table 1. In terms of ethnicity, the sample is homogenous as all participants were White British. More than half of the sample described themselves as originating from working class backgrounds and are part of a generation that experienced upward social mobility (Jones et al., 2010).

The second study (Older Men Living Alone [OMLA]) investigated the lives of OMLA in Frankfurt/Germany (Leontowitsch et al., 2019) and was conducted between 2017 and 2018. This study involved biographical interviews with four men (aged 70–89) who were interviewed twice in the course of the project. The men were recruited through organizations in Frankfurt that offered support or socializing events for older people. Details of the sample are provided in Table 2. Three participants in this study were White German and one of Turkish origin, two had university degrees, and two had worked in manual positions. Two men came from rural-farming backgrounds, another had a father with a business, and the other described growing up with his mother who had been widowed young.

For the ER study, 17 interviews in round one and all follow-up interviews were conducted by the author, as were all the interviews in OMLA. Three interviews in the first round were conducted by the principal investigator of the original ER research team. Participants from both studies had been given a choice of where the interviews could take place (e.g., at home, at the university, and at another venue). The majority of the ER interviewees opted for an interview at home as did all the participants in OMLA. Eight of the second interviews in ER were conducted via phone or video conference. The ER interviews lasted between one and 2 h, the interviews for OMLA, which took place on two dates, lasted around 2 h per session. All interviews were audio recorded and transcribed verbatim.

5.1 | Ethics

The NHS Wandsworth Local Research Ethics Committee received the research protocol for the ER study and decided that no ethical approval was needed. Ethical approval for the research study OMLA was granted by the Faculty of

TABLE 1 Sample characteristics of the early retirement Study

No.	Age at retirement	Age at 1st interview	Occupation preretirement	Age at 2nd interview
01	55	57	IT-Account Manager	
02	55	56	Head of Commissioning	
03	54	59	Sales Director	
04	53	63	Personnel Manager	69
05	58	66	Building Society Executive	
06 ^a	57	61	Communications Consultant	70
07	54	63	Business Development Manger	69
08	55	62	Engineer and Artist	68
09	55	66	Director of Public Health	
10	55	66	Pensions Manager	
11	60	61	Accountant	70
12	53	62	Trade Marks Manager	71
13	54	59	Plant Hire Director	
14	52	52	Public Sector Manager	61
15 ^a	57	58	Chief Inspector	
16	60	62	Senior Engineer	71
17	55	62	Head Teacher	72
18	55	55	Senior IT Officer	
19	53	57	Commercial Manager	67
20	57	58	Group Purchasing Manager	

^aFemale participants.

TABLE 2 Sample characteristics of the older men living alone study

No.	Age at interview	Occupation preretirement	Family status
01	76	Social work	Unmarried, longstanding LAT relationship, no children
02	69	Teacher	Divorced, two children
03	86	Tram driver	Widowed, longstanding LAT relationship, four children
04	88	Supplies clerk	Unmarried, single since 1980s, no children

Abbreviation: LAT, living alone together.

Educational Sciences at Goethe-University Frankfurt. Participants of both studies received written information about the respective research studies and data handling, and all participants gave written informed consent.

5.2 | Contextualizing the data sets

The ER project involved a longitudinal data set of semi-structured interviews collected over a stretch of 12 years. The analysis of the first wave of interviews explored the decisions that led to early retirement, experiences of retirement, changes in lifestyle and social roles, and the meaning associated with retirement. The focus was on the extent to which the attitudes and beliefs of retired people resonated with the idealized “quasi subject” (Beck et al., 2003) expressed in individualized identities and lifestyles. In the reanalysis of the data, the focus was on caring relationships between the men interviewed and their family members and other people. This work involved reconsidering the

discourses around taking early retirement in the late 1990s/early 2000s in England and ideas around the social roles available for (executive) retirees. Analysis of the follow-up interviews suggests that a “meaningful social role”, that is, such that built upon their previous expertise, was hard to obtain for most interviewees and that changes in their family life often pushed them into becoming more involved in the domestic sphere.

The first analysis of the OMLA data concentrated on the men's life courses and how they had led them to live alone, their everyday lives and social networks, and their thoughts about their future. The analysis also involved contextualizing the men's lives against a historical perspective with a focus on significant political and cultural influences (e.g., decriminalization of homosexuality). The results showed that despite living alone, the men were engaged in numerous social relationships that were very meaningful to them and in which they were as likely to care for someone else as others cared for them. As the sample was diverse in terms of ethnicity, sexuality, and socio-economic status, the men's narratives of caring were examined against these social divisions and the nexus of privilege and vulnerability.

5.3 | Connecting the data sets

Care and caring had not been part of the research focus for either study, and although interviewees from the ER study had talked about caring for children and elderly parents, this had not been investigated further during the first analysis. It was not until care practices emerged as an inductive theme in the OMLA study that a connection was made. Following a Grounded Theory methodology (Strauss, 1998), the emerging theme of wanting to care for others was taken back to the ER data set. Using the open codes from OMLA the ER data was reexamined, allowing for new codes to be developed to use on the OMLA data in turn. This process of developing codes and checking them against data in an iterative process is key to Grounded Theory and followed Strauss's coding paradigm of coding data for its relevance to the phenomenon at stake (i.e., caring) by identifying condition (e.g., retirement and entitlement), interaction between actors (e.g., among couples), strategies and techniques (i.e., emotions and non-dominance), as well as consequences (e.g., understanding the relational component of care). The process was aided by theoretical memo writing particularly when caring masculinities was included into the analysis as a sensitizing concept. As both projects had been officially finished, no new data were collected.

The respondents for both studies were purposively chosen: In the ER study the aim was to sample individuals who were most likely to have taken early retirement as a matter of choice and be sufficiently well resourced to engage in third-age lifestyles. The sample was therefore deliberately biased to contain privileged persons. For the OMLA sample, a more diverse set of men were sought to establish different pathways into and experiences of living alone in late life. The fact that needing to care and caring about emerged inductively in both data sets, despite the different sample characteristics, encouraged the reanalysis. To combine the two data sets required reflection on their central dissimilarities: social status and age. However, despite the differences, both groups of men enjoyed full pensions and a sense of retirement as entitlement, two aspects that are shaped by postmodern welfare states and that provide the foundation of privileges afforded to those being able to complete a full employment biography. As for age, chronological age tells us little about a person's social status, with employment, retirement, and health being much stronger indicators of agedness (Higgs & Gilleard, 2015). With retirement being relevant to both samples and health issues arising for some men in both samples, this was seen as sufficient similarity to combine the data sets to examine the role of care. Indeed, Calasanti et al. (2022) recently highlighted the importance of comparison of patterns across contrasting data sets to develop new theories on aging masculinities and to avoid reification.

5.4 | Enhancing participants' reflexivity

Follow-up interviews remain a relatively rare method in qualitative research despite the richness of insights it enables. Moreover, follow-up interviews allow the participants to reflect on what they talked about in the

first interview, thereby providing evidence of reflexivity. Despite methodological discussions about increasing researchers' reflexivity, methods available to enhance participants' reflexivity remain few (Riach, 2009). Follow-up interviews are particularly important with men, who can be hesitant in sharing experiences and emotions related to their past with others (Leontowitsch, 2012). Conducting two interviews strengthened the relationship between the interviewer and interviewees and provided the trust necessary to talk freely, leading to rich, in-depth data sets.

6 | FINDINGS

The reanalyses of the data sets developed four themes: The first, *pathways into caring*, looks at who and what influenced the men's caring. The second theme, *care at work in family relations*, considers the impact caring had on relationships with family members. The third theme, *caring at work in enacted masculinities*, is an extension of the second, showing how caring affected the men's enacted masculinities. The fourth theme, *egalitarian care work and biographical roots*, shows how events in the past and longstanding arrangements shaped care practices in later life and notions of equality. The themes are considered in turn with quotations drawn from both data sets with ER-FI denoting the first interview and ER-FU the follow-up interview.

6.1 | Theme 1: Pathways into caring

As the majority of the men in the early retirement study had left work in their mid to end fifties, their retirement provided a window of opportunity for spouses or partners, who after years of looking after the family either increased their working hours, returned to work full time, or took up training. In doing so, they handed over domestic and where applicable child care duties to their husbands.

[pause] yes, she was still working and her job became really pressurised. And yeah, I used to take over a lot of the housework duties and that kind of thing, yes. Cooking and some of the cleaning, but not always, I still can't iron! [laughs].

ER-FI-12: retired trade marks manager, aged 62, wife in professional occupation

While for some participants this period ended after a few years when their wives retired, for others it was more permanent.

Yes, I'm doing much more of the caring, you know, I'm probably the person that shoves the clothes into the washing machine most. A bit of cooking, not a massive amount of cooking, but more cooking than I've ever done before, which is to the disadvantage I think of the family, but there we are. You know, they've got to make some sacrifices, and some of it is having my cooking!

ER-FI-14: retired public sector manager, aged 52, wife in professional occupation

In the follow-up interview 9 years later with still one child at home, he reiterates his domestic chores:

My wife continues to work more than full-time, I wish I could make her step back. She would laugh hollowly at me doing all the household chores but I do some cooking, though a very limited range of recipes and always [cooked] breakfast, most of the laundry, mowing the grass and paying someone to come in and clean.

ER-FU-14: aged 61 at second interview

In addition, the interviewee talked about his youngest son's serious health problem that involved regular visits to specialists and check-ups, which took up a lot of time. Being afforded the time to accompany his son made him glad. During the first set of ER interviews, participants had spoken about the option of returning to some form of (part-time) professional employment. For the men involved in looking after children, this did not happen nor was it contemplated in the second interview.

Data from the OMLA project show pathways into care that are linked to a wife, partner or mother developing care needs. In one of the interviews a participant who had emigrated from Turkey in his twenties, talked about how he had taken in his mother as she grew frailer after her husband's death. Cultural expectations around adult children's care responsibilities for old parents frame this pathway into care. However he struggled to integrate this role into his masculinity and used humor in the interview to describe the time he looked after his mother.

I: How long did your mother live with you?

R: I think ten years. And I said to my pupils: I have a cat at home, I need to go home. They said: really, Mr A. you have have a cat? They really thought I had a cat. Then I said: no, my cat is my mother (laughs). And they said: how can you call your mother a cat? Because she is like a cat, she needs care. I have to cook for her and look after her.

OMLA-02: aged 69, retired teacher

The quotations suggest that caring for dependents continues to be at odds with "normal" male biographies even in light of cultural expectations. However, participants did not avoid the care work, and once involved, the meaning of this work was reevaluated (see theme 2). For some, caring was partially or wholly incorporated into ideas of masculinities (theme 3); for others, as the above quotation illustrates, it remained a disjuncture.

6.2 | Theme 2: Care at work in family relations

The transition into retirement and the taking up of a domestic role as illustrated in theme one had an influence on the atmosphere in the men's homes, thus changing their role within the family. This was explained by being at home more and not returning home exhausted after a long working day.

She was born in '89, so she was just coming up to ten. My wife says I changed, I was more relaxed, more tolerant, sort of less tense. I think my wife enjoyed going out to work full time, it gave her an opportunity. [...] My daughter benefited, because she had a personal chauffeur at home [laughs]. Because she did a lot of activities, if she hadn't had a chauffeur, she wouldn't have been able to go because she was going from one activity to another. [description of activities] So it is just generally, I think it's been a more relaxed atmosphere in the house. I mean, I used to come home from work shattered and I don't like to think I was snappy or whatever, but you just flop in a chair and you're "Oh God, you don't want some help with your homework do you?" [laughs] So I think generally, if my wife was sitting there, she'd say, yeah, we weren't an unhappy household but it's just more relaxed. I was more relaxed, there was more time.

ER-FI-17: retired head teacher, aged 62, wife is a teacher

The experience of returning home "shattered" helped some of the men to empathize with their wife's situation after a working day.

So she comes in and I make her a cup of tea, I take her shoes off and say, "Get changed" I force her to get changed and sit there because she feels tired as well. So I say "if you get changed you feel better,

get yourself into civies like". So we sit down and have cup of coffee and things like that. We didn't do that before.

ER-FI-18: retired IT specialist, aged 55, wife works in administration

This account is ambiguous as it denotes a caring attitude and displays a notion that his efforts are beneficial because he knows what is best for his wife. It can be read as a dominant form of care at the same time as showing awareness for someone else's needs. The presence of time and tending to a partner appear to bring about the change in a process of considering the other person's needs in relation to oneself. This has an effect on the relationships at home. The following quotation from OMLA illustrates how a phase of 6-week postoperative care by the interviewee for his partner who at the time was also still working full time, provided him with a positive experience of cohabitation.

Although I did ask myself is that the role of a male nurse [Krankenpfleger] or is it more the role of a female nurse [Krankenschwester]? Well, a sort of feminine, motherly side of mine came to the fore, to such an extent that my previous life was put to one side during the whole of her stay. I didn't even notice.

OMLA-01: aged 76, retired social worker

Having more time, being less stressed provided the men with a window of opportunity to reflect on the needs of others close to them and to try themselves in a caring role. Their care work is closely linked to lived and enacted masculinities and incorporates socially and biographically female connoted care work to fit their male identities in later life. Care at work in family relations signifies the development of a new caring role within the family and the temporary or permanent changes in relationships and men's identity it can bring about.

6.3 | Theme 3: Caring at work in enacted masculinities

Following on from theme one on the influence of wives and partners, this theme is concerned with interviewees talking about forms of caring outside of the family that they developed with their partners or through encouragement by them, again underscoring the role of women in the men's lives. The caring they got involved in stood in stark contrast to their professional occupations, could be triggered by bereavement or ill health of a family member, and often required prior training or change in mindset.

I also do therapies myself. We have a healing sanctuary which I didn't mention in the voluntary work, which we have adjacent to the home where we do therapies and counselling – well not counselling, you mustn't call it counselling, but one-to-one discussions, letting people pour their problems out and dealing with all sorts of matters like that. As I say, she's a Reiki Master and we both work as qualified healers. [...] and sometimes you know, just to be able to come into a safe environment and to chat and work things through and listen, which has a healing effect.

ER-FI-16: retired engineer, aged 62, wife in professional occupation

Allowing others to talk and being able to listen were skills that the participants had to develop, but had also experienced as beneficial themselves. Unlike the early retirement plans to build on their professional knowledge in voluntary or trustee roles, they chose a caring role that was new to them.

And then I was talking to my Mrs and I said, "Well, I'd like to do something less trivial and quite demanding" and she said "Well, have you ever thought of going into counselling?". Because my wife's a psychotherapist, she's been it for twenty-thirty years. I said, "No, hang on, first of all, that's not

me, you know me, that's why you married me because I'm a boring accountant and you're the one that's into feelings and you do all that stuff". She said, "Come on! It's not as simple as that!" So, I said, "Anyway, I'm too old, and the organisations like [names] are not going to start training 58 year old men! Because men are not good with their feelings and all that sort of stuff!" "Well, why don't you ring them up and ask them?" So I rang up and they said, "Oh, we desperately need mature men to see if we can train them!" I'm caricaturing, but that's essentially what they said.[...] I have been seeing clients, four couples per week, for the last two years. So that takes not only the four hours and there's the preparation, there's the supervision, there's the training, there's a lot of work and that is really, really stimulating for me, stimulating the other side of me.

ER-FI-11: retired insolvency manager, aged 61

The metaphor "stimulating the other side of me" suggests that a caring and nurturing side existed all along but was not allowed to come to the fore during working life. Several participants experienced retirement as a time in which they could awaken or reconnect with that side and develop it. The cognitive aspect of this caring activity, that involved training and development, resonates with the masculinities of their professional life and indeed gendered notions of maleness and femininity. Being able to develop an emotionally invested form of caring was something they had not foreseen for their retirement but in the process of finding meaningful pursuits, and in combination with spousal support, a form of caring closely linked to professional work was able to unfold.

In the OMLA study the men had been caring periodically across their biographies. Here too, a participant compared his caring metaphorically with a female form: "Herbergsmutter" (a housemother of a youth hostel) to describe how he looked after his grandson, who had been repeatedly late for school, in a phase when the boy's parents were separating.

I got up in the mornings, and I prepared a bit for him, to eat and drink. And I said to him, prepare your breakfast box the evening before and I won't wake you up. And it was so nice to see. I don't know how long it was, six weeks maybe? Not a long time. He prepared his food the evening before, he got up in the mornings and one day he came home and said, "Granddad I was the first at school today!" And I said, "congratulations!" I was so pleased. I had taught him without pressure. I told him: you can do it.

OMLA-03: aged 86, retired tram driver

This understanding of caring as something temporary that needs to be molded to a grandson's needs rather than the desire to fulfill a caring role resonates with newer work on the role of grandfathers, oscillating between helping grandchildren to find their place in society but not through dominant male behavior. As in theme two, the process of becoming involved in the care for someone requires them to incorporate ideas of nondominant care into their enacted masculinities.

6.4 | Theme 4: Egalitarian care work

Only few of the men in the ER study talked about egalitarian distribution of care work around the house and in terms of childcare. This can be explained by the full time work that the men were involved in prior to retirement and being married at a time when wives were not expected to work or who had stopped work to look after children. In addition, the upward trajectory of the interviewee's careers and their managerial positions provided them with an income with which to outsource house and garden work. However, there was the exception of one couple who had developed a pattern of sharing housework at an early stage of their relationship.

But we were married some time before we had our daughter, and we're used to a system before where we'd come home and do the housework together. We had a smaller house then, and then go for a pub

meal, sort of thing. On one particular night, I think it was a Thursday. And that's lingered in the sense that I tend to have a routine: I say right, Thursday. I will go through cleaning the house, scrubbing the bathrooms etc. I will do the ironing when the washing gets done.

ER-FI-17: retired head teacher, aged 62, wife is a teacher

Here, too, his wife had taken on a larger part of the housework while he was still at work but this had changed when she took up full time teaching work and he retired. His willingness to do the housework was confirmed in the second interview 10 years later, by which time his wife had retired and the housework had been divided up between them again.

7 | DISCUSSION

The paper set out to make a contribution to developing empirical and theoretical knowledge of caring masculinities in the lives of older men. The reanalysis of two data sets was based on the inductive theme of caring that emerged in the analysis of the OMLA data and was taken to the ER data for further exploration. In addition, the concept caring masculinities was used as a sensitizing concept to investigate the nature of caring the men were involved in. The analysis was able to trace the trajectories into caring and to render visible a connection between caring and relationality that developed for some men in the process of caring. As set out in the results, men in both studies could be pushed into care by wives returning to work, children at home needing care, poor health of partners and spouses, or wives encouraging new caring tasks. In the process of caring for others, care had an impact on family relations and enacted masculinities. The following discussion will link reflexivity with caring masculinities for a better understanding of how relational the men's care work was, and thus, how caring masculinities is reflected in the data. In addition, the role of reflexivity in the development of caring masculinities, both as a possible precursor and a consequence of taking on care practices, is examined, helping to identify new aspects that should be taken into account when linking caring masculinities and aging.

Pathways into care shed light on the privileged positions the men particularly from the ER study held. Their senior managerial roles and economic situation allowed them to exit from the labor market considerably sooner than the mandatory retirement age still in place at the time of the study. Their privilege and agency are expressed in the desire to find a (paid or unpaid) role that would build on their professional expertise. This expectation has been framed as a sense of entitlement that the men can take into retirement as they see this life phase as the reward for their time in employment (Denninger et al., 2014). Thus, the taking on of care work was neither planned nor expected by any of the interviewees. Nevertheless, they found themselves in a situation where spouses and partners were often faster in filling the void by returning to work or increasing their hours, requiring the men to look after children and domestic duties.

Thus, trajectories into care across both samples were not actively sought nor were they avoided. In taking on caring responsibilities and dealing with what Ungerson (2006) calls the practical task of caring, the interviewed men started to *care about*, getting into the emotionally invested relations of care. This process was also aided by the changes brought about by retirement life, involving more time and less work-related stress. Using the concept caring masculinities, it is possible to examine how the process of getting involved in care changed the way the men related to immediate family members. Elliot speaks of caring masculinities, when men are capable of integrating values of interdependence and relationality into their way of caring. Men from the ER study appeared to recognize the dependency of children still living at home and their responsibility for them as their partners took up full-time work. The absence of work-related stress allowed them to become more aware of how they had been while still at work and how a partner was feeling after a full day at work. Men from the OMLA study reflected on how temporary care for a partner or grandson could change the understanding they had of themselves, adding ideas of relationality to their autonomous understanding of themselves (Leontowitsch et al., 2019). Their usage of phrases, such as "hostel

mother" or "nurse," shows how care continues to be connected to emotional care that only women can provide. But by identifying with these roles, they integrated them into their masculinities by referring to their skill in caring for others (Ribeiro et al., 2007).

The importance men attached to being skillful and competent at caring and the need to undergo training underscores how later life is an ongoing negotiation of not being old. As outlined in the background, later life has evolved to become a continuation of middle life. Although many of the interviewed men had envisioned other practices with which to stay connected with midlife or to continue that identity, caring took its place. Thus, caring in later life can afford men a way of staying connected with, for example, changed gender relations that appear more relevant to early and midlife than male-retired life. Indeed, given the reconfiguration of late life as an arena of cultural change and distinction from previous (parent) generations, new and unexpected practices can provide ways with which to be read as agentic and in touch with current developments. This framing also draws attention to the gendered nature of aging and perceiving care, as women are not afforded this positive affirmation when they care. However, subsuming caring in men as an anti-aging technology of the self would fall short and ignore the men's journey from caring for to caring about, and that is a key to the concept caring masculinities. Elliott argues that caring in an empathic way is rarely new in men's lives but that it takes continued immersion to develop a relational understanding of care. In choosing care work that involved dealing with emotions (even if it was those of others rather than their own), they display a reflexive stance to what they wish to provide and feel capable of providing. In the case of the healing sanctuary, the interviewee had experienced the death of his first wife and coming to terms with his loss through talking therapy. He used this experience to develop a caring role after his career in engineering. Thus, reflexivity acted here as a precursor to a form of caring masculinities, whereas in other instances (caring for children and partners), reflexivity, the ability to think and act in relation to changed circumstances, came subsequently as a way of integrating care into enacted masculinity.

The sense of entitlement as discussed above is connected to power and has been described as a barrier to gender equality (Elliott, 2016). However, power and domination are not the same thing, and power in caring relationships can be used by the care giver to maintain the best interest of the care receiver. The care relationship, however, needs to be free of domination. Heilmann et al. (2019) have tried to shift the focus of caring masculinities from the individual level to examining power relationships at a societal level. The men in both studies had been socialized to become care-free breadwinners (Hanlon, 2012) and planned their later life as a phase in which to find fulfillment in various masculine-coded roles. Those men who were able to relinquish their sense of entitlement and who engaged in care that became relational and emotionally invested are evidence that later life can become a field in which the dialectical narratives of nurturing femininities and breadwinning masculinities can become less relevant.

8 | CONCLUSION

This paper set out to provide a theoretical and empirical contribution to furthering the use of caring masculinities as a sensitizing concept. At the empirical level, data from two studies on men in later life have shown that care and caring is at work in family relations and enacted masculinities. The findings chime with the body of work on men caring for spouses and grandchildren, as discussed in the first part of this paper. In addition, the paper considered the role of power in caring relationships. From the data presented here, those men who were involved in care did not appear to dominate in their caring setups. They did use power to make decisions, get training or organize but this was not used to dominate dependents. As studies on fatherhood have shown, it is possible for men to construct nondominant masculinities through care work and it appears that the same applies to caring men in later life. Using caring masculinities as a sensitizing concept has helped to render visible the care work, the interviewed men were involved in and to examine how men relate to others and how they become emotionally involved through the process of caring.

At a theoretical level, the reanalysis of the two data sets strengthens the argument that caring for others is a field in which aging men can find a meaningful role in later life despite prior ideas of entitlement. This does not only

indicate the relevance of the concept caring masculinities but to how later life is experienced as a life phase in which new and old roles need to be found and negotiated that in turn can provide men with the status of agentic agers. In the first analysis of the ER study data, Jones et al. (2010) argued that interviewees did not associate retirement with old age, but with newer and multiple lifestyle choices where the emphasis was on spontaneity and more fluid forms of identity. The second set of interviews showed that these lifestyles were not readily available or did not last. Both studies (ER and OMLA) show that later life has become more fluid, contingent and open to change, requiring individuals to choose quickly in the context of uncertain outcomes (Beck et al., 2003). Becoming involved in care work made the men more aware of relational ties they have with others with reflexive thoughts and actions leading to care or to make sense of their care work. The data provide valuable insights into the care trajectories of largely privileged aging men. In particular, the analysis suggests that these experiences reflect caring masculinities and that men in later life may be contributing to gender equality in a small way.

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CONFLICT OF INTEREST

I have no conflicting interests that influenced this research.

DATA AVAILABILITY STATEMENT

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ENDNOTES

- Men is used here as a term to delineate persons who identify as men and who are attributed as men. The usage does not imply a binary gender order.
- The term retirement is used here to refer to a life phase post occupational work, but that can include a spectrum of activities both remunerated and not. At the same time, retirement acts as a structural marker and transition into "later life" regardless of age.

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