

The lived experience of older involuntary childless men.

Robin Hadley

Independent Researcher

Abstract

The implications of the global trend of declining fertility rates and an increasingly ageing population have been extensively reported. This piece examines the complex intersections between men's experience of involuntary childlessness and agency, structure, and relationships. Childless men are, compared to women, missing from gerontological, sociological, infertility, and psychological research. These fields have mainly focussed on family and women. Feminist studies into infertility and ageing have highlighted the absence of the male experience. Involuntary childlessness has been viewed as a complex bereavement formed by multiple losses. Distress levels in both men and women in this population have been found to be as high those with grave medical conditions. This piece draws on my doctoral study framed by biographical, life course, gerontological and feminist approaches. I explore the factors that influenced the 14 participants' routes to involuntary childlessness. Findings countered the stereotype that fatherhood is not important to men and challenges research that reports that men are not affected by the social, emotional, and relational aspects of involuntary childlessness. I will offer how my research has influenced my own identity.

Introduction

On the 1st January 1660 Samuel Pepys's wrote , 'My wife, after the absence of her terms for seven weeks, gave me hopes of her being with child, but on the last day of the year she hath them again'. Throughout his diary, Pepys notes the sadness that not becoming a parent brings to him and his wife. In most societies, biological parenthood provides the surest way to adult status. The attainment of genetic continuity brings kudos and supports an acknowledged positive social identity

(Dykstra & Hagestad, 2007). All the main world religions exemplify the child bearing ideal and becoming a parent is considered central to the life script of the 'normal', 'expectable' life-cycle' (Dykstra & Hagestad, 2007; Monach, 1993; Neugarten, 1969). The discourse surrounding men's desire for fatherhood and the impact of non-fatherhood is small compared to that concerning motherhood and non-motherhood (Throsby & Gill, 2004; Letherby, 2010).

The global trend of declining fertility rates and an increasingly ageing population has been comprehensively documented with childlessness often only viewed as an element of demographic change (Dykstra, 2009; Schnettler & Wöhler, 2016). The vast bulk of socio-cultural discourses surrounding reproduction have historically centred on women (Marsiglio et al., 2013). There is a wide-ranging debate in feminisms concerning reproduction from those who view Assisted Reproductive Technology (ART) as a means of liberation and control to those who perceive 'biological mother-hood is the ultimate source of women's power' (Tong, 2009, p. 4). Feminist studies of ART exposed the paucity of literature on *not* being a father (Throsby & Gill, 2004). Inhorn (2009) argued that men have become the 'second sex' in all areas of reproduction scholarship because of the 'largely untested assumption' (Inhorn, 2012, p.6) that men are not interested in reproductive intentions and outcomes. Although there has been an increase in material on fatherhood in recent years, infertility seldom features in masculinities' research, including Connell's (1995) pivotal book. However, men in- or post- infertility treatment reported the process had a profound effect on their views of their masculinity, self-concept, identity, and their place in society (Fisher et al., 2010; Throsby & Gill, 2004; Webb & Daniluk, 1999). Men diagnosed with male factor

infertility reported similar issues as infertile women: grief, loss, powerlessness, guilt, inadequacy, betrayal, isolation, and threat (Webb & Daniluk, 1999).

The diagnosis of actual or potential infertility has considerable implications for mental and physical health, economically, socially, relationships and wellbeing (Greil et al., 2010; Lee, 1996). Those for whom ART treatment is unsuccessful are classed as 'involuntarily childless'. The failure to include non-treatment seekers in the definition of 'involuntary childlessness' has led to the criticism that much infertility research cannot be generalised to the wider population (Greil, 2010, pp.142-3).

Women who were 'Childless-by-circumstance' (Cannold, 2005) reported 'social clock' influences such as economics, education, and location had as much influence on their fertility outcome as the biological clock. Procreative outcomes were influenced by age; class; education level; economics; gender; timing education exit, entry in to the workforce, sexual and intimate relationship and relationship formation and dissolution (Simpson, 2009). Moreover, men's attitude to family, health, leisure and work, money, and relationships influenced procreative decision-making (Parr, 2007; Roberts et al., 2011). A number of authors have argued that there is a 'continuum of childlessness' (Monach, 1993) with distinct groups that stake their position at either end. The remainder may locate themselves at different points at different times over the life course as personal circumstances change. Among those are people who take a 'mediated' view of their childlessness based on their individual experiences contingencies and complex intersections between the individual and wider social relationships and processes (Hadley, 2017).

It is only relatively recently that childlessness has started to be recognised as a substantive research subject in the field of social science. Previously, social

scientists had focussed on social networks, family formation and relationships, fertility rates, childbearing age, and marital status. Consequently, the never married, childless and specifically, involuntarily childless men, are mostly absent from research (Dykstra & Keizer, 2009; Murphy, 2009). Childless adults are not a homogeneous group and many studies have not clearly defined who constituted being 'childless'. Frequently research has included a conflagration of the never married, expected-to-be-childless, childless-by-choice, childless-by-circumstance, people whose children have pre-deceased them or children who have left home (Dykstra, 2009; Murphy, 2009). Moreover, terms such 'infertility' and 'voluntary' or 'involuntary' 'childlessness' have been used inconsistently in both research and practice (Kelly, 2009; Letherby, 2010). Similarly, there has been an inconsistent use of the terms such as 'old' 'older' 'elderly' and 'senior' in gerontological research and wider practice. These terms carry both positive and negative connotations depending on context, culture, location, and intent.

The increase in life expectancy has serious implications for the individual and institutions alike. In Europe, most later-life families have a child nearby; frequent contact with at least one of their children; have strong family care obligations; and there is regular exchange of 'help-in-kind' from parents to children (Dykstra & Fokkema, 2010, Hank, 2007). In the United Kingdom those needing care are projected to grow by 90% by 2041 with carer numbers predicted to increase by approximately 27% (Pickard et al., 2009). Adult children have typically undertaken informal care for their older relatives. In the UK 42% of carers are men with sons providing the equivalent to daughters in engaging services and emotional and financial support (Carers UK, 2015).

There is an absence of research literature reporting men's lived experience of ageing. Gerontological research since the 1990's has tended to focus on the lives of older women for two main reasons. Firstly, the structural disadvantage of women in terms of care, economics, and health (Arber et al., 2003). Secondly, men's earlier age of mortality. However, the gender profile of the ageing population is changing as men's age of mortality increases. Recognition of the impact of involuntary childlessness on men is important, not only because of actual and projected demographic change but because of the lack of material examining male involuntary childlessness (Dykstra & Keizer, 2009).

Exploring the lived experience of older involuntary childless men

My doctoral auto/biographical qualitative study (Hadley, 2015) drew on pluralistic framework of biographical, life course, gerontological and feminist approaches provided by Chambers (2005, along with the Biographic-Narrative Interpretive Method (BNIM) developed by Wengraf (2001). The aims of the study were to explore the lived experiences of men aged 50 to 70 years and who did not have children but who currently or in the past, wanted to be a father. This age range was chosen to account for the increase in live births in the UK between World War Two and the early 1960's. Difficulties in recruitment led to a loosening of the age criteria. For example, both participants and third party recruiters reported great difficulty asking about others fertility history. The 14 participants' ages ranged between 49 and 82 years with a mean of 63.5 years. The sample was not stratified by other criteria such as ethnicity or social class as these may have impeded

recruitment. One participant was Anglo-Celtic Australian and the rest were White-British, two self-identified as gay and the rest as heterosexual, seven had partners and seven were single. Two of the men were widowers. The majority of participants' were located in urban and rural communities across the UK. One man was based in Thailand. The study is based on what Davidson (1998) called a small 'fortuitous sample' (p. 235).

Two semi-structured biographical interviews were used to collect data. The latter interview focussed on the transcript of the first interview. This allowed the development of the original narrative and the introduction of new material. Eleven of the interviews were face-to-face. At the participants request two interviews were conducted via Skype and one by email. A broad latent thematic analysis was applied to the data (Braun & Clarke, 2013). The analysis was an iterative process that involved open coding that formed provisional, candidate, and four main themes.

The data presented here was drawn from my auto/biographical (A/B) doctoral study. My age and involuntary childlessness makes this paper autobiographical: I am a childless man who at times desperately wanted and expected to be a father. All my academic work has been influenced by the work of feminist scholars. As a male researcher, I acknowledge the influence feminist research and feminisms have had on qualitative research in general, and my work in particular. Drawing on that background, and in common with the sociological concept of reflexivity, I will now locate myself within this piece by supplying a brief autobiography. I am a British-white, heterosexual male, 58 years old, divorced and re-married, with a non-genetic life-long hearing impairment. I am the seventh youngest of eight children, and was born, raised, and educated in Old Trafford, a working class area of Manchester,

United Kingdom. I am defining 'broody' as the behaviours, feelings, thoughts, and urges that constitute the emotional and physical desire to be a parent. My reactions to my 'broodiness' have included; anger, depression, elation, guilt, isolation, jealousy, relief, sadness, yearning, and withdrawal. I worked for 31 years as scientific and technical photographer before training, and qualifying, as a counsellor. Searching for a reflexive subject for my counselling dissertation, I recalled I had been particularly broody in my mid-30's; I wondered if other men had similar feelings. My academic background follows my multi-modal counselling style in that it draws on the knowledge, experience, myths, and legends, of different tribes. As such and much like some childless people, I define myself by what I am 'not' – I am not solely a photographer, counsellor, educationalist, gerontologist, or sociologist. However, I drew on all those fields, and more, in the undertaking of my doctoral study. I am a childless man who has been desperately affected by the desire to be a biological father.

Given my experiences as described above, the interviews therefore were meetings between involuntarily childless men. The subject is of a sensitive nature and I drew on my counselling background to be authentic and genuine in my interactions with all respondents. For the majority of the participants this was the first time they had discussed their experience. On first contact, all the participants enquired about my about my parental status which I willingly shared. I believe sharing my childless status helped build rapport in the interview. All pseudonyms are participant approved. To retain anonymity ages given (in brackets) are in the region of the participants' actual age. Keele University Ethical Review Panel approved the study.

Pathways to childlessness

The men in my study defined themselves as men who want or had wanted to be a biological father. The universal opinion of the participants was the assumption of marriage and parenthood as the social norm and therefore the re-entrenchment and maintenance of heterosexual pronatal norms. Until proved otherwise the participants' held the assumption that they were fertile. Studies have shown heterosexual men hold a 'package deal' view of the order of the adult life course: work, marriage/partnership, home, and children (Townsend, 2002). Martin (70) and David (60), respectively, described themselves as working and middle-class and expressed the essentialist heterosexual pronatalist normative:

Martin: You know, you meet a girl, you get married, you have children, and that's the way it is.

David: I expected to leave school, do university, get a job, get married and have a family.

The dominance of the pronatal normative was also reflected in the narratives of the two gay participants, Raymond (70) and Alan (82).

Raymond: I think from about like 15 years old I knew I was gay, so in my mind even then I knew I would never get married. So I suppose I didn't even think too much about children because you don't get married them days you didn't have children.

Raymond and Alan also highlighted the change in values from their formative years and that have been enshrined in law, for example the Equality Act (2010):

Alan: I could never have been a father, I don't think so. Might've worked if it had bin in today's time and place, you know.

The childless are often viewed as having at some level, 'chosen' their childlessness. Many infertile and voluntarily childless people have hidden their experience and status to avoid stigma and/or protect themselves or others from discrimination (Miall, 1986; Letherby, 2012). These different factors affected my participants' fertility outcomes: Economics, Biological clock, Social clock, Timing, Relational Dynamics and Identity. A view widely expressed by the participants was an awareness of age and its impact on fatherhood: many of the men citing that a child would not want to be associated with an 'old' father. Martin's (70) observation was typical and demonstrated the relationship between how age and role are viewed, indicating a demarcation between father and grandfather in the phases of the social clock.

Martin: And once you get to 50 then it ceases to be tenable because nobody wants a 70-year-old father when you're 20. You know, that's grandfather age when you're 20.

Edward (60) narrative highlights the impact of timing of events concerning upbringing, education, career, and socio-economics. Edward studied architecture at university, a course that lasted longer than most and populated mainly by men.

Edward: I was getting on towards 30 before my partner and I did get together. She certainly wanted to delay it until she was settled [career and accommodation]. That was mutual. The age thing didn't bother me because, with my parents both in their 40's when I was born, I thought it would just be like falling off a log.

In addition to the age, the timing of relationship formation and relationship dynamics were a critical element in the opportunity to become a parent. Edward and his partner had agreed that they needed to 'settle down'; for example, establish their careers and acquire accommodation before starting a family. John and his partner (59), who were in their mid-twenties when they became a couple, had a common aim to have children.

John: It was not if we had children – it was how many. I said, "You know, two would be pretty good" but she said, "Yeah, but four would be better, though". I certainly wasn't alarmed or, you know, frightened by the prospect. I just thought, "Christ, I didn't think life could be this good.

John and his partner had bought a four-bedroomed house in anticipation of having children:

John: Just after we moved in the bloody interest rates hit 13%. It needed the two of us to be working and getting in all the overtime that was going just to survive it. So, that made me delay, you know, overtures in those directions.

Having survived the economic crisis and now in their mid-30's, John's awareness of the 'biological' clock led him to address the subject of parenthood.

John: I said "C'mon, we really need to make a decision, you know, we just don't want to let time go by and let nature take the decision for us". She said, "Well, I never thought you are responsible enough to have children." Which, I guess is the time I started drinking seriously... I felt so devastated that, you know, I just drank to anaesthetise myself.

The consequence of John's drinking led to several related medical conditions including depression (with suicidal ideation), circulatory, heart, neuropathy, Type 2 diabetes with concomitant erectile dysfunction (ED). He had been an emergency admission to hospital 18 times in the previous 10 years. John built a mediated perspective that balanced his partner's refusal to have children with him, his low self-esteem, and the lifestyle that his partner's status provided. Moreover, he supported his position by counterpointing the masculine ideals of virility and risk taking, by highlighting his lack of virility and fear of exacerbating his position.

John: You have to try and accept the situation for what it is. She is on a very good salary. You know, I'm not going to get involved in a serious relationship with anybody - it just ain't going to happen, is it? I mean for a start off this ED is not really much of an advantage is it? We ceased having sex, so, bloody hell, probably about 1988 or '89. I mean, if this was bad then being out there on your own... You know, you'd have to be pretty bloody sure to not make your own life even worse.

John's account highlighted the complex intersection of the macro level events of national economics and the micro dynamics of the interpersonal. The importance to older men of being in an intimate relationship has been shown in a number of areas including: health, social network, and wellbeing. However, as John's narrative suggests, the dynamics are complex and change across the life course. Colin (59) had formed an intimate and meaningful relationship with his first wife in his mid-teens, married her, and subsequently divorced in his early 30's.

Colin: At age 26, I married my childhood sweetheart after courting for 10 years. We were both excellent at sport and both had successful careers. My first wife did not want to give up work and at the time did not want children. She went on to have two with her second husband who she left me for. When I was 22 to 33, I would have particularly loved to have children.

One effect of Colin's relationship ending was the long delay until his next intimate relationship. The period between his first relationship and second relationships was

critical because it encompassed the biological clock of contemporary females and increased the significance of the social clock.

Colin: I was devastated by our divorce and went 12 years before I had another serious relationship, aged 45. I married for the second time when I was around 48. I hadn't realised until she told me when we were first intimate that my second wife had previously had surgery to prevent her having children [after having three in a previous marriage].

The power of the heteronormative pronalst ideal was also seen in James's (65) and Martin's marriage experience. Both men's partners expressed fear of childbirth (tokophobia) at different stages of their respective relationships. James became aware of an urge to become a parent in his late thirties.

James: I started havin' those inklin's [for fatherhood]. I was gettin' together with Meg and she stated that she didn't want children. She was very petite, it was just the thought of it - she found quite scary. I just quickly put those inklin's to one side.

In contrast, it was only as their relationship was ending that Martin discovered his wife's fear of childbirth:

Martin: We had a good relationship, we spoke a lot to each other, but she never really articulated the fact, until quite later on, that she was just terrified of the thought of childbirth, you know?

The reticence of the partners in declaring their fear of childbirth is understandable given the lack of an acceptable social narrative to the dominant pronatalist social dynamic of the 'motherhood mandate' (Russo, 1976). Navigating between one's own need and the 'natural' pronatalist normative of parenthood exposed the embeddedness of the latter within the social and cultural structure. Martin's experience illustrates the importance of the timing of events: divorce (aged 43), re-marriage (aged 48) followed by the diagnosis of his infertility. Martin and his second wife discovered he was infertile after unsuccessfully trying to conceive.

Martin: My first marriage ended in '85. I married my wife in '90 and then we'd tried to have children and that's really, where I've found medically that, yes – you're definitely infertile.

Two other men, George (60) and Edward, and their partners, also accessed treatment in trying to conceive. Both George and Edward were in their mid-40 to early 50's, and their partners in their mid-30 to early 40's when accessing In Vitro Fertility (IVF) treatment.

George: When we got to the point of the next stage of the IVF, we just felt "I don't think we want to do this" you know? If it happens it happens, if it

doesn't, it doesn't. [...] We spent a lot of time talking about it because we wanted to be clear what decision we were making and why we were making it.

The impact that IVF treatment has on women and couples has been well documented. Men are often distressed by the effects the treatment has on their partner and are frequently the initiators of the decision to end treatment (Brian, 2009, Moulet, 2005).

Edward: The IVF was very stressful for my partner. The injections and the hospital visits were not particularly easy for her so after two cycles we called it a day basically.

Edward and his partner were diagnosed with unexplained infertility and withdrew from treatment after two cycles. Between 30-40% of couples in infertility treatment have this diagnosis (Siristatidis and Bhattacharya, 2007). The men who accessed IVF treatment were the only participants in the study who had had sex with the intention of conceiving a baby. Therefore, one of the reasons the other men in the study were childless was because they did not have sex with the intention to have a child.

Discussion

The men's narratives revealed the complexity and diversity of their experience of involuntary childlessness. Against the generally held view that people choose

childlessness, the participants' narratives illustrated how they negotiated the deeply embedded dominant heteronormative pronatalist 'virility-proved-by-fertility' and the primacy of biological fatherhood or 'fatherhood mandate' normative. The heteronormative normative directive of marriage followed by children meant that the two gay men, at a relatively early age, put aside any thoughts of fatherhood. Their experience demonstrated how the structural affects individual agency. For the other men the social environment they inhabited contextualised the embeddedness of the expectation that fatherhood would happen at some point. My research supports the view that childlessness should be viewed as a continuum on which people's individual reactions to their childlessness changes across time and is influenced by internal and external events. The acceptance of childlessness was not linear but was influenced by interpersonal, intrapersonal, and wider social factors. Childlessness involves a complex process involving not only what one *is* but also what one *is not*.

The men demonstrated a keen awareness of the social clock with regard to the social morè surrounding the appropriate age of becoming a father. Letherby (1999) argued that the choice for women is not when to have children but when not to, and highlights the importance of societal expectations in influencing women's reproductive decisions. The findings of this study highlight that although men do not have the same choice as women they may face similar life course, socio-cultural and relational accords. I found that some men do have an emotional and long-lasting reaction to not reproducing biologically that, for some, underscored a sense of loss, loneliness, and difference. The men spoke of 'missing out' on the father-child relationship. Even those who had gone through infertility treatment tended to use the word 'missing' rather than loss, bereavement or grief. The majority of infertility

literature highlights a trajectory of grief that ends with a sense of completeness. Negotiating non-fatherhood involves navigating a disenfranchised grief involving the loss of identity, role, and emotional experience (Corr, 2004; Doka, 2002). This highlighted the importance of relationships to men throughout the life course. While parenthood brings the negotiation of continuity, involuntary childlessness involves the negotiation of many forms of non-continuity: economic, familial heirlooms and narratives, genetic, identity, material, role, and socio-cultural.

Age was a key element in the men's perception, and engagement in, social expectations. Many of the men proposed that a child would not want to be associated with an 'old' father. However, the changes in equality law and social morès over the last few decades gave Alan and Raymond an opportunity to consider their roles in later-life. Therefore, the timing of wider social change in different fields i.e. technology such as IVF, political and social policy, and increased media exposure of reproductive diversity, can affect an individual's sense of being-in-the-world. However, all the men expressed a fear of being viewed as a paedophile; the widowers and single men expressed this most strongly. The negative portrayal of older people has been long established with, critically, lone older men particularly viewed as 'dirty old men' (Scrutton, 1996, Walz, 2002, Bytheway, 1997).

Reflections

I started this piece with describing my journey in to studying male involuntary childlessness and it seems fitting to end in a similar manner. I believe two pieces of

writing that I produced at the end of my MA and my PhD encapsulate change. I wrote this poem as part of my reflexive process during my MA:

*There's something missing,
A conversation ended before it began
Scatterling thoughts of cuda, shuda, wuda, dada
The latent maelstrom of the none man
There's something missing,
holding a life-wide gap,
breathing wallpaper,
I am whole and incomplete*

*There's something missing,
first to be left behind,
first to be sent in,
this line is not complete (Hadley, 2008)*

The following piece was written a few weeks after I had passed my PhD viva-voce. I was on the London tube back to my accommodation post conference. The carriage was packed and I struck up a conversation with the man I was facing. Reflecting on that conversation later, I pondered on my role. Why had he told me about his fertility history, wishes, and desires? What had I become?

"It's crowded," he said and I agreed with the man who looked like Richard Dreyfuss from Jaws

His Irish accent crested the noise of human shingle that washed out and in and out

His voice dips and swells as he skims the lifescapes of the Irish greats of the English

'I am one of those' when he heard about my research.

The few times he had had the chance - and if he could go back, he would do it different

We are swimming in the sea of the unspoken and the latent currents of experience unite and separate us.

The shark exits at Finchley Central.

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