
UNIT 3 DISABLED MASCULINITY

Renu Addlakha

Structure

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3.1 INTRODUCTION

In the unit on “Disability and Feminism” (Unit 5, Block 5, MWG-001), we have already discussed how a person with a disability experiences the condition and how these experiences and perceptions are influenced by gender. The gender-based implications of disability with regard to women with disabilities have already been discussed in that unit. In the present unit, we shall examine how male identity or masculinity impacts and is impacted by disability, using disabled masculinity as a central category of analysis. This unit should be read in conjunction with the units on disability and feminism.

Disabled feminists have claimed that disability studies have ignored the experience of disabled women. For instance, **Jenny Morris (1994)** speaks of a false generic in writings on disability speaking of people with disabilities in a gender neutral kind of way, when it is actually speaking of men with disabilities. On the other hand, according to **Tom Shakespeare (1999)**, there has been a neglect of the specific concerns of men with disabilities both in the newly emerging sub-discipline of masculinity or men’s studies as also in the disability studies domain. While such perspectives reflect the ongoing wider debates in gender studies on oppression, the purpose of this unit is not to engage in a gender war on disability, but to highlight how male identity and disability intersect to produce particular forms of disadvantage for men that are linked to social constructions of masculinity.

The first part of the unit discusses critical concepts in masculinity studies, namely, masculinity and its forms i.e. hegemonic and subordinate masculinities. This is followed by examining what disability means to men with disabilities, giving rise to the concept of disabled masculinity as a counter-point to the concept of disabled femininity. Of particular interest

is the discussion on the strategies that disabled men employ to reconfigure their masculinity in the context of disability which is gleaned from a pioneering empirical study on disability and masculinity.

3.2 OBJECTIVES

After going through this unit, you will be able to:

- Analyse the inter-relationship between masculinity and disability as a form of intersecting categories;
- Explain different permutations of masculinity as they relate to disability with particular reference to the concepts of hegemonic and subordinated masculinities; and
- Explain how disabled masculinity is a form of subordinated masculinity.

3.3 HEGEMONIC AND SUBORDINATED MASCULINITIES

There is abundant feminist scholarship on how gender intersects with other social categories such as race, class, ethnicity, and social identities. Of late, an interface between disability and gender has been theorized by a few feminist scholars to develop an inclusive gender theory, which can address questions such as to how disability impacts gender performance, how women and men experience disability differently, and how disability affects the gender experience in society. Theories of gender and disability aim at putting the notion of the disabled- body in relation to the devaluation of masculinity. Before discussing the interface between disability and masculinity, we need to know what we mean by masculinity in the first place.

Masculinity is not a generalizable subject that can be discussed in isolation. It is located in the gender structure of the society and can be reflected through a set of social practices. As **Connell** (2005) argued, masculinity is inherently relational in nature; hence it exists in opposition to femininity. If a culture does not treat women and men as bearers of polarized characteristics, then, masculinity would not exist as a concept. Masculinity is thus conceived as a product of a bourgeois ideology that created two different and exclusive spheres for women and men in the 19th century. In this sense, masculinity has a recent history that can be understood in relation to different cultures and societies.

Box 3.3.1: Defining Masculinity

Two pioneering researchers in masculinity studies offer the following concise, yet comprehensive, definition: 'Masculinity is not a fixed entity embedded in the body or personality traits of individuals. Masculinities are configurations of practice that are accomplished in social action and, therefore, can differ according to the gender relations in a particular social setting' (Connell and Messerschmidt, 2005, p. 836).

From the above definition, it is clear that masculinity is not a unitary, universal or homogenous concept. There is no intrinsic thing called masculinity, and it is not necessarily linked to the body. On the other hand, it is socially constructed, since it is actualised through social actions and practices. Masculinity comprises of certain norms and behaviours which are associated with gender bodies in a particular social arrangements.

Forms of Masculinity: Masculinity is positioned in a variety of relationship structures that add various meaning to the concept. Hence, masculinity needs to be understood in relation to structures of power, and production which are closely shaping gender relations. As Connell pointed out, we need a three-fold model of structure of gender such as a) power b) production, c) cathexis to analyse masculinity.

Box 3.3.2: Three Fold Model of Gender Structure

Power relations: It implies the overall subordination of women to the domination of men, which is primarily described as patriarchy. This structure of unequal power relations between women and men persists in the contemporary society in spite of resistance and change. Politics of masculinity can only be viewed in reference to the feminists' resistance to patriarchy.

Production relations: In the sphere of production and reproduction, there is an obvious gender division of labour that is manifested through allocation of different tasks to men and women, and differential wages in the labour market. In a capitalist economic condition, gender division of labour is an extension of patriarchy that exists in the reproductive arena. It is the social construction of masculinity which gives men the power to accumulate wealth and private capital in the labour market. Gender division of labour can also offer a meaningful construct to analyse masculinity in the process of socialization.

Cathexis: When emotional energies are attached to any object, the gender characteristics become apparent. The social practices like 'practicing heterosexuality' shape masculine identity in the society.

Source: Connell (2005)

The information provided in the box above indicates that ‘structure of gender’, which is embedded in the unequal power relations between women and men, is leading to the construction of masculinity as a social identity. Different social forces, institutions and practices are assigning social roles and behaviours to men within the society. Masculinity is a representation of prescribed social roles and behaviours assigned with the male body. It is not a static concept and it keeps on changing across cultures and societies. **Blackwood (2006)**, in the anthropological study of Minangkabau ethnic group explores the interrelationship between gender identities and the reproduction of gender transgression. Within this community, individuals exhibit tomboyish orientation to show themselves as masculine. ‘Tomboy’ is a practice through which females will act in the manner of men, and this practice is shaped within the Minangkabau culture. In this context, masculinity is not attached with the body but shaped through cultural practices. The plural masculinity model reflects variations, which exist in a society, within different groups and at individual levels as well. According to **Kimmel and Aronson (2004)**, differences between women and men are not as intense as the differences among men or among women. To summarise, connotation of masculinity varies in four dimensions:

- Across cultures
- In one country over time
- Over a person’s course of life
- Within a society at any point of time

One of the central themes is the concept of hegemonic masculinity. The term was first used by scholars in Australia working in diverse fields such as social inequality in education (Kessler et al., 1982), labour politics (Connell, 1982) and embodiment (Connell, 1990). It refers to the existence of a culturally normative ideal of male behaviour marked by the tendency to dominate not only women but also other men. Paralleling the socialization of girls and women into ideals of femininity, boys and young men are also socialised into internalising and enacting the forms of hegemonic masculinity considered appropriate in their culture.

As Connell points out, “a particular form of masculinity being hegemonic means that it is culturally exalted and its exaltation stabilises a particular structure of dominance and oppression in the gender order as a whole” (1990, p. 94).

The principal characteristics of hegemonic masculinity today, particularly with reference to Western society, are physical strength and athleticism, courage, endurance, aggression, stoicism, tenacity, independence (especially economic independence), sexual prowess, etc. Even though these may not necessarily be the most prevalent forms of male expression, they are the

most socially endorsed forms. Proponents argue that such characteristics as aggressiveness, strength, drive, ambition, and self-reliance, are encouraged in males but discouraged in females in contemporary Western society, as evidence of the existence of hegemonic masculinity. The concept has been used in applied domains such as the sociology of education, psychotherapy, criminology and health sciences etc. Hegemonic masculinity is not a static concept; it responds to and is shaped by macro-level socioeconomic and cultural changes.

The critique of hegemonic masculinity has come from a variety of sources:

- class and ethnic studies that have highlighted the existence of multiple masculinities, differentiated by socio-economic power and race/ethnic differentials even within the same culture;
- gay liberation politics and scholarship that has showed up hierarchies of masculinities manifested in the oppression of gay by straight men; and
- empirical research in different contexts like schools, the workplace and village communities documenting local gender hierarchies and cultures of masculinities.

Consequently, those men who do not match up to these impossible standards of masculinity due to ethnic, race, class, and sexual orientation are subordinated or marginalized. There is a complex intersection of masculinity with other sets of variables such as race, sexual orientation and disability. According to Connell (1987), the functioning of hegemonic masculinity rests with patriarchy's role in subordinating the other while privileging the men's role and their position (cited by Joseph and Lindegger, 2007). In this context, subordination of others includes women, and men of different class, race, and with disability. Disabled men also fall short because they do not embody the ideal of the strong, fit, competitive and able masculine body. This is eloquently summed up by the anthropologist **Robert Murphy**, who developed a disability later in life. According to Murphy: "Paralytic disability constitutes emasculation of a more direct and total nature. For the male the weakness and atrophy of the body threaten all the cultural values of masculinity: strength, activeness, speed, virility, stamina and fortitude" (1990, p. 94).

Check Your Progress:

What do you understand by hegemonic masculinity? Give examples to describe the concept.

3.4 MASCULINITY AND DISABILITY

Gender identity and disabled identity interact in different ways for men and women. Disabled females suffer a double disadvantage in that while they cannot enter traditionally male occupied roles, they are also denied access to normative female roles like wifedom and motherhood. As Fine and Asch point out:

“Whereas disabled men are obliged to fight the social stigma of disability, they can aspire to fill socially powerful male roles. Disabled women do not have this option. Disabled women are perceived as inadequate for economically productive roles (traditionally considered appropriate for males) and for the nurturant reproductive roles considered appropriate for females” (1985, p. 6).

While the asexuality ascribed on account of disability translates into general features of dependency and passivity for disabled persons of both sexes, it has different implications, because there are links between the assumed passivity of disabled persons and the assumed passivity of women. Persons with disabilities are often described by use of terms such as weak, vulnerable, innocent and dependent— terms that also connote femininity. When these characteristics are ascribed to men with disabilities, they have adverse consequences on their self-esteem and body image, since:

“The social definition of masculinity is inextricably bound with a celebration of strength, of perfect bodies. At the same time, to be masculine is not to be vulnerable. It is also linked to a celebration of youth and of taking bodily functions for granted” (Morris, 1991, p. 93).

There is an assumption that disability and masculinity are conflicting identities, because of the contradictions of the two stereotypes. For instance, Nigel, a gay man with learning difficulties, one of Shakespeare’s informants, expresses this experience: “I get mixed messages. As a disabled person I am told to be meek and mild, childlike. Yet as a man I am meant to be masterful, a leader, get angry” (Shakespeare, 1999, p. 60).

However, while the clash of stereotypes may lead to confusion, the reality for disabled men is more complicated and less straightforward than the simple divergence expressed by Nigel. Although, women and men with disability share more or less similar statuses of stigmatization, devaluation as gendered being, isolation, and face marginalization from the mainstream society, but their experiences in relation to gender performance and role vary. T. J. Gerschick (2000) pointed out that women with disability too face a stigmatized status, which further devalues their gender status in the society. Conversely, for men with disability, suffering through status inconsistencies as masculine gender privilege collides with the stigmatize status of being disabled.

According to Tom Shakespeare, disabled men's experiences are under-represented in disability studies. He feels that the women's movement and feminism have played a role in focussing on the realities of the lives of women with disabilities, while the specific concerns of men with disabilities have either been overlooked or under-studied. He cites the disproportionate number of publications on women with disabilities and the only handful of publications specifically dealing with disabled men.

Connell's work on masculinity cited earlier explores the varieties of masculinities, moving away from a notion of natural' masculinity. His approach may be used to analyse the variations implicit in disabled masculinity. In fact, it influenced the seminal piece of research till date into masculinity and disability. **Thomas Gerschick and Adam Miller (1997)** investigated the clash between hegemonic masculinity and social perceptions of disability as weakness through interviews with ten disabled men. Their article highlights the range of different disabled masculinities and the variation of male disabled identity and experience. The authors found three dominant strategies employed by these men as they confronted the challenges of hegemonic masculinity: reformulation, which entailed disabled men redefining masculinity according to their own terms; reliance, which entailed disabled men internalizing traditional meanings of masculinity and attempting to continue to meet these expectations; and rejection, which was about creating alternative masculine identities and subcultures.

Reformulation is a creative process whereby individuals alter their ways of thinking, and adapting masculine ideals to their own lifestyle possibilities, achieve considerable success by departing from traditional notions of masculinity. In this case, a mention of **L. Joseph and G. Lindegger's** study on the construction of adolescent masculinity by visually impaired adolescent boys will be helpful for the analysis of reformulation. The study explores the ways how visually impaired adolescent boys construct masculinity and examines their subjective strategies to sustain masculine identity. The study revealed that visually impaired boys are familiar with the various constructions of hegemonic masculinity such as physical strength, reproductive power, sexual prowess, capacity to fight and so on.

However, many boys have identified themselves as possessing some forms of masculine constructions and on the contrary, a number of boys have expressed their inability to achieve the standards of hegemonic masculinity due to visual impairment. For example, many adolescent boys covered under the study have said that they are capable of participating in rough sport, which is a significant platform to show masculine identity, however raised concern about their participation. Narratives of the boys reveal that their anxiety, concern, and stress show a trend towards resisting and challenging the hegemonic constructions of masculinity and found their own ways to construct personal masculine identity that can be accessible to all.

Implicit in reformulation is a tacit agreement with dominant standards, and the attempt is to recast them in a manner to accommodate the disability. In this process, self-confidence and access to economic and cultural resources often play an important role. For instance **Gerschick and Miller** cite the example of a septuagenarian man who became quadriplegic on account of a spinal cord injury a decade earlier. He continues to adhere to notions of autonomy and control, and liberally employs personal care assistants to enable him to be independent. The following excerpt highlights his reformulation:

“I direct all my activities around my house, where people have to help me to maintain my apartment, my transportation which I own and direction in which I go. I direct people how to get there and I tell them what my needs will be when I am going and coming and when to get where I am going” (cited by Gerschick and Miller, 1997, p. 458).

Those men who choose the strategy of **reliance** are very troubled by their inability to meet prevailing masculine standards due to their disability. They encounter the most problems, owing to their inability to meet such standards. Often, this results in anger, frustration, passivity and depression. They are caught in a double bind as they try (often in vain) to gain acceptance from themselves and others. For instance, Gerschick and Miller highlight the predicament of Jerry who refrains from asking for help:

‘If I ever have to ask someone for help, it really makes me like feel like less of a man. I don’t like asking for help at all. You know, like even if I could use some, I’ll usually not ask just because I can’t. I just hate asking... {a man is}fairly self sufficient in that you can sort of handle just about any situation in that you can help other people and that you don’t need a lot of help’ (Gerschick and Miller, 1997, p. 462).

The internalization, acceptance and attempts at enacting ideals of hegemonic masculinity like independence and autonomy may involve engaging in a high level of risk taking behaviour as also self-alienation.

Rejection is probably the most dynamic strategy. The third group identified by Gerschick and Miller went further in letting go of conventional gender identity and rejecting the ideology of masculinity altogether: often this was linked to membership of the disability rights movement, with its alternative value system and support structures. This group focuses first and foremost on their status as persons and attempts to evolve new standards of gender identity, including the rejection of procreation and economic independence, which are core components of hegemonic masculinity. Summing up the perspective of this group, Gerschick and Miller argue:

‘Thus, men with disabilities who rejected or renounced masculinity did so as a process of deviance disavowal. They realized it was societal conceptions of masculinity, rather than themselves, that were problematic. In doing so, they were able to create alternative gender practices’ (Gerschick and Miller, 1997, p. 202).

Disabled masculinity is a different experience to that of 'normal' masculinity, and the new literature that is developing on masculinity fails to address this. Disabled men do not automatically enjoy the power and privileges of non-disabled men, and cannot be assumed to have access to the same physical resources. As Gerschick and Miller point out: 'Constructing hegemonic masculinity from a subordinated position is almost always a 'Sisyphean' task. One's ability to do so is continuously undermined by physical, social and cultural weakness' (1995, p. 468). Men with disability are engaged with an asymmetrical power relationship with their sexual and gender identity. Hence, they become susceptible to different forms of physical abuse as men with disable body do not embody the criteria of hegemonic masculinity. Masculinity is always constructed in in opposition to femininity. For instance, the expected gender expectations from men are that they supposed to be rough, having physical prowess, and independent. These constructions come under question for the men with disability. Boys and men with disability often share a subjugated position with girls and women vis-à-vis the temporarily able-bodied men.

Body plays a central role in the course of performing or enacting gender. Bodies of men with disability make them vulnerable to be recognized as masculine. Moreover, masculinity may be experienced negatively in a way which is rare for heterosexual non-disabled men. There is an urgent need to generate awareness and expand research on the unique and diverse experiences of men with disabilities in different cultural contexts, and particularly of those disabled men who face multiple disadvantages due to class, caste, ethnicity and sexual orientation. Further, other features associated with disability such as type of disabilities, their severity, and nature of disability (physical or mental) yield different experiences for men. In the study of visually impaired boys, it was discussed that boys with disability are exposed to three choices;

- Helplessly submitting to the *othering* process (marginalized, isolated vis-à-vis the able-bodied men)
- Repositioning themselves as hegemonic males
- Constructing an alternative non-hegemonic masculinity

According to **Joseph, L., and Lindegger, G.** (2007, p. 68), in the study, the visually impaired adolescent boys tend to choose the second potion as the strategy to gain masculine identity.

Check Your Progress:

How are men with disabilities treated in different socio-cultural contexts? Take some example/case from your immediate environment as the basis of your analysis.

3.5 LET US SUM UP

Discourses of *ableism* and *disabilism* permeate all aspects of the disability paradigm and are easily identifiable; the units in this block have highlighted this in the context of disability and gender identity, disability and embodiment and disability, sexuality and motherhood

The traditional account of gender and disability is that femininity and disability reinforce each other, while masculinity and disability contradict each other. But we know that both masculinity and femininity are in flux and not static characteristics or concepts, since they respond to and are influenced by changing social, economic, political and cultural factors. Some disabled women feel liberated from social expectations, while some disabled men experience a double jeopardy. There is now also an objectification and sensationalisation of the male body taking place in western culture, which is akin to the objectification and commodification of the female body that the women's movement has contested so vehemently. As you have read in this unit, there is no one pattern of the intersection between disability and gender: multiple masculinities and femininities have complicated this relationship. There are differences between disabled men due to class, ethnicity and sexual orientation as also the type of impairment - visible, invisible, congenital or acquired.

3.6 UNIT END QUESTIONS

- 1) Discuss the interrelation between masculinity and disability.
- 2) How do masculinity and disability construct a form of gender identity? Discuss.
- 3) What is hegemonic masculinity? How is it different from the notion of disabled masculinity?
- 4) Compare and contrast disabled masculinity and disabled femininity using examples from the Indian context.

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